

attendant, when the latter is called in at the discretion and expense of the householder. By throwing the duty on the medical man, the promoters of the Bill confess that they do not expect the householder to do his part; and, indeed, where the dual system is in force under local Acts, the householder's report is generally dispensed with, two accounts of the same case being only embarrassing to the authorities. Similarly, there have been about a score of prosecutions of medical men, but of householders barely a fourth of that number (I cannot recall more than three). Surely this is not the way in which to teach the people, that "England expects every man to do his duty." It would be far preferable to insist on notification by the person primarily liable, and not to let ignorance be any excuse, except from inability to obtain a medical certificate.

The party of private practitioners to which I belong is quite willing to be under compulsion to certify in a case of infectious disease just as we do to the cause of death and to vaccination. But we regard it as unprofessional and un-English to send the information to the authorities direct, except at the householder's request. It is repugnant to our nature to bring the healing balm in one hand and the hangman's rope in the other.

We are therefore persuaded that the dual system of notification is wrong in principle. It has also been proved to be worse than useless in practice; for, in the year 1887, when the death-rate from zymotic diseases was high throughout the country, and when consequently there was an excellent opportunity for showing the superiority of that system, it lamentably failed—so much so that the large towns under the dual system lost 206 per million more persons from *notifiable* diseases than died of the same diseases in the large towns under no system. The same thing holds when a series of years is taken: the dual system is worse than useless. And no wonder; for it leads the public to regard the doctor as their natural enemy, as one who will turn upon them for a paltry half-crown. Accordingly, they put off sending for him as long as they possibly can, and until the mischief is done which he could have prevented.

The single, or householder, system has no such ill effects, and in proof of this I can confidently appeal to the Registrar-General's returns for Bradford and Norwich.

If Mr. Ritchie will only transform his Bill so as to embody the single system of notification (as carried out in Bradford), instead of the dual system, and then make its acceptance unconditional throughout the country, we shall all be pleased. It will then be a good and strong measure (which it certainly is not at present), and he will find it perfectly efficient.—I am, Sirs, yours faithfully,

Kingston-on-Thames, Aug. 7th, 1889.

D. BIDDLE.

TREATMENT OF HIP-JOINT DISEASE.

To the Editors of THE LANCET.

SIRS,—In his recent interesting lectures at the Royal College of Surgeons, Mr. Howard Marsh refers at some length to my experience on the question of hip disease. I should like to take the opportunity of thanking him for his kindly reference to me, and he will not, I am sure, take it amiss if I venture to point out certain, as I think, fallacies in his statistics, and in the conclusions he draws therefrom. I am the more anxious to do this because a similar mode of reasoning is being constantly brought forward by those who, lacking Mr. Marsh's moderation, seek to discredit all operations of the nature of excisions in the treatment of joint disease.

Mr. Marsh first refers to the results of treatment other than excision in the case of the hip-joint. He gives the results of 76 cases, of which 37 had abscesses and the rest had not supplicated. Mr. Marsh then analyses the results in these cases, comparing them with the results of excision, naturally to the disadvantage of the operation. But it is not, I think, unreasonable to say that the comparison is not valid, and that no such conclusion can be drawn from these figures. For in the first place more than half Mr. Marsh's cases were those of disease in which no suppuration had taken place—i.e., of early disease in which a good result would naturally be expected without operation. Secondly, the figures are taken from a comparatively small proportion (76 out of 160 written to) of those selected. To make out the case against operation, we ought to know what became of the 84 who did not appear. Is it not possible that death, or what one of my patients graphically called "permanent cripplehood," may have had something to do with the

absence of the others? This would, of course, invalidate the conclusions altogether, since only the recoveries would come. My conclusions, on the other hand, were based on the results of the whole of the cases (except one) treated by a certain method.

Mr. Marsh next takes 614 cases treated since 1880 at the Alexandra Hip Hospital, with a mortality of 6 per cent., or including incurables, 8.4 per cent. These are compared with my cases of excision, with a mortality of 20 per cent. But is there not a clear fallacy here? Were Mr. Marsh's 614 all cases in which suppuration had occurred, or the disease was as far advanced as in my excision cases? If any of these 614 were cases of early slight disease, the comparison of course falls to the ground. To compare two different modes of treatment, must we not require that they be employed in similar cases?

Consideration for your space prevents my commenting upon much that is valuable and interesting in Mr. Marsh's lectures. Two points, however, I must ask you to allow me to mention. First, that I do not think that the evidence of the Alexandra Hip Hospital is conclusive on the subject of the frequency of necrosis. My own experience, and I think Mr. R. W. Parker would agree with me, is that I have frequently found necrosis, and I think I can give an explanation that is probable of the difference in our views. In the Alexandra Hospital patients are kept in for an indefinite time, and therefore are not under the unfavourable conditions of liability to frequent exacerbations of disease from periods of neglect that ordinary hospital patients are. Hence I can well imagine not only that Mr. Marsh's results are better than those of other hospital surgeons, but that he sees less of necrosis.

