

advanced the idea that our modern way of living, the patent roller-made flour, which is deprived of all the coarser part of the flour, and must be of all or nearly all of the carbohydrates, which go largely into the nutritious element of the same. The low price of it puts it within reach of the poorest families, and they, too, indulge in what is called the best grade of flour, when, at the same time, it is the life nutrition, and when you intrude upon native with improved or adulterated foods I many times see that some of the organs and fluids of the body must suffer.

JAMES A. HOPKINS, M.D.

Medical Legislation.

IOWA CITY, IOWA, Aug. 15, 1897.

To the Editor:—At the meeting of the Iowa State Medical Society, at Des Moines in 1896, discussion was had concerning a project to unite the practitioners of the State into an association to "influence legislation." Nothing was done by the society but subsequently an association was organized and an effort made to secure a union for political purposes of all practicing medicine, including sectarians with various labels. Many declined to unite with the organization; some because they believed the discordant elements would prevent any useful work, and others because they believed that the attempt to organize a political club out of a profession would lead rather to adverse legislation than to any legislative reform of advantage. A circular is the first fruit that has emanated from the association; and it appears to the writer that the introduction of the profession to practical politics of this kind, is undesirable. The physician has the same rights and duties as other citizens, and experience has shown that the study of medicine does not lessen the capacity of a man to serve the people in legislation or administration. It would probably be better for the country if, as individuals, the members of the medical profession took the practical and active interest in politics that has been so noticeable among their *confrères* of France. The reproach, that such an association has been used to advance personal interests, can not help lessening its value as a protector of general interests. The association however is not an offshoot or a part of the State Medical Society of Iowa.

"HALLER."

A Suggestion for the Next Meeting.

BOSTON, Aug. 18, 1897.

To the Editor:—Permit me to make a suggestion. If it be carried out I think it will add to the interest of our annual meetings. Some of us in the ASSOCIATION are engaged upon original work. This work can be presented to our brother members in two ways: by reading a paper about it, and (when it concerns something concrete) presenting the thing itself. The combination method at present employed could be improved on without infringing on the practical work of the Section. Instead of the momentary presentation of instruments, etc., in conjunction with the reading of a paper, would it not be well to have such devices and objects placed where the members could examine them at their leisure? Such an exhibit could be conveniently made in the rear of the hall where the Section meets, or in a reserved space in the usual exhibition hall. It would add nothing to the expense of the meeting, as a few tables is all that would be necessary for the purpose. Members of the Section having instruments, devices, X-ray pictures or other objects of practical interest could thus place them where their fellows could have access to them. If members had the opportunity to get a working knowledge of the new devices that are constantly being applied in the art of surgery, the practical utility of the Section would be increased. In time, perhaps, a surgeon who wished to keep abreast of his art could not afford to miss a meeting of the ASSOCIATION, not alone for what he could hear, but for what he could see. Trust-

ing this suggestion will meet with consideration by interested members, I remain, respectfully,

EDWARD A. TRACY, M.D.

Infectious Disinfectors.

GROVELAND, MASS. Aug. 21, 1897.

To the Editor:—The following case was recently reported in the *Journal of Hygiene*, France: "A child suffering from a light attack of scarlatina is confined to his room for forty days, the room is disinfected by the board of health. Two days later the child presents undoubted symptoms of diphtheria—a patch on one tonsil. The physician in attendance does not doubt that the disinfectors brought this disease, as the child had seen no one but them and the physician who had himself not been exposed."

Such a theory seems hardly tenable. I have had cases in my own practice, of mixed infection, and others where diphtheria has followed scarlet fever, the patient ill at first with all the symptoms of scarlet fever and then with those of diphtheria. In none of these cases were cultures made demonstrating the presence of Klebs-Löffler bacilli. More recently I have had under my care a case where the symptoms were unmistakably those of scarlet fever supplemented by symptoms of true diphtheria. In this case cultures failed to show Klebs-Löffler bacilli, but supplied abundant evidence of streptococci. That there is a remarkable relationship between diphtheria and scarlet fever there can be no longer any doubt. Those who believe in this theory of unity of disease are finding considerable evidence to support their views.

