

CANADA.

(FROM OUR OWN CORRESPONDENT.)

Aid for the Belgian Doctors and Pharmacists.

At the request of Sir Rickman Godlee, Dr. Herbert A. Bruce, Toronto, has successfully organised a strong and representative committee of the leading physicians and pharmacists of Canada, having for its object the relief of Belgian doctors and pharmacists. The central committee is located in Toronto, where meetings are being held regularly and the work prosecuted with vigour. Dr. Walter McKeown acts as secretary and Dr. David Gibb-Wishart as treasurer. Its personnel consists of presidents of the national and provincial medical societies, presidents of the various Medical Councils, the editors of the medical journals, and the deans of the medical departments of the universities. Although just organised there has already been made a number of substantial contributions from the members of the professions in Toronto as well as from some private citizens.

Medical Reciprocity in Ontario with Great Britain.

Late in December a special meeting of the newly elected Medical Council of Ontario was called in Toronto, and the subject of medical reciprocity was fully discussed. It was resolved unanimously to approve of the principle of medical reciprocity; and the Legislative Committee of the Council was instructed to lay the matter before the Ontario Legislature for sanction, and also to bring the proposition before the General Medical Council of the United Kingdom. When Ontario falls in line that will make five provinces in Canada having reciprocity with the motherland—namely, Prince Edward Island, Nova Scotia, New Brunswick, and Quebec. It will only remain then for the four western provinces to complete the arrangement for all Canada.

The Canadian Medical Profession and the War.

It is reported that already Canada has 160 medical men serving the Empire either in England or at the front; and many more are in line for the front with Canada's second contingent. Many of the leading men have volunteered for service, and others have actually taken training. Altogether in Toronto, after the second contingent has been supplied, there is a waiting list of nearly 200. McGill Medical Department will send in the spring a complete hospital staff from the members of the medical faculty and the student body, the nurses being selected from the various hospitals of the city. Dean Birkett will be in command. Queen's University Medical Department, Kingston, Ontario, has also offered a complete general hospital. And now comes another offer from the French-Canadian medical men and students at Laval University, Montreal, for still another general hospital. Not only for active service, but for relief, the medical profession of Canada is well to the fore. An example of what medical societies are doing is seen in the case of a recently organised society in Toronto, the Æsculapian Club, of some 70 members. This society has practically donated all its reserve funds: to the Patriotic Fund, \$100; Ladies' Comforts for Soldiers Fund, \$50; Belgian Relief, \$200; and for surgical supplies to wounded in Northern France and Belgium, \$50.

Toronto University and German Professors.

The University of Toronto has been very much in the public eye during the past two or three months owing to having retained on its teaching

staff three German professors. One of the governors, a prominent financier, died suddenly, but left a letter which deprecated retaining these professors on the staff in war time, or of even permitting them to retain their connexion with the University, although released from their duties on full pay. Still another leading financier and public man, Sir Edmund Osler, protested, and resigned over the matter. The result has been the departure of two of the German professors for the United States, whilst the third remained in Toronto and took out naturalisation papers. So far that professor has been allowed to provide a substitute. This has brought the president of the University, whose rule is practically predominant, owing to recent legislation, into difficulties.

Queen's University and the War.

When the war began no university in Canada responded to the call so promptly or did so well as that of Queen's at Kingston. This was due to the splendid work of the Faculty of Applied Science. A company of engineers was sent to Valcartier, which was the only organised contingent at that camp. Of the work they did there professional soldiers and others qualified to speak have done so in the highest terms. With the second Canadian contingent another well-trained corps will go, being again the only Canadian university to send an organised unit. Of the 80 members of this unit 70 are members of the Kingston School of Mining, the other 10 being picked from the Faculties of Arts and Medicine.

Jan. 27th.

Correspondence.

"Audi alteram partem."

THE VALUE OF TINCTURE OF IODINE AS A BACTERICIDE.*To the Editor of THE LANCET.*

SIR,—In THE LANCET of Jan. 2nd Dr. Alexander Brown asks if the tincture of iodine, or a 2 per cent. solution, can destroy bacteria and their spores. Since there are several hundred varieties of bacteria recorded as excitants of disease, and as there may be wide differences in their resistance to antiseptics, much more experimental work must be undertaken before a comprehensive answer to Dr. Brown's inquiry can be given. The following experiments, which I made two years ago, though they offer a very partial answer to the question, may be of interest at the present moment. I had been asked by Dr. J. R. Bentley, of Limpsfield, to suggest a douche for a case of cystitis. The patient had had his prostate removed, to his great relief, but his cystitis persisted despite a partial relief from an autogenous vaccine of the B. coli present in his urine. The failure to clear up the infection was attributed to the sacculated condition of the bladder. An emulsion of living B. coli, obtained from a catheter specimen of the urine, was divided into six equal portions. To each portion an equal volume of solution of tincture of iodine in varying strengths, distilled water being the diluent, was added. Thus—

Tubule No. 1	= 2%	tincture of iodine in distilled water.			
" No. 2	= 1%	"	"	"	"
" No. 3	= 0.5%	"	"	"	"
" No. 4	= 0.25%	"	"	"	"
" No. 5	= 0.125%	"	"	"	"
" No. 6	= 0.0625%	"	"	"	"

These tubules were at once placed in the incubator at 37° for five minutes only and directly afterwards an equal volume from each was pipetted into a tube of gelose. The inoculated culture tubes were incubated at 37° for 24 hours and no growth occurred in any of them. The deduction was that the tincture of iodine solution, in each of six strengths (2 per cent. down to 0.0625 per cent.), had proved an effective bactericide. Irrigation of the bladder with 0.2 per cent. strength was recommended. This proved to be quite unirritating, and cultures taken on the following day showed marked diminution in the number of colonies of *B. coli*.

