Correspondence.

Correct Use of Words.

CHICAGO, Nov. 4, 1899.

To the Editor:—The former usage of the Latin word *sutura*, and its English derivative suture, always had three meanings: 1, a seam, or the line of union made by sewing parts together; 2, the seam-like lines of junction of the cranial bones; 3—in surgical use—the thread used to make the row of stitches composing a suture.

According to the best authority the Latins did not apply the word *sutura* to a single stitch. For the latter they employed a phrase of two words signifying "a passage of the thread." There was also a rare word, *punctio*, for stitch, but it almost never appears in their literature.

When our medical ancestors dropped the Latin and began to write their works in English, their dignity, or perhaps their pomposity led them to feel that the use of the word seam was too much like the low phraseology of cobblers and tailors, so they altered the Latin word *sutura* to make the English suture. However, they were not entirely relieved from contact with the despised English tongue. There was the word stitch and no Latin derivative for it, but they made the best of it, and manfully concluded to use it, so that stitch and suture were in these days never confounded. General literature has never changed in that respect. The great dictionaries of the English language are nearly or quite unanimous in stating that stitch and suture are not synonymous. Webster, Worcester, "The Century Dictionary," "The Standard," and the "Encyclopedic" dictionaries agree in this. All the earlier surgical authors, and the older medical dictionaries agree on the same point.

However, a change set in. About forty years ago careless, or illy-educated surgeons, both in this country and in England, began confusing the two terms. The medical dictionaries held back at first, but by degrees they yielded to the constant pressure of the blunders in professional books and journals, and now they are giving a set of definitions which, in a blundering and confused way, admit that stitch and suture are or may be synonymous terms. Highly educated medical writers still cling to the pure English use of the words, but the blunderers are apparently winning the victory by the sheer pressure of superior numbers.

There are surgeons of great merit whose writings are continually helping on this deterioration. It is a matter of regret, because it lowers the standard of English clearness and precision. One writer says, nearly as follows: "I closed the incision with a suture six inches long. . . . by inserting fifteen sutures about a centimeter apart. Here the writer, a man of high reputation, actually claims to have made one suture by putting in fifteen sutures. Scores of reputable writers are blundering in the same way. I give no names because I am fighting literary errors and not combating individuals.

It is apparently the useless introduction of the Latinized term "suture" which has led to this error. No one would ever have confounded seam and stitch, but suture, not being vernacular, is a hazy term in many minds.

It is best for the clearness, honor and influence of our professional literature that we use the simplest and purest English possible. Yet a surgical writer said to me not long ago that he preferred to use as many Greek and Latin derivatives as possible, so as to add dignity to his words.

I know that we have to express many objects and facts which have no English names, and hence we can not avoid all technical terms, but the evil is that unskilled writers load up their pages with an enormous and unnecessary amount of such rubbish. Any excess of technical verbiage conceals clear thought as the scabbard conceals the sword. Draw the blade when you wish to strike home.

The long Greek and Latin derivatives of our college days, when uselessly lugged in, have a musty smell. They are the dried catnip of literature. Like bunches of herbs hanging on the rafters of housewives' garrets, they swing and rattle in empty heads, giving forth only an ancient medicinal odor.

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EDMUND ANDREWS, M.D.

Milk from Tuberculous Cows.

WORCESTER, PA., Oct. 16, 1899.

To the Editor: In vol. xxxiii, page 988 of the JOURNAL, you say: "Considerable positive evidence exists of the danger from use of milk derived from tuberculous cows." This statement and statements like it are very misleading and can not be accepted by one that has given the matter much thought. It has by no means been proved that the disease is transmittable from bovine to man or vice versa, and yet this is a question that should be decided.

Such statements will have a discouraging influence on scientific investigators. It certainly has not been proved that man will take tuberculosis from milk of cows or from their meat, and expressions like the above are accountable for so few investigators working up this subject at the present time.

Very truly,

E. G. KRIEBEL, M.D.

[It has been abundantly demonstrated that the milk of tuberculous animals—and in less degree its secondary products, butter and cheese—contains tubercle bacilli, and inoculation of lower animals with such material has been followed by the development of tuberculosis. (See JOURNAL, Feb. 18, 1899, p. 373.) We are not aware that analogous experiments have been made on human beings, but it is the consensus of opinion that there is an intimate relationship, if not actual identity, between the bacilli of animal and of human tuberculosis. Ed.]

Association Committee on Legislation.

CLEVELAND, OHIO, Nov. 1, 1899.

To the Editor: Readers of the JOURNAL will remember that at the Columbus meeting of the ASSOCIATION the Committee on Legislation, of which Dr. H. L. E. Johnson, Washington, D. C., is chairman, was authorized to invite, in the name of the ASSOCIATION, the army medical service, the navy medical service and each state society of legally qualified practitioners of medicine, to send one delegate each to a conference to be held at Washington, D. C.; such conference to consider the medical and sanitary legislation now pending, and the members of the conference to report to their respective societies such action as ought to be taken. It goes without saying that the members of the conference will push to their utmost ability those measures on which the profession is now in substantial agreement, such as, for instance, the measure to establish a national board of health, which we hope will be got through at the coming session of Congress. While the committee representing the AMERICAN MEDICAL ASSOCIATION carries weight with Congress, its members can not appeal to the senators and representatives from a given state with the directness and force that a committee can which has been appointed for that purpose by the medical association of their own state. Nor will a resolution passed by the AMERICAN MEDICAL ASSOCIATION come home to them like an expression of opinion from the physicians of their own state—men whom they know and of whose character and attainments they are personally cognizant. Each congressman will say to himself, when the committee from his own state calls on him: "If the state medical society regards that matter of sufficient importance to send a man here and pay his expenses there must be something to it, and I can afford to give it my careful consideration," and unless there appear strong reasons to the contrary the measure is likely to get his hearty support. While denominated a "conference," in the resolution, such an assembly of representative men from the AMERICAN MEDICAL ASSOCIATION and the various state societies, called together for business, would run little risk of degenerating into a "talking match." The first day's session would definitely determine what were the measures on which the medical profession had already agreed, and which of those were in such shape before Congress that they could be advantageously pushed. Forenoons could be spent by the members of the conference interviewing their respective senators and representatives, and by special committees of the conference appearing before the committees of Congress having such legislation in charge. Afternoons and evenings could be spent by the conference in deciding which measures it would be best to "tackle" next, and a report could be agreed on, which the members would submit to their respective societies for ratification or rejection. In three or four days so spent every member of both House and Senate will have been