May I lastly point out that many writers on the subject of operation in joint disease (among whom I should not class Mr. Marsh) write as if those who advocate excision never employ any treatment short of operation? They do not seem to realise, what everyone surely admits, that the number of joints requiring operation is small compared with those that recover without, *provided suitable treatment can be carried out*. What those who condemn excision *in toto* require to make out their case is to produce a large series of consecutive cases of the same degree of disease in the same class of patient as those which have been published by operators, and to show a better result without operation. I am fully aware of the difficulty of compiling such a report accurately, but it is, I think, the only way in which a valid conclusion can be arrived at.

I am, Sirs, yours faithfully,

Manchester, July 30th, 1889.

G. A. WRIGHT.

PROFESSIONAL TATTLE.

To the Editors of THE LANCET.

SIRS,—Your remarks in a leader in a recent issue of THE LANCET condemning certain articles which have appeared in non-medical public journals on the death-bed scenes and sayings of celebrated men were much needed and timely. What objects the writers of these articles have set before them it is not easy to discover. To themselves we scarcely think there can accrue either honour or profit, if we except the brief popularity they may obtain, and in the surviving relatives, whose sacred feelings they thus violate, they can only create pain and disgust. During a fairly long professional life I have seen many things to deplore in medical practice, but hitherto, wherever I have lived and whatever grade of professional life has presented itself to me, I have ever felt that the secrets of the time of sickness and its frailty and weaknesses were held inviolate by the family medical man. Of late, however, all is changed, and we seem to have become on these matters as garrulous as the Barber of Seville, and if this evil is not sternly and speedily checked amongst us, we must not wonder if the public should lose all confidence in us and all their wonted respect for us and our profession. I am personally gratified that you have taken up this important matter.

I remain, Sirs, yours obediently,

King's Lynn, Aug. 5th, 1889. WM. DALE, M.D. Lond., &c.

DR. DETTWEILER'S POCKET-FLASK FOR THE DISPOSAL OF THE SPUTA IN PHTHISIS.

To the Editors of THE LANCET.

SIRS,—Dr. Arthur Hill Hassall has given most sensible advice in his paper "On the Disposal of the Sputa in Phthisis," printed in THE LANCET of July 27th. He

justly dwells on the danger of infection arising from the dried sputa when inhaled as dust, and he shows that the practice of spitting on the floor of rooms, or on the pavement of streets, or into handkerchiefs, is very injudicious. Dr. Hassall recommends the introduction of spittoons into all the rooms where consumptive people dwell, and the regular disinfecting and removal of the contents. As, however, spittoons are not to be found in the streets and in railway carriages and other vehicles, I venture to direct attention to the suggestion of Dr. Dettweiler of Falkenstein, that every consumptive person should carry a small flask and always expectorate into it. He has constructed such a flask, which he calls "Taschenfläschchen für Hestunde"—"pocket-flask for coughers." Dr. Dettweiler read a paper on this subject in April last, at the meeting of the Congress for Clinical Medicine at Wiesbaden. There would probably be no difficulty in obtaining the flask through surgical instrument makers. The contents of this flask can easily be disinfected once or twice a day by a solution of perchloride of mercury or other disinfectant; one part of perchloride to 200 of water, when thoroughly rubbed up with the sputa would, I should think, render the sputa perfectly innocuous.

To many persons such a suggestion may seem a very small matter, but the hygienic importance is very great.

I am, Sirs, yours faithfully,

Grosvenor-street, W., Aug. 1st, 1889.

HERMANN WEBER.

BIRMINGHAM.

(FROM OUR OWN CORRESPONDENT.)

Cremation of Dogs.

A WISE REGULATION is now in force here, which gives a sense of public security with regard to stray dogs. It is this: Certain members of the police force are told off to dispose of ownerless dogs which may be found straying about the town. Armed with a lasso, they seize their unsuspecting victims and lead them off to the place of execution. The killing process is effected by a dose of prussic acid, and the bodies are cast into a furnace used for burning the refuse from the interception of the sewage. Numbers of mongrels and curs of low degree are thus got rid of, to the relief of timid pedestrians.

Alleged Bad Meat Prosecution.

