

septic bacteria no special advantage so far as I can discover. Ehrlich, in his first paper (May, 1882) recommends blue as the contrast when red is used to stain the tubercle bacillus, and this led me to try the methylene blue among others. It seems to me the best of those which up to the present I have used. Dr. Heneage Gibbes' magenta liquid certainly has with me been much more effective than the original weaker anilin stains recommended by Ehrlich; but if one views the process as a whole, including the action of the acid upon the first stain, it is difficult to escape from the conviction that his process is essentially Ehrlich's improved. After using several acids of various strengths I have adopted, as the most convenient and best, nitric acid, one part, with four parts of water, rather than the one-to-two generally used, and first recommended by Ehrlich. A similar red staining solution may be made with magenta or fuchsin, using ammonia or potash instead of anilin; but although the bacilli of tubercle may thus be shown, they are neither so certainly nor so strongly stained as by the anilin solution. I find, as Mr. Prideaux does, that the washing in absolute alcohol and drying in air after the second stain may be dispensed with.—I am, Sir, your obedient servant,
Nottingham, Jan. 13th, 1883. W. H. RANSOM.

"PICRIC ACID AND SUGAR TESTING."

To the Editor of THE LANCET.

SIR,—Dr. Pavy accuses me not only of ignorance of fundamental chemical principles, but also of "confusion in writing," and of introducing into this discussion "complexity and fallacy." Putting aside, therefore, all controversial language, I will simply make a plain statement of facts.

1. The absence of sulphide in a solution of albumen which has undergone prolonged boiling with potash is *not* due to gradual oxidation of sulphide by *air and moisture* during the boiling, for the same result is observed when the ebullition is conducted throughout in an atmosphere of carefully purified *hydrogen gas*.

2. If the sulphur of the albumen is eliminated at all in the gaseous state during ebullition with potash it is certainly not given off in the form of ammonium sulphide, or any other *volatile sulphide*; for when albumen and potash are boiled together in an atmosphere of hydrogen carefully purified, and the vapours and gases issuing from the boiling alkaline solution are conducted into a solution of lead, no black precipitate is formed in the lead solution, however long-continued the boiling may be.

In case anyone should be inclined to repeat this experiment with a view to test its accuracy, I may mention that the hydrogen was purified by passing through (1) a solution of corrosive sublimate and (2) a flask containing *boiling solution of potash* before it entered the flask containing the albumen and potash, which were also kept boiling, and finally the gas was conducted into an alkaline solution of lead hydrate. The lead solution remained clear and colourless throughout the experiment; and on testing the alkaline albumen, after boiling for three-quarters of an hour in the atmosphere of pure hydrogen gas, *no indication of sulphide* could be observed.

The *pure albumen* employed by me was made by the method of Wurtz, and at *no period* during the ebullition of this substance with potash could any evidence be obtained of the presence of sulphide in the cooled liquid, even by the application of the most delicate tests.

I, therefore, having employed every possible precaution, not with a view of introducing "complexity and fallacy," but with the object of avoiding otherwise inevitable error, most emphatically repeat my original statement, that no sulphide, either volatile or fixed, is produced when pure albumen is boiled with potash, and I make this statement without the slightest hesitation, in the firm belief that experiment will prove it to be true.

I am, Sir, yours truly,

G. STILLINGFLEET JOHNSON.

King's College, Jan. 20th, 1883.

ANTHRAX.

To the Editor of THE LANCET.

SIR,—In an annotation in your issue of the 13th inst. you draw attention to the fact that, contrary to the generally received opinion, the placenta does not always constitute an

impassable barrier to the passage of the bacilli of anthrax from the blood of pregnant animals to that of the foetus. In corroboration of that statement I may tell you that during the past summer while investigating an outbreak of anthrax in a flock of forty ewes—produced by the carcass of an anthrax sheep buried in the pasture ground the previous summer—I found well-marked anthrax lesions in the foetuses of three ewes which had succumbed to the affection; and not only this, one or two of the animals aborted and recovered: it was also observed that most of the ewes which had lambed before the symptoms of the disease were shown recovered and did well. This case only confirmed strongly the opinions I had previously entertained in reference to this matter.

I am, Sir, yours truly,

THOMAS WALLLEY,

Principal, Royal Dick's Veterinary College.

Edinburgh, Jan. 19th, 1883.

THE HOUNSLOW TRAGEDY.

To the Editor of THE LANCET.

SIR,—The jury empanelled to inquire how, and by what means, Dr. Wm. Whitfield Edwardes, late of Bath-road, Hounslow, came by his death, having returned a verdict which, as I have read the evidence, meets the just requirements of the case, I write to express the hope that the profession generally will give its opinion on this sad story. If this view meets with approval, the most practical and beneficial way in which we can express our sympathy with the survivors of Dr. Edwardes' family is to raise a fund for the benefit of his widow and children. I therefore, through your columns, ask the aid of my brethren for this object.

I am, Sir, yours truly,

Soho-square, W., Jan. 20th, 1883.

JOSEPH ROGERS.

A BRIEF SUMMARY AND DIGEST OF THE WORK OF THE DEVONSHIRE HOSPITAL AND BUXTON BATH CHARITY DURING THE YEAR 1882.

(Communicated by WILLIAM H. ROBERTSON, M.D., F.R.C.P., Consulting Physician to the Hospital, and Chairman of the Committee of Management.)

At the annual meeting of the Committee of Management of the Devonshire Hospital and Buxton Bath Charity, Dr. Lorimer, the resident medical officer, and Mr. Craig, the clinical assistant, presented several tables analysing the work of the hospital during the past year. These tables appear to contain much that may be of general medical interest, and additional similarly suggestive details are in preparation. It may be hoped that these painstaking and capable medical residents will communicate these results to the profession, and possibly one or more of the able members of the acting medical staff will utilise the valuable case-books of the hospital for the public advantage; but, in the meantime, I venture to ask for space to make what I should be glad to find may be only a preliminary account of the experience derivable from the Buxton Rheumatic Hospital.

During the year 1882 there were 1856 in-patients received. Of these, 1340 were suffering from rheumatism proper, of whom 784 were males and 556 females; 17 were cases of gonorrhoeal rheumatism, the whole of whom were males; 138 were cases of rheumatoid arthritis, of whom 12 were males and 126 females; 35 males were cases of gout, of which 12 were complicated with lead-poisoning; 19 were suffering from lead-poisoning apart from gouty complication, of whom 17 were males and 2 females; and 180 of the total patients received were suffering from other diseases, of whom 112 were males and 68 females. Of the 1340 cases of rheumatism proper, 2 males and 2 females were under ten years of age; 52 males and 57 females were from ten to twenty; 145 males and 126 females were from twenty to thirty; 157 males and 101 females were from thirty to forty; 173 males and 95 females were from forty to fifty; 128 males and 102 females were from fifty to sixty; 97 males and 59 females were from sixty to seventy; 29 males and 14 females were from seventy to eighty; and 1 male was upwards of eighty years old. The