The coliform group of bacteria is a very large one, very widely spread, and plays a most important rôle in many infections, though perhaps not often the leading part. Its vitality in most strains is above that of many other common pathogenic microbes. Yet its resistance, if one may safely argue from the above tests, to iodine solutions falls far below that strength (tincture, or 2 per cent. solution) generally employed by surgeons.

Some years ago I had considerable experience of very severe accidents amongst the Durham miners. Extensive lacerated wounds, always badly contaminated with the highly septic pit dust, were very frequent, and I generally brushed them over freely with tincture of iodine. Where this was done subsequent occurrence of suppurating cellulitis was very rare. For bad compound fractures I preferred to rely upon free irrigation with 1 in 5000 solution of perchloride of mercury. The latter solution never let me down in major midwifery operations, under the most unfavourable sanitary conditions, even when puerperal septicæmia was epidemic in the district, provided that the uterus and vagina were thoroughly irrigated at the conclusion of the labour. When, in deference to various authorities, who said that perchloride was futile because it formed a surface coagulum, I abandoned my routine for other antiseptics I not infrequently had serious trouble.

With regard to the action of iodine upon spores, my experience is limited to a few of the common, innocuous bacteria of the spore-producing species. Some of the *B. vulgatus* family occur not infrequently as contaminations in the preparation of vaccines from throat cultures or from pyorrhœa. For three years I have made a practice of adding 0.5 per cent. of tincture of iodine to the emulsions after heating for an hour at 55° on three successive days. Subsequent cultures have invariably proved sterile, and I have attributed that sterility to the action of the iodine, since spores would probably have survived the comparatively low heat used.

I am, Sir, yours faithfully,

H. LYON SMITH, M.D. Durh.

Bentinck-street, W., Feb. 8th, 1915.

LICE AND RHEUMATISM AMONGST SOLDIERS.

To the Editor of THE LANCET.

SIR,—I have read with very great interest Sir Lauder Brunton's letter with this title in your issue for Feb. 6th, but among the remedies for body lice he does not mention paraffinum liquidum (B.P.), which can also be obtained in a crude state. The B.P. preparation is very largely used at our cleansing station in Poplar in the treatment of verminous children. After the bathing of the children liquid paraffin is

smeared on the heads so that any lice may be killed as they are hatched from nits which have not been removed by combing the hair with a fine tooth comb dipped in methylated spirit or by application of the same by dabbing any discovered nits. If a little mercury perchloride, half grain to the ounce, is added to the spirit it makes the application more effectual. A very common household method of loosening the nit is the application of vinegar or acetic acid. Respecting Dr. S. Monckton Copeman's article on p. 273 of the same issue, I have known many mothers use the ordinary paraffin, but this is dangerous, the flash point being low, but that of liquid paraffin (B.P.) is high. Two handbills are circulated in the borough of Poplar *re* body and head lice, and the liquid paraffin (B.P.) is not only recommended for the head, but also, when dried after a bath, for gently rubbing over the whole body, except the face, leaving a thin layer of the liquid.

I am, Sir, yours faithfully,

FRED. WM. ALEXANDER,

Medical Officer of Health, Metropolitan Borough of Poplar.
Bow-road, E., Feb. 6th, 1915.

To the Editor of THE LANCET.

SIR,—In THE LANCET of Feb. 6th you publish a letter from Sir Lauder Brunton under the above heading in which he enumerates 11 drugs as useful for the cure of the former and sulphur powder applied externally as a remedy for the latter disease.

In my book on "The Treatment of Diseases of the Skin," under the chapter on pediculosis, the following paragraph occurs on p. 169: "Sulphur wrapped up in a piece of flannel or in a porous bag and worn about the person next to the skin acts in many cases as a preventative." If our soldiers resorted to this very simple remedy they might remain free from both complaints.

I am, Sir, yours faithfully,

W. KNOWSLEY SIBLEY.

Cavendish-place, W., Feb. 7th, 1915.

THE SHORTAGE OF RESIDENT MEDICAL OFFICERS.

To the Editor of THE LANCET.

SIR,—In THE LANCET of Feb. 6th Mr. W. M. Wilcox, secretary of the East London Hospital for Sick Children, suggests that there is a shortage of resident doctors. Perhaps if a reasonable payment be given the very "alleged" shortage will disappear. The local educational authorities now pay not less than £250 to freshly qualified doctors, while the equally fresh tuberculosis medical officers under the National Insurance Acts receive up to £350. I am told that about 3000 doctors have entered their names at the Admiralty and War Office. Each accepted will receive about £1 per day on service. May I add that many of the steamship companies are now paying their surgeons £15 to £20 per month, a bonus of £50 per annum, the right to charge fees to saloon passengers, and admission to membership for the pension fund. The present resident doctor at voluntary hospitals is paid a lost-dog's wage and is financially on the same degrading level as the Poor-law medical officer. Even residents in Poor-law infirmaries now obtain over £250 per annum, extra fees, with board, lodging, and washing—i.e., about £450. Let Mr. Wilcox attempt to do away with the dog-in-the-manger policy of doctors now acting as visiting