

vary to an extent which impairs their utility, there can be no doubt as to the value of systematic observations on the blood pressure. I now always use Martin's modification of the Riva-Rocci sphygmomanometer, and with it I have frequently been able to forecast attacks of pulmonary hæmorrhage, to detect my patients in errors of diet, over-smoking, etc. In fact, numberless hints may be obtained after a little practice, and when a patient's normal tension has been ascertained.—I am, etc.,

Exeter, Sept. 27th.

HAROLD DOWNES, M.B.

DOUBLE VACCINE TREATMENT IN ACUTE APPENDICITIS.

SIR,—After reading the interesting paper (p. 782) by Dr. Hawkins and Mr. Corner on the above subject, and studying the list of opsonic indices contained in the note appended by Sir Almoth Wright, I feel that there is an important piece of information still wanting—the relation between the opsonic indices and the injections of vaccine. The streptococcus was given on the sixth, ninth, twelfth, forty-sixth, fifty-sixth, and sixty-ninth days. What, may I ask, was the relation between these injections and the opsonic indices for that organism which were taken on twelve consecutive days, and thereafter at irregular intervals? Does the table show any negative phases?

Sir A. Wright says that the streptococcus index was at first 0.28, and that it was never allowed to go below normal. I would ask, Was the sudden rise from 0.28 to 5.00 on the next day the result of an injection? If so, the effect of the injection of 5,000,000 of cocci seems extraordinarily pronounced and to have been devoid of negative phase. We learn, too, that the colon vaccine was given on the seventh, thirty-fifth, and forty-sixth days. Is there any connexion traceable between these injections and the sudden rise of the colon index from 1.51 to 6.16 and its fall from 7.00 to 1.30 on consecutive days? These are points of both theoretical and practical interest. They bear directly on the important question with regard to which so many still have an open mind—the value of opsonic index determination in treatment by vaccines.—I am, etc.,

E. J. McWEENEY, M.A., M.D. R.U.I., F.R.C.P.I.

Dublin, Sept. 28th.

MEDICAL EXAMINATIONS UNDER THE BOARD OF EDUCATION RULES.

SIR,—Will you allow me to point out that the examination for which Dr. Bennett states¹ he charges 2s. 6d. to 5s. cannot be the examination I referred to in my previous letter. I have myself accepted 2s. 6d. or 5s. for such examinations as he mentions, but the *final* medical examination has to be made by medical officers appointed by the Education Department.

In the "Letter to Medical Officers under the Elementary (Superannuation) Act, 1893," attention is drawn to Rule 34. This rule is as follows:

1. "A medical officer nominated or chosen by the Education Department will be bound to make any medical examination required by these rules on payment of a fee of 10s. 6d."

2. "The fee and all other expenses incurred by a person offering himself for examination must be paid by him or on his behalf."

I would not have troubled you with any further correspondence were it not that this case seems to emphasize the difficulty one finds in getting members of our profession to adhere to any definite scale of charges such as Dr. Bennett suggests.

All medical officers under the Elementary School Act have copies of the rules I have quoted from, and I think Dr. Bennett will agree with me that, unless in exceptional cases, they should not accept less than the recognized fee.

These isolated cases which now and then are reported to the JOURNAL are perhaps insignificant in themselves, but they all show how great the need is for some such scheme as Dr. Bennett pleads for, and yet we get no nearer the solution of our difficulties, owing, I fear, to the fact that the majority of us are too lazy or too indifferent to move in the matter.

The various friendly societies have invested funds

¹ BRITISH MEDICAL JOURNAL, September 26th, p. 949.

amounting to several millions of pounds, and we are content, apparently, to attend their members—many of whom are tradespeople and farmers—for 4s. a year, juveniles 2s. a year, I believe. Isn't it absurd?—I am, etc.,

September 27th.

F. S.

ANOTHER UNDERPAID MUNICIPAL APPOINTMENT.

SIR,—I have no wish to enter into any public controversy on the subject of the payment of municipal officials in Burnley, but I should like to say—as it may modify any editorial comments you might think of making—that the letter of the Chairman of the Burnley Division is distinctly misleading; in fact, it was dated two days before the meeting of the Branch.

The advertisement is for an assistant medical officer of health, and that is what is wanted. That he will have to assist in the schools—a medical officer of health who is also medical officer to the Education Authority—goes without saying, but he will not be the medical officer to the schools.

The Education Committee have taken the public health view of this question of inspection—a course which I strongly recommended—and decided that as medical officer of health I ought not merely to supervise, but take control of the work, and for that reason appointed me its medical officer. At my request to the Corporation as its medical officer of health, it was decided to appoint one assistant, not at all regarding this as an end, but as a beginning of the matter, for neither the Corporation nor the Education Authority for one moment consider that the medical officer of health and an assistant are alone going to carry out in Burnley the instructions of the Board of Education as contained in the Memorandum of November, 1907.

This course of action I have advised, and the authorities have decided to adopt it, as they think that an efficient scheme can best be formulated in this way, and it does not bind them to any definite plan as regards staff, without possessing a further knowledge of the working of the new Education Act.—I am, etc.,

THOMAS HOLT,

Medical Officer of Health, and Medical Officer
to the Education Authority.

Burnley, Sept. 23rd.

THE REPORT OF THE ROYAL COMMISSION ON THE FEEBLE-MINDED.

SIR,—Practical suggestions for carrying out the recommendations of the Royal Commission on the Care and Control of the Feeble-minded will doubtless be discussed in due time, but the value of Dr. James Erskine's letter in the discussion is *nil*. He has made the subject a thin pretext for an attack on me and my work. Let this be my reply: Four or five years ago Dr. Erskine started a campaign against me by letters (unsigned) to some of the Glasgow newspapers. Nearly four years ago an anonymous pamphlet directed against me was circulated amongst my friends, both personal and professional. I have succeeded in tracing authorship and publication of that document to Dr. Erskine. Not long after this Dr. Erskine secured a seat in the parish council, and since December he has been chairman of the Hospitals Committee. He has thus had abundant opportunity for harassing me in the discharge of my duty, and he has openly avowed his intention of driving me from the service of the council.

The BRITISH MEDICAL JOURNAL is the last place in which I should have looked for the spectacle of one medical man making a scandalous attack on another. To be attacked in the lay press is annoying, but it is one of the penalties of an official position. When, however, it comes to the medical press it is past endurance, though there is at least this consolation, that the injured party can retaliate, whereas he must hold his peace so far as the lay press is concerned.

I have not replied to any of the statements in Dr. Erskine's letter, though the impudence of some of them makes reticence difficult. But my work in lunacy administration is well enough known to the medical profession, and requires no apology. My object in writing is to protest against the statements made and the attempt to make a catspaw of the medical press.—I am, etc.,

Glasgow, Sept. 2nd.

J. CARSWELL.