At the Congress of Italian Naturalists, held lately in Catania, Professor Zurno, of Naples, proposed a reform of the chemical nomenclature of organic bodies; and a commission of Italian chemists was appointed with instructions to present the new system of nomenclature at the next meeting of the Congress in 1870.

At an inquest lately held relative to a death occurring in the Kidderminster Infirmary, Dr. Rose stated that the appearance, during the progress of the case, of symptoms of pyæmia and diphtheria, was partly attributable to the crowded state of the institution, and the deficiency of cubic space in the wards.

THE memorial stone of a fever hospital, to cost about £11,000, was laid at Bradford last week. Mr. Titus Salt gave £5000 towards the cost, and has promised to give an endowment of £50 a year; and Mr. A. Harris, a contributor of £3800, laid the stone.

THE Director-General of the Naval Medical Department has completed his tour of inspection of the naval establishments at the out-ports, and has returned to town.

THE mortality from scarlatina continues to increase in London. The deaths from that cause in the last ten weeks have amounted altogether to 1163; of these 83 occurred in the western, 220 in the northern, 171 in the central, 411 in the eastern, and 278 in the southern, groups of districts. Thirty-eight deaths were recorded last week from measles, as compared with 19, 20, and 21 in the three preceding weeks.

THE deaths of 2244 persons were registered during the month of August in the eight principal towns of Scotland. This number is 189 above the ten years' average for the month, after allowing for increase of population. Scarlatina was very prevalent in Dundee, Perth, Greenock, and Leith.

THE Poor-law Commissioners in Ireland have issued a circular calling attention to certain irregularities which had occurred in the dispensing of medical relief, and stating that, except in cases of urgency, no relief should be given without the production of a ticket obtained from a party duly authorised for that purpose.

DR. CONSTANTINE HOLMAN, of Reigate, Surrey, has been appointed by the Lord Chancellor one of the Justices of the Peace for the borough.

Correspondence.

"Audi alteram partem."

NOTE ON AMPUTATIONS IN HOSPITALS.

To the Editor of THE LANCET.

SIR,—It was not my intention to have taken any further part, for the present, in the discussion respecting the death-rates after certain amputations in hospitals; but I cannot allow the statements recently made by Sir James Simpson to pass unnoticed.*

He has advanced the proposition that "the aggregation or isolation of patients regulates, in a marked degree, the results of operations &c. upon them."

"Already," he says, "I have published the details of above 2000 cases in private country practice, and above 2000 cases in the practice of our large and metropolitan hospitals. Nearly 3000 cases which have been reported to me from provincial hospitals—large and small—require to be

reduced; but as yet this cannot be fully effected, as the collection is not yet completed. The general outline, however, of the whole inquiry may, as it at present stands, be shown in this table:—

Size of Hospital, &c.	Death-rate.
In hospitals from 300 beds to 600 ...	1 in 2½ die.
In hospitals from 100 beds to 300 ...	1 in 4 „
In hospitals from 25 beds to 100 ...	1 in 5½ „
In cottage hospitals under 25 beds ...	1 in 7 „
In isolated rooms in country practice	1 in 9 „

"These few figures teach a lesson of vast import in relation to hospital hygiene; and yet they seem to discourse so plainly as to require no comment."

The lesson which these figures teach me, and will, I believe, teach others, is this—that no reliance can be placed upon them; in other words, that they do not correctly represent the actual state of the case.

By the kindness of the medical officers, I have collected the most recent results of amputations at the thigh, leg, arm, and forearm from various country hospitals in England; and I have 2512 of these cases tabulated and reduced. The returns are entirely at variance with those quoted above, as is shown in this table:—

TABLE showing the results of amputations at the thigh, leg, arm, and forearm in country hospitals in England.

	Death-rate.
In hospitals from 150 beds to 270 ...	1 in 5·2 die.
In hospitals from 100 beds to 150 ...	1 in 5·3 „
In hospitals from 50 beds to 100 ...	1 in 6·1 „
In hospitals from 20 beds to 50 ...	1 in 6·6 „
In hospitals from 6 beds to 20 ...	1 in 4·4 „
In hospitals from 100 beds to 270 ...	1 in 5·3 „
In hospitals from 6 beds to 100 ...	1 in 5·7 „

I do not think anything of conclusions based upon figures which are of doubtful accuracy. I join issue at the root of the matter—with the reckonings, namely, on which Sir James Simpson's calculations are based; and I shall take an early opportunity for drawing the attention of the profession to the results of the independent inquiry which I have instituted.

