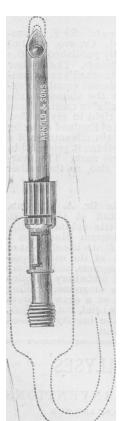
TRITICUMINA FOOD.

WE have received from Messrs. Meaby and Co., of Reading, and 7, St. Paul's Churchyard, E.C., some samples of "triticumina" food for examination. The food is stated to be a malt food prepared by malting wheat under specially ascertained conditions, and it is, therefore, claimed to be more suitable for use as a digestible food than ordinary farinaceous preparations. The results of our analyses show that the wheat has been acted upon by a malting process, and that the food contains about twice as much soluble carbohydrates as ordinary wheaten flours. The food is entirely free from adulterants or makeweights, and possesses a pleasant maltike flavour. We have no doubt that it will be found useful and reliable.

PHOSPHANE OR CHEMICAL FOOD BISCUITS. We have examined samples of the "chemical food" biscuits prepared by Mr. J. D. Marshall, of 5, Pimlico Road. It is claimed that the biscuits afford a reliable and palatable mode of taking Parrish's chemical food, the equivalent of about a teaspoonful of this preparation being stated to be present in each biscuit. The results of our analyses show that the statements made are justifiable and substantially accurate in so far composition is concerned. The biscuits are made with oatmeal; they are devoid of the taste of the iron compound, are free from adulteration, and are very palatable.



IMPROVED OVARIOTOMY TROCAR.

THE trocar consists of two tubes; the outer carries a pen-shaped lance, and the inner is round at the point, with a large lateral opening. By a bayonet joint the instrument is opened and shut. The orifice and joint are en-closed in an india-rubber case, which is continuous with the discharge tube. The case is securely fixed by slipping the end over a metal block and then compressing it with a ring attached to the trocar. It has no claws for holding the cyst. The instrument can always be kept from slipping out of position by the hand of the operator. Sometimes I use my left fore-finger and thumb for securing the cyst until the puncture has been withdrawn well out of the abdominal cavity. All the movements within the case are done by the hand un-assisted by the eye, and they are very easily performed. By the sliding action of the piston the point can be exposed or protected, and by slight lateral movements the trocar can be alternately opened, half opened, or shut. The air-tight india-rubber cover prevents leaking around the joint during the evacuation of the fluid, and this is a safeguard of considerable value. The trocar has been very neatly made for me in two large sizes by Messrs. Arnold and Sons, of West Smithfield.

J. WARD COUSINS,
Senior Surgeon to the Royal Portsmouth
Hospital and the Portsmouth and
South Hants Eye and Ear
Infirmary.

COMBINED NURSING CHART AND DIET TABLE. We have received from Messrs. Benson and Co., of Darlington Street, Wigan, a combined nursing chart and diet table, designed by Dr. R. Prosser White. The one side of the sheet is occupied by the nursing report, and contains spaces for the entry of notes of the hours, temperature, pulse, respiration, sleep, bowels, and urine; the other by spaces for notes of hours at which food and medicine are given. The chart is likely to be of use in the management of serious cases in private practice. (1,000, 25s.; 100, 3s. 6d.; 50, 2s.)

INQUIRY INTO THE SANITARY CONDITION OF LONDON THEATRES.

[BY OUR SPECIAL COMMISSIONER.]

ORIGIN OF THE INQUIRY.

From time to time the public mind has been excited by the illness of some leading member of a theatrical company, and comments have been made on the insanitary conditions which are believed to exist in our theatres, London and provincial, to a greater or less exient. Hitherto no systematic inspection of these places of amusement has been undertaken to discover what the 'conditions really are with a view to having them remedied. That omission is now being rectified by a careful examination which is being made on behalf of this Journal, and already with good effect, as at theatres which have not yet been visited important works of a sanitary nature are being rapidly undertaken. We have, in the first place, to express our thanks to the managers who have placed every facility in our way, and who have themselves been anxious to have explained to them defects either in construction or in management which produced unwholesome conditions in the theatres under their case.

DIFFERENT TYPES OF THEATRES.

