

Introducing two fingers into the vagina, I now succeeded in hooking into the groin of the fetus and delivering it promptly. It had the appearance of being somewhat immature and of having been dead a long time. The secundines were delivered in the usual manner in about twenty minutes.

My attention was attracted to the extreme length of the cord. Upon examination, I found a large, firm knot near the center, revealing the cause of the death of the child. It was not simply a single knot, but a complete figure 8. The cord had apparently become looped, twisted once upon itself and the loop had passed completely over the fetus and been drawn tight, shutting off the circulation. Untying the knot and measuring the cord I found it to be *forty-seven* inches long, by careful measurement. Forty inches is the longest I had ever before found. After the removal of the placenta and clots the uterus contracted normally and the patient felt relieved of all her distressing symptoms.

My theory, which may not be correct, is that after the cord became tied the placenta was detached and hemorrhage took place, distending the uterus abnormally, finally being limited and controlled by the size of the uterus, and for some reason it could not escape from the os, the clots remaining in utero until after the rupture of the membranes, when they were allowed to escape. The cough, with profuse expectoration, the dyspnea, cyanosis, perspiration and high pulse were, I believe, due to absorption of toxic material from within the uterus. I report the case, hoping it may be as interesting and instructive to some of the readers of the JOURNAL as it has been to the writer.

A. H. TUFTS, M.D.

Braces in Spinal Curvature.

CHICAGO, Sept. 12, 1898.

To the Editor:—In the JOURNAL of Sept. 10, 1898, there appears an editorial entitled "Braces in Spinal Curvature" which contains so many half truths, to put it gently, that it should not pass without comment.

The editorial writer says: "The two conditions of tubercular caries and spinal curvature differ so widely in their causation, symptomatology and treatment that each must have a clear-cut picture in our mind when examining spinal caries." This is true in so far as causation and treatment go, but it is not true in all cases in so far as symptomatology is concerned. It is true that there are cases that distinctly differ, and there are other cases where those having the greatest experience can not at once differentiate. Lateral spinal curvature may not simulate tubercular caries, indeed there would be no serious harm done to the patient by the treatment if it did, but tubercular caries in the early stage, before the characteristic posterior deformity has developed, may simulate spinal curvature so closely that a certain diagnosis can not be made by any one on the first examination. This is a serious matter, for tubercular caries will be seriously aggravated if it be treated for spinal curvature. In all cases of doubt the benefit of the doubt should be given to tubercular caries, and the case treated by some efficient form of immobilizing apparatus.

Now as to symptoms: A reflex rigidity of the spine is the only constant symptom in tubercular caries. Pain is rarely present until months after a diagnosis should have been made, and in many cases it is never complained of during the entire course of the disease. Pain on motion is rarely present except when the patient is caught off his guard. The involuntary muscular rigidity, above referred to, protects the spine from motion, which otherwise would be painful. It is a very fatal error to regard pain as a constant symptom in tubercular caries of the spine or of other bones. I have reported a case of hip disease that passed to a flexion deformity of ninety degrees and absolute loss of motion, then through a complete reduction of the deformity by a leverage brace, through the development and spontaneous evacuation of two large abscesses, and finally

to recovery with good motion at the end of six years, that never had a minute's pain or tenderness, and was all the time able to walk on the leg and also, to stand on it alone, and holding up the well leg, hop about without the slightest sensitiveness. "Angular deformity in an anteroposterior plane" is a comparatively late symptom; he who can not make a certain diagnosis long before the development of "angular deformity in an antero-posterior plane," is very ill-fitted to treat a case of tubercular caries of the spine. Lateral deformity, simulating lateral curvature, is an early symptom in nearly half of the cases. Abscesses appear in less than half of the cases, and paralysis, fortunately, is very rare. These should be counted as complications and not as symptoms of tubercular spinal caries. If the diagnosis is made early, tubercular caries of the spine will be found in well-nourished as often as in ill-nourished children; it is only when it has remained unrecognized for months, perhaps until pain is complained of and angular deformity has developed, that the children nearly all become poorly nourished.

