

schools of tropical medicine. This multiplication of investigators had already borne remarkable fruit. Without alluding to what had been done in Liverpool he pointed out not a few notable triumphs by men from the London school. He instanced Dr. G. C. Low's work in connection with the etiology of elephantiasis; the practical experiment of Dr. L. Sambon and Dr. Low as to the spread of malaria by mosquitoes; the discovery in the Gambia colony of a new blood parasite, which was subsequently recognized as a trypanosoma by Dr. J. E. Dutton of the Liverpool School of Tropical Medicine, and the demonstration by Dr. A. Castellani, of the association of this parasite with sleeping sickness. Referring to beri-beri he did not despair of getting light on this disease. Dr. C. W. Daniels, the late superintendent of the school, had been placed in charge of the research laboratory at Kurla Lumpur in the Malay States.

#### Ankylostomiasis in Miners.

In connection with the Liverpool School of Tropical Medicine, on Friday, Mr. Charles Salter delivered a lecture in the Thompson Yates laboratory of Liverpool University on "Ankylostomiasis in Miners." He spoke of his investigations in Westphalia and Belgium and of the measures adopted to eradicate the disease. If a miner, after leaving work neglected to wash his hands before eating, the disease could easily be conveyed, if the dirt on the hands contained larvæ. Expert opinion was divided as to whether the disease could enter through the skin. In his investigation the lecturer could not learn of any instance of workers above ground contracting the malady, except through contact with contaminated miners' clothing. In one instance a boy got the disease through cleaning his father's pit shoes, and in another case a woman was affected by washing her husband's mining clothes. Dampness in mines, and want of sanitary precautions, were among the prime causes of the disease. Disinfectants were costly and useless in preventing the spread of the disease in mines. Proper and adequate sanitary conveniences, strict systematic medical examination, and cleanly habits among the men were requisite. Such precautions had been adopted in Germany and other places with marked beneficial results.

### Correspondence.

#### Circulating Reprints Without Authority.

CHICAGO, Jan. 5, 1904.

To the Editor:—About a year ago I began a series of observations on the therapeutic effects of a new remedy that from analogy I believed would be a valuable sedative, especially for the relief of cough. I presented the unbiased results of these observations to the Illinois State Medical Society last May and the paper was published in the *Illinois State Medical Journal* with no title following my name except M.D. Reprints were made of the article and mailed to many physicians in the state. Subsequently a reprint of this article was republished by the manufacturers of the product without my knowledge or consent, and several titles were placed after my name on the cover page. I knew nothing of this until recently when I received a copy of the reprint with a protest from some physician whose name was not given to me. The titles were only such as may be found after the names of many physicians, yet I think the protest was fully justifiable, for I believe it in exceedingly poor taste to parade one's titles even before the profession, a thing which I am not in the habit of doing. I will deem it a favor if physicians will send me any copies of this reprint they may receive hereafter.

E. FLETCHER INGALS.

### Queries and Minor Notes.

ANONYMOUS COMMUNICATIONS will not be noticed. Queries for this column must be accompanied by the writer's name and address, but the request of the writer not to publish his name will be faithfully observed.

#### POSSIBILITY OF VACCINIA AFTER SMALLPOX.

SAGINAW, Dec. 29, 1903.

To the Editor:—1. Is it possible for vaccine to work on a person who has recently had smallpox? 2. If so, what would you say as to probabilities following a case in the last three or four years?

P. S. WINDHAM, M.D.

ANSWER.—1. Yes, but very improbable. 2. Very improbable, but less so than after recent smallpox. It should be remembered that some other disease may be mistakenly called smallpox and that a pus lesion may be mistaken for vaccinia.

#### BLOOD AGGLUTINATION.

PHOENIX, ARIZ., Dec. 26, 1903.

To the Editor:—Please inform me through THE JOURNAL how one can determine the agglutinating power of the human blood and its increase and decrease; also what works, if any, there are on this subject.

JOHN W. FOSS, M.D.

ANSWER.—Agglutination experiments or tests are made by mixing variable quantities of blood serum with the agglutinable objects, e. g., blood corpuscles, bacteria, and then observing the absence or development of definite clumps and masses either under the microscope or in small test tubes. The power of agglutination is generally determined roughly by finding the highest dilution at which the serum causes distinct agglutination. But there is no fixed standard of agglutinating power; it is, in all cases, normal as well as pathologic, subject to variations within wide limits. Assuming that you are especially interested in the agglutination of bacteria by human serum under various conditions, agglutinations that serve as diagnostic helps, we refer you in the first place to such works on the blood as Cabot's, Ewing's, etc., and to the annual reviews of current literature (*Progressive Medicine*, etc.). So far as we know there are no special books on this aspect of agglutination alone. Numerous articles have appeared in American journals on various aspects of agglutination in various diseases, especially the practical significance of its presence or absence. As an example may be mentioned L. M. Loeb on "The Serum Diagnosis of Tuberculosis," in THE JOURNAL, May 23, 1903.

### Marriages.

L. G. STEWART, M.D., to Miss May Tondee, both of Ellaville, Ga., December 23.

FRANK ANTHONY, M.D., Sterling Ill., to Mrs. Allie Sneed of Dixon, Ill., December 26.

LUCIEN STARK, M.D., to Miss Marjorie Guilfoil, both of Hyannis, Neb., December 23.

P. MAXWELL FOSHAY, M.D., to Mrs. Emily Morgan Grim, both of Cleveland, Ohio, January 6.

J. FOSTER McNARY, M.D., to Miss Mildred Anderson, both of Milwaukee, Wis., December 24.

ALBERT W. CLARK, M.D., to Miss Harriet G. Doran, both of Punxsutawney, Pa., December 9.

R. F. HILLIARD, M.D., Urbana, Va., to Miss Stella Evans of Essex County, Va., December 29.

HARRY A. COSLER, M.D., North Hampton, Ohio, to Miss Emma Myers of Dealton, Ohio, December 29.

HENRY B. A. KUGELER, M.D., San Francisco, to Miss Louise M. Coors of Golden, Colo., December 26.

FRANK P. STAFFORD, M.D., New Carlisle, Ohio, to Miss Alberta Dresback of Sidney, Ohio, December 23.

WILLIAM C. WEST, M.D., Kansas City, Mo., to Miss Estella Bottoms of Westport, Mo., December 16.

MONTGOMERY HUNT SICARD, M.D., to Miss Adelia Avenia Ireland, both of New York City, December 22.

ALFRED LEFTWICH GRAY, M.D., Richmond, Va., to Miss Alice Lear Clark, at Charlottesville, Va., December 23.

IRA E. SEWARD, M.D., Springfield, Ohio, to Miss Laura J. Foreman of Newark, Ohio, at Columbus, December 23.

F. LOMBARD WOODWARD, M.D., Glen Echo, Md., to Miss Maude L. Burnette of Washington, D. C., December 19.

CHARLES LYBRAND BONIFIELD, M.D., Cincinnati, to Miss Grace B. Finney of Northern Ohio, at Cincinnati, December 23.

### Deaths.

Edgar L. Carr, M.D. Medical School of Maine, Brunswick, 1864, assistant surgeon in the Thirty-fifth Massachusetts Volunteer Infantry, died at his home in Pittsfield, N. H., December 22, as the result of injuries received in a railway accident eight days before, aged 62.

Charles Merrill Clark, M.D. New York University, 1857, surgeon in the Army during the Civil War, at the close of which he was chief medical officer of the district of southeastern Virginia, died at his home in Chicago, December 28, aged 69.