

dangerous nature, and thus might be the means of saving life.

I cannot doubt that it would well repay any manufacturing chemist to prepare these capsules, which will certainly meet one of the great wants of the age, and of travellers especially—viz., the means of distinguishing good water from bad.

I am, Sir, yours truly,

King's Lynn, Oct. 28th, 1881.

JOHN LOWE, M.D.

## THE HOSPITAL AMBULANCE QUESTION.

*To the Editor of THE LANCET.*

SIR,—Respecting the “disgrace to our civilisation,” as you so properly characterised it in your editorial reference on the 5th instant to the Hospital Ambulance needs in the metropolis of London, you will learn with pleasure that after several months of effort towards the introduction of a Hospital Ambulance system practicable throughout this metropolis, I have found the idea has outside the hospitals met with uniform appreciation, sympathy, and enthusiasm. By Sir Edmund Henderson, chief of the Metropolitan Police, I am authorised to state to all hospital authorities and others whom it may concern that he is in sympathy with the idea, and in every way possible to him his practical co-operation may be relied upon. To the treasurer of one of the largest London hospitals I have recently, at his request, sent such letters as will facilitate his seeing for himself in the shortest time the working of the ambulance system in New York. While various interviews have been had with the authorities of certain other hospitals, there are two facts which will have for you substantial interest:—

1st. The first horse ambulance waggon for this service is already in a very advanced stage, under my directions, at a London carriage-builder's, which when completed will be seen to possess points of advantage beyond the ambulances in New York, and different from anything before attempted.

2nd. This ambulance will at once be employed by one of the largest general hospitals in London.

If the experience with the Hospital Ambulance system only approaches in London that which everywhere else has been uniform, the “disgrace to our civilisation” you so ably commented on may, let us trust, soon be removed.

With many thanks for your co-operation,

I am yours faithfully,

Grand Hotel, London, Nov. 8th, 1881. BENJAMIN HOWARD.

## ERECT DORSAL SUPPORT FOR THE TREATMENT OF DEFORMED SHOULDERS IN YOUNG GIRLS.

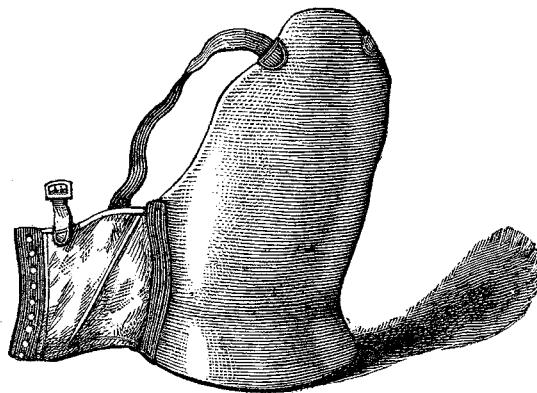
*To the Editor of THE LANCET.*

SIR,—Owing to the success I have had in the treatment of bow-legs in children with the poroplastic felt, and encouraged by so many good surgeons having adopted it in both hospital and private practice, I have been induced to try it, and successfully, in the above very common affection, although not altogether coming under the head of disease, but which leaves such a number of young girls an anxiety to their parents and a disgrace to this advanced state of civilisation when they have emerged into womanhood and begin to show their figures, more especially now at this period when figures are so exhibited, either real or imaginary. Why do we see so many with a stoop; one shoulder from an inch to two inches lower than the other; one scapula most perceptibly prominent and lower than its fellow; one side of the waist nearly straight when the other is sunk in, making to all appearance a raised hip at that side? All for want of a simple apparatus, if I may so call it, when the mischief is going on, and which occurs oftener from bad habits than disease. A course of calisthenics and deportment are practised in schools as a remedy to make and improve the figure, but which I consider, in many cases, cruel and highly injurious to the girl. In attempting to treat this state of things, I do not discard medical treatment where it may be considered necessary, but my object is to prevent the deformity under all circumstances, whether arising from disease or otherwise.

There are many kinds of splints and appliances made and sold to be worn on the back and shoulders for this purpose;

but I have seen none yet sufficient to counteract the stoop to the shoulders and act as a comfortable support, unless we resort to Cocking's poroplastic jacket, which mine (that I am about to introduce) is a modification of, and which will produce the same desired effect with a much lighter quality of his material, at the same time doing away with all the front portion of it, which to young girls especially is the hard part to be borne. Even in incipient spinal cases it is quite sufficient, without encroaching in the least on Cocking's jacket, which is a most admirable appliance in actual spinal curvature; besides, the ventilation must be so much greater with the half-jacket, as well as the bulk to the figure being so much less—a great consideration to the young girl, who may readily be induced to wear it.

I introduce a woodcut here, which will explain it better than I can describe. The weight of the whole apparatus is



only about eight ounces, with a corset arrangement in front, which may be adapted according to the development of the figure, or as necessity may require, with two suspender bands from the shoulder crossing the chest. It is as easily applied as a common corset, which there is no necessity of wearing with it; nor does it perceptibly increase the bulk of the figure. Such an advantage gained by keeping the patient in a perfectly straight position, without impeding the motion of her head or extremities in the slightest, is the object it aims at, and which has been carried out by Mr. Ernst, who has manufactured it for me. I have no hesitation whatever in recommending your readers to try it in the above affections.—I remain, your obedient servant,

Chelsea, November, 1881.

H. FISHER, M.D.

## THE QUEEN'S UNIVERSITY IN IRELAND AND THE MANY-PORTAL SYSTEM.

*To the Editor of THE LANCET.*

SIR,—Your notice of the last conferring of degrees by the Queen's University, held in St. Patrick's Hall, Dublin Castle, in conjunction with your leader on the Royal Commission on Medical Acts, afford material for reflection on the medical work this University has been doing. Its quality and influence on medical education generally, and how the existence of multifarious inferior examining bodies may mar such work, we may glean from the examination statistics quoted by the Chancellor of the University, the Duke of Leinster. And, first, I notice that out of about 600 students matriculated in the Medical Faculty, only some fifty proceed to the degree in Surgery—an honour examination, certainly, as it is fashioned after the F.R.C.S.E. examination in scope and severity of test, but still essential, if to be doubly qualified from the same source is required—that is, not more than ten out of every hundred of its medical undergraduates obtain the surgical degree. The percentage is but little higher for the better known degree of M.D. The question at once suggests itself, From where do the ninety per cent. obtain their qualifications to practise? The answer is, From Edinburgh and elsewhere. Now, why does this unnatural and undesirable state of things exist here, as it no doubt exists to a greater or less extent at all universities in proportion to the severity of their respective examinations? Lazy or sieve-brained students will not undergo the labour necessary to pass the Queen's examinations if there is an easy loophole for escape. No slight labour, certainly, to pass one of the most thorough and searching examinations of any board in the United Kingdom, only equalled, perhaps, by