In the communication by Sir James Simpson already referred to, the death-rate of the hospitals at Bristol, Norwich, Leeds, Aberdeen, &c., is said to be 1 in 4. Of the Scotch hospital I have no knowledge. Of the three English hospitals, the death-rate is 1 in 4·4; but the fact should not be concealed that, in the largest and oldest of the three, the death-rate is only 1 in 7. Canterbury, Shrewsbury, and Truro are very incorrectly introduced as examples of "still smaller hospitals." Shrewsbury has the same number of beds (140) as Leeds, and Canterbury nearly as many—namely, 120; and in these—I call them *large*—provincial hospitals, the death-rate after the amputations in question is 1 in 8·5—not merely "less than 1 in 5 or 6 operated on." But in one of these hospitals the death-rate is 1 in 4·6; in a second it is 1 in 11; so greatly do the results vary.

Everyone will agree with me that figure-facts should always be stated fully and correctly; no facts are so readily misinterpreted.

I am, Sir, your obedient servant,

GEORGE W. CALLENDER,

August 30th, 1869. Assistant-Surgeon to St. Bartholomew's Hospital.

THE TREATMENT OF THE INSANE OF THE UPPER CLASSES IN PRIVATE DWELLINGS.

To the Editor of THE LANCET.

SIR,—A solicitor asked my advice the other day as to where he should place a lady of unsound mind, the wife of a client in India. I suggested an advertisement in THE LANCET, which accordingly appeared on the 4th instant. The letters were to be sent to me to select from. He had only an allowance of £200 a year to deal with, and he offered £170 for board, lodging, and medical treatment. I have already (Sept. 8th) received eighty-nine replies, the large majority from medical men in good position, whose names alone are a reference of character and fitness, and with any one of whom the patient might with every confidence be placed.

* THE LANCET, Aug. 28th, 1869.

The improved treatment of the chronic insane lies in this direction—in removing them, when possible, from the weary imprisonment of asylum surroundings, and in placing them amid the healthier influences of home life. “Many chronic insane,” writes Dr. Maudsley, “incurable and harmless, will then be allowed to spend the remaining days of their sorrowful pilgrimage in private families, having the comforts of family life, and the priceless blessing of the utmost freedom that is compatible with their proper care.”

My experience of one advertisement in *THE LANCET* shows how ample the supply of such accommodation is. From north, south, east, and west came the replies. Moreover, the sum offered was small, only £170. Now, £300 a year is not considered a high payment in one of the best private licensed houses. I would not waste your space in contrasting the relative happiness for the patient under the two systems of treatment. I have known £600 a year to be paid for a chronic patient in a private asylum. For such patients also really magnificent accommodation can be had as single patients in the private houses of medical men. I know one medical man in this county who offers such accommodation for less than £600 a year.

I commend this whole subject to the consideration of the general physicians and practitioners, with whom the advising of relatives and friends in the placing of the chronic insane usually rests.

I am, Sir, your obedient servant,

C. LOCKHART ROBERTSON, M.D.

Hayward's Heath, September 8th, 1869.

ANTISEPTIC SURGERY.

To the Editor of *THE LANCET*.

SIR,—Permit me, in answer to Professor Lister's note in your impression of to-day, to state,—

1st, That I have been often in his wards, and have seen many cases treated by him with carbolic acid.

2nd, That in the trial of it which I caused to be made in the wards under my own care, the cases were dressed by pupils of Mr. Lister, who had been trained by himself, and who had faith in his plan.

I am not ashamed to state my belief to be that carbolic acid is inferior to several other disinfectants and antiseptics; and that the practice now advocated in severe surgical cases is a return to the dark days of surgery.

The sneer implied in Mr. Lister's quotation from my letter does not require further notice.

I am, Sir, your obedient servant,

Athole-place, Glasgow, Sept. 4th, 1869. JAMES MORTON, M.D.

To the Editor of *THE LANCET*.

SIR,—In your impression of the 28th ult., Dr. Morton, of this city, gives expression in an unequivocal manner to sentiments entertained, I believe, by the bulk of the profession in Glasgow, regarding this, the latest toy of medical science, so-called.

On all hands I have heard but one expression of opinion as to Mr. Nunneley's address, that being that it was characterised by a comprehensive grasp of his subject, a fair statement of his propositions, and withal a sturdy eloquence and correct logic. It is all very fine to cry out “misapprehension of published views,” &c.; but if Mr. Nunneley has misapprehended, I wonder exceedingly who *has* apprehended the intricacies of this surgical arcanum.

