Medico-Legal.

AN ACTION FOR DAMAGES FOR ALLEGED INFECTION. It is not often that claims for damages for alleged infection are preferred against employers. Indeed, we can hardly recall the occurrence of any such case except under the provisions of the Workmen's Compensation Act. Only last week, however, the Lord Chief Justice and a special jury had to consider a claim for damages for tuberculosis alleged to have been contracted by the plaintiff while engaged in making "camel-hair" brushes for the defendants. It seems that these brushes are made from remnants of Russian and Siberian squirrel skins, which are imported into England from Germany. They are generally pointed by being passed through the lips. It appeared that the plaintiff first became engaged in this occupation in 1901; that he developed phthisis in 1903; and that he finally had to leave the factory in 1905. He admitted in cross-examination that his sister had died of tuberculosis; that the hair was not put in the mouth until after the ironing, when the paper in which it was was scorched; and that since 1900 he had only been a foreman in the department. Medical evidence was given to the effect that these hairs were dangerous, as consumption was prevalent in the fur trade in Germany, but it was admitted, however, that the ironing of the brushes would kill the tubercele germs in the hair. At the close of the plaintiff's case the jury expressed the opinion that they had heard enough. The claim was therefore dismissed, his lordship saying that the defendants had acted very fairly towards the plaintiff. While we are not surprised at the result, it would have been interesting to hear the opinion of the learned judge upon the law applicable to the case. It is true that an employer has been held liable when his workman became infected with anthrax in consequence of sorting foreign wool, but that decision was come to because this was held to be an "accident" within the AN ACTION FOR DAMAGES FOR ALLEGED INFECTION.

held fiable when his workman became infected with anthrax in consequence of sorting foreign wool, but that decision was come to because this was held to be an "accident" within the meaning of the Workmen's Compensation Act. Such a claim could not have been made at common law. If made, the answer of the employer would be that the risk of infection was a natural consequence of the employment, and that upon the principle of "volenti non fit injuria" it was undertaken by the workman himself. It is by no means certain, however, that consumption acquired " in the course of the employment?" would not be held to be an accident within the Act of 1906; and if the claim in the case under review had been considered in the light of that piece of legislation. the defendants might not have light of that piece of legislation, the defendants might not have escaped so easily. It is manifest, however, that the plaintiff wholly failed to supply the necessary connecting links between his disorder and his contributions. his disorder and his occupation.

THE PRESCRIPTION OF BRANDY.

S. inquires whether a publican may (or is bound to) serve brandy to a person who bears an order from a medical man during "closed" hours.

 $*_**$ It is very usual for a publican to supply brandy at any time on a medical certificate of urgency; he is not bound to do so, and it is even doubtful whether he has any legal authority for so doing. It is not likely, however, that any action would be taken against him in England for a technical offence of this kind.

RECEIPT STAMPS.

RECEIPT STAMPS. H. asks for information as to the law of receipt stamps: (1) Should one always be put on a receipt for $\pounds 2$ or more, or is it unnecessary when it is paid on account? (2) If an account of $\pounds 3$ is paid in three equal instalments, is a stamp necessary on the second or third payment? (3) Are receipts given in the case of friendly societies, and are there any other exemptions? exemptions?

 $_*$ (1) Yes, whenever £2 and upwards is paid a stamp should be put on the receipt. (2) A stamp is necessary on the second payment if the receipt is put on the same bill; otherwise, if a separate acknowledgement is given, then it need only be put after the third payment. (3) We know of no other exemptions.

CO-OPERATIVE SOCIETIES AND MEDICAL ATTENDANTS. G. W. writes that he has been approached by a co-operative provident society which runs large stores for the supply of "groceries, boots, clothing, coal, and in fact almost every-thing its members can require," to know whether he would be disposed to discuss the question of establishing a medical aid deartment in comparing with the cogistry. In writing to aid department in connexion with the society. In writing to us he expresses a doubt whether by doing so he might not be contravening the regulations of the General Medical Council, and asks for our opinion.

*** We cannot, of course, say what view the General Medical Council would take of this particular case, but the Council has condemned canvassing, and experience proves that such enterprises are often contaminated by canvassing. We would advise our correspondent to study the report on contract practice by the Medico-Political Committee of the British Medical Association, published as a special SUPPLEMENT to the JOURNAL of July 22nd, 1995. Copies can still be obtained (price 8d., post free).

Medico-Ethical.

The advice given in this column for the assistance of members is based on medico-ethical principles generally recognized by the profession, but must not be taken as representing direct findings of the Central Ethical Committee.

