

and the parasite is there, a child (nay, even a member of the Indian Medical Service) might see it.—I am, etc.,

A. CROMBIE, M.D.,

Surgeon-Lieutenant-Colonel; Surgeon Superintendent
of the European General Hospital, Calcutta.

Calcutta, Sept. 15th.

* * The address in question was published by Messrs. Thacker and Co. in Calcutta immediately after delivery, and Dr. Crombie confirms our impression that he had not read it. In reference to the paragraph on malaria in Dr. Crombie's letter we would remind him that both he and we were discussing the best time in the fever cycle for a beginner in malaria blood examination to select for finding the parasite; and we quoted Mannaberg, who, along with Laveran and many others, distinctly recommends the end of apyrexia and the commencement of pyrexia for this purpose. Dr. Crombie quotes Marchiafava and Bignami (pp. 9 and 56, *Sydenham Society's Translation*) to show that the parasites are most numerous during pyrexia and fewest during apyrexia; and he would have us think that Mannaberg and these authors are in disagreement. But if he would study Mannaberg he would find that this authority and all other good observers concur on this particular point. This, however, is not the question at issue. What is wanted is the best time for the beginner to look for the parasites, not the time when they are most numerous. These are two very different things. It is quite true that many more parasites can generally be seen by the expert during fever than during late apyrexia; but it is equally true that during fever the vast majority of the parasites—the new generation in fact—are then so minute—little more than specks in the corpuscles—that they are hard for one unaccustomed to the work to recognise, so that at this stage the beginner, and even the expert, has often to fall back on pigmented leucocytes, or, according to the type of the fever, on any crescents or flagella-forming spheres that may chance to be present for a diagnosis. But about the end of apyrexia and the beginning of the fever paroxysm the parasites, though fewer in number, are pigmented and have grown so large that a "child might see" them, and hence this is the most suitable time for the beginner to endeavour to find the malaria parasite. A full-grown hen is a much more conspicuous object than a newly hatched chicken—a self-evident proposition as applicable to the malaria parasite as to the barn-door fowl.

If Dr. Crombie had quoted the passages from Marchiafava and Bignami *in extenso*, and had translated them, his readers would have had no difficulty in reconciling what he would erroneously have them believe is a discrepancy between these authorities, Mannaberg, and ourselves. A mutilated quotation gives an incorrect impression. In other respects this letter does not correctly represent the effect of our leader, with which it may be compared.

LONGMORE'S GUNSHOT INJURIES.

SIR,—In the last paragraph of the note you appended to my letter which appeared in the BRITISH MEDICAL JOURNAL of October 12th, you quote me as having said that "we are already supplied with ample statistics as to the effects of the use of small arms." What I did say was that we had full statistics as to the effects of small arms of the Martini-Henry patterns. As regards the wounds rifles produce, these weapons may be divided into two classes: one comprising the modern rifles of small calibre, and the other all the older rifles firing the elongated cylindro-conoidal bullet—the Martini-Henry, Snider, Gras, Chassepôt, needle gun, Minié, etc. The point I wished to make in my remarks on Sir Thomas Longmore's second edition was that it contained the ample statistics which are available as to the use of rifles of the second category, but that the omission of statistics of the effect of the use of modern rifles was not a defect, or that it was unavoidable, for the reason that none existed. As regards the Balmaceda rebellion in Chili, we have no information as to the effect of the small bores used there, except some general statements which are now known to be, in great part, inaccurate. I certainly would not "seriously maintain that the work was complete" if it omitted important statistics which were available, but I do not consider that it does so.—I am, etc.,

W. F. STEVENSON,

Professor of Military Surgery, Army Medical
School, Netley.

October 14th.

THE ANDREW CLARK MEMORIAL FUND.

SIR,—In the BRITISH MEDICAL JOURNAL of October 12th you have rightly stated the cause of the failure of this fund—that the profession had not an opportunity of expressing its wishes on the form which the memorial should take.

Clinical medicine was a strong point with Sir Andrew; any scheme which would have contributed to the advancement of its study would have been dear to his heart; therefore may we not hope at the eleventh hour that a meeting of medical men will be called in order that Sir Andrew Clark's memory may be perpetuated by some worthy memorial?—I am, etc.,

Warwick Square, S.W., Oct. 14th.

THOS. LANGSTON.

INADEQUATE SALARIES OF PUBLIC HEALTH APPOINTMENTS.

SIR,—I should very much like to enlist your help in trying to induce those of the profession who have taken up public health work to make a stand once for all against such sweating as appears to be contemplated by the East Sussex County Council, judging from their advertisement in the BRITISH MEDICAL JOURNAL of October 5th. The JOURNAL has of late said much to encourage the medical men of Cork and elsewhere in their resistance to the grinding terms which the clubs and medical aid societies have sought to impose. Is this bargain proposed by the East Sussex County Council not quite as stringent?

This proposed appointment in East Sussex is unfortunately not the first of its kind. There are others, of which the remuneration is on much the same scale, which have been sought after and accepted even by men of some standing in the profession, and the need is therefore the greater that some expression should be given to the opinion held by, I trust, the vast majority of the profession, that all those who apply for such posts show an utter want of respect for themselves and their profession.

The appointment of a county medical officer of health on such terms must mean one of two things as regards the County Council: either that they are quite ignorant of the work to be done by a county medical officer of health, which is the more charitable supposition, or that they do not wish their officer to be too active in the discharge of his duties; but as regards the medical officer of health appointed the former excuse can scarcely be applicable, and he must be undertaking the office well knowing that the salary is totally inadequate to the work which ought to be done.

I have laid stress upon the injury to the profession which such an appointment will give rise to, but it is evident that the injury to the public will be no less. The useful work now being done by the medical officer of health in a few of the more advanced counties where they are properly remunerated can evidently not be looked for under such an arrangement as that proposed by the East Sussex County Council.

It may be that this advertisement is merely a matter of form, and that it is the intention of the County Council to combine the post of county medical officer of health with some of those for local sanitary districts, but if so it would have been only fair to make the facts known, and even so the above remarks apply to other similar posts in other counties.

It is, Sir, I hope you will agree with me, high time that the profession should make some protest against such treatment.—I am, etc.,

October 9th.

PUBLIC HEALTH.

* * The duties of the appointment appear to be those ordinarily assigned to the medical officer to a county council, and the "honorarium" offered is one hundred guineas a year and travelling expenses.

The proprietors of the *Provincial Medical Journal* have decided to discontinue its publication after the December number. Dr. T. M. Dolan, the editor of the moribund periodical, proposes to provide a substitute in the form of a monthly journal of medicine and surgery, to be entitled *The Scalpel*.

A MONUMENT to Duchenne, of Boulogne, will shortly be erected in the Salpêtrière. It is the work of M. Desvergnès, the sculptor, and M. Debrie, an architect. It is also proposed to erect a memorial to Duchenne in his native city of Boulogne.