

a general *résumé* without mention of any English authorities. I suppose the packing you had originates from the continent, and as he bound himself to me to prevent any foreign packing coming here and also in future to strike out English names in his prospectuses used on the continent I do not think that you will in future have reason to complain. As to the commission of which that circular speaks he explained to me that this was not in existence, but that the Russian journal merely had proposed such a commission. Anyhow, he accepted my distinct terms as to English names.

I give you freedom to make use of this letter as you may think fit, and remain, dear Sir,

Yours respectfully,  
(Signed.) AUG. ZIMMERMANN.

## "CHRONIC MEDIASTINITIS."

*To the Editors of THE LANCET.*

SIRS,—In a leading article in THE LANCET of April 29th you refer to the subject of mediastinitis upon which an interesting article by Dr. Whipham has recently appeared in your pages.<sup>1</sup> Valuable though the paper of Dr. Whipham is, I cannot say that it has strengthened my belief in mediastinitis as a pathological condition of any importance, apart from general adhesion of the pericardium, with which it is almost invariably associated. All the symptoms and physical signs attributed to the presence of mediastinitis may be produced by an adherent pericardium, and it seems unnecessary to assign to an increase of fibrous tissue in the mediastinum a name and a place in the category of diseases.

It is not easy to comprehend why increase of fibrous tissue in the mediastinum should produce physical signs. It can hardly produce obstruction of the inferior vena cava since that vessel passes almost immediately into the pericardium after piercing the diaphragm. If any vessel is to suffer it must be the superior vena cava. It is well known, however, that the superior vena cava may be much compressed without giving evidence of such pressure. It generally requires not only pressure from without but invasion of its wall and rapid encroachment upon its lumen, such as occurs when a mediastinal growth is present, before signs of marked venous obstruction occur. In my experience some degree of thickening of the tissues of the mediastinum has been present in the majority of cases of necropsies on cases of general adhesion of the pericardium, but I have seen no reason why the adhesion of the pericardium should not be looked upon as the only lesion to which any importance could be attached.

I am, Sirs, yours faithfully,

April 29th, 1899.

THEODORE FISHER.

## THE NOTIFICATION OF MEASLES.

*To the Editors of THE LANCET.*

SIRS,—In THE LANCET of April 29th, p. 1178, under "Reports of Medical Officers of Health, Wigan Urban District," you say: "The voluntary notification of measles is in force in Wigan, but Mr. William Berry, the medical officer of health, is of opinion that the notification of the first case in a household has not been of use in preventing the spread of the disease." My opinion happens to be the converse. On p. 6 of the report in question you will find: "Measles was very prevalent at the commencement of the year and I do think that the system of voluntary notification of the first case has been of benefit in preventing its spread." Again, on p. 17: "Voluntary notification of measles is still in force and it places us in a position to know long before a death takes place the locality in which measles arises, besides enabling us to make an effort at isolation in the patient's house," and following this is an account of an epidemic of measles in one part of the town, our knowledge of the cases through early notification enabling us to take early action and have the school in the district closed, with an immediate decline of the outbreak; and following this I give a list of the notifications and the number of cases discovered by the inspector. In my previous annual report (1897), p. 16, you will find the following: "I do claim, however, that the action of the sanitary authority has diminished the spread of the disease and its mortality by the systematic visits paid, isolation, the supply of disinfectants, the fumigation of the rooms occupied by the patient, and the disinfection of the bedding. This practice has severely called the attention of parents to the dire effects of the disease." We are now in our third year of voluntary notification of measles and I am convinced that

it has been of the greatest use in limiting the spread of the disease. If I had not held this strong opinion and that I am soon about to ask my sanitary authority to extend this voluntary notification for a further period of time I would not have troubled you with this letter, which I trust you will be able to insert in your next issue.

I am, Sirs, yours faithfully,

WILLIAM BERRY,  
Medical Officer of Health.

Wigan, April 29th, 1899.

## KITE v. GUNN.

*To the Editors of THE LANCET.*

SIRS,—In your able annotation on the case of Kite v. Gunn, an action raised at the last Manchester Assizes, you comment upon the anxiety and expense which the defendant must have undergone. Will you kindly allow me to state that the action was defended by the Medical Defence Union, of which society Mr. Gunn was fortunately a member, and all the expenses—naturally heavy—were defrayed by the Union.

I am, Sirs, yours faithfully,

A. G. BATEMAN,

General Secretary of the Medical Defence Union.

4, Trafalgar-square, W.C., April 28th, 1899.

## THE METRIC SYSTEM FOR THE PHARMACOPŒIA.

*To the Editors of THE LANCET.*

SIRS,—The following resolutions were unanimously passed at the last meeting of the Reading Pathological Society. They were proposed by Dr. Abram and seconded by myself.

I am, Sirs, yours faithfully,

Reading, April 30th, 1899. JAMIESON B. HURRY, Hon. Sec.

### RESOLUTIONS.

(a) That the Reading Pathological Society is of opinion that the metric system should be definitely adopted in the next edition of the British Pharmacopœia.

(b) That the honorary secretaries be instructed to communicate the above resolution to the General Medical Council.

## "A CRITICISM OF THE MORE COMMONLY EMPLOYED TESTS FOR ALBUMIN IN URINE."

*To the Editors of THE LANCET.*

SIRS,—In answer to Dr. Colquhoun's question in THE LANCET of April 29th may I state that if he will carefully read the first paragraph of my article on the tests for albumin he will find it stated that "the qualitative examination was followed in most cases by a quantitative estimation when albumin was found to be present." The estimation was usually made by a modified form of Devoto's gravimetric method; in a few cases alcohol was employed as the precipitating agent, as recommended by Hoppe-Seyler. If the methods which were employed in Dr. Colquhoun's laboratory were better than these I shall be glad to know the details of his experiments, as in this way the divergence of his results from my own and those of previous observers might be explained. With regard to Dr. Colquhoun's second paragraph I would remark that references judiciously given may answer some useful purposes. Not only do they call attention to accounts of recent work not yet embodied in the ordinary treatises, but they also enable the reader to distinguish between the writer's own experience and the statements of other authors which he quotes but has not personally verified.

I am, Sirs, yours faithfully,

P. J. CAMMIDGE.

St. Bartholomew's Hospital, E.C., May 1st, 1899.

## "THE PHARMACY ACT, 1899."

*To the Editors of THE LANCET.*

SIRS,—THE LANCET is quoted by the *British and Colonial Druggist* (April 21st, p. 470) to the following effect: "It seems to us that if this Bill should become law a company could 'run' a hundred shops and yet retain the services of only one single qualified man to satisfy the requirements of the law. Thus in 99 shops medicines could be dispersed and poisons sold by the unqualified, the inexperienced, and the

<sup>1</sup> THE LANCET, April 1st, 1899, p. 832.