

guinea-worm by the injection of corrosive sublimate solution, if possible, into the body of the parasite, but, failing this, into the tissues adjoining it, would seem to deserve a trial.

Correspondence.

"Audi alteram partem."

"THE PREVENTION OF SYPHILIS BY TREATMENT."

To the Editors of THE LANCET.

SIRS,—With reference to the letter in THE LANCET of Feb. 3rd (p 341), from Dr. C. R. Drysdale under the above heading, while probably many will agree with him that "syphilis being a contagious disease ought if possible to be prevented" by some "legal plan," some on the other hand may not estimate at a high value the means which he mentions to that end—"notification and prosecution of persons who voluntarily infect their neighbours." Notification implies the possibility of recognition of the existence of disease, and as one objection raised against the value of compulsory examination was based on this asserted difficulty the two methods are on this point, assuming the existence of the difficulty, on the same footing. Besides, the value of notification towards prevention lies in the extent and degree to which it would bring the disease under treatment; in range it is limited to those coming within the professional purview of the notifier, it can have no action on that large number who while diffusing the disease abstain from all application for treatment until physically compelled to seek relief; and to be valuable for prevention it must be associated with efficient continuous treatment so long as the disease remains capable of transfer by contagion and with compulsory withdrawal of the sufferer from all ways of its dissemination. Hence from a sanitary point of view the value of notification over the compulsory examination and enforced detention of the old Acts is not apparent; rather it is less in that so far as prevention is concerned it starts from pronounced disease compelling the sufferer to seek treatment, while the compulsory examination anticipated this period and withdrew the infecting person from acting as a focus of infection long before that condition had been arrived at, though to be efficient its mode of action follows the old compulsory lines. Nor is it apparent how notification could "give us correct information as to the extent of the evil" in view of its necessarily limited range of action, and before it can be acted upon the notifier must be relieved from the present legal disabilities attendant upon it.

Again, with respect to the "prosecution of persons who voluntarily infect their neighbours" the difficulties attending the procedure are many. We know already how profoundly obnoxious was the assumption of the rôle of the informer when directed only towards the recognition of the existence of disease and how much greater would be the obstacles when the additional object of punishment was entailed. I venture to think that these suggested means of prevention are, from a sanitary point, no advance over the old extinct procedures.

In his last paragraph Dr. Drysdale, referring to the last meeting of the British Medical Association, mentions an apparent wish on the part of some "to introduce the Parisian system into London," concerning which system he makes extracts from a pamphlet sent him recently by Professor Fournier. Although present and taking part at this signally inconclusive and abortive meeting and hearing a variety of opinions I cannot recall to mind any prominence given to the system bearing this designation. Speaking personally, my advocacy was for the prevention of syphilis by curtailment and control of its main diffusing medium—prostitution—and by sanitary legal action against its transfer. And, indeed, by the extracts given from Dr. Fournier's pamphlet we find that even in Paris the prevention of syphilis through "repression of prostitution by administrators and police measures" was not without "benefits," though the measures were "insufficient for their purpose" and failed "because so disgracefully unjust in application"—features of a remediable character and having reference not to the principle but to the means adopted. And that failure is no necessary sequel is shown by the results arrived at in the German army and in our own, and by the

experience of the Ionian Islands and of Malta, as stated by Sir H. Storks and Mr. Inglott, to mention no others of like import.

The great extent to which the disease prevails in Paris is pointed out by Dr. Fournier, and the evidence to the same effect among us is indicated in the addresses to the Prime Minister in June last; the formulation of a plan is wanted, not facts of disease prevalence which are palpable enough. After repeated references to the scandalous state of our streets and to the insane toleration of solicitation, the London Council for the Promotion of Public Morality have recently held a meeting for attacking one contributing factor; but what is unquestionably wanted is not isolated action on one point, good though it be in itself, but combined action directed both against prostitution with all its promoting influences and against the resulting physical diseases, if substantial durable results are to follow; and such action must be compulsory in nature, as recognised by Dr. Drysdale.

I am, Sirs, yours faithfully,

FRANCIS H. WELCH, F.R.C.S. Eng.,
Surgeon-Colonel (retired), A.M.S.

Feb. 12th, 1900.

"THE PHYSIQUE OF THE BOERS."

To the Editors of THE LANCET.

SIRS,—In the interesting article on the physique of the Boers in THE LANCET of Feb. 10th (p. 410) a statement occurs which I think will cause some surprise to those of your readers who have lived in Holland. The writer says: "In so far as they are of Dutch descent the Boers should be small. The French blood which is mingled with that of the Dutch would not tend very considerably to increase the height of the Boer. The French, though taller than the Dutch, are not so tall as the English." I believe that the notion that a Hollander is a short squat man is derived from the days when almost our only intercourse with him was in his sailor capacity, sailors being generally men of short, thick-set build. We are also familiar with his outward man through the seventeenth-century painters of rural life whose rustics are generally clad in garments that give them a "broad-in-the-beam" aspect. What struck me in the Dutch physique—I lived several years in Holland—was that it was by no means of the Teniers type and that gaunt tall men were quite as common as with us English. The Dutch are certainly of a greater average height than the French; but the stature of both varies somewhat in the different provinces of the two countries. The mingling of the French with the Dutch blood would, I venture to say, tend to diminish rather than to increase the height of the Boer; but it is doubtful whether the influence of the French upon the Boer physique is not *une quantité négligeable*.

I am, Sirs, yours faithfully,

HENRY ATTWELL.

To the Editors of THE LANCET.

SIRS,—Your correspondent who wrote last week (p. 401) on the subject of the physique of the Boers scarcely does justice to the physique of the Briton. He takes as his standard of comparison a crowded street in Glasgow, factory women in a Lancashire town, the inhabitants of a West-end slum, and ditto East-end, thus comparing a healthy agricultural class with the unhealthiest classes in the United Kingdom, if we except the healthy open-air workers in Glasgow. If he cares to revise his opinion let him go to any agricultural show in the country or even to the cattle show at Islington, and he will see a class more than able to hold its own in comparison. As it is not the time of year for these shows the next best opportunity is at a meet of the hounds or a local country steeple-chase. Then apart from the distinctly agricultural class take the athletes from the football and cricket fields and other branches of athletics. He seems needlessly troubled about replacing the Highland Brigade; it would be very interesting to know how many of them are pure crofters and how many town-bred; I fancy your correspondent would be astonished at the figures.

I am, Sirs, yours faithfully,

Forest-gate, E., Feb. 12th, 1900.

E. T. A. BOYTON.

"DEATHS UNDER CHLOROFORM."

To the Editors of THE LANCET.

SIRS,—Dr. Edmunds has still failed to grasp the meaning of my query, "If the patient does not absorb a similar dose