There is nothing more obstructive to scientific inquiry and progress than reasoning from false premises, and confounding coincidences with necessary consequences; and there is no science or art which has suffered more, or is suffering more, in this respect than that of medicine. This may be illustrated, as Dr. Morton justly puts it, in the “unrivalled success of Dr. Thomas Keith in ovariectomy.” We can fancy how jubilant Mr. Lister and his satellites might feel if Dr. Keith had been in the habit of “imbruing his surgical fingers” in the learned Professor's oil, and making his extensive incision beneath the antiseptic screen. By what power does Dr. Keith succeed in excluding the wonderful sporules?

A distinguished physician of this city related to the Medico-Chirurgical Society his wonderful success in the treatment of typhoid fever, by the exhibition, if I remember

well, of one drop of carbolic acid night and morning. This happened within twelve months ago. Learned medicals gaped in astonishment, vowed there was an occult power in carbolic, that typhoid fever was due to sporules, that carbolic killed them, and that we were on the confines of the greatest discovery of modern medicine. We have heard nothing of carbolic in typhoid fever since!

Sarracenia purpurea, not long ago, played such fantastic tricks with “facts” and “observation” as bromide of potassium has been doing in later times. Small-pox was cured in an incredibly short space of time; pitting there was none. *Sarracenia purpurea* is defunct! The hyposulphites have had their day. Pancreatic emulsion has passed the zenith of its glory—corroborated, as its good effects are, like everything else, by thousands, and the folly of the million emblazoned in an octavo volume. The phosphates are finding their own level; and, in the general chaos, I doubt not, a revulsion must certainly set in to the good old “friends we have, and their adoption tried.”

Sir John Lubbock finds in infant life analogies to the intellectual condition of now existing savages, and he infers to prehistoric man. When a child is presented with a toy,—for instance a tin rattle—he lays it under such an amount of exercise as to terminate in a “physical degradation” of the instrument. Is it an extreme drawing of an inference to conclude that it is the primitive minds of the profession who make such a hubbub of every new toy, medical or surgical, that now and then crops up for their delectation? There is a professional criminality, I contend, in putting forward, on such a flimsy foundation, such specious doctrines as the carbolic acid theory. Fostered by the morbid *pénchant* of the age for novelty, there cannot fail to be reflected on those who lend countenance to the new dodges a passing *éclat*. When a medical man produces deliberately “a retort stand and evaporating dish, with flexible tube, and gas jet, during the progress of a virulent case of diphtheria,” to kill the unseen entities of disease, can we wonder at the patient and friends feeling awestruck at the necromancy of modern science! “A deity! A present deity!” they cry. While all this is being enacted, the shrewd and justifiably sceptical practitioner shrugs his shoulders in doubt, in the face of the thousand and one panaceas that figure on the page of medical literature.

It is but recently, with a pompous flourish of trumpets, that that innocent article of the *materia medica*, sulphur, amid the general clangour of spray-producers, &c., emanated on a disease-exterminating mission from Biggar and Kirkcaldy. An infatuated public demanded a thirteenth edition of the grossest rhodomontade conceived by the mind of man, in the shape of a pamphlet by Robert Pairman, surgeon, Biggar. Cures flashed like lightning from the humble cottage, the manse of the sage divine, and the baronial hall. Human suffering and death fled howling before an offensive smell. Every home contained its quota of sulphur, and every matron toyed more with her spray-producer than with her feeding-bottle. Medical men applauded, and swelled the insane chorus. Time wore on. Marvels died away. The “sulphur cure” became known only in story. The bills of mortality were as obese as before; people suffered, people died.

It is no discredit, I contend, to the carbolic mania, to assert that we find its prototype in the above. Like it, a plausible theory, based upon false premises, and bolstered up by coincidences.

Medical men cannot be too cautious in mounting hobbies, or in being led away by the seductive influences of discovery. Than these panaceas, when the still calm which succeeds the storm arrives, there is nothing more calculated to shake the faith of the public in our art, nothing more opposed to the true progress of scientific medicine or surgery.

I am, Sir, your obedient servant,

Glasgow, August 25th, 1869.

D. CAMPBELL BLACK, M.D.

* * * The insertion of Dr. Black's letter has been unavoidably delayed.

THE EDINBURGH UNIVERSITY AND FEMALE MEDICAL STUDENTS.

To the Editor of *THE LANCET*.

SIR,—Pray allow me publicly to back up the views of “Scoparius,” and others who have written lately to your