

police magistrate or justice of the peace. It should be remembered that it not unfrequently happens that the workhouse medical officer is specially sent for on the admission of a lunatic, and perhaps may have to travel four or five miles, and that he is liable to be assaulted, as I have been in years gone by, by an excited lunatic. Yet all this is to count as part of his duty, for which he is to receive no consideration of any kind—nay, many workhouse medical officers will lose much of their emoluments when the Bill becomes law. It is probably hopeless to expect that the law lords will modify these sections, but it is to be hoped that some medical members of the Lower House will enter an opposition to them; at any rate, I feel that I am only doing my duty to my former colleagues in raising this objection.—I am, Sirs, yours obediently,

JOSEPH ROGERS,

Chairman of the Poor-law Medical Officers' Association.  
Montague-place, W.C., Feb. 21st, 1887.

### "INFANT MORTALITY AT WORKINGTON."

To the Editors of THE LANCET.

SIRS,—Kindly allow me to state that the annotation headed "Infant Mortality at Workington," in the last issue of THE LANCET, was written without adequate knowledge. I am not responsible for the comments of *The Times*, and the report in that journal was not accurate.

As to my remarks on scarlet fever, I was alluding to a few cases in the district during the latter half of the year, and I wrote: "Should the disease appear to spread to a dangerous extent, I shall advise you to have the schools closed." I presume that you will agree with this. During 1885 a malignant form of measles broke out here. I argued the question of school-closing first with the Local Board, and then with the School Board. Time and lives were lost in consequence. Indeed, from Oct. 4th, 1885, to the end of March, 1886, there were sixty-three deaths from measles. I did not wish for this delay over a probable scarlet fever epidemic, as to be forewarned is to be forearmed; hence my remarks. You mention "fatality amongst children at the school age, and not among young infants." My opinion is, that so long as there is scarlet fever in a house all the children in such house should remain away from school. I have not stated that 136 per 1000 is a high infantile death-rate, and, moreover, I turned my attention to the Registrar-General's reports. I stated that the infantile mortality in Workington might be less, and gave reasons which are defensible. You would appear to argue that because infantile mortality is low in Workington, when compared with the same mortality in all England and Wales, I should be silent on the subject. But if I know from personal observation that the infantile mortality in Workington can be reduced, surely you will agree that it is my duty to show how this may be effected.

I submit, therefore, that my "scathing condemnation" was not based on "insufficient data." My report is being printed, and you shall have a copy of it at an early date. In the meantime, I am convinced that a report should be couched in the terms best suited to the people for whom it is written. I might show this from the improvements effected in Workington during my term of office, but I avoid egotism. My object is not to write useless disquisitions on vital statistics, but to point the way to sanitary reform and thereby ameliorate the conditions of the public health.

I am, Sirs, your obedient servant,

JOHN LOWE,

Workington, Feb. 21st, 1887.

Medical Officer of Health.

### DOES LACERATION OF THE CERVIX UTERI MORE COMMONLY OCCUR IN FIRST LABOURS OR IN SUBSEQUENT ONES?

To the Editors of THE LANCET.

SIRS,—In Dr. John Williams' third Lecture on Cancer of the Uterus, published in your issue of February 12th, at page 301, the following sentence occurs: "Indeed, it may fairly be said that when laceration is present the time when it was produced was during the first labour." I have seen a large number of cases of laceration of the cervix, and have good notes of sixteen cases, in thirteen of which I have done Emmet's operation. In eleven of these cases it was possible to tell with tolerable certainty during which confinement the accident had occurred, and in one only had it taken place during the first, and this patient has not sub-

sequently borne children. The labour at which the laceration had probably occurred was usually the last, or the last but one or two, the average being 5.24, the total average of confinements of these eleven being 5.63 for each patient. Of course these numbers are small, and my conclusion or inference that the laceration occurred at a certain labour, and not at a preceding or subsequent one, may not have been invariably correct, but there was usually very good ground for the conclusion. So far as they go, however, these cases show that laceration is uncommon at the first labour. The explanation probably is that although at the first confinement the os dilates more slowly, it is in a healthy condition, and it is not so likely to tear as after the parts have lost to some extent their power of resistance from inflammatory action, the result of previous hard labours.

I am, Sirs, your obedient servant,

JAMES BRAITHWAITE, M.D.,

Feb. 22nd, 1887. Obstetric Physician to the Leeds General Infirmary.

### THE PREVENTIVE TREATMENT OF SYPHILIS AND OF HYDROPHOBIA.

To the Editors of THE LANCET.

SIRS,—Referring to the annotation in your issue of the 19th inst., which states that Dr. Andronico claims to have eradicated the syphilitic virus in four cases by excising the primary growths, permit me to point out the superiority of destroying chancres by means of the thermo-cautery as obviating the risk of reinfection of the system during the actual performance of the operation. I can now inform your readers with regard to the case of Mr. A. B. C. (published in THE LANCET, July 17th, 1886), in which I destroyed a Hunterian chancre on Nov. 11th, 1885, with Pacquelin's cautery, and upon the suggestion of Sir William Jenner, carried out a course of mercurial treatment, that when I last saw the patient in September, 1886, there had up till that date been no secondary manifestations of syphilis.

On Oct. 18th, 1886, I saw a patient in consultation with Mr. Abbott of Braintree. A typical hard chancre existed on the left side of the corona penis, and its development had been noticed to have commenced since Oct. 13th. This was destroyed with Pacquelin's cautery, the part having been previously painted with a solution of cocaine to mitigate the pain, as in the case of Mr. A. B. C. A mercurial course was also suggested, and I have no doubt Mr. Abbott will be happy to report in due time the effect of the treatment. Here five days had elapsed since the first suspicion of infection before the destruction of the chancre, and such a delay is no bar to attempting the eradication of the virus—not even if the nearest lymphatic glands be enlarged, since this enlargement is probably at first of a simple and only later of a specific character. Owing to the very strong analogy which exists between the natural histories of syphilis and hydrophobia, *a fortiori* to the longer period of latency of the latter disease, there is ground for recommending that in all suspected cases of hydrophobia the earliest attempt to destroy the virus at the seat of inoculation should never be omitted. Add to these considerations the fact that only from 5 to 50 per cent. of those bitten by dogs and other animals, rabid or otherwise, really receive the virus of hydrophobia, and the argument in favour of treating these patients in the first instance by applying the thermo-cautery thoroughly to the cocainised part becomes insuperable. The method is simple, and any practitioner in England can carry it out readily.

I am, Sirs, your faithful servant,

CHAS. E. JENNINGS, F.R.C.S. Eng.

Upper Brook-street, Grosvenor-square, W., Feb. 19th, 1887.

THE JUBILEE.—The committee of the proposed Victoria Hospital at Bournemouth have received promises of subscriptions amounting to £2800 towards the hospital which is to be erected in commemoration of the Queen's Jubilee. The committee of the existing Cottage Hospital and Dispensary have £2000 in hand towards the erection of a building (which has been contemplated for several years past), and they have agreed to hand over this sum, together with their interest in the present building &c., to the public committee, in order that there shall be one large and central institution.—At a meeting of working men, at Mansfield, on the 16th inst., resolutions in favour of the proposed establishment of a hospital to celebrate the Jubilee were adopted.