In the endeavour to secure a conviction in this important direction it is necessary to be careful that the arrangements are complete from a legal point of view. A butcher was summoned for exposing for sale a quantity of meat alleged to be bad, the number of pieces being specified. The prosecution wished to amend the summons by adding to the list of pieces exposed eighteen calves' hearts. This was objected to, and the proposed method of dealing with the case was characterised as very slipshod. The summons was withdrawn, and the bench ordered the corporation to pay all the witnesses 2s. 6d. expenses, and the defendant's solicitor a guinea.

The Pains of Childbirth

are usually stated to be extreme in comparison with other pains, yet occasionally it would seem not to be a difficult process. A young single woman retired to an out-house, and shortly afterwards a full-grown child weighing 8 lb. was heard crying in the midden. Unfortunately, it could not be rescued before it was suffocated. The mother did not appear to be much the worse for passing through an ordeal which at times tries the nerves of the strongest women. She now awaits her trial for infanticide.

Bank Holiday.

The desire for change and excitement of various kinds is associated with the mode of life in large towns, and yearly increases. The scenes at the railway-stations this year have been unprecedented, and crowds have been unable to gratify their pleasurable instincts by distant journeys out of town. The woes of excursionists have been depicted in the local press, and remarkable instances given of the endurance and long-suffering gone through in the pursuit of pleasure. The followers of Epicurus would have hesitated to accept the conditions imposed in many instances for the prospects afforded—prospects more often never realised, and the precursors of many an aching head and weary limbs for days

following. How far this excitement tends to the well-being of the community it is not difficult to estimate; such an artificial struggle cannot tend to health, though it may lead to sacrifice of the better impulses which promote true enjoyment and real recreation.

Birmingham, Aug. 7th.

NORTHERN COUNTIES NOTES.

(FROM OUR OWN CORRESPONDENT.)

Newcastle Royal Infirmary.

At the quarterly meeting of the Newcastle Royal Infirmary, held last week, it was stated that the subscriptions from the working men during the quarter had been £1669, being an increase of £229. So that the experiment, if it may be so called, of admitting working men to the governorships has been a complete success, and might perhaps be followed with advantage elsewhere when similar institutions are languishing from want of funds, and complaining that the working classes do not take a more active part in their support.

Sunderland.

The annual report of the Sunderland Infirmary is a satisfactory one. The *employés* connected with the various industries of the town have subscribed to the amount of £3783, being an increase of nearly £1000 over their contributions of last year. The medical report again shows a considerable advance in the number of patients treated in the infirmary over last year, the number being 4833, an increase of 933. The number of in-patients was 1770, an increase of 63. There had also been an increase in the out-patients and surgical accidents. The infirmary is nursed by sisters from the Tottenham Training Institution at a very small cost; and it is recommended by the governors that a fund should be established to make some provision for such sisters as are unable to continue their beneficent work from sickness, old age, or any infirmity. This fund will be commenced by a deduction of £100 from the infirmary receipts for the year ending June, 1890. I hear that Mr. A. E. Harris, who has been medical officer of health in Sunderland for nearly eight years, is a candidate for the same office now vacant at Leeds. Mr. Harris is well known as a scientific and hard-working sanitarian in the north, and has the satisfaction of knowing that many suggestions of his as to the health of Sunderland, have been carried out during his office, to the immense improvement of the health of the town. I regret to hear that Mr. Mordey Douglas, a well known surgeon in Sunderland, has returned from a sojourn at the Canaries in very indifferent health.

Alnwick.

In reference to the high death-rate prevalent at Alnwick the Local Board have consulted Sir Robert Rawlinson, who is well acquainted with the town and its sewerage system. He makes some valuable suggestions to the board, but tells them very plainly that ventilation will not very much improve bad houses, and that to his knowledge there are many of this sort in Alnwick, some towards the Castle entrance—dens, frequently used by vagrants and tramps. "Mend these," he says, "by new labourers' dwellings."

Darlington.

There was a strange scare in Darlington last week, so prevalent that the Mayor in Council found it necessary to allude to and contradict it. It was reported that the town crier had gone round with his bell warning the people not to eat any vegetables. Several loads of vegetables were unsold in the market owing to this scare. The Mayor very properly said that there was more danger to health in abstaining from fresh and clean washed vegetables than from their use.

Whitby.

Much sympathy is felt with Dr. E. P. Mead, an old and respected practitioner in Whitby, who has had the misfortune to lose his son under very sad circumstances. Mr. Mead was one of the chief officers of a Newcastle steamer, and while on an outward voyage in mid ocean was seized with rheumatic fever, and during the temporary absence of his attendant he got out of bed, went on deck, and leaped into the sea. Mr. Mead was not seen again.

Morpeth.

On the invitation of Dr. M'Dowall, the resident medical officer of the Northumberland County Lunatic Asylum, a