

emergency saves lives and prevents the misery which results from certain chronic ailments. Such aid brought to the poorer working-class women has the additional advantage of ultimately saving the pockets of the ratepayers. To the ratepayer it matters little or nothing whether the pittance which goes into the doctor's pocket is administered by the city or borough or county council, or even by the board of guardians. He only wishes to know that his money is disbursed fairly for value received without the harassment and ill-usage of those who have earned it, and he does not clearly see why the Poor-law should come in at all.

If you work out the arithmetic of the situation by addition and subtraction you will reach the conclusion, on the debit and credit reckoning without considerations of sorrow and suffering, that it would well repay the ratepayers of city or county to take matters out of the hands of the "guardians of the poor" throughout the length and breadth of the country, to put an end to the ill-usage of the humble medical practitioner, and to pay him decently well for his services.

I am, Sir, yours faithfully,

Manchester, Jan. 18th, 1909.

WILLIAM J. SINCLAIR.

To the Editor of THE LANCET.

SIR,—Sir William J. Sinclair has done good service to the general practitioner by drawing attention to the formation of this committee by the Privy Council. There is no doubt that in 1902 the medical profession was caught napping. There will be no excuse for us if we lose this opportunity now offered for amending the Act and the present rules of the Central Midwives Board which are only in force until Sept. 30th next.

The British Medical Association has been asked if it desires to tender evidence. The reference to the Departmental Committee is "To consider the working of the Midwives Act, 1902, and in particular with reference to the supply of midwives and the cost of training, the remuneration of medical men summoned on the advice of midwives under the rules in pursuance of the Act, and the delegation of their powers by county councils under the Act."

There seem to be two principles that should be urged: (1) adequate and immediate representation of the general practitioner by general practitioners nominated by the Association on to this Departmental Committee; (2) adequate representation of the general practitioner by general practitioners elected by the Association on to the Midwives Board. With these acceded to, as also: (3) adequate guaranteed payment for services rendered to the State by attending women before, during, and after labour; and (4) no State subsidising of midwives, the profession can rest content that the Act will not be able so grossly to be worked to the detriment of the doctor or of the woman and child for whose benefit it has been enacted. Will every general practitioner, therefore, *at once* bestir himself and take steps to induce his local medical society (or division of the Association, branch council or executive committee of the division) to put at the disposal of the Association evidence on the four points referred to the committee, as also a resolution in favour of the four principles enumerated above? Time is valuable. I am, Sir, yours faithfully,

London, S.W., Jan. 26th, 1909.

E. ROWLAND FOTHERGILL.

GOUT IN A WIRED BONE.

To the Editor of THE LANCET.

SIR,—In THE LANCET of Jan. 23rd, p. 219, Mr. Edred M. Corner, in his article on fractures of the olecranon, after describing a case in which an acute attack of gout followed wiring, says: "It is the only case of gout in a wired bone which I have seen or heard of." The following is an almost exact duplicate of Mr. Corner's case.

Fourteen years ago I assisted the late Mr. William Square in wiring the patella of a man, aged 50 years, for a recent transverse fracture. The case impressed itself on my memory for two reasons. Firstly the drill, weakened by the eye, which in those days the instrument maker insisted on making in the end of the blade, broke off and remained embedded in the upper fragment, compelling me to drill another hole, and secondly the joint within 48 hours of the operation presented every appearance of impending suppuration. This condition, with slight remissions, lasted a week, at the end of which period an attack of gout in

the great toe gave the clue to the condition of the knee-joint.

The patient suffered only moderately, and, being accustomed to frequent attacks of gout, was much less concerned about his swollen knee than were his medical attendants.

The patient recovered with a perfect knee-joint.

I am, Sir, yours faithfully,

Plymouth, Jan. 24th, 1909.

C. HAMILTON WHITEFORD.

POISONING FROM ANILINE BLACK ON SHOES.

To the Editor of THE LANCET.

SIR,—Your interesting remarks on "Poisoning from Aniline Black on Shoes" in the issue of Jan. 9th, p. 117, opens up the at present debateable question as to which is the more toxic, aniline or some of its salts, particularly the hydrochloride. Most competent authorities, such as Sir Thomas Oliver, Dr. T. M. Legge, and Dr. W. F. Dearden, have inclined to the former view; nothing but direct experiment can settle this point, which at the present moment is under investigation by Dr. Sellers.

For some time I have looked upon many cases reported as aniline poisoning as being due to its salt, the hydrochloride; it is just possible that the interesting case you cite may claim a like causation. The majority of these aniline black dyes for leather are made with the salt and contain no free aniline. The following prescription has been given me as a common sample of the ingredients composing this particular class of black dyes: Aniline hydrochloride, 100 parts; copper sulphate, 0.1 part; sodium chlorate, 6.0 parts; and ammonia, 1.6 parts. The above are dissolved in water and thickened with gum. The large proportion of the hydrochloride contained in it is very noteworthy, and although this salt may not be as volatile it is probably more poisonous than aniline, being absorbable by the skin. This will account for the symptoms observed.

The results of the analysis of the urine, such as the presence of the oxidation products of aniline, and the absence of aniline, would seem rather to favour the view of an intoxication by the salt rather than by the oil. This may be contrary to the current opinion but is supported by a case I have now under investigation.

I am, Sir, yours faithfully,

Wigan, Jan. 23rd, 1909.

R. PROSSER WHITE.

THE CAUSE AND PREVENTION OF DENTAL CARIES.

To the Editor of THE LANCET.

SIR,—If you have not already closed this discussion, I should like to point out how very little evidence has been produced in support of the view that "the essential cause of dental caries is a faulty system of feeding." Dr. J. Sim Wallace has had success in ten cases (I am afraid he knows nothing of the failures of his system), and that makes his theory well worth trying; but ten cases are no proof, for any man in general practice can bring forward ten or thrice ten "pap-fed" children with sound teeth. In his contention with the editor of the *Dental Surgeon* he is claiming the skin before the bear is killed, or at all events before he has proved that it is dead! The credit of a discovery goes not to him who first suggests it but to the man who proves it to the satisfaction of experts. There is hardly a modern discovery that has not been vaguely suggested by someone in the past. When Dr. Wallace has proved his theory he will well deserve and will receive the credit, no matter who first suggested it.

The interesting information from Dr. G. Elliot Smith that dental decay was common only amongst the adult aristocracy in Ancient Egypt does little, if anything, to support Dr. Wallace's theory, unless it can be proved that the babies then were given hard food before they were weaned and that the poor ate harder food than the rich. I thought they lived on lentils and onions boiled in a "flesh pot" with a morsel of meat to give them a flavour. A very poor peasantry, like that in Ancient Egypt, almost always boils its food, for that is the easiest way to cook vegetables, and the way to make meat go the furthest. But this would not be a food