THE FUTURE OF THE INDIAN MEDICAL SERVICE.

The *Broad Arrow* of July 29th gives a long report of the recent Indian Medical Service dinner at Simla. Surgeon-General C. P. Lukis, Director-General of the Indian Medical Service, in proposing the toast of the evening, said that nowadays it was the fashion to say that the palmy days of the Indian Medical Service were past, and many of the younger generation were depressed by fears that it would no longer offer a career to men who were really keen on their profession. He had no hesitation whatever in saying that those fears were groundless, and after more than a year's experience in his present office he honestly assured them that it was his firm conviction that the Indian Medical Service would flourish even more vigorously in the future than it had in the past. Changes would undoubtedly come ere long, but those changes would be for the better and not for the worse, and would place them in a stronger position than they ever occupied before. Pointing out the defects of the service, he said that every thinking man must be struck by the marvellous improvement in military medical organisation that had been made by the sister service since the Boer War, but could the same be said of the Indian Medical Service? He feared not. It seemed to him that so far as the military branch was concerned it was very much where it was when he came to India 30 years ago. Wherever he went he found square men in round holes, and he saw lieutenant-colonels in charge of regiments performing precisely the same duties that they did as lieutenants, and with no greater responsibilities or opportunities of acquiring administrative ability than they had in the days of their griffinhood. This appeared to him to be a grave defect, and, therefore, as the head of the service and as being chiefly responsible for the selection of officers for promotion to the administrative grade, he had felt it his duty to place his views on this subject before the Government, who would, he hoped, give them their earnest consideration.

BRITISH RED CROSS AND TERRITORIAL NURSING NOTES.

On July 29th, by invitation of Colonel the Hon. H. G. L. Orichton many people assembled at Netley Castle to witness a display by the Hampshire branch of the British Red Cross Society. The lady members of the various voluntary aid associations in connexion with the county branch gave a practical demonstration in looking after the wounded.

The Mayor of Derby presided over a public meeting on July 28th which was convened with the object of forming a local branch of the British Red Cross Society. The Duke of Devonshire strongly deprecated the friction between the Red Cross Society and the St. John Ambulance Association in certain quarters, remarking that there must be no friction in Derby. If he and the leaders of the St. John Ambulance Association in Derbyshire could not devise some reasonable and practicable scheme for coördinate working after a quarter of an hour's consultation he would retire, he said, from public life altogether.

At a luncheon given by Mr. Arthur Stanley, M.P., at the Carlton Hotel on July 29th in honour of the delegates of the Japanese Red Cross Society now in England, Mr. S. Hirayama, one of the delegates, said that the Japanese society was now devoting all its energy to the development of a perfect system of relief which could be instantly put into operation in time of war. In this way they were contributing to the great international work of the Red Cross which endeavoured to ameliorate the condition of the soldier wounded in war.

A branch of the British Red Cross Society for the Repton division has been formed at Ticknall.

MEDICAL BRANCH OF THE NAVY LEAGUE.

At a meeting held under the presidency of Dr. W. P. Herringham at the Imperial Institute on July 29th, a medical branch of the Navy League was formally constituted. Sir Richard Douglas Powell, Bart., K.C.V.O., was appointed President.

DURING the past few days His Majesty the King has graciously consented to become the patron of King's College Hospital, of the Royal Meteorological Society, of the Royal Sea-Bathing Hospital, Margate, and the Royal Sanitary Institute, and the King and Queen have been graciously pleased to become patrons of the Royal Dental Hospital of London, Leicester-square.

Correspondence.

"Audi alteram partem."

A CASE OF ENLARGED FRONTAL SINUSES.

To the Editor of THE LANCET.

SIR,—The following is an account of greatly enlarged frontal sinuses in an imbecile, aged 24 years, physically well developed but with a rather small cranium. The cavities formed projections into the floor of the anterior fossa of the skull equalling each the size of a small hen's egg, and occupying the whole extent of the orbital plate. The case illustrates, I believe, certain of the changes in the skull bones which are apt to develop consequent on changes in the brain, and indeed it may be also taken to exemplify the theories of tissue-tension (Ribbert) and "boundary-struggle" (Thiersch and Boll).

The cranium, though somewhat small (namely, ant. post. $7\frac{3}{4}$ inches, trans. at the frontal ext. ang. proc. $4\frac{1}{2}$ inches, and at the parietal eminences $5\frac{1}{2}$ inches), seemed sufficient in size, nevertheless, to warrant the presence of a brain considerably over $38\frac{1}{2}$ ounces in weight. This organ, which was uniformly abnormally firm, was decidedly ill-developed in the frontal regions. As to the frontal sinuses, these measured $3\frac{1}{4}$ inches across combinedly; the right cavity was $1\frac{3}{4}$ inches ant. post. and the left 2 inches; while the depth of each was $1\frac{1}{2}$ inches. In each case the opening of communication with the nose was near the midline on the floor of the cavity $\frac{3}{4}$ of an inch from the ant. side. The sinuses were separated by a thin bony partition; their walls were regular, except above, where a multilocular tendency was present. Behind and internally they communicated by wide mouths with a large ethmoidal sinus on each side.

I am, Sir, yours faithfully,

HORATIO MATTHEWS, M.B., Ch.B. Glasg.,
Acting A.M.O., Three Counties Asylum, Hitchin.

July 26th, 1910.

GRAIN ITCH.

To the Editor of THE LANCET.

SIR,—Under this heading Dr. H. J. Fardon mentions in THE LANCET of July 30th a case of skin eruption after the handling of straw. I think the cause of the eruption to be the fœtid chamomile (*Anthemis cotula*). This plant is a frequent cause of skin irritation in the hands and arms of those reaping corn by hand. I recently had under my care a brother and sister who developed a vesicular eruption after playing in a hay-field. This eruption I attributed to some plant in the hay, but I was unable to identify it.

I am, Sir, yours faithfully,

Knightwick, Worcester, August 1st, 1910.

P. G. FOULKES.

A SLUR ON ENGLISH PATHOLOGISTS.

To the Editor of THE LANCET.

SIR,—In Dr. Hertz's book on "Constipation and Allied Intestinal Disorders" there occurs a statement which I think should not be allowed to pass unchallenged. On p. 107 we find the following:—

Virchow, writing in 1853, expressed his astonishment that such a common condition as localised chronic peritonitis had up to that time aroused so little attention; it is also remarkable that until quite recently very few further observations of any value were made on the subject. This is due to the fact that, at any rate in England, the pathologist generally examines the viscera after they have been removed from the abdomen by an attendant, so that the peritoneal relations are destroyed and most of the adhesions are divided.

Now not only peritoneal adhesions but many other important pathological conditions would be overlooked if the pathologist only examined the viscera after they had been removed from the body by an attendant, and no pathologist worthy of the name would consider that he had made a satisfactory examination if he had not himself done the dissection or supervised it. It is possible, indeed, Dr. Hertz's statement would lead one to believe that in the hospital with which he is connected the sections are conducted in this fashion. If so it is rather surprising, for, so far