

compelled "to do it himself." Further, the argument which he adduces—viz., that because I had seen various degrees of heart failure and circulatory trouble, therefore my methods are erroneous—is an instance of what logicians call a *petitio principii*, and proves too much. In the first place, the open method, to which my remarks mainly referred, is precisely the method which the Hyderabad Commission, following Syme, advocates. I, as well as many others in Europe, learnt the method before the session of the Commission. That Surgeon-Major Lawrie has never seen the heart fail and that I have is not surprising, because he has never felt the pulse or examined the action of the heart during chloroformisation, and I have. That Surgeon-Major Lawrie has had many cases I do not for a moment doubt, only he has overlooked them, and as, fortunately, in most cases respiratory rhythm is affected *pari passu* with cardiac enfeeblement, he has seen the danger-signal *quâ* the respiration, and has taken measures accordingly.

I am further stated to give no fixed principle of chloroform administration, and in my paper, to which reference has been made, I admit such is the case, and for the reason above stated, that my object was argumentative rather than didactic. In my lectures and practical demonstrations I believe I am dogmatic enough, but personally I regard dogmatism in discussions upon scientific subjects in a scientific periodical as unseemly and valueless. In conclusion, may I draw attention to a sentence against which I am bound to enter a protest? It runs: "The Hyderabad Commission has proved that there is no such thing as chloroform syncope, and that in death from an overdose of chloroform the respiration always fails before the circulation." I submit the Hyderabad Commission has done nothing of the kind; its conclusions were based upon purely negative evidence, and were not warranted by the facts before the profession, and I am strongly of opinion that any teaching which tells chloroformists to ignore the pulse is fraught with danger. I am greatly obliged to Surgeon-Major Lawrie for his courteous reference to myself, and can assure him that I constantly employ the open method and obey the rules he, following Syme, advocates; but I also watch the pulse.—I am, Sirs, your obedient servant,

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## INFLUENZA COMMUNICATED TO CATS AND HUMAN BEINGS BY HORSES.

To the Editors of THE LANCET.

SIRS,—At Cairndow, Loch Fyne, on Dec. 24<sup>th</sup>, 1889, two yearling colts in Mr. J——'s stables were seized with "strangles," or what was believed to be that disease. On Jan. 2<sup>nd</sup>, 1890, two horses, aged respectively five and six years, were seized with influenza; the symptoms were as follows: short cough, profuse nasal discharge, nauseous breath, marked stiffness of joints, disinclination for food or drink; no lung complications; duration of illness about three weeks. I had not the opportunity of seeing these horses, but got the above facts from the owner, a gentleman skilled in the treatment of horses. I had, however, the opportunity of seeing and treating a horse infected in Mr. J——'s stables; this horse was in the infected stables for four hours on Jan. 17<sup>th</sup>, 1890, and was not in any other infected stables or near any other infected animal. The incubation period was six days and the period of illness sixteen days. This horse suffered from the following symptoms while under my treatment: short cough, with nasal discharge, at first watery and latterly thick, with a yellowish tint and offensive smell; no glandular swelling of the throat or jaws; he had a weak appearance, staring dry coat, drooping head, dull, sunken eyes, and suffered from loss of appetite, difficulty in urinating, and constipation. For a few days this horse had not lain down in his stall at night. The stethoscope revealed no lung complications. Temperature per rectum 102°; pulse 60 per minute. Mr. J——, the owner of the horses at Cairndow, had three young cats which frequented a hay loft over the stables where the horses were kept while suffering from influenza. These cats were often seen in the stables or about the stables where the horses fed. They were soon seized with sneezing, cough, discharge from eyes and nose, were disinclined to take solid or liquid nourishment, and suffered from severe purging. One died, the others recovered.

From Jan. 9<sup>th</sup>, 1890, to Feb. 10<sup>th</sup>, a dancing class was taught in the hay loft above the stables. This loft was low in the roof, with deficient ventilation, and the infected stables below were in a most insanitary condition. There was direct communication between the mangers out of which the affected horses fed and the hay loft through which a current of air passed into the loft and contaminated the atmosphere. There were forty pupils at this school, mostly the children of shepherds isolated from each other over an area of about four or five miles from the hay loft where this class was held. There are only about a dozen families in the district, and owing to their pursuits in life and primitive habits they have little communication with the outside world. There was no case of influenza in the district or anywhere near it as far as I know before Jan. 1<sup>st</sup>, 1890. On that date a person, who was in continual contact with the horses, was seized with the disease. On Feb. 2<sup>nd</sup> his son and a neighbouring lad were attacked with influenza, complicated with pleuro-pneumonia. The son described his symptoms as follows. General malaise for about a week, great depression, sickness and nausea, foul breath, hot and dry skin, alternately with cold sweats, severe pain in loins, frontal headache, deep-seated pain behind the eyeballs, followed by cough and prune-juice expectoration. All these cases were convalescent before I had the opportunity of seeing them, and cannot describe the symptoms more minutely. All the forty pupils in the dancing class suffered from well-marked influenza except seven. Some had the disease in a mild form, others had the gastro-intestinal type of this disease, one had severe otitis, with foul discharge from the ears. An occasional onlooker at the dancing class, a young lad, took ill on Feb. 7<sup>th</sup>, and his father the following day, both died on the 15<sup>th</sup> of the same month. They were ailing more or less for a week before being confined to bed. These were the only two fatal cases. At Lochgoilhead, about nine miles from Cairndow, there were five or six mild sporadic cases after the epidemic at Cairndow, but there were no other cases to my knowledge within ten miles of Cairndow. I think it fair to infer that a type of this disease was communicated from the horses to the cats and all the persons who suffered from it.—I am, Sirs, yours truly,

J. H. CAIRD,

Lochgoilhead, March 16<sup>th</sup>, 1891.

Medical Officer of Health.

## ERYSIPELAS AND TOTAL ABSTAINERS.

To the Editors of THE LANCET.

SIRS,—I should be sorry if any of your readers should, by my silence, imagine that I admit the truth of Mr. Whitehead's Parthian shot. I can afford to be amused at his reference to my supposed want of knowledge on the subject of alcohol. Mr. Whitehead is mistaken as to Dr. Parkes' dictum with regard to the quantity of alcohol which an adult man might possibly take. It was the late Dr. Anstie who, at one time, put the limit at two ounces (not "about two ounces," Mr. Whitehead). Dr. Parkes put the limit as between an ounce and an ounce and a half in the twenty-four hours, the maximum amount for a powerful man accustomed to the use of alcohol. And what he said about this was that this amount was not followed by any immediate and obvious deleterious effects. I think it can be shown that Dr. Parkes was mistaken on this point; but even if he were not, it by no means follows that such a dose could be taken day after day, month after month, and year after year with similar freedom from obviously bad consequences. As a matter of fact, the returns of some insurance companies show that in the long run these constantly repeated small doses of alcohol cause earlier average death by five or six years than would otherwise have been the case. But more accurate tests than Dr. Parkes applied have shown that all the senses are rendered less acute than before by moderate doses of alcohol, and that perception, discrimination, and decision are all rendered slower. As Dr. Lauder Brunton has said, it produces progressive paralysis of the judgment, and, I may add, of the will likewise. Mr. Whitehead says he is unaware that alcohol in small doses, well diluted, lowers the temperature in health, and says there is evidence to the contrary. Some observers have noted a very small temporary rise of half a degree or so, followed by a fall; others deny any alteration, especially in those accustomed to it. I have noted in myself, an abstainer, a fall of from half to one degree F. some time after two drachms of alcohol well diluted. It is