In the June-July issue, Arthur G. Lewis becomes bolder. The leading article is entitled "First Aid in the Navy," by C. F. Stokes, Surgeon-General, United States Navy. There is nothing to indicate that this article was not contributed to the *Army and Navy Medical Record* by its author. As a matter of fact, it originally appeared in an official publication, the *United States Naval Medical Bulletin* for January, 1913, and was reprinted by Lewis without credit and without permission. Following the article by Dr. Stokes is another, unsigned, entitled "The Passing of 'The Pie Habit.'" This describes the surprise of the students of Harvard University at being served breakfast cereals instead of pie at their noon-day meal and suggests that "Shredded Wheat Biscuits" make a "delicious dessert." A two-and-a-half page article on the "Danger of Corrosive Sublimate in Vaginal Douche" is reprinted from the *Lancet-Clinic* of September, 1903. The reason for resurrecting this ten-year-old article becomes apparent before one gets half through it. It deals not so much with the danger of corrosive sublimate as with the marvelous—alleged—properties of Tyree's Antiseptic Powder. Dr. Claude C. Keeler, Denver, has a three-page article on the "Medical Treatment of Pulmonary Tuberculosis." The "medical treatment" referred to is Waterbury's Compound. An editorial entitled "One Notch Ahead of Morphin" is devoted to that vicious morphin solution sold under the proprietary name "Papine." Another on "The Treatment of Catarrh by Palliatives and Curatives" deals with a widely advertised "patent medicine," "Kondon's Catarrhal Jelly." What appears to be a contributed article by Charles Wardell Stiles of the United States Public Health Service on "Country Schools and Rural Sanitation" has really been "lifted" from an official publication without credit and, needless to say, without Dr. Stiles' permission.

But medicinal preparations are not the only things to which the *Army and Navy Medical Record* gives editorial indorsement. All advertising matter, apparently, is grist to its mill. Sandwiched in between articles on "Public Health Administrations" and "Important Army Medical Lectures" is a dissertation on "The Millennium of Shirt Construction," in which are sung the virtues of the tailless shirt! A little farther along the Hawaiian pineapple is extolled, while the last pages of the issue are devoted to various banking concerns.

In addition to the advertisements appearing throughout the reading and editorial pages of these two issues of the *Army and Navy Medical Record*, there are a number of display advertisements. There is no reason to suppose, at least in the majority of cases, that the advertisers had the slightest reason to suspect the nature of the *Army and Navy Medical Record*. Several pages are devoted to financial advertisements, there being more than forty banks that have "fallen for" the wiles of Arthur G. Lewis. In view of the letters received by the deans of medical colleges and other educational institutions, the display advertisements of schools and colleges have a special interest to physicians. Schools for girls, polytechnics, colleges of music, veterinary, dental and medical schools—all are to be found in this cosmopolitan publication.

Among the therapeutic products advertised—in the advertising pages—are:

Fellows' Syrup of Hypophosphites.....	1	cover page
Sherman's Bacterial Vaccines.....	1	page
Kondon's Catarrhal Jelly.....	1/2	page
Expurgo Anti-Diabetes.....	1/2	page
Laxol.....	1/2	page
Campho Phénique.....	1/2	page
Palpebrine.....	1/2	page
Zumota.....	1/2	page
Sanmetto.....	1/2	page

While in the reading pages the following products are puffed:

Tyree's Antiseptic Powder.	Palpebrine.
Waterbury's Compound.	Bannerman's Intravenous Solution.
Papine	Daniel's Concentrated Tincture of Passiflora.
Kondon's Catarrhal Jelly.	Peacock's Bromides.
Ranier Natural Soap.	Aletris Cordial Rio.
Iodin (Battle).	Gonosan.
Creo-Derma.	Dilpuratum.
Fellows' Syrup of Hypophosphites.	Dioradin.
Tannalbin.	Pepto-Fer.
Expurgo Anti-Diabetes.	Lactol.
Zumota.	Campho Phénique.
Sulfothen.	
Dioxogen.	

Summed up: The *Army and Navy Medical Record* is but another of the parasites of quackery. It is not entered as second-class matter and it has probably no bona-fide circulation. While it is claimed to be "Devoted to the Interest of the Medical and Surgical Corps of the Army and Navy, the Public Health Marine Hospital Service and the Red Cross Society" it is actually devoted to none of these. It is devoted to the exploitation of the advertising public for the special financial benefit of the man who calls himself its editor—Arthur G. Lewis. Advertising contracts are obtained under false and fraudulent pretenses. In brief, Arthur G. Lewis is using the good name of the various medical services of the United States government to further his swindling operations. He has written letters to honorable physicians making dishonest and insulting propositions to deceive and defraud the public. Editorial indorsements of the *Army and Navy Medical Record* mean nothing except that money has been paid for them. In short, the *Army and Navy Medical Record* is a fraud, and its "editor," Arthur G. Lewis, a faker.

