

small-pox in the BRITISH MEDICAL JOURNAL of June 6th must be struck by the statements which he makes. While not prepared to admit that half of the deaths in the late epidemic in London were due to secondary suppurative processes, and therefore preventable, still I think that the subject is of sufficient importance to demand a thorough investigation by competent authorities in this country. In London we have plenty of material on which to test the accuracy or otherwise of his statements, and I would suggest to the Metropolitan Asylums Board that it might make use of its valuable opportunities by setting apart a portion of its small-pox hospitals to give the red-light treatment a trial. It could be left to the medical superintendents to choose suitable cases, when the value of this treatment could be compared side by side with the ordinary methods.—I am, etc.,

Bermondsey, June 8th.

R. K. BROWN, M.D.,
Medical Officer of Health.

THE SO-CALLED ANTHRACOSIS AND PHTHISIS IN COAL MINERS.

SIR,—I read with much interest Dr. Trotter's paper on Anthracosis in the BRITISH MEDICAL JOURNAL for May 23rd, p. 1197, and would remind him that many of the points in his paper have been known for several years.

Dr. Andrew Smart, of Edinburgh, in a clinical lecture in the Edinburgh Royal Infirmary in 1892, pointed out that coal mining is a harmless occupation, provided the miner works amongst pure coal. Also that if a coal miner has phthisis the disease is not caused by his occupation, but that he has a predisposition thereto. He thought that pure coal dust is not only harmless, but has a protective influence. He also observed that impurities in the coal may cause disease, making special mention of iron.—I am etc.,

Newcastle-on-Tyne, June 2nd.

W. T. HALL.

THE EVOLUTION OF THE VOLUNTEER MEDICAL SERVICE.

SIR,—The letters published in the BRITISH MEDICAL JOURNAL from Surgeon-General Evatt and Brigade-Surgeon-Lieutenant-Colonel Giles are interesting to all volunteer medical officers, and the opinions expressed therein will, I think, be accepted as the views of all those who have studied the question.

There is no doubt it is confusing to have bearer companies and field hospitals, as well as R.A.M.C.(Vol.), and that it would be better to call them all R.A.M.C.(Vol.), and to "ear-mark" them for service with the brigade in whose district they were located. If, however, the battalions were not brigaded together for camp, there might be a difficulty in the matter.

But it is with regard to the regimental medical officers that I venture to express an opinion. General Evatt recommends that these should be gazetted to a R.A.M.C.(Vol.) unit, and then be attached to the battalion with which they wish to serve. Speaking for myself, I have never felt the want of what is termed "substantive army rank;" and although many appear to be much concerned in the matter, I fail to see how a "surgeon-captain" differs from a "captain" R.A.M.C.

Then the question of uniform comes in. Is it not better for the medical officer to wear the same uniform as the other officers in his battalion? Would it not look odd to see a medical officer in one pattern of uniform and the stretcher bearers of the battalion to which he is attached in an entirely different one? Would the stretcher bearers not be inclined to regard such a medical officer as an outsider?

I imagine the absence of any mention of this difficulty in the correspondence shows which way the wind blows and that regimental stretcher bearers are regarded as unnecessary and will be abolished. I acknowledge that in many battalions they are already conspicuous by their absence or by the paucity of their numbers, but this is the fault of the regimental medical officers and can easily be remedied.

In a paper published in the BRITISH MEDICAL JOURNAL, October 4th, 1902, I have gone fully into the question and advocated the special enlistment of men as stretcher bearers. I am gratified to say that the result has been that during the annual camp this year we had a detachment of over twenty men doing special duty in the battalion hospital tent and always parading as a separate unit. They learn also the use of the rifle and do the necessary shooting, thus earning the capitulation grant like all the other men. At home they take part in all the parades of the local company and partake in its

esprit de corps. Yet they are always ready to parade as an ambulance section if wanted.

I regard the regimental stretcher bearers as a most important part of each battalion, and should be very sorry to see them abolished and their duties taken over by the R.A.M.C. (Vol.) If the authorities would continue to grant privilege to stretcher bearers and allow a stripe to be given to the best men on the recommendation of the medical officer we should seldom see a battalion with no stretcher bearers or perhaps a single squad. The permission to count lectures and stretcher drills in lieu of other drills is a most acceptable concession and no difficulty ought now to be experienced in procuring a full complement of men.—I am, etc.,

Folkestone, June 6th.

A. E. LARKING,
Surgeon-Captain.

HOSPITAL ACCOMMODATION ON MAIL STEAMERS.

SIR,—As I have had some experience at sea in the capacity of ship's surgeon in days gone by, I can heartily sympathize with and support the views advanced by Major Buchanan, I.M.S., in his letter.¹ Probably you will find on many steamers that there is a "sick bay"; but is this accommodation adequate, or is it always available at a moment's notice for the reception of a patient? It seems to me that deck tents or shelters, with double walls and double roofs, might often be the most suitable form of accommodation, especially in the tropics. The isolation of cases of infectious disease is a matter of primary importance on board ship.—I am, etc.,

Glasgow, June 6th.

JAMES W. ALLAN, M.B., C.M.

POST OFFICE AND GOVERNMENT APPOINTMENTS.

SIR,—The haphazard way Post Office and other Government appointments are made is not confined to England. In Scotland a similar procedure exists; and that such should be the case is neither for the public welfare nor for the upholding of the moral tone of our profession. Appointments seem to be made without any reasonable inquiry being instituted as to the fitness of the applicant either morally or professionally.

At every meeting of the General Medical Council men are arraigned for doing unprofessional actions, yet the Post Office and other Government authorities wink at things that sail near those actions. I am cognizant of a case where the Post Office surgeon runs a medical aid society and has a canvasser constantly at work. In this advertising appears in its worst form. No man doing such a thing or being connected with such a society could be admitted a member of the British Medical Association in Scotland, yet he is good enough to attend Post Office officials.

The question has a wider scope than the mere professional one. It is a most serious one for the public, and well worthy the attention of any member of Parliament having the public interests at heart.

It is scandalous the way appointments have been made during the last few years. The profession and the public are alike indebted to those who have so clearly exposed the system in the BRITISH MEDICAL JOURNAL, and we may just trust they will not rest until the system has been amended.—I am, etc.,

May 31st.

ZETA.

SIR,—The matter of the Post Office appointments to Fulham should undoubtedly be brought before the Postmaster-General, as Dr. Alderson suggests. The question is, Who is to do it most effectively? It is not the business of the General Medical Council, for it concerns neither education nor conduct. Nor, I think, of the Association. But for the last few weeks we in London have been electing a Branch Council, the duties of which are apparently nil. We are in want of such a representation to deal with this and similar matters arising out of local circumstances, such as the nepotism and favouritism in appointments under the patronage of the Boroughs and the Guardians; the insolence of magistrates when lunacy certificates have to be signed, and many questions of principle, such as will occur to every one. The Branch Council will have at its back the bulk of the profession in the metropolis. The abuses of patronage are due less to the innate corruptness of the corporate life as to the ignorance and indifference of those who happen to control it. A reasonable body of men would be always listened to and suggestions could be made which in time would remedy abuses which press hardly upon some men undeservedly.—I am, etc.,

May 10th.

G. C. C.