

tion of the Midwives Institute to obtain for midwives entire freedom from medical supervision. As a matter of fact the definition was drawn up by a Provisional Committee, which led up to the formation of the Midwives' Registration Association, and it was adopted by the Association at its first general meeting on July 3rd, 1893, as a part of its working basis. No midwife had any hand in its drafting. Dr. Smyly, himself a member, I am glad to say, of the Association, has, or should have, adopted the definition in common with the rest of the members as meaning the present anarchical condition of midwives; this is all it means. The Bill is intended to place the midwives under control. The definition is omitted altogether in the amended measure.

Another objection raised by Dr. Smyly is that the Bill does not sufficiently provide against midwives treating cases which are not normal. In the amended Bill a special clause provides against any further misconception on this point.

He also complains that all authority will be centralised in London; but, as a matter of fact, it is not so centralised, nor was it ever intended to be so centralised. But the proposed Board must have an office somewhere, though London is not mentioned even for this purpose.

It would be entirely against the policy of the Midwives' Board to keep the excellent Rotunda midwives from practising in England or Wales; Dr. Smyly is quite mistaken in what he states in this respect.

Perhaps Dr. Smyly would kindly suggest the amendments he desires to see in the present Bill, and they will, without doubt, obtain a fair hearing. As Secretary to the Midwives Bill Committee I will do all I can to get them well discussed, and in any case the authority for them will command respect.—I am, etc.,

Fellows Road, N.W., June 25th. F. ROWLAND HUMPHREYS.

PERMANGANATE OF POTASSIUM AS AN ANTIDOTE FOR OPIUM POISONING.

SIR,—The article by Dr. William Moor in the BRITISH MEDICAL JOURNAL of June 22nd was sent me by a friend who knows my claim to be the first to introduce potassium permanganate as an antidote to opium and morphine poisoning. There are some facts which ought to come under the notice of your readers with respect to this "new" antidote. I introduced acid solution of potassium permanganate as an elegant quantitative test for morphine and cinchona alkaloids in 1877.¹ I recommended solution of potassium permanganate in the year 1884 as an antidote for morphine, opium, and laudanum. Such 1 per cent. solution of potassium permanganate was my legal property prior to the introduction of a 1 per cent. solution into the *Pharmacopœia*. It was brought out for the convenience of workers using my method of oxidimetry introduced in 1877. I send you herewith a label on which you will see: "As an *antidote* to opium, morphia, and laudanum the *diluted* solution may be administered in doses of a wineglassful." This label was printed, together with a scientific pamphlet, by Messrs. Silverlock, Blackfriars Road, more than ten years ago.

As regards the "selective faculty" of potassium permanganate for morphine in the presence of albumen, I found so early as 1877 milk and albumen solutions react on my reagent. In the year 1890 the Belgian Academy appointed Messrs. Jorissen and Spring to inquire into my method applied to the estimation of food stuffs. Their report and my papers will be found in the *Bulletins* of the Royal Belgian Academy for 1890 and 1891. Those interested in this subject of estimation of food stuffs by means of acid permanganate should consult *Invention* from 1892, December 10th and 17th, and a long series of articles in the same, from October, 1893, to July, 1894. About fourteen articles may be found in the *Miller* dealing with my method applied to flour and bread, 1893 to 1895.

Those interested in knowing exactly the reactions of albumens and potassium permanganate, will find them recorded in my pamphlet *Rapid Analysis of Milk*,² by the permanganate method. However, when we recognise the fact that probably 60,000 cases of opium or morphine poisoning have occurred since I first published the antidote in 1884, we must confess

¹ *Vide Year Book of Pharmacy* for 1878, and elsewhere.

² Messrs. Williams and Nergate, Covent Garden.

that after all we must sometimes risk our lives, as Dr. William Moor has risked his, to secure serious and proper consideration of our convictions.—I am, etc.,

June 26th. J. BARKER SMITH, L.R.C.P.

URGENT POOR-LAW CASES.

SIR,—I think we must all welcome with great satisfaction the recent action of the Local Government Board in reference to the answer given to the Whitechapel Guardians as regards accidents and sudden cases of illness amongst the poor. According to the orders last issued, the nearest medical man called in will now be able to receive his fee from the guardians, thus preventing delay and possibly death, and unjust comments in the daily press in reference generally to the Poor-law medical officer.—I am, etc.,

J. WICKHAM BARNES.

Honorary Secretary Poor-law Medical Officers Association.

July 1st.

PROPOSED COMPULSORY INSPECTION AND REGISTRATION OF STILLBORN CHILDREN.

SIR,—In the BRITISH MEDICAL JOURNAL of June 29th Dr. Mullins, of Sydney, calls attention to a error which appeared in my remarks on the above subject in the JOURNAL of April 6th. You will remember that you considered my "paper" too long, and therefore it was cut down from 18 to 7½ pages. The words in the original manuscript which I sent were: "Dr. Mullins, of Sydney, informs me that in New South Wales, under Section 16 of the Children's Protection Act, 1892, it is enacted that when a stillborn child has been born in a lying-in home, it must not be interred until the certificate of a medical practitioner or of a magistrate is obtained, and that a stillborn child is one born dead after the commencement of the sixth month of pregnancy."—I am, etc.,

Liverpool, June 30th.

R. R. RENTOUL.

THE ANNUAL MEETING AND SOUTH WALES MEMBERS.

SIR,—Perhaps you will allow me an opportunity of informing the South Wales and Monmouthshire members that the Great Western Railway intend running an excursion train every Monday during the months of July, August, and September, from Swansea, Neath, and Cardiff to London, returning either on the following Saturday or the Saturday week. I have received a promise from the superintendent of the line that he will provide a saloon carriage for the use of medical men who intend travelling by the train leaving Cardiff on Monday, July 29th. It will be necessary for members to give me an early intimation of their intention to travel by this train. It will leave Cardiff about 4.20 P.M.—I am, etc.,

Cardiff, July 2nd.

T. GARRETT HORDBER.

CLUBS, MEDICAL AID ASSOCIATIONS, AND CONTRACT PRACTICE.

SIR,—Having been asked to read in the Ethical Section the opening paper on Clubs, Medical Aid Associations, and Contract Practice, I shall be much obliged if those who have personal experiences in these matters, favourable or otherwise, will kindly communicate the facts to me.—I am, etc.,

64, St. Giles's, Oxford, July 2nd.

ROBERT W. DOYNE.

DILATATION OF THE CERVIX.

SIR,—I have read with much interest the article in the BRITISH MEDICAL JOURNAL of June 29th, by Dr. Braithwaite, on Dilating the Cervix Uteri. The physiological fact that the cervix is so much more easily dilatable immediately at the end of a menstrual period than that at other times is one of great practical importance, and the thanks of the profession are due to Dr. Braithwaite for laying emphasis on this fact, especially as there is no allusion to it in the textbooks in common use.

I have tried most forms of dilating the cervix of the non-pregnant uterus, including Tait's, Hegar's, and bladed metallic dilators, and have come to the conclusion that the best results can be obtained from a combination of the use of Tait's and Hegar's dilators, though not in the sequence Dr. Braithwaite uses them. The method I have adopted for