

was of more immediate importance to the well-being of the race than her youthful sister. Modern civilisation and invention have destroyed her usefulness, and it is possible, but scarcely probable, that the increase of carcinoma, which especially attacks women during these years, is Nature's first effort to remove these useless individuals!

Let me hasten to add, with Dr. Campbell, that I do not advocate any startling measure of reform for the employment of women, but if women in their youth could be taught some useful employment, they might spend these years to their own good and to the advantage of the race. His suggestion of a selection of parents has often been discussed before, and is a fascinating idea, but we have not, and probably never shall have, either the power or the skill to carry it out.

I am, Sirs, yours faithfully,

Ottery St. Mary, June 15th, 1900.

CLAYTON JONES.

"THE RELATIVE VALUE OF SYMPTOMS IN ACUTE PERITONITIS."

To the Editors of THE LANCET.

SIRS,—I value very highly Mr. Mansell Moullin's appreciation of my article on "The Relative Value of Symptoms in Acute Peritonitis" and regret that he cannot agree with my main contention as to the necessary presence of true rigidity of the abdominal walls in that condition. May I point out that the position stated in my paper does not depend upon the three cases mentioned therein, these being only given as more or less typical, but upon more than 20 years' careful examination of hundreds of cases. On the other hand, Mr. Mansell Moullin brings forward one case which was not, so far as his communication goes, proved by post-mortem examination. This case was, he says, septic and may well have been one of septic intoxication or septic poisoning, in which the initial or repeated doses of poison totally preclude from the first all reactive or protective efforts on the part of the peritoneum, which I conceive are the essence of peritonitis. Peritonitis in these cases never occurs; it has never any chance of existence.

Mr. Mansell Moullin mentions abdominal cramp as a close imitation of the characteristic rigidity of acute peritonitis, and I quite admit this, but such cramp is, after all, only an imitation fairly easily detected, and one which, I am sure, would never deceive Mr. Mansell Moullin or any other abdominal surgeon whose sense of touch and whose patience were fully trained.

I confess that I cannot agree with, or even admire, the ingenuity of the logic which declares that our diagnosis will be the more reliable in proportion as we realise the total unreliability of the factors which constitute it. But, after all, this is a principle which can neither be proved nor disproved by the mere *ipse dixit* of any one man. If my surgical and gynaecological confrères would look for and record the presence or absence of this symptom in each case the question would soon be settled. In the meantime I can confidently recommend the test, whatever may be thought of the explanation, which I have ventured to propound.

I am, Sirs, yours faithfully,

Manchester, June 18th, 1900.

E. STANMORE BISHOP.

To the Editors of THE LANCET.

SIRS,—Many will agree with Mr. Mansell Moullin that Mr. Stanmore Bishop's rigidity of the abdominal walls is not absolutely diagnostic of peritonitis and also is not essential; that a marked rigidity may be found in such cases as gastric ulcer or hysteria without peritonitis; and that rigidity may not be present during the first stage of shock in perforative peritonitis nor even at all during some cases of peritonitis due to perforation in typhoid fever.

Mr. Bishop omits in his catalogue the more important fact mentioned in Mr. Treves's graphic description, "abdominal respiration ceases." This is invariable even when rigidity is absent; if general peritonitis exists the whole abdomen is motionless during respiration except that a slight reversed motion may be caused in the upper part by dragging in of the abdominal wall by the exaggerated thoracic movement in inspiration. Abdominal respiration is not abolished by any of the colics or intestinal pains and its absence seems therefore a better sign to rely on than rigidity.

I am, Sirs, yours faithfully,

Brighton, June 18th.

WALTER BROADBENT.

HORSE AMBULANCES.

To the Editors of THE LANCET.

SIRS,—The subject of the provision of a horse ambulance in towns having been raised in a recent issue of THE LANCET, may I relate to you what has been done in this direction in Oxford, which, so far as I know, is the only place where facilities of this kind are available? About 20 years ago a private subscription was got up and a horse ambulance purchased. It has been kept at one of the livery stables which has the advantage of a telephonic service and is thus in connexion with the hospitals and with the Acland Nursing Home. Anyone can have the use of it for about an ordinary cab-fare. Three years ago, the first ambulance having become somewhat worn out, a second horse ambulance was obtained, also by private subscription, and is in constant use. A nurse and medical man can travel with it when necessary. It is also used for local military purposes in connexion with the Oxfordshire Yeomanry.

I am, Sirs, yours faithfully,

Oxford, June 19th, 1900.

HORATIO P. SYMONDS.

To the Editors of THE LANCET.

SIRS,—I notice that the subject of public ambulances has been mentioned more than once in THE LANCET recently. May I be permitted to point out to you that we have had such a one in Oldham for about two years or more. It was presented to the town, is kept at the fire-station, horsed by the fire brigade horses, and worked by the firemen, all of whom hold St. John Ambulance certificates. It turns out within one minute of receiving a call. One evening during the severe weather last winter in a blinding snowstorm there were no less than five calls for its services.

I am, Sirs, yours faithfully,

Oldham, June 20th, 1900.

EDWARD KERSHAW.

PLAGUE IN AUSTRALIA.

(FROM A SPECIAL CORRESPONDENT.)

THE returns of plague in Sydney for the week ending May 5th are as follows: remaining at the beginning of the week, 75; admitted, 38; died, 10; discharged, 4; remaining at the end of the week, 99. The total cases are now 193 and the total deaths are 63; the number discharged recovered is 31. Total "contacts," 1130; "contacts" remaining, 235; cases among "contacts," 7. It is doubtless understood that the "cases among contacts" are those of persons who fell ill at the isolation ground, having been removed there merely as housemates of the primary patient; it must not be supposed that in any case there was good reason to think that the infection had been received by direct communication from the primary patient. Thus, as regards the first four contact cases mentioned at the beginning of March (D—), the infection was clearly received about the same time in the same place; in the second instance the second patient fell ill immediately after his removal; and in the third and fourth cases now added illness began 24 and 48 hours after removal respectively. The true history of the infection of five of the eight members of the D— family seems now to have been got from the father since his recovery. It was at first thought that the four children had been in the habit of playing on a very extensive rubbish heap to which wastes continued to be removed by the city council long after the wharves from which much of it was taken had become a marine centre of infection. Subsequently it appeared probable that the children never had been on this heap at all. Lastly, D—, after his recovery, said that a certain little outhouse in the yard attached to his cottage, which was used to hold both dirty linen and discarded bits of carpet, &c., was a place in which the younger children played; that as soon as the youngest child had been removed to the hospital where he died he cleaned out this place and found under the clothes and rags four dead rats. It has been noted already that these premises were full of fleas in extraordinary number and that the children were covered with their punctures from head to foot; it is now to be observed that the only members of the family attacked were the younger children and their father who cleaned out the place in which they often played.

Thus it seems that evidence of infectiousness is as much