

This usually takes twelve to twenty hours, and what about the hemorrhage *ad interim*?

In the main I consider the method outlined by Dr. Newman as sensible and practical and that it will meet the requirements in most cases, while at the same time it is so simple and rational that every general practitioner could skilfully carry it out in every necessary detail.

When, however, the embryo and its envelopes and placenta are not diseased and there has been an accidental rupture of the sac, we are confronted with "inevitable abortion" and I can hardly indorse the use of the curette unless there is actual or impending hemorrhage to a dangerous degree. The placenta and membrane are very firmly attached and dip deeply down into the uterine tissue, and a degree of force would be requisite to dislodge them that is not within the limits of safety.

There may be wandering abdominal and loin pains, but the uterine contractions are not sufficiently strong to expel the conception. In this condition it has been my practice for years, to moderately dilate the cervix with Goodell's or Palmer's dilator, remove any presenting fragment and thoroughly pack the womb with sterilized gauze, leaving a fairly close packing in the external canal. Then institute Dr. Newman's preparatory toilet and at the end of twenty or twenty-four hours, when the gauze is removed, in nearly every instance, the uterine contents will easily and bloodlessly pass away. In the event they do not you are then prepared for curettage.

As the paper of Dr. Newman treats only of "Inevitable Abortion," there need be here no reference to the wandering and mostly irrelevant discussion that followed.

507 Greisheim Building.

FAYETTE DUNLOP, M.D.

The Status of Hospital Stewards in the Army.

Letter of the Surgeon-General of the Army to a Committee of the American Pharmaceutical Association.

WAR DEPARTMENT, SURGEON GENERAL'S OFFICE,

WASHINGTON, Dec. 1, 1897.

MR. GEORGE F. PAYNE, Chairman of Committee, American Pharmaceutical Association, Atlanta, Ga.

Dear Sir:—I have received your letter of November 29, also communications from pharmacists in various parts of the country, urging me to support the bills which have been introduced relating to the status of hospital stewards in the army.

There is a misapprehension on the part of pharmacists with reference to the position of hospital stewards. These non-commissioned officers have many other duties quite as important as those connected with the dispensing of medicines, and at our larger posts they usually do not give personal attention to the preparation and dispensing of medicines. This is done by an acting hospital steward, or at times, by a detailed private of the hospital corps. While we require hospital stewards and acting hospital stewards to pass an examination which includes some knowledge relating to the action and doses of the principal medicinal agents, we do not ask for any great proficiency in the art of the pharmacist. This is not essential, inasmuch as our medicines are largely supplied in the form of tablets and pills, and our tinctures and fluid extracts are purchased from the manufacturers.

It is quite as important for us that the hospital steward should have experience in the control of men, in the making out of official papers, in the drill of the hospital corps and in the general management of the post hospital. These things he learns by coming up through the ranks from the position of private in the hospital corps to that of acting hospital steward and finally hospital steward. This method enables us to ascertain his qualifications and to estimate his character and capacity before he is finally appointed to the highest position. A graduate in pharmacy would not be competent to fill the position of hos-

pital steward unless he had had this previous experience.

I shall, therefore, not support any bill which proposes to appoint graduates in pharmacy directly to the position of hospital steward. But a graduate in pharmacy who desires to attain that position can enlist in the hospital corps with a view to promotion, and his education and knowledge of pharmacy would give him a great advantage over all competitors in obtaining a detail as acting hospital steward, and subsequently an appointment as hospital steward. Nor do I think it would be in the interest of the service to make hospital stewards commissioned officers. Their present position is a most honorable one. They are highly respected by the officers of the army, and the position is eagerly sought by educated young men. Any reasonable proposition which may be made with reference to an increase in the pay of hospital stewards will receive my hearty endorsement.

Very truly yours,

[Signed]

GEORGE M. STERNBERG, M.D.,
Surgeon-General United States Army.

The Coming Meeting of the Association at Denver.

TECUMSEH, MICH., Nov. 29, 1897.

To the Editor:—The editorial in the JOURNAL of November 20, under the heading "Influence and Environment of Medical Men," is well worth the perusal of every member of our profession. The article alluded to particularly points out the absolute necessity and special benefit these National gatherings have on the physician who attends them, irrespective of his home surroundings.

The author further states that, "The coming meeting should bring out two thousand physicians." But should it not bring out five thousand?

If the Committee on Transportation can obtain the same railroad rates that are given to stockmen's conventions, butcher's conventions, political conventions of all sorts and shades, Christian science and similar crank conventions, we should have at least five thousand physicians at the Denver meeting, instead of two thousand, as anticipated by the JOURNAL.

Respectfully yours, J. F. JENKINS, M.D.

A Water Company Sued.

MILWAUKEE, WIS., Dec. 4, 1897.

To the Editor:—Some years ago there was an epidemic of typhoid fever at Ashland, in this State. The water-supply was furnished by a company, and it was believed that the epidemic was due to the contaminated water taken from Chequamegon Bay. The water company extended its pipes, and later put in a filtration system, which has resulted in giving pure water. In the meantime a Mrs. Green sued the company for the death of her husband, and claimed damages amounting to \$5,000. This case was recently tried at Stevens Point, the case being taken from Ashland on a change of venue; much expert evidence was produced on both sides, and the jury decided in favor of the plaintiff, giving her \$5,000 damages. This was done in spite of the fact that the only evidence produced that the man died of typhoid fever was the symptoms given by the attending physician. No autopsy was made nor no bacteriologic examination of the discharges from the bowels whatever. The case will be appealed to the supreme court.

U. O. B. WINGATE, M.D.

Correction.

HOT SPRINGS, ARK., Nov. 26, 1897.

To the Editor:—On page 1065 of your JOURNAL, in the discussion of the paper by Dr. C. A. L. Reed, entitled "Gall Stones in their Relation to Cancer of the Gall Ducts," in the last line on said page the reporter makes me say that I had