

British Congress on Tuberculosis.—Dr. Rickards, Mr. Barling, and Dr. E. H. Snell were appointed to attend a preliminary meeting.

SPECIAL CORRESPONDENCE.

LIVERPOOL.

Departure of the Royal Society's Malaria Commission for Sierra Leone.—Proposed Legislation for the Prevention of Tuberculosis from the Milk Supply.

DR. STEPHENS and Dr. Christophers, the members of the Royal Society's Commission for the investigation of malaria, who returned recently from Central Africa, have sailed again from Liverpool in order to carry out investigations into malaria in Sierra Leone. They will thus be working in the same locality as the members of the Liverpool expedition which is investigating the connection between malaria and mosquitos, although they will act in complete independence of the latter. The Commission sailed by the ss. *Batanga*, and received a hearty send-off from Professor Boyce and others representing the medical school, of which Dr. Christophers is a distinguished former student.

The City Council intends to promote a Bill in Parliament next session providing, among other things, for additional powers for the prevention of tuberculosis from infected milk. The Bill imposes a penalty not exceeding £10 on anyone knowingly selling or allowing to be sold milk taken from any cow suffering from tuberculosis, and a penalty not exceeding £5 on anyone failing to isolate a cow suffering from tuberculosis on his becoming aware of that fact. It also imposes compulsory notification of tuberculosis on dairymen, and enables the medical officer or any person authorised by him to take samples of milk for bacteriological analysis, such power to be exercised within the city, and also outside the city on the order of a local justice of the peace. It also gives power to the medical officer or his agents to inspect cows, and to require them to be milked if suspected of being tuberculous. It also provides that the Corporation may obtain a magistrate's order prohibiting any dairyman outside the city from selling milk in the city if the medical officer is of opinion that tuberculosis is likely to be caused by consumption of milk supplied from that dairy; but an order from a local justice authorising the inspection of such dairy must first be obtained. The powers sought for dealing with the milk supply from outside the city will be of great value. Of recent years the regulation of cowsheds within the city has been so effectual that the milk yielded by cows kept in the city has been much less contaminated than the milk from cows kept in the rural districts beyond the control of the city inspectors. In this way the country milk supply largely neutralises the efforts of the city inspectors, and the town dairymen are handicapped by their competitors in the country, who are bound by less stringent regulations.

CORRESPONDENCE.

THE REMOVAL OF THE WOUNDED: MORPHINE INJECTIONS.

SIR,—The utility of morphine injections in saving suffering during the removal of wounded men seems so obvious that you may think it unnecessary to insert this letter, but some years ago I was a good deal struck by the account given me by my friend, Professor Binz, of Bonn, of the use which he made of subcutaneous injections in the Franco-German war while engaged in superintending the removal of the wounded. He went about armed with a bottle of morphine solution and a hypodermic syringe, and before a man was removed he gave him a subcutaneous injection, which put the man to sleep, prevented any pain during removal, and lessened shock, so that the patient was in a better condition for operation when he arrived at the hospital in the rear. It sometimes happens that measures of treatment which are perfectly obvious may occasionally, under the stress of circumstances, slip from an operator's mind, and I think

it worth while to trouble you with this letter on the bare possibility of preventing pain from such cause—I am, etc.,

Stratford Place, W., Dec. 14th.

T. LAUDER BRUNTON.

ATTEMPTED AMALGAMATION OF DEFENCE SOCIETIES.

SIR,—The publication in the BRITISH MEDICAL JOURNAL by the Council of the Medical Protection Society of the fact that recent attempts to effect amalgamation of the two defence societies have again failed will cause some disappointment to those members of both societies who think amalgamation desirable, and who perhaps do not realise the difficulties which exist.

There is no need to attribute this failure to ill-will on either side; the failure is due to the fact that no one has yet been able to devise a scheme which will satisfy the legitimate requirements of those who are responsible for safeguarding the interests of each Society; and neither Society, it appears to me, should feel offended if proposals made by it prove not to be acceptable to the other so long as their proposals have received adequate consideration.

The offer of arbitration is the subject of the letter to our Council published by Dr. Hugh Woods, and received the fullest consideration by the executive officers, and finally by the Council. From this letter we inferred that the Council of the Medical Protection Society was prepared to leave everything to what may rightly be called the "chances" of arbitration, that there was no one point considered by them to be of such importance to the interests of their society that they wished to reserve it from these chances.

Our Council held a different view, and was not prepared to risk every point which was considered crucial and of the greatest importance to the welfare of our Society to such uncertain chances, and decided that they were unable to accept the proposal.

If you will be so good as to publish this statement, I think it may help to allay the irritation which seems to be inseparably attached to collective negotiations on this subject, and serve to convince the members of both societies that the wisest course under the circumstances is for each to develop to the best of its power its resources for the benefit of its members, and for each to continue in friendly rivalry endeavouring to excel the other in its efforts for the good of the profession, until at some future time, perhaps, the only practicable solution, as it appears to me, takes place—namely, that one Society, acting on the belief that it was to the interest of the profession to do so, winds up its affairs and merges into the other.

Each Society is too independent and successful at the present time for this to be likely to occur; in the meantime, let us regard each other collectively as we do individually with the consideration and good feeling which we deserve for the valuable work we are doing willingly and gratuitously for our professional brethren, and which is known as medical defence.—I am, etc.,

Dec. 18th.

WALTER S. A. GRIFFITH,
President of the Medical Defence Union.

THE HOSPITALS AND THE WAR FUNDS.

SIR,—I have much pleasure in complying with your wish that I should state my experience in regard to a statement you have received to the effect that certain hospitals have received no contributions from the public owing to the Transvaal funds. It can readily be understood that the war and all connected with it is the one predominant object in the public mind at the moment. It is only natural, therefore, that everybody should think first of all of the war funds, of the widows and orphans, and of the wounded and disabled soldiers and sailors, as well as of the wives and families left behind to the care of the nation. I do not myself believe, however, that these circumstances will have any material effect upon the resources of the home charities. My confidence is based upon the knowledge that the special interest excited by the war in this country has temporarily affected everything, including the business of the country, and I know from inquiries I made recently in the United States that the same thing happened there at the outbreak of the war with Spain. Within three months, however, people got accustomed to the war, and were so enabled to resume