As to lateral curvature of the spine: It has not been demonstrated by any one that the predisposing causes are prolonged ill health or rapid growth. As a rule these cases have not grown rapidly, they are undersized, and have never had any special ill health, prolonged or otherwise. It is true that it is usually noticed by the dressmaker, between the ages of twelve and twenty years, but it can be found, if looked for, many years earlier, as shown by Ketch of New York. No one has shown any hypertrophy in the muscles of either side; if it were on either side it could not be on the side of the convexity, as claimed by your editorial writer, and further, it has been clearly proven by Scudder, of Boston, that there is no muscular hypertrophy, or atrophy, or muscular weakness, or difference in the strength of the muscles of the two sides in the ordinary cases of lateral spinal curvature. A tilted pelvis arises from a short leg, and one short leg is found in sixty per cent. of children who have no lateral curvature, as was long ago shown by Morton, of Philadelphia. When there is a short leg and a tilted pelvis in conjunction with lateral curvature it is found quite as often on the wrong side as on the right side. That is to say, with a right dorsal and left lumbar curvature the pelvis should be oblique, the right side high and the left low, and the left leg shorter than the right. Quite as often as otherwise the right leg is half an inch shorter than the left, as reported by me many years ago, and since confirmed by many observers. A word as to the treatment: In slight cases, especially in postural cases, "apparatus," that is, braces and corsets, is not necessary. In cases where there is any of what Roth calls "osseous deformity" "apparatus" is necessary if reduction of deformity is to be gained, and often, if the progress of the deformity is to be checked, but the "apparatus" should always be used in conjunction with exercises given by the surgeon himself.

Respectfully yours,

JOHN RIDLON.

American Public Health Association—Twenty-Sixth Annual Meeting.

CHICAGO, Sept. 12, 1898.

To the Editor:—The forthcoming meeting of this Association is an international one, inasmuch as it will convene at Ottawa, Canada, Sept. 27 next, and as such promises to be of much interest, because representatives, not only from the United States, but from Mexico and Canada will be present.

As this Association has been known in the past for its marked energy in successfully promulgating Municipal, State, National and International sanitary matters, its influence in disseminating the practical application of public hygiene, not only to the medical profession of the countries named, but to the public generally will be wide. It appears to the writer that at this particular time our profession should be largely represented at this international meeting of sanitarians. It is

well-known that all the wisdom of sanitary science is not contained in a few hundred of the members of this or any other large body, but there are other important reasons why this meeting should be a representative one in numbers, namely: among the special committees provided for in its constitution, is the Committee of Public Health Legislation, and it is expected that this committee will submit a comprehensive report, on the merits of which a full discussion should be participated in by medical men.

The convening of Congress at Washington, next winter, will be awaited with renewed interest, as many important topics of a judicial and commercial nature will be introduced, of which none are more important than public health matters. With the strong endorsement of the AMERICAN MEDICAL ASSOCIATION, the American Public Health Association, and scores of other scientific societies throughout the United States, our profession should demand of Congress that our petition looking toward a Department of Health be granted—a department that will be an ideal one from which any country throughout the universe might model.

As the medical profession and citizens of the beautiful and picturesque capital city of the Dominion of Canada have invited this Association and its friends to be their guests at this meeting, it is hoped that a large representation of our profession can attend. Several entertainments have been provided for. Those of us who have shared their hospitality on similar occasions know the social functions extended to us, and their unbounded hospitality is proverbial. For this occasion complimentary excursions, luncheons, etc., have been announced on the program, and the ladies who will grace the gathering will be provided for in a charming manner.

The usual rate of a *fare and a third* has been granted by the railroads: tickets issued on the certificate plan. It is proposed to leave Chicago on Sunday, September 25, at 3:15 P.M., via the Wabash and C. P. R. The magnificent sleepers of the Canadian Pacific will run through from Chicago to Ottawa without change. It is expected that the Mexican delegates will go this way, thus accompanying those who pass through and depart from Chicago. The train leaving Chicago at 3:15 P.M., is due to arrive at Detroit at 10:45 P.M. on Sunday, when we will be joined by other members of the Association, who will accompany us the remainder of our journey. Leaving Detroit at 11:35 P.M., we are due at Toronto on Monday morning the 26th, and at Ottawa at 5 P.M. the same day.

