

The difference between the two temperaments is strikingly epitomized by the songs the soldiers are singing, the response to "Deutschland uber alles" being "Tipperary." The majority of our own nationality therefore being—what Carlyle delicately hinted at—easily impressed, it naturally becomes a ready prey to the imposing Teuton.

Well, Sir, I think even Dr. Mercier will agree that now, at any rate, this Teutonic temperament has given us something new in the domain of psychology—namely, the spectacle of a whole nation suffering from a form of systematized delusional insanity, to which, in their own inimitable, hypermethodical, cannot-see-the-wood-for-the-trees manner, they have given the name of *Kultur*. The prognosis and proper treatment of this condition we all know, and from the letters already published it is a relief to see that at last such a course of treatment is in process of adoption amongst ourselves. It is being carried out in a more active fashion abroad.—I am, etc.,

Stafford, Jan. 4th.

B. H. SHAW.

SIR,—Dr. Mercier rejoins that rational argument is wasted on those who differ from him on Freudism. But this is no justification for appealing to the prejudice of those who are still open to conviction. Since, however, he has elected to follow this course, your readers are left the choice on the one hand of inferring the value he sets on his arguments, on the other of appreciating the compliment he pays to their intelligence.—I am, etc.,

London, W., Jan. 5th.

DAVID FORSYTH.

ALCOHOL AND THE WAR.

SIR,—I should like to draw the attention of the profession to the second resolution moved at the meeting at Caxton Hall by Sir Thomas Barlow (reported in the *JOURNAL* on November 21st, 1914), calling upon all classes to help the empire in its great struggle by becoming total abstainers for, at least, the duration of the war.

The temperance question is no mere case of personal betterment; it is one of supreme national concern. If it is bad for the soldiers to drink, it is equally bad for the civilian, and indeed, in some respects worse, because, how any one can selfishly indulge himself with alcohol and then acquiesce in urging what we all know, namely, that the best shot, the most enduring, the least complaining soldier is the total abstainer, passes all understanding. Yet that is what is going on now, and will continue until every man in the nation realizes that, since he owes to his country his resources and his services, whether he is in civilian life or in one of the Forces, it is his duty to economize those resources by ceasing to squander his money on his pleasures, and it is his duty to make his own work as efficient as he can, and that is only done by avoiding alcohol.

Let us, therefore, instead of merely asking our soldiers to practise self-restraint and total abstinence, begin ourselves by taking the pledge for the sake of our country. That is the just and patriotic idea of the Archbishop of Canterbury. Surely the medical profession, more than any other, should help it forward, and every one set an example personally to his fellow citizens.—I am, etc.,

Birmingham, Jan. 4th.

J. FURNEAUX JORDAN.

THE STOPPAGE OF ALCOHOL IN DELIRIUM TREMENS.

SIR,—It gives me great pleasure to see that Dr. J. C. McWalter has called attention to the error in your review on Dr. Mercier's work on *Insanity*, and to find that at last it has definitely been laid down by such an authority, that delirium tremens is frequently directly brought about by the sudden withdrawal of alcohol, and that many cases may be, and indeed are, successfully aborted by the judicious use of alcohol, even when symptoms have begun to show themselves. Not having yet read Dr. Mercier's book, I am unable to say whether or not he says so, but it is nevertheless a fact that a skilful tapering-off of the daily drink-ration in the treatment of chronic alcoholism is an almost certain safeguard against delirium tremens, which the sudden suppression of all alcohol in such cases is extremely liable to result in, even if strong sedation is resorted to, in the occurrence of it. I have stated this and very emphatically in my book¹ published last year, Dr. Francis Hare in his,² and neither of us arrived at our conclusions without abundant clinical evidence.

¹ *Pathological Inebriety, its Causes and Treatment*. Baillière, Tindall and Co.

² *Alcoholism*. Dr. Francis Hare. Churchill.

In my opinion one of the greatest causes, indeed the cause, of the not few cases of delirium tremens that we see in hospitals, following upon an injury to a man who, though he may be sober at the time of injury (many are drunk), shows signs of being a heavy drinker, and will, if questioned, admit to taking a good deal, though probably less than he actually does, is the sudden and complete withdrawal of all alcohol immediately on admission. I had my suspicions of this twenty-five years ago as house-surgeon in a London hospital. My twelve years of experience of the treatment of inebriety in a special sanatorium has convinced me that those suspicions were justified. In the interest of these unfortunate patients, many of whom go under when their injuries, often comparatively trivial, are complicated by an attack of delirium tremens, it is high time that the part played by the sudden suppression of alcohol in persons who are drunkards, and in persons who, while not actually in the common acceptation of the word drunkards, but very heavy chronic drinkers, should be better understood, and that the teaching of old textbooks should be revised on this subject.—I am, etc.,

J. W. ASTLEY COOPER,

Medical Superintendent, Ghyllwoods Sanatorium, near Cockermouth.

January 4th.

SIR,—I have for some years past had the opportunity of studying the treatment of alcoholism as carried out at the Norwood Sanatorium. Dr. Francis Hare, the able superintendent, has conclusively shown that an attack of delirium tremens may be precipitated by suddenly cutting off the patient's alcohol; and further, that it is unwise entirely to withhold alcohol during the attack.—I am, etc.,

London, W., Jan. 3rd.

HARRY CAMPBELL.

URETERIC CATHETERS.

SIR,—I trust that you will not consider me hypersensitive if I venture to reply to an inquiry contained in your very kind and carefully considered review of my book on genito-urinary surgery. The sentence runs as follows: "It would be pertinent to inquire why the ureteric catheter now generally made by instrument makers is described in the figure as the 'author's catheter.'"

During 1905 and 1906 the ureteric catheters sold in London were exclusively of foreign manufacture, being imported from Paris and Berlin. At that time I was pursuing work on the renal function, which afterwards appeared in the form of Hunterian Lectures (1907), and I entered into communication with catheter makers in Paris with the object of getting certain modifications carried out. The French firm, however, professed themselves satisfied with their article, and I approached Mr. J. H. Montague, 69, New Bond Street, W., with the idea of having catheters made in this country. He took endless pains in the matter, and after a number of trials a catheter, modified in the following points, was evolved: It was cut obliquely at the outer end, without the trumpet-end then commonly supplied, the object being to allow the catheter to slip out of the tunnel on withdrawing the cystoscope, and at the same time permit the easy entrance of the point of a fine-nozzle syringe into the lumen of the catheter. It was marked in half inches instead of centimetres, and at each six inches a narrow distinguishing band was added. Certain other points, such as a long gutter leading to the eye, and the use of Albarran's bulbous thickening below the eye to prevent leakage alongside of the catheter, were dropped as experience dictated, and the colour—at first black and yellow—was changed to black and brown, with red half-foot markings.

This catheter is at present sold by most instrument makers, but it is not, as your reviewer states, "generally made by instrument makers." The manufacture of ureteric catheters in this country is in the hands of one or two firms who supply them to the instrument makers.

I was unaware of any one else in this country working at the subject at that time, and the makers of the catheter did not produce the instrument on their own initiative. I therefore ventured to designate the article "author's catheter," under the impression that I had influenced its evolution in the manner indicated.

I trust this somewhat lengthy explanation may satisfy your reviewer that the claim was not made in haphazard fashion. In any case, I remain very deeply in his debt for his careful and indulgent review of the book.—I am, etc.

London, W., Jan. 5th.

J. W. THOMSON WALKER.