

Retired List of his rank, at his own request.—The following appointment has been made at the Admiralty: William Davis to be Surgeon and Agent for St. Dogmael's and Aberporth divisions (dated Oct. 26th, 1891).

VOLUNTEER CORPS.—*Royal Engineers*: 1st Lanarkshire Surgeon S. J. Moore, M.D., is granted the rank of Surgeon-Major, ranking as Major (dated Oct. 17th, 1891).—2nd Volunteer Battalion, the Prince of Wales's Volunteers (South Lancashire Regiment: Surgeon and Surgeon-Major (ranking as Lieutenant-Colonel) R. A. Gaskell resigns his commission; also is permitted to retain his rank, and to continue to wear the uniform of the Battalion on his retirement (dated Oct. 17th, 1891).

VOLUNTEER MEDICAL STAFF CORPS.—*Infantry*: Staffordshire Brigade: Surgeon and Surgeon-Major H. M. Morgan, 2nd Volunteer Battalion, the Prince of Wales's (North Staffordshire Regiment), to be Brigade Surgeon, ranking as Lieutenant-Colonel, (dated Oct. 17th, 1891).

Correspondence.

"Andi alteram partem."

THE DIRECT REPRESENTATION OF THE MEDICAL COUNCIL.

To the Editors of THE LANCET.

SIRS,—We have read a letter from Dr. Rentoul in THE LANCET of Oct. 17th in which he puts ten questions to us as candidates for the Medical Council. The majority of these questions, happily for us, refer to subjects on which we have already, by our actions and our votes in the Council, given an affirmative reply of the most practical kind. We are prepared to use the strongest powers of the Council for the repression of unqualified practice and to watch keenly for any opportunity of increasing these powers. As regards the minimum age of qualification, the changes we have already advocated, and in a large degree initiated, will raise the age practically to twenty-two, and even more. The question of uniformity of fees for registrable qualifications is not within the province of the Council, but we sympathise entirely with the wish to have the fees for corresponding examinations made uniform in the different divisions of the kingdom, as we do with the wish to make the consolidation of the examining bodies complete. Lastly, with regard to the question of midwives, we have secured a committee of the Council for the purpose of watching legislation in connexion with the registration of midwives, and on that committee we shall use our best efforts to protect the interests of the profession.

We are, Sirs, your obedient servants,

C. G. WHEELHOUSE.
B. W. FOSTER.
J. G. GLOVER.

Oct. 20th, 1891.

DIPHThERIA AND NOTIFICATION.

To the Editors of THE LANCET.

SIRS,—I would beg permission to occupy a further small space in your columns in reference to diphtheria mortality. Since the appearance of THE LANCET of Oct. 10th, I have had time to enter more fully into the subject, and also to read more carefully the annotation. In quoting my opinion that possibly "a proportion of deaths formerly certified as due to tonsillitis, sore-throat, or quinsy, possibly also to croup and laryngitis, may now be certified as due to diphtheria," part of my opinion was doubtless unintentionally omitted. I think that it should have been added that I continued: "it is also possible that deaths from scarlatinal sore-throat may be similarly certified."

The monthly figures in the annual report of St. Pancras for 1890 point to the date of the advent of notification as marking an increase of deaths from diphtheria; but, apart from the monthly numbers the annual figures afford a strong presumption that a modification of nomenclature is taking place. Notification came into force in the fourth quarter of 1889, therefore in the following table I have taken the annual periods from the beginning of the fourth quarter of one year to the end of the third quarter of the following

year, and the table embraces the two years previous to notification and the two subsequent years up to date:—				
Deaths.	1887-88.	1888-89.	1889-90.	1890-91.
Laryngitis	17	13	15	16
Croup	35	5	8	9
Sore-throat	6	4	6	5
Scarlatina	52	33	20	37
Total of the above	110	65	49	67
Diphtheria	65	52	129	97
Total	175	117	178	164

It will be observed in the three lower rows of figures that as the diphtheria deaths have increased in number the deaths from the other diseases have decreased, and that is most marked in the first year of notification. The suddenness in the change of the monthly numbers was, as I have already stated, not marked in the metropolitan figures, but upon going further into the matter curious support is given to the inference that probably a modification of nomenclature is taking place in at least two diseases by the following figures for London during the last four years:—

Deaths.	1887.	1888.	1889.	1890.
Scarlatina	1447	1209	784	876
Diphtheria	961	1301	1583	1417
Total	2408	2510	2372	2293

It will be observed that *pari passu* with the fall in scarlatina there has been a rise in diphtheria. Although the effect of notification is not here apparent, I am nevertheless indebted to its effect in St. Pancras for drawing my attention partly to the matter, and I would draw the attention of others to this inversion of numbers. Possibly other interpretations may be forthcoming. Without any intention to minimise or magnify the serious aspect of the steady increase of diphtheria, to purposely blind our eyes to the difficulties in the diagnosis of the disease and the errors arising therefrom would be suicidal. Mr. Wheelhouse is reported in this week's issue of THE LANCET to have pointed out the deficiency in instruction in zymotic amongst other diseases, and it is an open secret that hundreds of men are launched annually into practice without having seen, probably, one single case of many of the infectious diseases. I would invoke your powerful influence to recognise what is only emphasised by notification—namely, that there are numbers behind and rocks ahead for the good ship Infectious Diseases Acts, which will not be escaped unless clinical instruction in infectious diseases is made compulsory at the helm.

I am, Sirs, yours faithfully,

Oct. 17th, 1891. JOHN F. J. SYKES.

"THE USE OF ANTISEPTICS."

To the Editors of THE LANCET.

SIRS,—Briefly, in reply to Mr. Charles H. Taylor, let me say that he is perfectly welcome to infer that I gave up what he is pleased to regard as pathology; in fact, he may go further and assume that I never had it. I certainly should not care to occupy my attention with such a mass of confusion as his letter indicates. Between the years 1855 and 1890 a vast number of detailed improvements have entered into our hospital methods, and it would be perfectly impossible to arrogate for any one of these the difference in hospital mortality which is apparent everywhere. I have no doubt that if we were to have a full knowledge of the conditions of the Derby Infirmary at the first of those years, it would be found essentially different from its arrangements at present, in an enormous number of particulars. Here, then, is the pathological as well as the logical inconsistency of Mr. Taylor. He says that during the last two years there have been only two deaths from what he calls "septicæmia" in the Derby Infirmary, and in these the antiseptic treatment had not been very strictly applied. The assumption is, therefore, that if the antiseptic treatment had been strictly applied, these deaths would not have occurred; certainly the logical conclusion is that they ought not to have occurred. This means that some person has been guilty, according to Mr. Taylor's facts, of criminal neglect. There ought to have been two inquests over these two cases and two committals for manslaughter, if Mr. Taylor's conclusions can be logically maintained. And in relation to this conclusion it is interesting to note that Mr. Charles H. Taylor is the house surgeon to the Derby Infirmary and is fresh from King's College Hospital, and