cysts as to be unrecognisable." There were no growths on the parietal pleura on either side of the carcase.

In view of the presence of ciliated epithelium it is unfortunate that the uterus and its appendages had been destroyed, as an examination of these might have shed some light on the question as to what was the starting point of the growths.

POISONING OF POULTRY BY COMMON SALT.

By EDWARD R. EDWARDS, F.R.C.V.S., Board of Agriculture and Fisheries.

IN the issue of this Journal for March 1910 there is an abstract of an article in the *Rev. Gén. de Méd. Vét.* on the poisonous effect of common salt on poultry, and a case has recently come to my knowledge resembling the previously recorded one, as the following note will show.

Briefly, the facts are these: A railway station master had thirty-four fowls, and they had always been in good health; on going to the fowl-house one morning he found twenty-one of them dead, although they had been apparently quite well the night before, and he could not imagine the cause. Enquiry elicited the information that the man's wife had been doing some house-cleaning and had turned out, into a bucket, the contents of the box in which the domestic stock of salt was kept. The man then put some boiled potatoes into the bucket, and mashed them up with the salt, and fed the fowls with the mixture, with the result that twenty-one birds out of thirty-four died within a few hours. Some of those left alive refused food and were very weak for a few days, but their appetite and strength gradually returned.

The carcases of the dead birds had been buried some little time before the veterinary surgeon appeared on the scene; two of them were exhumed and a quantity of potato was found in the crops, but detailed *post-mortem* examinations were not practicable. There was no history of any circumstance pointing to any other poison, and the deaths were attributed to the ingestion of salt.

ACID-FAST BACILLI IN CAMEL'S LUNG WITH LESIONS RESEMBLING THOSE OF TUBERCULOSIS.

By A. S. LEESE, M.R.C.V.S., Civil Veterinary Department, India, Investigating Camel Diseases.

IN the March number of the *Journal* (Vol. XXIII., p. 56) Captain R. G. Archibald, R.A.M.C., reports a case under a heading similar to the above, and says: "In the literature at my disposal I cannot find any previous reference to such a condition existing in camels."

Apart from cases in zoological gardens, in which camels lead a confined and unnatural existence, the following are records of two similar cases in India:—

Lingard (Annual Report of Imperial Bacteriologist India 1905-06)

described extensive pathological changes in lungs and post-tracheal glands, due to the presence of what appeared to be tuberculosis, in a camel which died in very poor condition. He noted that the bacillus differed from the human, bovine, and avian types, and that two guinea-pigs inoculated with material from the lung died of tuberculosis in 114 and 96 days respectively.

In the Annual Report of Officer Investigating Camel Diseases (1908) I mentioned a case which I came across an hour or two after the animal's death. The carcase was of a sixteen-years-old camel in poor condition. Muscles flabby and oedematous. Left lung practically solid throughout, with tubercles, caseous matter, and fibrous tissue; right lung congested, and had a tuberculous area the size of a fist. On the parietal pleura (costal and diaphragmatic) typical "grapes" were present. Mediastinal glands enormously enlarged; tubercles also in bronchial and prepectoral glands. Visceral surface of pericardium had a few "grapes" also. Caseous matter was white in colour.

Microscopically the lesions resembled those of tuberculosis, and acid-fast bacilli morphologically resembling tubercle bacilli were found amongst others in the lesions.

The only history was that the camel had been "off colour" for three or four months, and fell during a march (unloaded), dying ten hours later.

In the course of my work I have made about 110 *post-mortems* on Punjab camels (one-humped), and no tuberculous lesion has been met with excepting the above. It is therefore not a very common condition here.

Although the camel leads an entirely open air life, the practice of feeding *bhusa* by making the camels sit in a circle facing inwards, the feed being thrown down in a heap in the middle, would probably make transmission from camel to camel a fairly easy matter.

Suppuration of the lungs (following an attack of pneumonia) is the most common chronic lung disease in camels here.

Abstracts and Reports.

THE DIAGNOSTIC VALUE OF THE INTRA-CUTANEOUS TUBERCULIN TEST.

THE unreliability of the results obtained with the cutaneous tuberculin test suggested to the author the desirability of modifying the technique with the object of obviating this. In the author's opinion the results obtained depend upon the absorptive capacity of the animals' skins and upon the use of a sufficient quantity of tuberculin. These two conditions are met by the intracutaneous injection of the tuberculin.

Technique of the Method.—The seat of operation is the side of the neck. Clipping and shaving of the place have been given up without impairing the safety of the method or the accuracy of judging the effect of the injection.

The thickness of the skin is first determined in the manner described in Romer's account of Lignières' method. With a simple scale two points