

SIR ANDERSON CRITCHETT ON THE TREATMENT OF CONICAL CORNEA.

SIR.—The recently circulated pamphlet by Sir A. Critchett on the above subject contains some statements which I think ought not to be allowed to pass without some modification. The author's skill in the management of cases of this disease is evidently not equalled by his knowledge of the literature of the subject, and with a little trouble he might have ascertained what others had done in the same field with the cautery long before the date (1895) of his communication to the medical press. If he will only turn to the BRITISH MEDICAL JOURNAL of February 23rd, 1889, he will find a short paper read before the Section of Ophthalmology at the Glasgow meeting in the previous year, in which I refer to the works of the late Dr. Andrew and Mr. W. J. Cant on the use of the cautery, and in which it is stated that:

The plan adopted by these operators differs in at least one important point from the method employed in the cases which I am about to relate. The essential difference consists in the fact that the two surgeons named make a point of opening the anterior chamber so as to allow a continuous drainage of the aqueous for a prolonged period, and so purposely use a needle capable of penetrating the corneal tissue; whereas I hold that complete penetration of the cornea with the discharge of the aqueous is a result to be avoided, as unnecessary and dangerous, and believe the same object as regards the reduction of concavity can be attained without the escape of the fluid.

Yet Sir Anderson Critchett says in his pamphlet:

Till about three years ago the universally accepted plan of applying the cautery in cases of conical cornea was to use it almost at red heat, and to persevere until a spurt of aqueous showed, that the anterior chamber had been penetrated.

My first case was operated on in 1886, fourteen years before the time mentioned by Sir Anderson! I do not think, therefore, that he can claim either priority in or "initiation" of this method of treating conical cornea, and I am sure he would be the last willingly to deprive benighted provincial surgeons of the few laurels that they may be able to cull as against their more fortunate metropolitan *confrères*.—I am, etc.,

Liverpool, May 11th.

RICHARD WILLIAMS.

POST OFFICE MEDICAL APPOINTMENTS.

SIR.—Having great admiration for the name of Chamberlain, believing, as I do, that it is synonymous with efficiency, I believe the Postmaster-General would be obliged to the British Medical Association if that Association was to bring under his notice the correspondence that has appeared in the BRITISH MEDICAL JOURNAL on Post Office Medical Appointments; more particularly because in one of the subdivisions the gentleman who had acted as deputy medical officer for the past six years, and since the death of the late holder has had charge of the whole of the present four subdivisions, and to the satisfaction of the Post Office authorities; in spite of this, when the department looked round for a suitable officer to appoint to the subdivision in which this gentleman dwells, it does not offer the appointment to the gentleman who "knows the ropes" of the appointment, and of whose efficiency it has practical knowledge, but offers it in the first place to one gentleman who refuses it, and then to another who accepts.—I am, etc.,

F. HERBERT ALDERSON, M.B.

Queen's Gate Terrace, S.W., May 9th.

SOMNOFORM.

SIR.—In your report in the BRITISH MEDICAL JOURNAL of April 25th of Mr. Cross's paper on the above subject before the Society of Anaesthetists, some remarks are accredited to me which I write to correct. The report states that "in from 90 to 100 seconds, and in some cases 35 seconds, the eyes became fixed, and the patient was ready for operation." My remarks at the meeting were that the average period of induction of anaesthesia was from 20 to 25 seconds, in some cases 35 seconds, and that the period of anaesthesia resulting from a single application of the mask was from 90 to 100 seconds. These figures represent the average duration in some five hundred administrations in the Dental Department of Guy's Hospital, but in some instances an anaesthesia of 2½ to 3 minutes has been obtained with a single administration of somnoform.

The report goes on to say that I have "found a good deal of muscular rigidity" with somnoform. This again is inaccurate, for my remarks were that I seldom saw rigidity since I have been in the habit of administering somnoform with a cone and rubber bag apparatus, pointing out at the time that the

absence of muscular rigidity was one of the great advantages of somnoform over nitrous oxide anaesthesia.

Trusting that I am not encroaching too much on your valuable space in asking you to insert this letter. I am, etc.,

R. H. JOCELYN SWAN, M.S.Lond., F.R.C.S.

Anaesthetist, Guy's Hospital.

St. Thomas's Street, S.E., April 25th.

OBITUARY.

ARTHUR TRETHERWY, M.B., B.C.CAMB.

