

was so written. More than 400 years before Christ Hippocrates repeatedly wrote ἐμπύημα, a gathering or suppuration,¹ or an abscess, especially an internal abscess.² Nay, more, the Father of Medicine gives us the derivation of ἐμπύημα, for in "Prognostics," page 43, he uses the verb ἐμπύειν, which means to have abscesses in the lungs. This verb is, of course, in its turn derived from πύον, discharge from a sore matter (Latin pus).³

This very word empyema may serve to illustrate my opposition to Dr. George M. Gould's proposed reformation of English spelling. If his suggestions are adopted it will be next to impossible to trace the history of words and to recognise their hidden meaning. Changes in spelling have, of course, taken place in the past—one has only to read Trench's "English Past and Present" to become aware of this—nay, more, changes are taking place and will in the future take place. But this is being effected by what the writer in THE LANCET aptly calls "the ordinary evolution of language," when "the unconscious impulse of the English-speaking race tends in that direction."

I am, Sirs, yours faithfully,

JOHN WM. MOORE, M.D. Dub.,
Ex-Scholar, Trinity College, Dublin.

Fitzwilliam-square West, Dublin, Sept. 25th, 1897.

"AN IMPROVED ŒSOPHAGEAL PROBANG."

To the Editors of THE LANCET.

SIRS,—Looking over back numbers of THE LANCET I find an illustration in the issue of Sept. 18th of "an improved Œsophageal probang," by Mr. C. J. Mayhew, and a letter from Dr. Sympton in THE LANCET of Sept. 25th claiming priority on the ground of publication of a similar instrument in January of the present year. But the second edition of my book, "The Throat and its Diseases," published so far back as June, 1887, contains an illustration, Fig. 101, page 142, of an instrument constructed to overcome both the difficulties it has occurred to these gentlemen to correct—viz., that of premature expansion of the ramoneur on insertion and the employment of but one hand; and both—as I venture to think—by a better mechanism. Moreover, my instrument is made in jointed form, so as to occupy less space in the pocket or instrument case, while the end, instead of being of sponge, is replaced by an aseptic metal point, which has the additional advantage of detecting any hard foreign body on percussion.

I am, Sirs, yours faithfully,

Mansfield-street, W., Sept. 27th, 1897.

LENNOX BROWNE.

To the Editors of THE LANCET.

SIRS,—In THE LANCET of Sept. 25th a correspondent asks leave "in fairness" to remind you that you published a notice of an Œsophageal probang designed by him, which, he says, embodied the improvements claimed for mine. Does your correspondent consider it unfair of you to publish a notice of a probang which is entirely different, and which I consider simpler, in construction to his? I am unable to understand how the probang illustrated in THE LANCET of Jan. 9th this year is more easily opened and withdrawn with one hand than the old form of instrument.

Messrs. Mayer and Meltzer have informed me that some years ago they made for Mr. Lennox Browne a probang with catch which prevented opening during insertion, but it required the use of both hands to manipulate it.

I am, Sirs, yours faithfully,

King's College Hospital, London.

C. J. MAYHEW.

* * Each inventor has aimed at obviating the same difficulty, but the mechanisms employed are entirely different.—ED. L.

THE BATTLE OF THE CLUBS: THE COVENTRY PROVIDENT DIS- PENSARY.

To the Editors of THE LANCET.

SIRS,—As secretary of the Coventry public medical service I have been requested to forward you a copy of a letter, dated Sept. 5th, 1897, to the medical staff of the Coventry

Provident Dispensary, also a copy of the *Coventry Herald* for Sept. 4th, 1897. My committee feel that the reply of the Coventry Dispensary committee to the memorial of their medical staff was insulting, not only to that staff, but to the whole profession of medicine. In intimating to its medical staff "that if they were not satisfied with their position the dispensary would be quite prepared to get a medical staff exclusively for the institution," the committee were taking a low estimate of professional men in the town and elsewhere, and considering that the Coventry public medical service is open to the dispensary staff upon their resignation, and that ultimately their financial position will not be impaired, there seems to be no reason why they should not stand to the terms of their memorial. With a view of assisting them in such a course the following letter was addressed to them on Sept. 5th, and on the 25th last the enclosed reply was received.

I am, Sirs, yours faithfully,

EDWARD PHILLIPS.

Much Park-street, Coventry, Sept. 28th, 1897.

[COPY.]

20, Much Park-street, Coventry, Sept. 5th, 1897.

TO THE CHAIRMAN OF THE COVENTRY DISPENSARY MEDICAL STAFF.

DEAR SIR,—As secretary of the Public Medical Service I have been instructed to write to you to express the regret of my committee that you have failed in your efforts with the dispensary committee to carry out any of the reforms asked for in your memorial to them. If the report in the *Coventry Herald* of Sept. 3rd be a correct one my committee much regret that any body of professional men should be exposed to such an insult as the following paragraph would imply: "The present arrangement with regard to salaries the committee consider fair both in the interests of the patients and the medical staff, and they are not disposed to disturb it. The general feeling of the committee on the whole question is that if the medical staff are not satisfied with their position the dispensary would be quite prepared to get a medical staff exclusively for the institution, as is being done in some other towns, notably at Yarmouth."

Taking into consideration the verdicts already pronounced on your dispensary system by THE LANCET, the *British Medical Journal*, and the Ethical Committee of the British Medical Association, we are of opinion that there is nothing open to you but the resignation of your appointments. Supposing such a view were accepted by yourselves, and you were at once willing to resign your positions as members of the staff, it is our intention to cordially ask you to join the public medical service, and become members of a professional body which is able to control all contract work undertaken by its members.

We are anxious to assist you by this offer in resenting an insult which has been offered through you to the whole profession of medicine.

I am, dear Sir, yours faithfully,

(Signed) EDWARD PHILLIPS.

[COPY.]

24, Bishop-street, Coventry, Sept. 25th, 1897.

DEAR SIR,—I beg to acknowledge the receipt of your letter of Sept. 6th. As negotiations are still pending between the staff and the committee of the dispensary I am instructed to say that we are unable to adopt your suggestions.

I am, dear Sir, yours faithfully,

(Signed) W. J. PICKUP,

Sec. Medical Staff of Coventry Provident Dispensary.

To Dr. Phillips.

"CONGENITAL ABSENCE OR DELAYED DEVELOPMENT OF THE PATELLA."

To the Editors of THE LANCET.

SIRS,—In connexion with Mr. Little's original article on Congenital Absence or Delayed Development of the Patella, published in THE LANCET of Sept. 25th, the following case, at present in the wards of the Manchester Children's Hospital, under the care of Mr. Wright, may possibly be of interest as illustrating the usual association of the above condition with other extensive congenital deformities. A girl, aged six years, was admitted to hospital on Aug. 7th; she was rather a delicate-looking child and of small build for her age. Both knees were in a position of hyper-extension of about 20°; both admitted of very slight flexion only—the right until the leg and thigh were in a straight line, the left to a further extent of 10°. The left also permitted a slight degree of lateral movement. The left joint line was perfectly horizontal, but owing to the abnormally large size of the inner condyle of the right femur the right joint line was somewhat oblique from within upwards and outwards, causing a slight appearance of genu valgum. On the right side no trace whatever of any patella could be found, and on the left all that apparently represented it was a fibro-cartilaginous nodule about the size of a pea situated in the quadriceps tendon one inch above the joint line. There was also very marked congenital dislocation of both hips, the femora being abnormally moveable on the pelvis, it

¹ Prognostics, page 41.

² Epidemics, III., page 1059.

³ The references are to the pages of the edition of Foësius, published at Frankfort in 1624. It lies before me as I write.