in the editorial comment on "Smallpox in 1894," published in the issue of January 5. It was therein attempted to contrast the mortality from smallpox in the ante-JENNERIAN period—96 smallpox deaths out of every 1,000 deaths from all causes—with the actual number of deaths from smallpox in 1894—less than 3,000 out of a total of 1,170,000 deaths from all causes, or about 2.5 smallpox deaths out of every 1,000 deaths from all causes. As printed in the JOURNAL the number of deaths from smallpox out of the total deaths was given as 12,300, instead of the correct figures 112,300, thus weakening the arithmetical force of the argument for vaccination by about nine-tenths, as DR. SHARP points out.

CORRESPONDENCE.

"The Practical Importance of Well Established Facts in Therapeutics."

CHICAGO, Jan. 15, 1895.

To the Editor:—Under this head, your correspondent, Dr. J. H. Stallard, gives in our JOURNAL for Jan. 5, 1895, an interesting account of his own experience in using alcohol in the form of brandy or whisky, apparently to prove that it is a true tonic and restorative. His first point of proof is that after having climbed to a height of 10,000 feet one morning, he took a hearty breakfast and, after only an hour's rest, began his return when the "heat was intense" and over glacier ice "as irregular and uncertain as on board of a ship." What is not singular, the intense heat, the presence of undigested food in his stomach, with the excitement of his unusual walk brought on extreme irritability of the pneumogastric and whole vasomotor system of nerves, indicated by excessive vomiting renewed at every attempt to proceed. In this dilemma, after his digestive organs had been emptied of their contents and the "intense heat" of midday had somewhat subsided, he was given a full dose of brandy which, by its true anesthetic effect, so far lessened the excitability of his cerebral and pneumogastric nerve cells that he was enabled to resume and complete his journey under the impression that he had on "a pair of brandy boots." I suppose an equivalent dose of ether, chloroform or any other reliable anesthetic would have produced the same effect. But is there no difference between an anesthetic and a stimulant or cardiac tonic?

Your correspondent's second point of proof is, the fact that at about the age of 62 years he had a sharp attack of pneumonia, took half ounce doses of brandy or whisky every two hours for nine days and his "recovery was perfect." But if his recovery proves that the alcohol was a "stimulant and heart tonic," what will he say in regard to the case of an eminent physician and medical teacher in one of our Eastern cities, who had a severe attack of pneumonia after he was 60 years of age, was promptly bled freely from a vein in his arm, and treated strictly according to the antiphlogistic system of the first half of the present century, and not only made a perfect recovery, but lived in fair health to the ripe age of 83 years. Does it prove that venesection and anti-mony are stimulants and heart tonics?

The third point of proof implied by the personal history of your correspondent is that he has attained the age of 74 years still in good health, though he has drunk wine every day for over fifty years and as little water as possible. But, on the other hand, I well knew an eminent surgeon and teacher, who was through life a total abstainer from both

alcohol and tobacco, and was somewhat of a vegetarian besides, who continued his professional duties until he was 80 years of age and died of old age at 86 years. And I could refer to a score of similar cases, some of whom reached their 100 years. If Dr. Stallard's condition at 74, affords any proof that wine is a stimulant or heart tonic, the other cases must prove that simple water is equally efficacious, to say the least. But, in truth, such personal histories prove nothing of value, for every well read physician knows that we meet with individual cases of unusual longevity in all classes of society, sometimes in the midst of poverty and unsanitary surroundings with bad food and drink, and sometimes in the mansions of luxury. Such histories of individual cases of disease only show that some persons possess a tenacity of life that enables them to recover in spite of the most injudicious treatment when sick, and attain longevity in spite of both bad habits and bad surroundings. To determine the actual effects of alcohol or of any other agent, on the living body requires a widely different line of investigation, at least, something more than the impressions of the patient while under the influence of the anesthetic.

Yours truly,

N. S. DAVIS, M.D.

Treatment of Typhoid Fever.