W. THORNTON PARKER, M.D.

How the Defunct Osteopathy Bill was Passed by the Illinois Legislature.

ONEIDA, ILL., Aug. 20, 1897.

To the Editor:—I send you a *Journal of Osteopathy*. I know something of how they managed the late House at Springfield, which may be of interest, as I am well acquainted with our representative, Murdock. While the bill was being agitated I went to him and asked for his influence against it. He informed me that he was in favor of it, that one of the operators in the cult was at the capital demonstrating the treatment and one of the members who had sometime previously been laid up with an attack of rheumatism for six weeks, was taken suddenly one evening with a similar attack, and the osteopathic gentleman asked to be allowed to treat him just once and was granted the request. He at once proceeded to carry out the treatment in view of several of the other members. To use Mr. Murdock's expression, "he doubled his legs up and then pulled them out with a snap; thumped and pulled and doubled and rubbed and yanked. The patient the while yelled like a bull." After about half an hour of that he let his victim alone and by the next morning the man was as well as usual. Another patient was also exhibited. A man with dislocated wrist which the "doctors had failed to set or help," and he proceeded to at once replace it and let the man go without splint or bandage. To sum up, the man simply "pulled the leg" of the whole Illinois Legislature. Was it any wonder that the bill passed speedily on for the Governor's signature! But he showed himself a man with decision enough to refuse to sign it, thereby gaining the friendship of every reputable physician in the State and the ill will of a few cranks.

Yours for good, T. W. DAVIDSON, M.D.

No Itinerant Quacks in Kentucky.

EXECUTIVE OFFICE STATE BOARD OF HEALTH OF KENTUCKY, BOWLING GREEN, Aug. 7, 1897.

To the Editor:—After careful examination of the authorities Judge Thompson of Louisville has just handed down his opin-

ion in our test case with the osteopaths. They had plenty of money and were ably defended, but after the proof was heard we never had any doubt as to the result. They are not only the most ignorant, but also the most unscrupulous lot of empirics with which we have yet had to contend in this State. Our law has now been in operation nearly four years. It has been tested upon every point and so far we have not failed to secure a conviction in each case tried. We convicted the Copeland people, the "K. & K.'s," and all other concerns of that kind doing business here, and are able to report that there is not now an itinerant or advertising doctor within the limits of the State. Very respectfully,

J. N. McCORMACK, M.D., Secretary.

[Vide JOURNAL, Aug. 14, 1897, pp. 351-352, Louisville column, for the text of this decision.]

Honorary Medical Degrees.

PHILADELPHIA, PA., Aug. 19, 1897.

To the Editor:—*Apropos* of the editorial in the JOURNAL of August 14 concerning the conferring of an honorary fellowship in the Royal College of Physicians on the Prince of Wales, it may be of interest to note that the first medical degree granted on this continent was an honorary one, bestowed on Daniel Turner of Connecticut by Yale College in 1720. As this was intended as a token of gratitude for Dr. Turner's liberal gifts to the college and not as a recognition of any particular fitness on his part to practice medicine, a wit of the time interpreted M.D. to signify *multum donavit*. Yours truly,

FRANCIS R. PACKARD, M.D.

PUBLIC HEALTH.

The Bacteriologic Laboratory of Princeton, N. J. is the recipient of a \$3,000 appropriation from the State Legislature.

Disinfection of Bombay Mail.—The mail sacks from Bombay, per Cunard steamship *Servia*, from Liverpool, Eng., at New York, August 19, were transferred at quarantine for disinfection.

Ice Sources Must be Pure.—The Paterson (New Jersey) Health Board and the Police Department have united to enforce the law against persons dealing in ice cut from filthy ponds, rivers or lakes.

To Hurry Mortals Home.—The Health Commissioner of St. Louis has ordered an inspection of Chinese laundries. He fears that some may mouth-spray their work with tubercle bacilli, which being ironed into the clothing may cause contagion. Once these experts were in high esteem for washing infected clothes rejected by their timorous rivals.

Health in Michigan.—The report for July, 1897, as compared to that for June (*vide* JOURNAL, July 17, p. 186) shows consumption present at two places more; measles at 65 less; diphtheria at 26 less; scarlet fever at 19 less; whooping cough at 19 more; and typhoid fever at one place less. Compared with the July average for eleven years (1886-1897), measles was more prevalent; intermittent fever, cholera infantum, erysipelas, consumption, remittent fever and diarrhea less prevalent.

