

it extended a considerable distance below the edge of the ribs, and that it had given rise to the mistaken feeling of a "movable kidney." The patient recovered and went home, and I heard from him that an operation was performed in America for "floating kidney" in January, 1892. He died in September last, and the post-mortem record gives the following amongst many changes: pyothorax and pulmonary tubercle, caries of five dorsal vertebrae (eighth to twelfth), with complete destruction of one; the right kidney was practically normal, save for some small tuberculous spots and its artificial anchorage; and there were prostatic abscess, nutmeg liver, mesenteric tubercle &c. We so rarely get a complete history of cases of this kind that I feel that the above record is a most valuable one, casting a light on many failures I have met with in this operation. There can be no doubt now that my general view of the condition of the patient was a correct one, though I missed, as everyone else did, the fact that the symptoms localised over the right kidney were due to the early stage of dorsal caries and the formation of an abscess which ultimately burst into the right pleura. Certain it is that I was quite justified in refusing to perform nephrorrhaphy in 1890, and its performance in 1892 has been proved to be quite useless. The greater interest attaches to the case in that the patient was himself an experienced physician.—I am, Sirs, yours faithfully,

LAWSON TAIT, F.R.C.S.E. &c.

The Crescent, Birmingham, Nov. 12th, 1893.

"THE SO-CALLED 'PARASITIC PROTOZOA' OF MAMMARY CARCINOMA."

To the Editors of THE LANCET.

SIRS,—I shall be glad if you will allow me to bring forward two or three points which occur to me on reading Dr. Snow's paper on the above subject in your issue of Nov. 11th. As regards the rarity of cancer in comparatively young persons, I do not think it is quite so extreme as stated by Dr. Snow. I am acquainted with a case of mammary cancer in an unmarried woman aged thirty-three, who is in comfortable circumstances, and in whose family history most careful inquiry has failed to elicit any evidence of hereditary taint. "A spontaneous cure is unknown," but not inconceivable, if we consider that portions of cancers are sometimes so fibrous that the cells are quite unrecognisable as "cancer cells," and also that such portions are sometimes as completely calcified as an old tuberculous nodule. This cicatricial process, which is known to occur in certain parts of cancerous tumours, may not improbably in some cases occur throughout the whole of a tumour and so destroy its malignant properties. Dr. Fagge¹ mentions a case of fibrous thickening of the pylorus, which would not have been recognised as cancer except for the presence of secondary nodules in the liver. Dr. Payne² has seen specimens of "fibrous induration of the pylorus, in which no cells could be discovered in the part examined. The probability is that such a mass is the scar of a cancer." Of late years evidences of healed tubercle have been found in the bodies of persons who have died from other diseases with a frequency which would formerly have been looked upon as impossible. A careful search for evidences of healed cancer in the post-mortem room might result in a like revolution in traditional opinion. There are many pathologists better qualified than I am to point out how the coccidia-like bodies of cancer can be distinguished from nuclear and protoplasmic degenerations. I may say, however, that the parasite-like bodies can certainly be seen and differentiated from other structures without over-staining preparations; they can, indeed, be seen in unstained preparations. Among Dr. Snow's figures there is not one which would be accepted as an illustration of a typical parasitic body by anyone who has devoted special attention to these structures. Why do the epithelial cells proliferate and invade parts of the body in which they normally do not occur? Neither in Dr. Snow's "Cancers and the Cancer Process" nor in any of the standard works which I have seen is this question satisfactorily answered. This being the case, an inquiry into the etiology of cancer and the possible connexion of micro-parasites therewith undoubtedly lies within Dr. Snow's "domains of cancer pathology in which valid work remains to be done."

I am, Sirs, yours truly,

Nottingham, Nov. 14th, 1893.

CHAS. H. CATTLE.

"WHERE THERE'S A WILL THERE'S A WAY."

To the Editors of THE LANCET.

SIRS,—Another great man has fallen. He has gone down without taking time to "adjust his mantle ere he fell." The career of Sir Andrew Clark fully verifies the saying, "Where there's a will there's a way." Sir Andrew Clark's will was strong and he made a way for himself under circumstances which would have militated against advancement in most instances. He began life, as he said himself, without knowing he had parents. Of course, that meant too clearly that in early life favourable prospects were distant, probably not far outside the range of impossibility. Notwithstanding the infelicitous condition of Sir Andrew Clark's early life, his will and his talents placed him in the foremost position in the medical world before his too early death took place. All Scotsmen are proud of Sir Andrew Clark, whether they belong to the medical profession or not.