ST. FRANCIS, ARK., Jan. 8, 1895.

To the Editor:—Having become interested last summer in Dr. Woodbridge's articles on the abortive treatment of typhoid fever, I determined to test it at the first opportunity. I had seen and assisted in treating quite a number of cases of typhoid fever in the Memphis City Hospital, having been an interne there for nearly two years, and have no recollection of any cases being free from fever under three weeks, although treated according to the latest and most approved methods. Last fall I treated several cases according to Dr. Woodbridge's plan and was exceedingly pleased with the results. I did not succeed in cutting the disease so short as Dr. Woodbridge did, on account of the method being new to me, and for other reasons, only giving prescription No. 1 every hour for twenty-four hours, then the guaiacol and eucalyptol every three hours for twenty-four hours, thus alternating them as I thought necessary. I was surprised to see how uniformly the temperature would drop from the effect of these antiseptics so frequently administered, only to rise again on leaving them off or reducing dose or frequency of administration. All of these cases recovered and only one had any bad nervous symptoms. Two of them were free of fever on the tenth day of treatment, two on the thirteenth, one on the fifteenth, one on the sixteenth and one on the seventeenth. In the case running for sixteen days, all medicine was left off—on the tenth day—by mistake, for eight hours, and the temperature which had fallen to 99.5 rose again and was 104 for two evenings. The highest temperature in the two worst cases was 105.5, and in none was it less than 104 for a few evenings, thus showing them to be severe cases. One case on the eighth day of the disease had incontinence of feces, the only one having any bad nervous symptoms. I was forcibly reminded and impressed with what Dr. J. B. Herrick, of Chicago, said about the effect of antiseptic treatment of typhoid fever. In an article headed, "A Synopsis of nearly a Thousand Cases of Typhoid Fever," he says that there is no doubt but that the antiseptic treatment of typhoid fever prevents the development of nervous symptoms. This article was published in our JOURNAL some time ago. I regard the treatment as being a vast improvement over any other and a boon to humanity. Dr. Woodbridge simply carried to the full extent what has been advocated for some years by quite a number of the most prominent men in the profession, and I think it a practical success and

not a therapeutic theory. There seems to be no doubt but that this frequent administration of antiseptics has an inhibitory influence on the typhoid bacilli, checking their activity, hence preventing the development of toxins, the absorption of which no doubt causes the grave nervousness in so many cases. I will say, in conclusion, that in none of these cases did fever exist over twenty-one days after beginning.

Yours faithfully,

WM. BAYARD SHIELDS, M.D.

Treatment of Typhoid Fever.

ORAN, Mo., Jan. 8, 1895.

To the Editor:—In our JOURNAL of January 5, I find a report on typhoid fever by Dr. Woodbridge and it reminds me of a report I made to the Southeastern Missouri Medical Association a few days before the Doctor made his report at Hot Springs. I reported a case of typhoid fever treated with *hyposulphite soda* and *Fowler's solution*, which gained over a pound a day during treatment. He ate his meals regularly, went to the table and to the privy (fifty yards distant from his hotel) his temperature ranging from 102½ to 105 for fifteen days. He ate largely of green apples, dates, oranges, lemons, anything he wanted (and could get), never complained of any pain, said he felt first-rate all the time, slept well, read the newspapers by day, and was a great Breckinridge man, they both being Kentuckians. I am as positive that this man had a genuine case of typhoid fever as I am that I am writing this squib.

Now what does my report and that of Dr. Woodbridge teach? Nothing, only that typhoid fever does not kill everybody that has it. I treated a babe, 2 years old, last week with as typical a case of typhoid fever as those described by Dr. Love in this same number of the JOURNAL. I gave it calomel and Dovers' powder 1 gr. each, every four hours for six days and *Fowler's solution* (Squibb's) ½ of a drop every two hours during the same time. This case was clear of fever on the tenth day and called for food. Can Dr. Woodbridge or any other man, do any better for typhoid fever than I did in these two cases? We did not use the same treatment but obtained the same results. Therefore the treatment is not entitled to all the credit.¹ I gave my doses two hours apart, allowing some time for sleep between doses. Any doctor who gives medicine every fifteen minutes for twenty-four hours ought to have mild cases to treat or be dosed himself for the next twenty-four hours.