The theatres in the metropolis having been built at different periods, and for different purposes, must necessarily be divided into groups if comparisons are to be made. Thus we cannot expect to find similar conditions in a theatre built twenty or forty years ago, in one built recently in an entirely open space, or in one which is to a great extent underground, or buried between other buildings. Again, theatres used for comedy are on a different footing from those having ballets or spectacular displays, and the same applies to music halls or variety theatres. Some theatres have been built originally for one kind of entertainment and have been subsequently used for another, or have been found to have too insufficient accommodation behind the scenes, so that private houses adjoining have had to be acquired, and converted as best they could be to the new requirements. Hence architects of theatres have in many ways been heavily handicapped in their endeavours to deal satisfactorily with the sites at their disposal.

Scope of the Inquiry.

which have been dealt with it

The points which have been dealt with in our examination refer to the ventilation, lighting, and heating of each part of the theatre, the character of the accommodation for those engaged in the buildings, the general cleanliness of rooms, and sanitary appliances, with their suitability for the purposes for which they are required.

In each case care has been taken to ascertain exactly the course and condition of the drains, which have also been tested with the view to discover any defects of jointing,

trapping, or improper ventilation.

The Electric Light and Warming and Ventilation. Before dealing specifically with each theatre, it may be well to draw attention to a question which does not appear to have received the attention it requires. Previous to the introduction of electric lighting architects relied, to a considerable extent, for heating purposes upon the gas used for lighting, both in front and behind the curtain. The advent of the electric light, however, has taken away that heat, and in many theatres no further provision has been made for warming, and complaints of chilly draughts have become common. Stoves have sometimes been placed in the corridors, but the result has not been satisfactory. It is extremely desirable that the ventilation and warming of theatres should be considered together, and that some method be adopted for supplying all parts of the house with pure air, warmed or cooled, as the varying condition of our climate require.

climate require.

In some theatres, while electricity is in general use, the dressing rooms still retain gas as an illuminant, the reason given being that the artistes prefer gas to electric light for "making up;" this, however, is disputed, as at other theatres no difficulty is experienced in this direction. The true reason is, no doubt, that without some other means of warmth being supplied, the dressing rooms would be disagreeably cold.

The presence of a number of gas lights in a small badly ventilated room must necessarily pollute and overheat the air therein to an objectionable degree, rendering the temporary occupants susceptible to chills when they go on the stage or leave the theatre. It would be much better to fit up the electric light in the dressing rooms, and supply them with some suitable warming apparatus.

THE SHAFTESBURY THEATRE.

This house is one of the more recently erected places of amusement, and has generally been well designed and constructed. Surrounded by open streets, it is well situated for obtaining good ventilation, but curiously this has not been taken advantage of. Before the curtain, there is certainly enough ventilation, but the air entering is cold and draughty; behind in the dressing rooms it is very deficient. The windows, which are usually the only means of obtaining fresh air and giving exit to the foul, do not reach the top of the room by from 2 to $2\frac{1}{2}$ feet, and even if they were opened regularly the air in the upper part of the rooms would be unaffected, as is evidenced by the state of the walls and ceilings.

It is necessary that some steps be taken to afford better means of ventilation to these rooms which, with the passages and staircases adjoining, also require cleansing and whitewashing. If the numerous gas lights, with which the ladies' rooms especially are plentifully supplied, are to remain, some means must be provided for the removal of the used-up heated air, such as by placing over each gas burner a cone leading to the outer air by a tube, while proper inlets are made for the ad-

mission of air from without.

In the front of the house the ladies' cloak rooms demand some attention; that for the stalls is a narrow room deficient in ventilation, while occupying the end next the window is a watercloset separated from the rest of the room only by a curtain. The upper circle room is larger, and the watercloset it contains is surrounded by a wooden partition. In the gallery the watercloset is not completely partitioned off from the passage in which it is placed. All the closets in the theatre require more efficient ventilation, and there should be no difficulty in doing this, as they are placed against outside walls. They should be separated from the rooms and passages in which they have been placed by a wall of brick or brick nogging extending from floor to ceiling.

There are no drain pipes inside or under the building, and all waste pipes are trapped and disconnected, but their open ends are in some instances a considerable distance from the gullies, and the water has to find its way along the sunk areas. It would be well to take the pipes nearer the gullies, or better to provide an open channel in the area between them. The drainage was found to be in good condition, and no

emanations therefrom can enter the house.

THE CRITERION THEATRE.