Believing that this international meeting will be an unusually profitable one, scientifically, and that a large attendance is particularly desirable, is why the writer has invoked space in our JOURNAL for this communication.

Very sincerely yours,

LISTON H. MONTGOMERY.

PUBLIC HEALTH.

Society for the "Repression" of Tuberculosis.—A well-attended meeting of prominent members of the profession took place recently, by invitation, at the house of Sir William Broadbent. The meeting had been called to consider the advisability of inaugurating a movement to disseminate knowledge concerning tuberculosis and its prevention, and also the provision of sanatoria for the open-air treatment of tuberculous lung disease. Sir William Broadbent was in the chair, and he briefly stated the objects in view. He read a letter from the President of the Royal College of Physicians of London, expressing approval of the project and suggesting lines of work. Dr. Corfield, Mr. Malcolm Morris, Mr. Shirley Murphy, Dr. Isambard Owen, Dr. J. Pollock, Dr. Ransome, Dr. H. Weber and others spoke; and resolutions were passed: 1, expressing the desirability of forming a public association for the purpose stated, and 2, appointing a provisional committee to take the

necessary steps to start such an association. We heartily sympathize with any action which may be taken to diminish the amount of tuberculous disease, and consider that if, as no doubt will be case, the methods of effecting this are pursued with wisdom and discretion, much good will be done. The facts, as stated by Dr. Ransome, that under existing sanitary legislation the death-rate from such disease has been reduced by two-thirds, and, as Mr. Shirley Murphy pointed out, that vast improvements have taken place in London habitations during the past twenty years, go far to encourage the hope that yet greater benefits will accrue when the community realize fully the preventable nature of tuberculosis and the value of pure air and food.—*London Lancet*.

Phosphorus Poisoning in France.—The prevalence of this formerly serious evil has been much reduced since the French government assumed the monopoly of match-manufacture, and framed rules that must be read aloud to the work people at the factories, at least once every month. Among these rules, according to the *London Lancet* for August 6, is one that enjoins that no food or drink shall be allowed in the workshop, but must be left in the dining-room; that before meals the working clothes must be left in the cloak-room, and the work people must wash their hands with soft soap and water, and must gargle their mouths with a gargle specially provided for that purpose. Then only are they allowed to eat. The same precautions are taken on their leaving the works. Further, it is enacted that no one shall be employed under sixteen years of age, and that they must first be examined by the medical man, who must certify that they are free from bodily infirmity and contagious disease; that they have been vaccinated or have had smallpox, and that the state of the teeth is good. As a result of these precautions among the 575 men and women employed at the Pantin and Aubervilliers works there has not been a single case of phosphorus poisoning during the year 1897. A reduction in the severer cases has been chiefly due to raising the age of admission, to medical examination, subsequent close supervision, repeated dental examination, the personal cleanliness of the workers, and immediate suspension on first symptoms of illness, with allowance of two-thirds of the salary while the employé is away from the works. The French government is doing all in its power to discover better methods of manufacture. Chemists and inventors are paid out of the public purse to study the matter, and the result is, that a match which will strike anywhere and yet which is free from phosphorus has been invented, though it has not yet become a commercial article.

Milk Supervision by Municipal Sanitary Boards.—Dr. W. H. Hatch has reported in the *Journal of Comparative Medicine*, some of the good results of local milk-work in the city of Buffalo, N. Y.

In the absence of State supervision it would seem pertinent to here refer to the system adopted by the Health Commissioner of Buffalo, with the view of mitigating, if possible, the contamination mentioned. By his direction a record of the various dairies supplying the city is kept. This includes inquiry: 1, as to the herds, their health, and whether they are subjected to veterinary examination and tuberculin-test; 2, the methods of cleaning utensils, the process and time given for cooling the milk, hour of shipment, and distance hauled; 3, quality and source of the water supply; 4, physical condition of the employes, etc.; 5, educational efforts in the way of causing the dissemination of literature bearing upon the interest of the dairyman and his care of the milk.

Following this, where conditions at the dairy are deleterious or where circumstances arise of a character deemed prejudicial to the public health, instant investigation by the health department is made, and the dairyman required to correct, without delay, such conditions as may be at fault. Failing to