

will be under the charge of Captain Pinch, to whom all communications should be addressed. It is not intended to keep the exhibition open longer than one month, beginning Oct. 1st. Exhibitors are invited to be responsible for the removal of their drawings, but false-backed frames will be provided for their secure exhibition under glass whilst displayed. The exhibition is open to all members of the profession on presentation of card, but those who desire to consult it more than once or to attend any lectures that may be given are invited to subscribe to the Polyclinic funds the sum of 1 guinea.

I am, Sir, yours faithfully,

JONATHAN HUTCHINSON.

The Polyclinic, Chenies-street, Sept. 14th, 1908.

RUPTURE OF THE LIGAMENTUM PATELLÆ.

To the Editor of THE LANCET.

SIR,—The statement in your annotation under the above heading in THE LANCET of Sept. 12th, p. 825, that rupture of the ligamentum patellæ has seldom been recorded has prompted me to send you the notes of the following case.

A man, aged 29 years, on Nov. 11th, 1902, slipped and fractured his right patella. No operation was performed and he recovered with very fair movement in the knee, being able to carry on his ordinary employment quite well. On August 13th, 1907, he slipped and fractured the same patella again. I saw him with Mr. A. J. D. Riddett and advised operation. This was performed a week later, when it was found that the second fracture was through the middle of the upper fragment, the original fracture being firmly united with fibrous tissue with half an inch interval between the fragments. The edges of the recent fracture were sawn off and then wired firmly together; the fibrous union of the original fracture was not interfered with. The result was quite good and the man returned to his work after three months, which he carried on till August 29th, 1908, when he slipped once more and felt his knee go again.

I again saw him with Mr. Riddett and found a lot of effusion in and round the joint with total inability to lift the leg. We decided to operate again, especially as the patient wished it, saying that his leg had felt much stronger since the last operation. On opening up the old scar we found that the patellar ligament was torn right through just below the attachment to the patella. The second fracture was found to have united with firm bony union. The old silver wire was removed and the ligamentum patellæ fixed firmly to the lower border of the patella with silver wire and some silk sutures. The original fracture was in the same condition as at the previous operation. The wound has now healed and it will be interesting to see what the functional result will be and also whether it will be the quadriceps tendon's turn to go the next time he falls.

I am, Sir, yours faithfully,

Leicester, Sept. 12th, 1908.

F. BOLTON CARTER.

THE VARIATIONS IN THE PHAGOCYTIC POWER OF LEUCOCYTES FROM DIFFERENT INDIVIDUALS AND ITS BEARING UPON THE OPSONIC INDEX.

To the Editor of THE LANCET.

SIR,—Sir A. E. Wright has stated that "we may take the opsonic index of any blood as an index of the patient's power of phagocytic response."¹ According to this one person is less resistant to a staphylococcal infection than another, partly because his blood is deficient in opsonin, certainly not because there is an inherent deficiency in the phagocytic capacity of the leucocytes themselves.

In a paper read by two of us (E. E. G. and W. Y.) before the Pathological Society of Great Britain and Ireland in January, 1908, we stated that the phagocytic power of the leucocytes of one individual may constantly differ from that of another individual. This was tested according to the technique of Wright with an emulsion of staphylococcus albus.

¹ THE LANCET, August 17th, 1907, p. 427.

We have recently made further observations upon the blood of two individuals, "A" and "G," estimating the degree of phagocytosis to staphylococcus obtained with (1) "A's" and "G's" serum respectively with the *same* leucocytes—i.e., comparing the opsonising influence of the serum upon phagocytosis; (2) "A's" and "G's" leucocytes respectively with the *same* serum—i.e., comparing the influence of the leucocytes upon phagocytosis; and (3) "A's" serum with "A's" leucocytes and "G's" serum with "G's" leucocytes—i.e., comparing the total phagocytic power of the blood. Three indices were calculated in this way, using "G" as control at intervals of three days for one month. On July 20th, for example, "A's" indices were the following: (1) 1.15 (mean of three separate observations), (2) 0.83 (mean of three separate observations), and (3) 0.98 (mean of two separate observations). Therefore, though "A's" opsonic index was definitely above that of the control the total "power of phagocytic response" was practically equal, because "A's" leucocytes were deficient in inherent phagocytic power. "A's" and "G's" red corpuscles were not agglutinated by any of the sera used; systematic examination of their blood revealed no leucocytosis.

We intend at an early date to publish a detailed account of the observations we have in hand and the conclusions we have arrived at.

We are, Sir, yours faithfully,

ERNEST E. GLYNN, M.A., M.B. Cantab.,
M.R.C.P. Lond.,

Lecturer in Clinical Pathology and Morbid Anatomy, University of Liverpool; Pathologist to the Liverpool Royal Infirmary;

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Late Holt Fellow in Physiology, University of Liverpool;

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Holt Fellow in Pathology, University of Liverpool.

August 24th, 1908.

A PERSONAL MATTER.

To the Editor of THE LANCET.

SIR,—My attention has been directed to the recent distribution, for advertising purposes, of a pamphlet bearing my name. The facts are as follows:—

In 1906, when acting as foreign editor of a medical journal, the editor asked me to make an abstract of an article in the *Berliner Medizinische Klinik* by Professor Gumpert. The abstract was published as an article under my name, although I had given no authority therefor; it is the only time my name has appeared in this journal. Copies of my abstract were bought, I believe in good faith, from the journal in which the abstract appeared, the sale being without my consent or knowledge. The heading "A Contribution, &c. By T. P. Beddoes," has led many to conclude that I claim the credit of the original work described, which is entirely due to Professor Gumpert and his collaborators.

Yours faithfully,

Sept. 14th, 1908.

T. P. BEDDOES.

* * We should be interested to learn the name of the medical journal.—ED L.

THE PREVENTION OF TUBERCULOSIS (IRELAND) BILL.

To the Editor of THE LANCET.

SIR,—May I say that I believe your attitude with regard to the Compulsory Notification Clauses of the Irish Tuberculosis Bill is entirely wise? Unlike Sir John Byers, I am not a professor of midwifery, but, after all, a medical man who is a member of a sanitary authority is perhaps in closer touch with the prejudices of people who will be affected by the Bill.

Knowing what I do of the Irish people, I believe that the Compulsory Notification Clauses will excite so much suspicion and dread as effectually to undo any good result heretofore obtained from the tuberculosis campaign. People simply will not go to a medical man if they think that by so doing they may be listed as tuberculous. I fully recognise that the anti-tuberculosis movement in Ireland has done much good, but it has a source of weakness in not being largely controlled by those in close touch with the popular party—and thus its