my own eyes. However, admitting for the sake of argument that the certificated midwives continue to oust the uncertificated, why does Mr. Humphreys require registration? Surely it is better to gradually effect a change in a system which has crept into existence through many generations and which is being superseded by an improved system—i.e., that of certificated midwives—than it is to attempt to hasten such a process by an Act of Parliament which, for aught we know, might cause the whole obstetric fabric to totter to its very foundation? 5. I repeat that there are any number of medical men who attend midwifery for the same fees as uncertificated midwives, and it is absurd to attempt to produce a creditable class who could, on the whole, work at a more modest scale of charges than numbers of medical men. 6. In answer to Mr. Humphreys' question, "I should like to ask him [i.e., myself] what amount of knowledge he usually acquires when he attends a natural labour," I answer that if this Act had come into operation before I had acquired my experience, whatever that may be worth, and if the "natural cases" had through female enterprise having been stimulated to too great a pitch been absorbed by local registered midwives, I could not hold the post I now hold. Moreover, Mr. Humphreys forgets that the results of registration would show themselves on the rising generation and not so much on those who have gained experience. 7. Mr. Humphreys in scoffing at every-day experience and routine practice says, "Mr Sers might as well talk of the opportunities of studying children which we waste in not turning ourselves into children's nurses." I answer that there is no analogy whatever between a general practitioner who requires obstetric knowledge and one who does not require a knowledge of nursing children. In conclusion, Sirs, I must remind Mr. Humphreys that I have had the most ample opportunities, both in town and country places, of judging this question, and that I am not afraid to speak upon it with candour, and, viewing it in its purely social aspect, I claim, if I may be pardoned for so saying, to speak with some authority.

I am, Sirs, yours faithfully,

CLEMENT H. SERS.

Queen's-road, Peckham, S.E., Sept. 18th, 1893.

To the Editors of THE LANCET.

SIRS,—Now that the subject of the registration of midwives is under discussion it will be well if those most likely to be affected by the change give their version of what appear to be some of the results that will accrue, judging from what already occur.

I was called a few mornings ago to see a newly born child. A midwife had been engaged to attend the mother, but through some delay she did not arrive until some time after the child was born. The mother shortly before her delivery declared that she wished to go to stool, for which purpose a pail was provided; whilst straining to pass the motion (!) the child was born, head first, into the pail. The mother cried out and a neighbour in the house ran in, saw what had happened, and rescued the half-suffocated infant from its dangerous position. Soon afterwards she sent for me, as the child's breathing was rapid and difficult. I administered an emetic, which gave great relief to the breathing. Before long the midwife arrived and on being told of what had occurred assured the mother that, although she had done quite right in sending for me, yet, even if she had not sent, it would have been all right still, as *she* was a *doctor* and could have given the certificate if necessary. I have heard nothing more of the case, and, for aught that I know to the contrary, the certificate may have been supplied and accepted by now.

If this is the way in which a mere L.O.S. acts now (and I do not think that it is an isolated case), what are we to expect if midwives obtain official recognition at the hands of the General Medical Council? I enclose a Kensington paper containing the account of an inquest, which forcibly illustrates my point. Our fears that the new order of midwives will assume to themselves the style and title of medical practitioners do not seem to be so groundless as some of the more expensive and fashionable members of the profession would have us think. A medical man in Mayfair or Belgravia or a specialist cannot know much about the requirements of general practice in a poor neighbourhood like some of the districts of Fulham and North Kensington. Some of these midwives sell draughts to their patients, charging sixpence each for them.

I am, Sirs, yours faithfully,

M. A. SALTMARSH, L.S.A. LOND.

West Kensington, Sept. 16th, 1893.

BLOODLETTING.

To the Editors of THE LANCET.

SIRS,—Some years ago you were kind enough to give a place in THE LANCET to a communication from me on the subject of bloodletting. I then made an attempt to show that the moderate and reasonable abstraction of blood, in acute and properly selected cases, was not deserving of the nearly universal condemnation insisted upon in the teaching and practice of the last forty years. This attempt I supported by adducing cases reported from the Edinburgh Royal Infirmary and from the published lectures of Mr. (now Sir) Rutherford Alcock. The cases quoted were of great gravity, and the successful issue, in most instances, justified the very free abstraction of blood which was had recourse to. To those, like myself, who have been engaged in practice for nearly sixty years, and who have witnessed the beneficial effects of venesection before the little operation became unfashionable, it is satisfactory to be able to recognise the fact that this fashion, like many others, is again in process of coming to the front. A letter in a recent issue of THE LANCET records the good results obtained from venesection in certain cases in the practice of the writer. To those like your present correspondent who have performed phlebotomy hundreds of times it does appear strange and even marvellous to learn that an operation—the first that every apprentice was taught to perform and which he was in the habit of performing almost daily and long before he was the proud possessor of a medical diploma—should be presented to us to-day as one of equal magnitude with deligation of the brachial or femoral artery in its continuity. It does seem strange to one who obtained his diploma in 1836 to be obliged to realise that there are gentlemen in practice who have never performed the operation in question and that there are many more who have never seen it performed. This unfortunate condition of matters, no doubt, must sometimes stand in the way even when the necessity of venesection is apparent. If the operation is performed as it was in former days it will almost invariably be experienced that blood will flow *plene rivo*.

I am, Sirs, yours faithfully,

Fordoun, N.B., Sept. 18th.

DAVID JOHNSTON, M.D.

THE HÆMATOZOA OF MALARIA

To the Editors of THE LANCET.

SIRS,—The following letter from Professor Laveran of Paris finally settles the disputed question of the existence of the malarial hæmatozoa in Mauritius. When I announced in THE LANCET of Aug. 20th, 1890, the discovery I had made (during my visit to that island) of these parasites in the blood of malarial patients in the Civil Hospitals the accuracy of my statement was attacked by certain critics out there, who maintained "that Laveran's hæmatozoa did not exist in Mauritius, for no one except myself had ever seen them," and yet more than half of my slides had revealed their presence. The question was referred to Professor Laveran, who, after waiting for two years, has at last received a few specimens from Mauritius whereupon to base his verdict.

I am, Sirs, yours faithfully,

D. E. ANDERSON, M.D. Paris, M.B., B.Sc. LOND.
Paris, Sept. 3rd, 1893.

MON CHER CONFÈRE,—Je vous remercie de votre envoi; parmi les préparations de sang desséché que vous m'avez adressées il y en a beaucoup qui sont mauvaises et qui ne peuvent pas être utilisées pour la recherche de l'hématozoone, mais quelques-unes ont été recueillies dans des conditions assez satisfaisantes; j'ai constaté dans plusieurs de ces dernières préparations la présence de l'hématozoone du paludisme (corps sphériques pigmentés et corps en croissant). Il n'est donc pas douteux que ce parasite existe à l'île Maurice et qu'il se présente là sous les mêmes aspects que dans les autres contrées palustres.

Votre tout dévoué,

Paris, 7 Août, 1893.

A. LAVERAN.

PROFESSOR BURDON SANDERSON ON PHYSIOLOGY AND PSYCHOLOGY.

To the Editors of THE LANCET.

SIRS,—In his address to the British Association Professor Burdon Sanderson briefly referred to the relation between physiology and psychology. Considering that the brain is