MEDICAL ADVERTISING IN INDIA. PAINT, in reference to our answer to "L. M." (JOURNAL, May 23rd, 1908, p. 1265), writes, from Bombay, that in his opinion the local medical profession, and especially Fellows of the colleges of Great Britain practising in Bombay, would regard the proposed as antirely unathical the proposal as entirely unethical.

* We do not know that our correspondent is an authoritative interpreter of local professional feeling, but he may be right in his opinion. Nevertheless, we think our suggestion to "L. M." should be adopted-namely, that the proposed addition to the name-plate should be submitted to the local medical profession.

The Services.

TERRITORIAL ARMY: FEE FOR MEDICAL EXAMINA-TION OF RECRUITS.

TERRITORIAL ARMY: FEE FOR MEDICAL EXAMINA-TION OF RECRUITS. THE National Defence Association held a County Association Conference on July 8th at the Royal United Service Institution. The Right Hon. Sir George T. Goldie, K.C.M.G., occupied the chair, and the large lecture hall was full. Questions relative to the Territorial Force were discussed, and Lord Lucas, the Under Secretary for War, and Mr. F. D. Acland, Financial Secretary, attended on behalf of the War Office. The only question of medical interest was that of the increase of medical examination fees from 1s. to 2s. 6d. proposed by the City of London and Buckingham Associations. The question was introduced by Colonel P. B. Giles, P.M.O. of the 1st London Division, who in a short speech said that there was a shortage of medical officers because the demand upon the medical officers' time was so great that the busy could not give adequate time; of the majority of medical officers who joined a very large percentage were frequently losers by attending to examine recruits. The fee of 1s. was absurd, the lowest sum should be 2s. 6d. However doctors might be supposed to differ, in this point they were as one. Colonel Giles said that he had had 788 officers through his hands at the Volunteer Ambulance School of Instruction, and knew the feel-ings of the officers, the time they gave to the unit they belonged, and the negunizer spacefices they made. ings of the officers, the time they gave to the unit they belonged, and the pecuniary sacrifices they made. In war plenty of civil surgeons could be obtained, but the difficulty was to get officers who knew the men and could and would train them in peace and

so acquire a knowledge of their wants and of discipline. Mr. Tonman Mosley, Chairman of the Buckingham Associa-tion, also spoke in favour of the fee being fixed at 2s. 6d., and spoke of the difficulty there was in getting recruits satis-

Mr. Acland replied that as a great number of recruits satis-factorily examined. Mr. Acland replied that as a great number of recruits were examined free, 2s. 6d. might be obtained where required. He trusted that a patriotic feeling existed among medical men so that they would examine recruits free of charge. The Director-General, he added, had received numerous offers, and there was no difficulty in obtaining medical support no difficulty in obtaining medical support. Colonel Giles explained that these offers were for the \dot{a} la suite

Colonel Giles explained that these offers were for the \dot{a} la suite staff for time of war, not for officers for units. In this connexion we may call attention to the remarks of Lord Lovat in the House of Lords on July 8th, when he submitted a preliminary list of minor and vexatious economies adversely affecting the efficiency of the territorial army. Among these he enumerated the unfortunate economy made in the direction of the doctors' fees, the sum of 2s. 6d. for passing a man medically fit having been reduced to 1s. Lord Lucas, in his reply on this point, said that a grant was made of 1s. for every recruit who was passed. A consider-able percentage of the recruts had been examined either by the able percentage of the recruits had been examined either by the regimental doctor or by some public-spirited and patriotic local practitioner, who had done the work for nothing. They had every reason to believe, in view of the extremely generous and public-spirited way in which the whole medical profession had come forward to help this scheme, they would continue to receive their assistance, but the County Associations would draw their shilling for every man whether he had been examined free or not, and they hoped that this would enable them to meet those cases where a fee had to be paid.

TERRITORIAL FORCE

TERRITORIAL FORCE. It has been decided that medical officers of the late volunteer force who do not desire transfer to the Territorial Royal Army Medical Corps and wish to remain merely as medical officers of units shall be gazetted to those units with their old rank and compound title. Those who desire transfer to the Royal Army Medical Corps will be gazetted to that corps, and be attached to the unit with which they wish to serve.

TERRITORIAL MEDICAL OFFICERS' EXAMINATION. An examination of Territorial medical officers for proficiency certificates will be held at the Queen Alexandra Military Hospital, Millbank, on the 21st inst.