Correspondence

The Parasite of Rabies

To the Editor:—The paper of Noguchi on the "Cultivation of the Parasite of Rabies (*Jour. Exper. Med.*, 1913, xviii, 314; abstr., THE JOURNAL A. M. A., Sept. 20, 1913, p. 993), has a special interest for the student of hydrophobia. Is the cause indeed a parasite, or is it, as Ferran supposed, a ferment? Are the Negri bodies parasites, or do they simply enclose an invisible germ, the true parasite, of which the Negri corpuscle is the outward and visible expression? This view, which is probably at present the most illuminating, is represented by two admired and popular authors, Babes, who regards the Negri inclusions as the reaction of the cell to the parasite, and Prowazek, who classifies the parasite among the *Chlamydozoa*. Both the parasite and the Negri bodies have been connected by some writers with the *Protozoa*; but in view of the fact that the Negri corpuscles are too large to pass through a filter, as the true parasite does, and that bodies similar and in fact identical have been found in healthy panthers by Cornwall, and in the fresh brains of cats by Luzzani, it will be understood that not much help could be obtained from them by any one who desired to form a critical estimate of the morphology of the rabies germ.

Noguchi, who appears to think that it is a protozoon, presents his theory in a slight setting of practical circumstances. This does not mean that he finds absolute certainty in his results, but rather that he would render further experiments convincing by backing them with comprehensive details. In his cultures of "street," "fixed" and "passage" virus, he observed "very minute granular and somewhat coarser pleomorphic chromatoid bodies." In "fixed" virus he found "nucleated round or oval bodies surrounded with membranes totally different from the minuter granular bodies," though they occur in the same culture. "The center is nuclear and the membrane is distinct and highly refractive." By inoculating animals with cultures of the "granular, pleomorphic or nucleated bodies, rabies has been reproduced in dogs, rabbits and guinea-pigs." It is not easy, it must be confessed, to distinguish between these bodies, but his nucleated oval bodies, surrounded by a very refractive membrane, resemble in their morphology the protozoa rather than the bacteria.

From this point of view, the present work of Noguchi is less disentangled from the early work of Pasteur, Roux, Memmo, Babes, Bruschettini, Grigorjew, and Rivolta than could be wished, for it is constructed on lines similar to theirs and Busila's. (*Compt. rend. Soc. de biol.*, July 31, 1908.) Busila's work, in fact, gives a foretaste of what may come, and is worth an attentive study, though it illustrates the limitations rather than the powers of the experimenter. He was able to find in the nerve centers and in the cerebrospinal fluid of animals infected with "fixed" virus a motile, sporing

bacterium which grew on ordinary mediums, stained with Gram, and lived through 250 generations without losing its virulence. Cultures of this organism were first heated to 110 and subsequently injected into guinea-pigs, rabbits and dogs. The animals became rabid and their brains showed Negri bodies, but the most remarkable circumstance was the period of incubation, which was exactly what it ought to be after a genuine infection, being from seven to fifteen days after cerebral inoculation, and from fifteen days to three months after inoculation under the skin. Moreover, the brains of these animals produced rabies, which is certainly a point of primary importance.

Unfortunately, it is impossible to read these results with conviction. To Babes, who reviewed them without success, they seemed opposed to all our notions of the nature of infectious diseases ("Traité de la rage," p. 255). He could not confirm them. As an experiment in bacteriology, there is in their favor this fact, that they give a hint of the difficulties of the subject, of the difficulty under which all investigation has labored from the time when Hallier discovered in the blood of rabid animals his *Lyssophyton suspectum* (Ztschr. f. Parasitenkunde, 1869, i, 301), or Memmo his *Blastomyces*, or Pasteur his granules. Others, too, have associated rabies with a bacterium, as, for example, Mottet and Protopopoff (*Russk. Vrach.*, 1887, viii), who found a microbe which grew on ordinary mediums which produced paralytic rabies in animals. Though these experiments are interesting and curious, they are not convincing, and, moreover, they have failed to evolve the superb technic that will be indispensable to the man who is to isolate the true germ of rabies. It is probable that we have now passed through the crude phase of this investigation. The contribution of Noguchi is perhaps the nearest approach to the solution of the problem, unless the recent researches made by Luzzani (*Pathologica*, 1912-1913, v, 253) and Andreyewsky (*Sbornik. rabot. v. pam. I. M. Sadovskovo*, 1912, ii, 68) have attained the absolute solution.

PAUL BARTHOLOW, M.D., New York.

