

ciles, persons taken up for drunkenness (each conviction with an increased sentence), and prisoners on their first conviction. Such an institution would relieve public lunatic asylums of criminals, prisons from drunkards (not *bonâ-fide* criminals), and enable those on first conviction to be kept from contamination with hardened offenders.

I am, Sirs, yours faithfully,

PUGIN THORNTON.

Nov. 18th, 1889.

PAROXYSMAL METHÆMOGLOBINURIA.

To the Editors of THE LANCET.

SIRS,—At the last meeting of the Clinical Society Mr. Barton brought forward a case of what he terms paroxysmal methæmoglobinuria, from the fact that the blood pigment present in the urine during an attack showed the spectroscopic appearances due to methæmoglobin. It seems, however, that this addition to the ordinary nomenclature of the disease is somewhat unnecessary, since it was conclusively shown in a case which was brought before the Medical Society a few months ago by Dr. Bristowe and myself, and which has since been published in THE LANCET, that the pigment excreted was in every instance oxyhæmoglobin, and that the change to methæmoglobin took place during its stay in the bladder under the influence of the acid urine. In addition we found that occasionally acid hæmatin, a further derivative of hæmoglobin, was present; this being noticed when, as sometimes was the case, no urine was voided for four or five hours, or even more, after exposure to cold, so that following on the same lines the case would then have to be called "paroxysmal hæmatinuria." That this double change through the stage of methæmoglobin to that of acid hæmatin was really due to the exposure of hæmoglobin to the influence of acid urine at the temperature of the body was proved by experiment in the laboratory, a small quantity of laky blood being added to some of the highly acid urine passed by the patient in the intervals between his attacks. We found also that the breaking down of the blood-corpuscles was due to the direct influence of exposure to cold, as the greater the surface exposed the greater was the blood destruction, and the consequent elimination of pigment in the urine; while in very mild attacks either no pigment appeared at all, its place being taken by albumen, or else that albumen appeared alone at the commencement and end of the attack, a small amount of pigment making its appearance in the acid period. The presence of this albumen, however, was really due to the breaking down of blood-corpuscles, as was shown by the fact that it consisted for the most part of a globulin, doubtless derived from the hæmoglobin, the pigment apparently being disposed of in the body when set free in small quantities only at a time. That the depth of colour of the urine should be greatest when the quantity was least is only what might be expected, supposing that each attack was of similar severity; while the considerable flow of urine after an attack, which was also noticed in our case, appeared to be due to a diuretic action exerted by the hæmoglobin during its elimination by the kidneys.

I am, Sirs, yours faithfully,

York-road, S.E., November, 1889. S. MONCKTON COPEMAN.

SOUTH-WESTERN FEVER HOSPITAL, STOCKWELL.

To the Editors of THE LANCET.

SIRS,—An advertisement recently appeared in your columns offering registered medical men, under stated conditions, opportunities for the clinical observation of the diseases treated in this hospital. In response to that invitation, no one has applied for the appointment of clinical assistant. At the same time, one hears a good deal of a demand on the part of the profession for the admission of students to the fever hospitals for educational purposes. Now the appointment of clinical assistant offers far better opportunity for the clinical study of fevers than would be possible under any well-considered scheme for the admission of students to the practice of this hospital. A three-months' stay in a fever hospital as a post-graduate course surely presents greater advantages educationally than attendance at fever hospitals for special instruction previously to qualification. As I believe the material for study placed at the disposal of the profession by the managers of the Metro-

politan Asylums District is not used because it is not generally known that such facilities exist, I trust by your drawing attention to it members of the profession will be induced to apply for these appointments.

I am, Sirs, yours faithfully,

R. A. BIRDWOOD, M.D.,

Stockwell, S.W., Nov. 14th, 1889.

Medical Superintendent.

NOTIFICATION OF DISEASES ACT.

To the Editors of THE LANCET.

SIRS,—I have just seen the letter in your issue of the 2nd, signed S. Gourley, on the above subject, urging that the list of infectious diseases to be notified should be extended so as to include contagious venereal diseases. As one of the members of Parliament who opposed this Bill, may I say that Mr. Gourley's desire is fortunately impossible. The Act is strictly limited to infectious disease, and no contagious disease can be brought under it. Certain diseases are mentioned as being under the Act, and any other infectious disease may be added to the list with the joint consent of the local authority and the Local Government Board. But no contagious venereal disease can be included in the list. I have the assurance of Mr. Ritchie himself that it is utterly impossible. A new Act of Parliament would be required, and no one is likely to bring in a Bill for that purpose. If anyone were to do so, he would find he had entered on a hopeless task, and one which would raise a storm of opposition.

I am, Sirs, yours faithfully,

Nov. 14th, 1889.

WALTER S. B. M'LAREN.

LIVERPOOL.

(FROM OUR OWN CORRESPONDENT.)

Hospital Sunday and Saturday.

THE annual meeting of the supporters of the Hospital Sunday and Saturday Funds was held on the 8th inst., and the treasurer was enabled to make the gratifying announcement that the total sum realised this year was £300 in excess of that of 1888. But it was short by £2000 of the year 1874, which was a year of prosperity, and marks very clearly that the falling off was due rather to the commercial depression than to any diminished interest in the medical charities. The increase over last year and other circumstances augur favourably for the Hospital Sunday and Saturday of 1890, which will be their twentieth anniversary.

The Royal Southern Hospital.

In accordance with a time-honoured custom, the newly elected mayor (Mr. Thomas Hughes) attended St. Barnabas Church in state last Sunday, when a sermon was preached by the Very Rev. Dean Lefroy, and a collection was made for the Royal Southern Hospital, which is situated near the church, and of which the incumbent is the honorary chaplain. After the service the mayor, accompanied by some of the members of the City Council, visited the hospital, and went through some of the wards. The collection amounted to £133, and several special donations of £10 each were promised for the Nurses' Home.

The Royal Infirmary

The recently adopted rule in the Royal Infirmary, which required all the surgeons to be Fellows of the Royal College of Surgeons of England, has considerably limited the number of candidates, and at the last two elections Mr. Rushton Parker and Mr. F. T. Paul have been allowed a "walk over." But each has fairly earned the distinction, the former by many years' service as assistant surgeon to the infirmary, the latter as having been surgeon to the Royal Southern Hospital for some years past, as well as having held other appointments, including that of resident medical officer to the infirmary. These unopposed appointments possess great advantages in one respect. They save the annoyance—a very serious one both to the candidates and the trustees—of canvassing; and the candidate a very considerable expense in advertising, printing copies of testimonials, &c. The contests of former days, moreover, were not calculated to raise the profession in the estimation of the public.