Health in Chicago.—The total number of deaths during July, 1897, was 2,275 or 1.44 per thousand against 1.52 per thousand in July, 1896. Of these deaths, 835 were persons under one year of age and 287 were between one and five years. The principal causes were: Infantile diarrhea, 413 deaths; diseases of nervous system, 231; consumption, 184; violence, 157; heart disease, 117; pneumonia, 79; cancer, 63; bronchitis, 48; diphtheria and membranous croup, 44; typhoid fever, 27.

Bovine Tuberculosis.—The State Board of Health of New York announces its belief in the efficacy of the tuberculin test for preventing the spread of cattle tuberculosis. Governor Black,

however, vetoed an appropriation of \$15,000 for the use of the Board in its investigations. The Saranac Board of Health intend to maintain a complete quarantine against the importation of untested cattle within the limits of their milk supply. As it is, nearly all the animals at this lake resort are native common stock and the more intelligent buyers of thoroughbred cattle refuse to accept purchases that do not pass the test in question. The State Board can do little more than merely approve these intentions.

The Duration of Infection in Whooping Cough.—Weill, who in 1894 expressed the opinion that whooping cough is contagious only during the premonitory catarrhal stage, has since put his opinion to the test (*Lyon Méd.*). On various occasions he permitted nearly one hundred young children who had not previously suffered from whooping cough to be associated in the same ward, for twenty days or more, with children suffering from the disease during the stage of whooping. In only one case was the disease contracted, and in this instance the patient from whom the infection was derived was in the very earliest period of the whooping stage. In three small epidemics, Weill was able to satisfy himself that infection was contracted from children who had not yet begun to whoop. He concludes that infection ceases very soon after the characteristic whoops commence, and that therefore in a family it is not the patient who is already whooping, but his brothers and sisters who have not previously had whooping cough, who ought to be isolated.—*Brit. Med. Journ.*

Smallpox Mortality in London, 1887-96.—The Asylum Board was first called upon to provide for the accommodation of smallpox patients at the end of 1870. During the ten years, 1871-80, they dealt with upward of 33,000 cases, all of which were treated in the town hospitals. The deaths in London in the ten years were 15,539, including 7,912 in 1871. In May, 1881, the "camp hospital" was opened at Darent, and the system of removing cases of smallpox to the country thus initiated was gradually perfected, so that for many years all of the sufferers coming under the managers' care have been treated at extramural hospitals. During the ten years 1887-96, the number of cases admitted to the hospitals was 5,232. The deaths in London were 429 only, and of these 206 were registered in 1893, in which year 2,376 cases of smallpox were admitted to the managers' hospitals. Had the mortality during the ten years, 1887-96, been at the same rate as in the ten years, 1871-80, regard being had to increase of population, the deaths would have been not 429, but 18,752. The net gain in life saved during the ten years, therefore, was represented by 18,323 lives. In other words, had the average death rate from smallpox in the ten years 1871-80 continued throughout the ten years, 1887-96, 18,323 lives would have been sacrificed in addition to the 429 which were actually lost by death from this cause. This satisfactory result is admittedly due in a large measure, if not entirely, to the removal of nearly all cases of smallpox out of London.

Bacillus of Yellow Fever.—The superintendent of the Institute of Experimental Hygiene at Montevideo, J. Sanarelli, announces that he has succeeded in isolating a bacillus from the blood and internal tissues of yellow fever patients (See editorial in this issue.—*Ed. JOURNAL*), which produces the disease in animals inoculated with cultures of it, and also in man. The shape is that of a rod with rounded ends, growing in pairs or small groups in the cultures, developing on the usual media, with a specific appearance resembling a wax seal on a letter, when first developed ten to twelve hours in the oven and then the same length of time at the ordinary temperature. In the oven the culture develops iridescent and transparent, while at the ordinary temperature it forms shining, opaque drops like drops of milk. It is pathogenic for almost all animals, producing a cyclic disease lasting from five to twelve days, "analogous to