It is with great regret that we record the death of Dr. Arthur Trethewy, Resident Medical Officer of Haileybury College, which occurred very suddenly on May 4th at Haileybury, Hertford, from heart disease. He was the youngest son of Henry Trethewy, of Silsoe, Bedfordshire, and was only 34 years of age at the time of his death. Dr. Trethewy was a B.A. of Cambridge, and obtained his scientific and medical training at Cambridge University and at St. George's Hospital. He became M.R.C.S., L.R.C.P.Lond. in 1894, and took the degrees of M.B., B.C.Camb. in 1898. While at Cambridge he held the post of Assistant Demonstrator in the Biological Laboratories of the University. On entering St. George's Hospital, in 1892, he obtained an Entrance Scholarship in Science, open to students from the Universities of Oxford and Cambridge. He held at this hospital the posts of Assistant in the Dental, Obstetric, and Throat Departments; Assistant House-Surgeon, Assistant House-Physician, House-Surgeon, and House-Physician. Afterwards he became House-Surgeon at the Warnford Hospital, Leamington. Dr. Trethewy served as a civil surgeon in South Africa in 1900-1, being attached to the 1st Herts Volunteers. The funeral took place at Great Amwell, Ware, on May 6th.

Dr. J. W. Noble (Nottingham) writes: As one who was at school, college, and hospital with the late Arthur Trethewy, Medical Officer to Haileybury College, I should like to bear some slight testimony to the sterling worth of his character. Kind, generous, and of a most cheerful disposition, he was the life and soul of any social gathering. His friends, once made, were made for life, and however seldom seen in later life were still old friends in the best and truest sense of the word. Upright and conscientious in the highest degree he was always to be depended on to fulfil his duty. Fearless of ridicule, he was possessed of a dogged perseverance which enabled him to carry through any scheme on which he had set his heart. Gifted with great physical strength, I have never known him use it in oppression, but always to aid those less strong. Broadminded to an unusual degree, he was always tolerant of other people's views, even when in direct opposition to his own. A conservative in most things, he was still never tired of trying to better the lot of his less fortunate fellow-men. Truly he was a gentleman in the highest and best sense of the word and his short life has left its mark in the hearts of those who had the privilege of knowing him and calling him friend.

ROYAL NAVY AND ARMY MEDICAL SERVICES.

ROYAL NAVAL MEDICAL SERVICE.

The following appointments have been made at the Admiralty: WALTER G. AXFORD, Staff Surgeon, to the *Eolus*, for Haulbowline Dockyard, May 28th; ERIC C. WARD, M.D., Staff Surgeon, to the *Black Prince*, June 2nd; JOHN MOORE, B.A., M.D., Staff Surgeon, and MONTAGUE H. KNAPP, Surgeon, to the *Essex*, June 2nd; HENRY N. STEPHENS, Surgeon, to Haslar Hospital, May 8th; THOMAS E. HONEY, M.D., Surgeon, to Haslar Hospital, for zymotic wards, May 28th; CHARLES S. WOODWRIGHT, Staff Surgeon, to the *Victory*, and tenders for instruction of Probationary Sick Berth Staff, May 18th.

ARMY MEDICAL STAFF.

COLONEL W. J. FAWCETT, from the Royal Army Medical Corps, to be Surgeon-General, on temporary augmentation, April 1st. His commissions are thus dated: Assistant Surgeon, April 1st, 1871; Surgeon, March 1st, 1873; Surgeon-Major, April 1st, 1883; Surgeon-Lieutenant-Colonel, April 1st, 1891; Brigade-Surgeon-Lieutenant-Colonel, April 24th, 1895; and Colonel, May 10th, 1900. He was in the Soudan campaign in 1885 (medal with clasp, and Khedive's bronze star), and with the Hazara expedition in 1888 (mentioned in dispatches, medal with clasp).

ROYAL ARMY MEDICAL CORPS.

COLONEL FREDERICK BEAUFORT SCOTT, M.D., C.M.G., died at Tivoli, near Rome, on April 27th, aged 64. He was appointed Assistant Surgeon, October 1st, 1862; Surgeon, March 1st, 1873; Surgeon-Major, April 28th, 1876; Brigade Surgeon, January 23rd, 1888; and Surgeon-Colonel, December 27th, 1892. He retired from the service December 9th, 1898. *Hart's Army List* informs us that he received the special approbation of the