Dr. Woodbridge is an enthusiast, and evidently a good man, but there is nothing in his treatment that is new or an improvement on mine. Mine will only cure cases that would probably have gotten well without it—typhoid fever comes as near having its own way as any disease we have to treat. Dr. Woodbridge's treatment is like the homeopaths or the old woman's butter, "If it does no good it will do no harm." Dr. Woodbridge is full of enthusiasm; I am full of gall. This makes a stand off. He tells what he thinks is true; I tell what I think is true. Another stand off. The reader can take his choice of treatments—not forgetting that typhoid fever kills under all kinds of treatment, and that many cases get well under the most unfavorable conditions.

W. P. HOWLE, M.D.

A New Truss—The Nagler Shield.

SAN FRANCISCO, CAL., Dec. 29, 1894.

To the Editor:—For the past few months I have been carefully investigating the virtues of a new mechanical device to act as a truss and abdominal supporter wherever such is indicated. It absolutely controls all protrusion and reduces

¹This is a non-sequitur, for Fowler's Solution is an excellent germicide, so also is calomel, and sodium hypsulphite.—ED.

to a minimum all discomfort from pressure or friction. It consists in its main features of an aluminium shield, carefully molded to the abdominal periphery, and suitably modified to conform to the anatomic requirements of either sex. The shield is lined with soft felt, in which pockets are formed, which can be filled with additional packing, should any particular case demand such support.

In extreme cases a padded metallic ring, surrounding the penis is fastened underneath on top of arched cut away portion of the shield, and this ring is pressed against that part of the pad where the opening for the scrotum is set in and when so adjusted to the body completely controls all possible prolapsus.

The Nagler Shield.

The pressure for the truss is created by the fastening of an elastic belt around the body, which is attached to a series of pins placed around the borders of the shield; this can be graded to suit the amount of pressure required. An additional mechanism prevents all vertical movement.

The complete truss is so simple and yet so effectual that nothing but actual experience of its use will convince those unacquainted with its virtues. The lightness of the material—an infantile umbilical truss not weighing over one ounce—and the freedom from friction go far to commend the application of this truss in all reducible hernias or lax abdominal walls.

FRED W. D'EVELYN, M.D.

One Hundred Thousand More.

PARKERSBURG, W. VA., Jan. 9, 1895.

To the Editor:—In your article on "Smallpox in 1894," in JOURNAL of January 5, occurs a clerical error on page 27, which destroys the force of the argument. Should read 112,300 deaths instead of 12,300, making the value of vaccination much less than it is.

Yours,

W. H. SHARP, M.D.

Doctor Dana O. Weeks.

MARION, OHIO, Jan. 12, 1895.

To the Editor:—A mistake occurs in this week's issue of the JOURNAL, page 62, under Society News. Dana O. Weeks was elected President of Marion County Medical Society—not Dana O. Webb. Very truly yours,

O. W. WEEKS, M.D.

PUBLIC HEALTH.

Board of Health of North Carolina.—The December *Bulletin* of the North Carolina Board of Health makes announcement of the resignation of the President, Dr. H. T. Bahnson, of Salem, to become a director of the State Hospital at Morganton. Dr. George G. Thomas, of Wilmington, has been elected to succeed to the presidency. Dr. William P. Beall, of Greensborough, has been appointed by the Governor to fill the place in the Board.

Windmills for Sanitation.—A paper, at the Mexican capital, reports that a new project is on foot for the better sanitation of the sewer system of the City of Mexico. It is proposed to construct twenty-five windmills, at a cost of \$25,-