Discussion has sometimes been raised on the advisability of permitting theatres to be built below ground. An examination of the Criterion reveals no grounds of objection to this type of theatre so far as the demands of sanitation are concerned. The dressing rooms, cloak rooms, lavatories, and house generally are well ventilated, both by inlets and outlets. The flush to the waterclosets is very insufficient; the apparatus in use is a form of washout basin with side plug, and the water is laid on direct from the water mains by a half-inch lead pipe. This method should be discontinued at once, and replaced with water-waste preventing cisterns, which would afford the flush these closets require to keep the pan and trap clean. The lavatory basin in the dress circle ladies' cloak room discharges into a lead D trap instead of into a siphon trap. In connection with the ladies' dressing room better ventilation should be provided for the watercloset. The closet set apart for the use of the occupants of the private box is ventilated only by the door which gives access to it; on the day of inspection it was found not to have been used for some time, so that the water had evaporated from the trap, and foul smells were given off when the plug was pulled up. This is a most unsuitable place for a watercloset, and it should be at once

The watercloset for the staff is of the long hopper variety, the pan cracked and dirty, and the trap had been placed about 18

inches below the soil pan. This should be remedied by substituting a short hopper pan with a good flush of water, which is also required for the urinal adjoining. An old bell trap, in very foul condition, was also found here; proper gulley traps should be fitted in connection with the urinal. In all other respects the sanitary arrangements were found satisfactory.

IRISH MEDICAL SCHOOLS' AND GRADUATES' ASSOCIATION.

The annual meeting of this Association was held on St. Patrick's Day, March 17th, at the rooms of the Medical Society. The chair was taken by Sir Thomas Crawford, K.C.B. Special interest attached to the occasion, as the Association was honoured with the presence of Professor Virchow, of Berlin, who had responded to the desire of the Council to

elect him as an honorary member.

Sir Thomas Crawford said the honour of introducing Professor Virchow to the Society had unexpectedly fallen upon himself. Dr. Virchow had already received a warm and hearty reception from the members of the profession in London; but, although they were a smaller body, in no portion of the medical society of London could he be more warmly appreciated or more heartily esteemed than he was in the Irish Graduates' Association. Addressing Professor Virchow, Sir Thomas said he had great pleasure in being enabled to enrol his name as an honorary member of the Association.

Professor Virchow expressed his gratification at meeting such an honoured body of graduates from the Green Isle. It had long been his wish to visit that island, but it had been hitherto impossible for him to accept the invitations he had received from Dublin. He hoped they would accept his hearty thanks for the reception they had accorded him. He spoke of the esteem with which the degrees conferred by Trinity College were regarded in Germany, and of the high reputation borne by the Irish medical schools. The professor then inscribed his name in the Roll of Members.

The CHAIRMAN said the Association had also had the privilege of enrolling Sir James Paget as one of its honorary members. Sir James was not an Irish graduate in the Irish sense of the term, but he was a graduate of every college and university which respected itself, and, like Professor Virchow, he

enjoyed the honour of the world at large.

Professor Virchow then left amidst renewed demonstrations

of applause.

Dr. Cagney (Honorary Secretary) read the sixteenth annual report, which stated that the present total strength of the Association was 701. The exclusion of Irish and Scotch diplomates from honorary appointments on the staff of cer-The exclusion of Irish and Scotch tain English hospitals was in opposition to the interests of those institutions, whilst the publication of this exclusion by advertisements was an affront to men who otherwise would not be affected by it, and tended to injure them socially and professionally. The monopoly was maintained against the express desire of the entire profession, as shown by the resolutions of three general meetings of the British Medical Association. Each year something had been done to procure its abolition, and the past year had been particularly eventful. The report then referred to the case of the Hastings and East Sussex Hospital, where, an attempt being made to induce the governors to adopt a liberal policy, they declined to do so, being influenced in their refusal by misleading state-ments, made recklessly and in ignorance, but with a certain show of responsibility. These statements reflected so seriously upon the character of the Irish schools and upon the status of Irish practitioners that the Council deemed it imperative to contradict them. The whole question was ventilated in the local press, and a meeting of the governors was held on May 30th, when the obnoxious rule was repealed by a majority of 78 to 33. The success of this enterprise was largely due to the energy and personal influence of Dr. Heath, the President-elect of the Association. An attempt had also been made to induce the medical authorities of the chief London hospitals to reconsider their policy, and the Council was not without hope that they might in time come to hold the more liberal view which experience had shown to be that generally taken by the charitable public whom they re-