At this particular time it may not be inopportune to recall the early and latter history of another medical man from Scotland who also attained high position, and who began life under circumstances as humble as could well be imagined. Sir William Burnett, who was born in Montrose towards the end of the last century, began his professional life as surgery boy to Dr. Hunter, a practitioner in that town. Part of Willie Burnett's duty was to take charge of his master's horse. After occupying this position for a certain period he proceeded to Edinburgh and attended medical classes. As the time arrived when he might have obtained a diploma he was not fortunate enough to possess the stipulated number of certificates of attendance; his scanty funds were exhausted, and he had not even means sufficient to carry him back to his native town. But, as said before, "Where there's a will there's a way." William Burnett enlisted as a common seaman and went on board a transport lying in Leith Roads. During the tedious voyage to the Nore he made himself known to the surgeon of the ship and with diffidence told him that he knew something of medicine—in fact, gave him his history, and said he might be of some service to him. The surgeon did find him exceedingly useful, and when he gave place to another on arrival at the Nore, he told his successor that he would find that Burnett could be of great use to him and advised him to take advantage of his medical abilities as he had done. After some time a commission as surgeon's mate was obtained by the young man. This was a commission in existence at that time for which a medical diploma was not necessary. After becoming possessed of the needful means young Burnett obtained leave of absence, attended classes, and obtained his diploma. After the struggles narrated, and, no doubt, many more in after-life, although of a different nature, Willie Burnett, as he was familiarly called, became Sir William Burnett, Director-General of the Navy Medical Department.

I am, Sirs, yours faithfully,

D. J.

"PROPOSED NEW MIDWIFERY PRACTITIONERS."

To the Editors of THE LANCET.

SIRS,—With reference to Dr. Rentoul's letter, which you published in your issue of the 11th inst., respecting the advertisement of Queen Charlotte's Hospital, I am instructed to inform you that on Oct. 9th the Committee of Management gave directions that the wording of the advertisement in question should be altered.—I am, Sirs, yours faithfully,

G. OWEN RYAN, Secretary.

Marylebone-road, N.W., Nov. 15th, 1893.

QUACKS.

To the Editors of THE LANCET.

SIRS,—If medical men can only sink for a short time their bickerings and jealousy and pull together for once, they have now a unique opportunity of putting a speedy end to the vile tribe of advertising quacks. The recent disclosures have caught the attention of the public and have roused public feeling. The principal daily papers call for a change in the law. Let us strike the iron while it is hot and approach the Government (which includes an eminent physician) and endeavour to induce it to pass a short Bill amending the Medical Act and forbidding

¹ Principles and Practice of Medicine, second edition, vol. ii., p. 357.

² Manual of General Pathology, p. 319.

unqualified practice. Such an opportunity may never come again, as the public mind is notoriously fickle, and these disclosures will soon be forgotten. I think the gratitude of the profession is due to Dr. Hugh Woods for the able and courageous manner in which he worked up the Indian cases. They are bound to do good, though a conviction was not obtained owing to the state of the English law. Dr. Woods in one year has done more to protect and advance the interests of his profession than such bodies as the General Medical Council have done during the many years of their sleepy existence.

I am, Sirs, yours truly,
JOHN P. HENRY, M.D., B.S.

High-street, Lewisham, S.E.

LIVERPOOL.

(FROM OUR OWN CORRESPONDENT.)

The Lord Mayor and the Children's Infirmary.

THE Right Honourable W. B. Bowring, the newly elected Lord Mayor of this city, visited the Infirmary for Children on Sunday last, following the example of his predecessors in the mayoral chair for some years past. His lordship, who was received by the members of the committee of the medical and surgical staff, went through the wards and expressed himself as greatly pleased with all the arrangements and with the spotless cleanliness and general air of comfort and convenience about the place.

Bequests to Liverpool Medical Charities.

Under the will of the late Mr. C. E. Horsfall the following institutions will benefit by the sums named: the Royal Infirmary, the Northern Hospital, the Royal Southern Hospital, the Children's Infirmary, and the dispensaries, £800 each; the Eye and Ear Infirmary, the Home for Incurables, the Ladies' Charity, and the Nurses' Home of the Royal Infirmary, £500 each.

Nov. 14th.

NORTHERN COUNTIES NOTES.

(FROM OUR OWN CORRESPONDENT.)

Outbreak of Influenza in the North.

SINCE I last wrote there has been a remarkable outbreak of influenza in Newcastle, Sunderland, and other large northern towns. In Newcastle, so far, the brunt of the attack has fallen on the Jesmond, the north-east, or well-to-do end of the city. In the east-end and the west-end, mostly occupied by mechanics, the cases are not so numerous in proportion or so severe. In Sunderland and South Shields the affection seems to be well diffused. I regret to note the death from pleuro-pneumonia following influenza of Mr. John Whitehouse, surgeon, of Sunderland, which occurred on the 7th inst., at the early age of thirty-seven years. Mr. Whitehouse, who was a native of Birmingham, came to Sunderland about ten years ago. He first joined Mr. Barron, and after that gentleman had left the town he entered into partnership with Dr. Maling. Mr. Whitehouse was hon. surgeon to the Sunderland Infirmary.

