

be evaded, and "irrational derangements of commerce," such as are still practised under the name of quarantine in some ports, should be resorted to.

Desirous as anyone to prosecute inquiry into the true nature, etiology, pathology, and mode of propagation of a disease about which we are still very imperfectly informed, and believing thoroughly that all reasonable sanitary and preventive measures dictated by modern science should be put in operation in this as in all epidemic diseases, I yet deprecated unnecessary publicity and needless alarm, feeling assured that preventive and protective measures could be taken in this country that would be amply sufficient, even should plague (which is most improbable) extend to our coasts. The following extract from a letter recently received from a passenger on board an outward-bound steamer from Brindisi to Alexandria will illustrate what I venture to think is an *irrational* mode of dealing with the subject, and shows how great must be the dread of infection when it puts a ship coming from India *via* the Red Sea to Italy into quarantine because the plague has appeared on the banks of the Volga:—

"Brindisi, March, 1879.

"I write, not with any idea that the letter will ever reach you. The quarantine rules are very strict; we are now lying outside Brindisi, with two men in a boat watching us, for fear anyone should rashly try to land. Even if we succeed in getting our letters on shore, they will be not only fumigated, but cut open, so that it is extremely doubtful whether they ever reach their destination. There are now on board six mail bags full of letters from India, which the captain says he has been quite unable to get rid of. They have refused them both at Brindisi and Venice. Some of the quarantine adventures are most funny. The ship brought away from Alexandria an Arab pilot, meaning to leave him at Brindisi to get back with the next steamer. The man has been three weeks on board, and is entirely refused permission to land anywhere. He has made up his mind that he shall never see his family again, and now and then is found crying piteously."

My correspondent's apprehensions have not been altogether realised, for the letter has reached me, and let us hope the six bags of Indian letters have been distributed, and the Arab pilot restored to his family. But is it expedient, even if plague be ever so contagious, to extend these regulations to ships that have sailed from ports where the disease does not exist, and so derange the whole traffic, compelling passengers to incur the delay of an extended sea-voyage by Gibraltar and the Bay of Biscay to avoid sixteen to twenty days of quarantine in an Italian port?

Yours faithfully,

Granville-place, March 11th, 1879.

J. FAYRER.

HOSPITAL STATISTICS.

To the Editor of THE LANCET.

SIR,—Since my return, last week, from America, my attention has been directed to certain statements in an article of mine in the last volume of St. Bartholomew's Hospital Reports. The article was printed during my absence from England, and I regret very much I was thus unable to look over the proofs; otherwise, I think it is evident, seeing that I refer in the next paragraph to a case of blood-poisoning, and again make mention (p. 193) of this case of blood-poisoning after amputation at the hip-joint, that I must have corrected the statement that there had not been a single case of pyæmia amongst the patients under my care. I greatly regret that I have omitted a case of blood-poisoning which was associated with osteo-myelitis and trephining of a bone. The omission was accidental. Referring to other cases, I may state that a femoral hernia was admitted December 17th, 1873, and contracted blood-poisoning between that date and the 30th of the same month. This case I narrated under the head of "Septicæmia" in the tenth volume of our Reports. As I had told the story of the case in connexion with the year 1873, the year in which the poisoning, if any, occurred, I did not include it with the cases of 1874. With reference to the cases of erysipelas, a dental case, Oct. 10th, 1873, is mentioned by me in the Hospital Reports, vol. x., p. 138. It should be added to the fatal cases of erysipelas. It should be stated, p. 185, that the amputation cases cover a period

of eight years and three months. Amongst the tumour cases should be given that of a woman, aged seventy-two (described in the Hospital Reports, vol. x., p. 150), who sank after the removal of a large chronic mammary tumour; and amongst the operations upon bones should be included the case of osteo-myelitis previously referred to. There are some other corrections I should have made in the paper if I had had the opportunity of revising the proofs, but those I have mentioned are of chief importance, and I take this opportunity of referring to them, and, so far as I now can, of correcting the article.

I venture to trouble you with this note, as so long a time must elapse before I could make these corrections in the next volume of the Hospital Reports.

I am, Sir, faithfully yours,

March 1st, 1879.

GEORGE CALLENDER.

WILLIAM HARVEY.

To the Editor of THE LANCET.

SIR,—Since your article upon the celebrated Dr. Harvey, in THE LANCET of Nov. 30th, 1878, I have tried to make some little inquiry as to the probable removal of his remains, and am informed that there is no chance of the family allowing them to be removed from the position that they have occupied since June 26th, 1657.

Another idea presents itself to me. The author of your article speaks of the Harvey sepulchral chapel as a "handsome little ruin," but fails to mention the far greater ruin that stands beside it—the church itself,—in comparison with which the chapel is really in good repair.

Would it not be a noble and worthy purpose, as a memorial to so celebrated a gentleman, for the country to thoroughly restore this fine old church? The churchwardens and I are arranging to attempt a little more patching up, as we are conscious that the district is far too poor to do one tithe of what is required, and more especially during the present depression of agriculture. The roof and tower are both in a bad state, the bells require rehanging, and the whole church (except the chancel, which was done a few years ago) requires reseating, to say nothing of many little detail matters.

If you, Mr. Editor, or the author of your article, or both, should think this plan practicable, and could fall into it, I shall be pleased to hear from you, and shall be glad to take the matter in hand.

In this way the Doctor's name would be honourably commemorated, God's glory worthily extolled, and several generations of humble worshippers here would bless the efforts that resulted in so good a work.

With due apologies,

I am, Sir, yours faithfully,

JOHN ESCREET,

Hempstead, Saffron Walden,

Curate in Charge of Hempstead.

March 11th, 1879.

TREATMENT OF TRACHEOTOMY CASES.

To the Editor of THE LANCET.

SIR,—In the report of the discussion at the Clinical Society on the 28th ult., on Messrs. Lawson's and Pugin Thornton's cases of Diphtheria, published in THE LANCET of last week, I am made responsible for the opinion that a temperature of 65°F. was likely to prove debilitating to the patient. As the point is one of considerable importance, and is likewise attracting special attention at the present time, I seek your permission to allow me to rectify the above statement, which was not made by me. I directed attention to the fact that I had frequently found the temperature in curtained cots, heated by steam, raised to 75°, or even higher, and that I considered such an atmosphere very unwholesome and weakening, and liable to enfeeble the patient's muscular power. I stated that *any point above 70°* was quite unnecessary for the conduct of the case. The facts elicited in the discussion went to prove that a temperature of 65° was even preferable; and it will be well that more attention is in future directed to this feature in the treatment of these very grave cases.

I am, Sir, your obedient servant,

DYCE DUCKWORTH.

Grafton-street, Piccadilly, 10th March, 1879.