

and in the closest contact with the discharges from such eyes, and yet it is the rarest occurrence for any one of them to suffer from even a transient conjunctivitis. I have myself manipulated, shall I say, tens of thousands of granular ophthalmias in one or other form, and as yet I have been, happily, entirely free from any such disease.

"My purpose in thus writing is to enforce the suggestion that the fashionable isolation remedy is a stupendous mistake and that the true cause of this decimating disease and its remedy are in danger of being forgotten in our anxiety to find means of prevention. I subscribe to the statement of THE LANCET that 'overcrowding, dark and ill-ventilated rooms, damp soil, and insufficient diet' are very efficient agents in developing the disease. In fact I believe that they are, practically, the only agents and that contagion has but a small influence. The *sequitur* of my argument is that the system of aggregating large numbers of children in big isolation hospitals is good only so far as it removes such children from insanitary surroundings and not at all because it isolates them, which, indeed, it does not do. I hold that if these children could be boarded out in farm houses or could be otherwise provided with fresh air, nutrient diet, and tonic medicine they would get well, with the assistance of a little local treatment, months in advance of the (so-called) isolated patients. I will go so far as to say that I never saw a case of granular conjunctivitis in its primary stage which I could not cure by such means and without any serious danger of infection to the persons with whom they might be boarded out.

"Yours very truly,

"ARCHIBALD HAMILTON JACOB, M.D., F.R.C.S.I.,

"Professor of Ophthalmology, Royal College of Surgeons in Ireland,
Ophthalmic Surgeon to the House of Industry Hospitals,
Dublin."

"THE HOSPITAL REFORM ASSOCIATION: REPORT OF THE COMMITTEE APPOINTED TO INQUIRE INTO THE WORKING OF THE SPECIAL HOSPITALS OF LONDON."

To the Editors of THE LANCET.

SIRS,—In a report published by the Hospital Reform Association on certain of the London hospitals statements are made with regard to the London Throat Hospital which have been brought before the notice of the medical committee of that institution, and on whose behalf I am instructed to write to you as follows:—1. The medical committee protest most emphatically against the manner in which this incorrect information has been obtained. Two gentlemen, it appears, came to the hospital without any permission or invitation from the committee or medical staff or from any subscriber, and without having given any notice of their advent they asked to see the secretary. It now appears they were medical men and their conduct can only be characterised as most discourteous to their professional brethren, and also to the governing body of the institution. 2. They asked various questions, and our secretary absolutely denies having given any such information as they allege to have received, and which is contained in their "Statements and remarks"—i.e., "as to patients' means." They state this is "left to visiting staff"; "a proper system of inquiry is absent." This allegation on their part is wholly at variance with the facts. A most careful inquiry is made into the means and position of each patient by a person especially appointed and paid for discharging that duty. 3. As to beds. The gentlemen who visited the hospital were informed that at that very time of their visit new wards were in course of preparation and almost completed for the reception of fifteen patients, and it was most unfair of them in the face of that information to state there were only five beds. The medical committee trust that you will at once take steps to have these erroneous statements withdrawn, and the facts correctly stated.

I am, Sirs, yours faithfully,

HERBERT TILLEY, M.D. Lond.,

May 31st, 1897.

Honorary Secretary to Medical Committee.

THE HOSPITAL REFORM ASSOCIATION: AN APPEAL.

To the Editors of THE LANCET.

SIRS,—May I be allowed to appeal to all those members of the profession who are sincerely desirous of seeing the administration of medical relief in our hospitals restricted to those who are really in want of it to help the Association with funds? The memory of most men is short, and therefore I may be pardoned for reminding them that the Association has placed itself in communication with every hospital in England and Wales, and has held meetings of the profession in London, Birmingham, and Manchester. Only those who have had actual experience in the work of organisation can realise the cost of holding such meetings

as we have held. We may perhaps be pardoned for assuming that we have done any real good, but unless I am misinformed the general hospitals of the metropolis have already determined to take steps to bring about a reform of their out-patient and casualty departments. My council believe that they are engaged in a righteous crusade, and they are endeavouring to accomplish their objects without resorting to extreme measures. As far as I am aware, no steps have been taken which are in the least likely to injure the name and good fame of our great charitable institutions. To restrict their use for whom they were originally intended, and to make them *more useful* to those persons who are in need of their aid, has been the aim of the Association to which I have the honour to belong.

I am, Sirs, yours faithfully,

T. GARRETT HORDER, Honorary Secretary.

Cardiff, May 28th, 1897.

"ON CERTAIN SYMPTOMS OF SPINAL CORD AFFECTION IN BICYCLE RIDERS."

To the Editors of THE LANCET.

SIRS,—In reference to two articles in THE LANCET of April 17th and May 15th on the above subject I beg leave to make the following remarks. The symptoms in question are not due either to cycling *per se* or to the "wedge-shaped article called a saddle." They are owing either to the distance between the saddle and the pedals being too great, or to the saddle not being placed horizontally, or to the handlebar being too low. In all these cases the body is bent too much forward and is no longer supported by the tuberosities of the ischium as it ought to be, but by the perineum. When the faulty position of the saddle is corrected the symptoms complained of will certainly disappear.

I am, Sirs, yours truly,

J. HARPÖTH,

Assistant Physician, Frederiksberg Hospital,
Denmark.

May 23rd, 1897.

THE OXYGEN TREATMENT OF ULCERS.

To the Editors of THE LANCET.

SIRS,—Having recently had an opportunity of watching the oxygen treatment of ulcers at Netley, and comparing the results with those of an ordinary method, I was not a little astonished to see a report from the assistant professor of bacteriology, who not only had nothing to do with the treatment of the cases, but had not even taken the usual course of seeing and consulting the medical officer in charge. The official report being of a confidential nature I cannot enter into particulars, but feel bound to state that, apart from the bacteriological aspect of the question, Surgeon-Major Semple's facts and inferences are grossly inadequate and misleading.—I am, Sirs, yours faithfully,

Netley, May 31st, 1897. M. KELLY, Surgeon-Major, A.M.S.

THE BRITISH MEDICAL BENEVOLENT FUND.

To the Editors of THE LANCET.

SIRS,—In this eventful Jubilee year many of us are doubtless hampered by special appeals of all kinds; but we shall all agree that those of our poorer brethren who have fallen in the battle of life, and who are helpless and sore stricken, are especially deserving our sympathy and help at the present time. The funds of the British Medical Benevolent Society are now at a very low ebb, and have for some time been quite inadequate to the relief of the large and increasing number of cases, many of which are very distressing. A glance at the last report will show the excellent work done by the Fund; but how piteous are the stories of those 158 cases which were relieved, representing every kind of trouble, affliction, and distress which may at any time befall any one of us; and how much more could be accomplished in the way of relief with a little additional help from the profession. Surely at such a time our hearts will respond to an appeal for thank-offerings, if only for our own good health and prosperity. It should be especially noted that the applicants for relief are spared all the trouble and expense of canvassing or the pain of publicity, and that the cases are most carefully investigated by the committee, while no fund could be more