The Small-pox Epidemic at Leadgate.

It was reported by Dr. George Renton at the last meeting of the Leadgate local board that the small-pox outbreak in that town and its vicinity was reported to be of a very serious type. Twenty-six cases had occurred and two deaths, both females. Dr. H. M. L. Wilson, Government inspector, has been directed to make an inspection of the district.

Carlisle and the Borders.

The "merrie city" of Carlisle was *en fête* last Wednesday on the occasion of the opening of Tullie House, a very fine old mansion of historical and Border interest, which by the liberality and public spirit of the citizens and corporation of Carlisle has been reconstructed and converted into a hall of science, art, and literature. The building comprises a reference library, reading-rooms, picture galleries, museums of natural history, and antiquities, together with class-rooms, painting-rooms and lecture-rooms. The whole will afford high educational advantages to the youth of the city. Considering that Carlisle is a small city, numbering about 40,000 inhabitants, it speaks well for its "burghers" that

they have been willing and able to devote upwards of £20,000 for the purchase and the furnishing of Tullie House.

Newcastle-on-Tyne, Nov. 14th.

SCOTLAND.

(FROM OUR OWN CORRESPONDENT.)

Edinburgh Health Lectures.

PROFESSOR MCFADYEAN delivered his second lecture on "Diseases of Animals Transmissible to Man" on Saturday last. Professor Chiene occupied the chair. This lecture was devoted to animal parasites in man acquired by means of meat. He dealt first with the trichina spiralis and pointed out that, while man acquired it from the pig, the source of infection for the pig was not so certain, although there was evidence to show that it might be acquired through the rat, for rats were frequently affected with trichinæ. Part of of the protective measures against this disease lay with the sanitary authorities, but in this country the preventive most to be relied on was thorough cooking. A temperature of 140° F. was necessary for this, and that temperature had to penetrate into the centre of the meat to make it quite safe. Human trichinosis was rare in this country but it was not a comforting thing to know that the disease was common among American pigs and that living trichinæ had been discovered in hams imported from the United States. He next dealt with tapeworms and bladder-worms, which were among the commonest of the parasites of man and the domestic animals. He described the habits and life-history of these. The measly flesh of the pig infected man with one form of tapeworm, while another was due to eating beef. He then referred to the tapeworms in the dog—the tænia serrata, which had occasionally been met with in man, and the tænia canina, which gave rise to hydatids in him. Hydatid disease was not common in this country, but in Iceland, where dogs lived in such close contact with the people, one person in seven was affected with hydatids. A temperature below the boiling point was believed to be sufficient to kill the bladder-worms of measly pork, but experiment had shown that even three hours' boiling did not raise the centre of a ham of ordinary size to the killing point of bladder-worms. The safest guide in the matter of boiling was the appearance of the flesh at the centre of the ham or joint. There was reason to believe that thorough salting killed any bladder-worms that might be present in pork or beef, but it was by no means certain that so-called "mild-curing" was sufficient to remove all danger. The duty of sanitary authorities in this matter lay in taking reasonable measures to prevent measly pork or beef from finding its way into the market. No such precautions worthy of the name were taken in any town or city of this country. It was a safe statement that under present regulations a score of animals affected with bladder-worms might any day be slaughtered in London, Edinburgh, or Glasgow, with little risk of the disease being detected. This was not a creditable state of things, but it was well that the public should know how matters stood. If tapeworm was not common in this country among human beings that was owing to the prevailing custom of cooking food fairly well and to hydatid disease not being very common in British cattle and pigs.

The Election of Lords Rector of Edinburgh and Glasgow Universities.

The election of Lord Rector of Edinburgh University took place last Saturday. The candidates were Lord President Robertson and Lord Reay. The result of the voting was: for Lord Robertson, 1145; for Lord Reay, 728, thus giving the former a majority of 417. One of the features of this election was the part the female students took in it—they not only voted but spoke at the meetings and in other public ways manifested their partisanship on both sides. In the evening there was a torchlight procession in which about 1000 of the students took part. Sir John Gorst has been elected Lord Rector of the University of Glasgow.

The Dumfries County Council has decided to spend £29,000 on the construction of a new water scheme for Dumfries.

It is said that the hardy fishermen of the Berwickshire and Northumberland coasts are likely to be severely tried this winter by the bad catches and the inferior quality of the fish captured on the coast.

Nov. 15th.