

Digitale.—Contents: an ethereal extract of the dried leaves of the plant. No digitaline can be detected in the contents from six pearls; it is therefore present in excessively small quantity only, if at all.

Assafœtida.—Contents: an ethereal extract of resin, the residue from which may be taken as representing about twice the weight of crude resin.

Valériane.—Contents: an ethereal extract of valerian-root holding in solution chiefly essential oil and resin, and scarcely a trace of valerianic acid or its salts.

The following table gives the mean amount of substance contained in any single pearl, and it should be stated that pearls of one class differ but slightly from each other in this respect.

Nature of contents.	Mean amount of contents.		Amount of substance dissolved.
	By weight.	In minims.	
Ether ...	3·8 grains.	... 5·6 ...	—
Chloroform ...	5·0 „	... 4·8 ...	—
Thérébenthine.	5·0 „	... 5·7 ...	—
Castoreum ...	3·6 „	... — ...	0·15 grains.
Digitale ...	3·8 „	... — ...	0·03 „
Assafœtida ...	3·8 „	... — ...	0·20 „
Valériane ...	4·0 „	... — ...	0·03 „

These pearls may be obtained of Mr. Jozeau, Haymarket, London.

Correspondence.

"Audi alteram partem."

"AN OBSCURE INJURY TO THE HIP."

To the Editor of THE LANCET.

SIR,—I hasten to correct some of your misstatements under the above heading in your "Annotations."

Mr. Buckley did *not* measure the limb from the trochanter to the ankle; but from the anterior spine of the ilium to the trochanter, and from the anterior spine of the ilium to the ankle, without finding any shortening.

Dr. MacLagan measured the limb within half an hour of the accident on the 11th of December, without finding any shortening; and put Mr. Balmforth twice under chloroform without detecting any dislocation or fracture.

I saw the plaintiff four days after the accident, and measured the limb carefully without finding any shortening.

The verdict of the jury was for 40s., not £40 (a compromise), for which we are indebted to four infirmity surgeons, acting as you have done, in drawing a wrong conclusion from an imperfect history, and an exhibition of want of charity and proper conduct to a professional neighbour.

You may think, from your imperfect knowledge, that we "have every reason to leave the verdict undisturbed"; but we have sound facts, good reasons and good opinions for acting otherwise than you advise—always remembering, before so doing, that there is a certainty of our not being able to get any costs out of the plaintiff.

Mr. Wheelhouse was *not* the first surgeon to see the case; he did not see him before the 19th of July last. Dr. MacLagan was the first to see Mr. Balmforth and examine him.

For your advice about the conduct of medical agents I am obliged, whilst I have a right to question the universality of its application; and desire to inform you that any opinion I gave the plaintiff was given after the Accidental Assurance Company had declined to entertain the claim he had made.

I am, Sir, yours respectfully,

Greenheys, Manchester, Aug. 17th, 1872. J. OGDEN FLETCHER.

* * Mr. Fletcher is very angry with us for following the usually very reliable report of *The Times*, which stated distinctly that the "mode of measurement adopted was to put the tape on the 'trochanter' bone, and then pass it down the leg to the ankle"; and also that the verdict was for forty pounds—not shillings. The statement that Mr. Wheelhouse was the first surgeon to see the patient was due to the accidental transposition of a sentence by the printer, which we regret. We maintain our right to comment on this and similar cases.—ED. L.

THE BIRMINGHAM WOMEN'S HOSPITAL AND ITS LADY HOUSE-SURGEON.

To the Editor of THE LANCET.

SIR,—I see in your issue of the 3rd inst. that the committee of the above hospital have elected a "Mrs. Louisa Atkins, M.D. of Zurich," as house-surgeon, in opposition to two eligible gentlemen candidates. Now my only object in asking you to give insertion to this is to call the attention of the committee—and also that of the two gentlemen who were candidates—to the probability of the election being illegal.

On referring to Clauses 36, 37, and 40 of the Medical Act, the following may be read as extracts:—Clause 36. "No person shall hold any appointment as physician, surgeon, or other medical officer," &c., "in any hospital, infirmary, dispensary, or lying-in hospital, *not supported wholly by voluntary contributions*" &c., "unless he be registered under this Act." Clause 37 provides that *only* persons who are registered under the Medical Act can give valid or legal certificates of death, sickness, &c., for insurance societies, &c. Clause 40 provides that anyone using such a title as Doctor of Medicine (i.e., M.D.), or any other title leading the public to believe that he or she is recognised by law as a physician, surgeon, doctor, or other practitioner in medicine or surgery, or branches of these, and is *not* registered under the Medical Act, is liable to prosecution, with a fine of £20 and costs.

Therefore, until the committee are able to prove that the hospital "is supported *wholly* by voluntary contributions," or that Mrs. Louisa Atkins has got her Munich degree registered (she cannot register the M.D. Zurich unless she obtained it in a *bonâ-fide* manner before January 1st, 1859), or at least a British qualification in lieu, by the General Medical Council, the appointment is not legal and cannot be lawfully held. It now remains for the interested parties to examine their individual *locus standi*.

Faithfully yours,

Sheffield, August 20th, 1872.

JOHN BROOM, L.M.S.M.

ARMY MEDICAL OFFICERS AND LEAVE.

To the Editor of THE LANCET.

SIR,—Before our late principal medical officer, an Inspector-General of Hospitals, left Malta, a reduction of the medical establishment took place, whether by his recommendation or not I do not know; but he refused "all leave to medical officers," and his successor, a surgeon-major sent out from England to assume medical charge of the station, is rigorously carrying out his instructions. Just a glance at the Army List will show that there were already two officers on the strength of the command of the same grade as the *in commendam* surgeon-major. Coincident with or rapidly succeeding this reduction of establishment is a great amount of sickness amongst the medical officers. Two regimental surgeons have been sent home on sick-leave, one surgeon-major and two assistant-surgeons are on the sick-list, and as we are now in the middle of our hot season, the work falls heavy on those who are left to perform it. At home medical officers are so harassed and often impoverished by incessant change of station as to make them almost glad to go abroad to avoid the discomfort. Here they are treated differently from other officers. Every officer in the service is entitled to leave in accordance with existing regulations and usage. It is not, therefore, the spirit of the regulations to deprive the medical officer of this boon. Why, then, is he treated in this respect with less consideration than others? If there were anything unusual to cause pressure or "exigency of the service," the privation would not form a ground for complaint. It is a serious and long-standing grievance. No class of men, I believe, perform their duties more conscientiously than the medical officer, and no other officer so urgently requires an occasional relief from his duties. I ask you, therefore, in the interest of the service, whether it is either just or politic to withhold from him that which is freely conceded to others?

If a new order of things is to be introduced, by which