Comment on Sex Hygiene

To the Editor:—Your summary of newspaper comments on the problem of instruction in sex hygiene (*Medical Economics*, THE JOURNAL, Oct. 18, 1913, p. 1477), shows that we are one step ahead of the former generation—we recognize generally that it is a problem. It would be well, however, for the reformer, physician or layman, to recognize several other facts. In the first place, the greatest obstacle to the proper handling of the subject lies in the home. From my experience with large numbers of boys in private schools I know that the average boy of this type has, up to the age of 14 at least, no correct idea of sexual anatomy or physiology, while the public-school boy, though usually more wise, obtains his wisdom from a dangerous source. I have known many boys to whom another boy naked is a pleasing curiosity, while but very few know how animals propagate. This ignorance is of course due to the prudish reticence of the parents, and the curse of it is that the child of to-day is no further advanced than were the children of former generations. To say then that this question should be left to the home is to drop the matter entirely. We cannot expect aid from the very source which is presenting the obstacle.

It is therefore clear that it is up to the schools as the only organized medium available. But it is also plain that to make a sudden jump from the reticence of the home on all matters pertaining to sex to a direct discussion of sex hygiene in the schools would be as dangerous to the child as it would be abhorrent to the parent. If we could only stop crying reform, stop the warring between the sentiment surrounding innocence and the excitement over the moral results of ignorance, and treat the question from the point of view of educational science, the matter would be simple. Give the children more natural science taught by competent teachers—botany to the youngest, biology to the older ones, and anatomy and physiology to those of 10 or 12. The sexual side should not be emphasized but taken as a matter of course. With this foundation the teaching of sexual questions as such would

cease to be a nightmare to parents or a side-show to children. Most important of all, we might reasonably hope that from such a course of study the parents of the next generation, who are the children of to-day, will treat the whole matter rationally, will make their children feel that the truths of sex are not an awful thing of mystery and shame that will be revealed some time in the dim future, but, like the working of the bowels, are things of great interest and importance, though they are not to be discussed at the dinner-table.

I have known boys who were fortunate enough to be brought up in homes in which they received proper instruction and explanation, and their true modesty and frank understanding of things sexual were distinctly refreshing after the prudery and morbid curiosity which are perfectly natural in the ignorant child.

W. B. H., Boston.

Queries and Minor Notes

ANONYMOUS COMMUNICATIONS and queries on postal cards will not be noticed. Every letter must contain the writer's name and address, but these will be omitted, on request.

ACQUIRED IMMUNITY TO SMALL-POX

To the Editor:—1. Can acquired immunity to small-pox be transmitted to the offspring?

2. Does small-pox protect against bovine vaccination?

The following examples will bring out the reasons for the preceding questions:

FAMILY A.—Five in the family, father previously vaccinated, mother unvaccinated, children exposed. One child had preliminary symptoms followed by slight eruption consisting of few pimples, one or two of which were pustular. Eruption lasted about a week, child not sick. The father and children were vaccinated at the same time. All four vaccinations were unsuccessful. Mother refused vaccination. No other cases in this family.

FAMILY B.—Five members. Father previously vaccinated successfully when a child, also four or five times since without result. Children exposed. Mother and the three children were vaccinated. In two of the children vaccination was unsuccessful, also when repeated.

FAMILY C.—Six members. Father previously vaccinated successfully when a child, also four times since without result. Mother has been vaccinated four times without result. Mother and four children vaccinated; two of the children without result; vaccination repeated on these two without result. This makes the third time for one of the children without effect.

FAMILY D.—Seven members. Given as a control. All vaccinated, six successfully.

ROBERT P. STARK, M.D., Allegan, Mich.

ANSWER.—1. Many cases seem to indicate the possibility of the transmission of immunity to small-pox, but the phenomenon is quite exceptional.

2. Yes.

CONTRACTURE OF FINGERS IN HEMIPLEGIA

To the Editor:—1. Would the lengthening of the flexor tendons of the fingers in a case of hemiplegia of a year's standing in which the flexors overbalance the extensors be a procedure of much hope? The hand, when extended on the wrist, causes the flexion of the fingers into the palm. The joints are still seemingly normal. The power of flexion is good, but the patient cannot open his hand enough to grasp any large object well.

2. Do the tendons of the fingers unite when severed, like the Achilles tendon?

3. Would a lengthening operation or a division be the better?

4. Would there be any great danger of infection if no silk, for instance, were left in?

W. E. B., M.D.

ANSWER.—1. We do not think that lengthening of the flexor tendons of the fingers in a case of hemiplegia would be of any use in overcoming the contracture, due to paralysis. If there were no paralysis present the tendons could be lengthened with good result.

2. Tendons of the fingers unite when severed the same as other tendons, provided they are properly cared for.

3. If an operation were advisable it would be better to lengthen the tendons rather than divide them, as the retraction after simple division is too great and union might fail on account of wide separation of the ends.

4. The best material for suturing or lengthening tendons, is silk. The silk should be prepared according to Lauge's method, which consists in boiling it in 1:1,000 mercuric chlorid solution. Such silk would remain indefinitely without danger of infection, provided the operation was aseptically done.