

reasonableness of the fees of the National Deposit Friendly Society, and yet we quietly submit to the system of sweating the medical profession which exists all over England. As a country doctor of eight years' experience, with a large club practice, I feel sure no system will ever be found satisfactory alike to doctor and patient where the former receives a fixed annual sum independent of the work done, even though it be 6s. or more. A doctor's life is of such a harassing nature that it is absolutely necessary, in my opinion, that he should be paid for work done on some such principle as that adopted by the National Deposit Friendly Society. This is all the more necessary now since, owing to the frequent epidemics of influenza, the club doctor's work is increased tenfold. For example, during the recent epidemic, in January alone I dispensed, I should think, nearly a thousand bottles of medicine, for which I did not receive an extra penny (that is, practically gave them away), and this in addition to the numerous visits which had to be made, and of course my experience was by no means singular. If this is not sweating, what is? The interests of the patient, quite apart from those of the doctor, demand a change. It is idle to pretend that we do our work properly: we do not; we cannot; and yet I am sorry to say I believe there are many who will not admit this unpleasant truth. It may be said that there are many of the poorer people (labourers, for example) who could not afford to pay an annual contribution sufficient to defray the cost of the fees above mentioned. This difficulty might easily be got over by the richer branches of the big friendly societies helping their poorer brethren, and in this connection we must remember that there are thousands of members who could easily afford to pay much more. I feel sure the friendly societies will not consent to pay us for work done unless under great pressure. They have been in the habit of sweating us for so long that they are not likely now to give it up. For this reason I think a Conciliation Board is not likely to do much good. There ought to be a minimum fee for club patients fixed, if possible, by the General Medical Council, and any doctor taking less should be considered guilty of infamous conduct and punished accordingly. For infamous conduct from a professional point of view it certainly would be did he take less, whatever the public might think of it.

ADDRESS REQUIRED.

DR. HUGH WOOLFE (Secretary General Secretary) writes: The Secretary of the London and Counties Medical Protection Society, 12, New Court, Lincoln's Inn, W.C., would be obliged if any reader can furnish him with the present address of Mr. W. K. Willis, bonesetter, recently practising at Tylorstown, South Wales.

EMPLOYMENT OF UNQUALIFIED ASSISTANTS.

FAIR PLAY writes: I am in practice in North Wales, but find to my dismay that there are several medical practitioners in the locality who continue to employ unqualified persons as assistants (in one case two are employed). Such persons visit, treat, and vaccinate in the district where they are known as Dr. So-and-So. I am fully aware that if such cases were brought before the General Medical Council and substantiated by statutory declaration the complaints would at once be investigated; but this would lead undoubtedly to the erasure of the names of the medical practitioners from the Register, and the full penalty would be enforced, which is more severe than I should wish.

There is no difficulty now in obtaining qualified assistants, but we (the qualified ones) expect a reasonable remuneration, and if, as it is so often stated, we do less work, it is done conscientiously. Is there no likelihood of the General Medical Council issuing a "final notice," or carrying out the laws they make?

I should be glad of your advice.

** We are not sure that we understand our correspondent's point. It is true that the only punishment which the General Medical Council can inflict is erasure from the Register, but it has frequently, in cases in which the charge has been proved, admonished the offender and suspended judgment, to afford him an opportunity to reconsider his position.

THE TREATMENT OF DIPHTHERIA.

DR. A. JEFFERIS TURNER (Brisbane) asks us to publish the following corrected form of the table in his paper on the Treatment of Diphtheria, published in the BRITISH MEDICAL JOURNAL of December 30th, 1899, p. 1789, col. 2:

Mortality of all Cases of Diphtheria at each Year of Life treated in the Hospital for Sick Children, Brisbane, before and after the Introduction of Antitoxin.

Age Last Birthday.	Preantitoxin Period.			Antitoxin Period.		
	Cases.	Deaths.	Mortality.	Cases.	Deaths.	Mortality.
			Per Cent.			Per Cent.
Under 1 year...	11	9	81.8	7	2	28.6
1 year ...	44	32	72.7	35	10	28.6
2 years ...	56	27	48.2	48	10	20.8
3 " ...	44	19	43.2	44	6	13.6
4 " ...	53	14	26.4	47	3	6.4
5 " ...	38	9	23.7	54	4	7.4
6 " ...	23	10	43.5	42	4	9.5
7 " ...	16	5	31.2	19	1	5.3
8 " ...	6	1	16.7	6	—	—
9 " ...	7	—	—	5	—	—
10 " ...	—	—	—	2	—	—
11 " ...	1	1	100	—	—	—
12 " ...	3	—	—	—	—	—
13 " ...	1	1	100	—	—	—
Total ...	303	128	42.2	317	40	12.6

TREATMENT OF ANAL ULCER.

L.R.C.P.L. writes: Ulcer of the anus and rectum may be speedily and painlessly cured, without using the knife or caustics. Let the patient lie in bed during six or seven days, taking a low diet, and preventing all evacuation by the bowels. On the seventh day give an aperient dose, say of castor oil, to be followed in a short interval with a softening enema to promote defecation. This will be quite painless, as by this time all trace of ulceration will be gone.

SODIUM SALICYLATE POISONING.

DR. A. C. BARRON, (Dailly, Ayrshire) sends us a case of poisoning with salicylate of soda in a patient suffering from acute pleurisy, and closely resembling in its symptoms that recorded by Dr. Ainslie Scott, in the BRITISH MEDICAL JOURNAL of February 3rd, 1900. The man, who was a healthy ploughman, contracted pleurisy after exposure in a ploughing match. He was given 3 drachms of the drug in the course of three days; he became noisy and restless, developing hallucinations of sight and hearing. He was with difficulty kept in bed; he imagined that pins were being thrust into him, and that bees were buzzing within his head. With the fall in his temperature, and under the exhibition of sedatives, the untoward symptoms passed off.

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BOOKS, ETC., RECEIVED.

Victor von Richter's Organic Chemistry, or Chemistry of the Carbon Compounds. Edited by Professor R. Anschütz. Authorized Translation by Professor E. F. Smith. Third Edition. Vol. II. London: Kegan Paul, Trench, Trübner, and Co. 1900. 15s.
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Das Weib in seiner geschlechtlichen Eigenart. Von Dr. Max Runge. Vierte Auflage. Berlin: J. Springer. and Glasgow: F. Bauermeister. 1900. 1s. 3d.
Die Neurologie des Auges. Von Dr. H. Wilbrand and Dr. A. Saenger. Erster Band (II Abtheilung). Wiesbaden: J. F. Bergmann; and Glasgow: F. Bauermeister. 1900. 8s.
Das Sarkom des Auges. Von Dr. B. P. Kerschbaumer. Wiesbaden: J. F. Bergmann; and Glasgow: F. Bauermeister. 1900. 16s.
Pocket Guide to Paris. London: A. Nion. 2s. 6d.
Diphtheria. By W. E. Smith, M.D., D.Sc., F.R.S.E. London: Baillière, Tindall, and Cox. 1900. 6s.
Lessons in Elementary Physiology. By T. H. Huxley, LL.D., F.R.S. Fifth Edition. London: Macmillan and Co. 1900. 4s. 6d.
Mock-Nurses of the Latest Fashion A.D. 1900. By F. J. Gant, F.R.C.S. London: Baillière, Tindall, and Cox. 1900. 3s. 6d.
Bubonic Plague. By Dr. J. V. Montenegro. Authorized Translation by W. Munro, M.D. London: Baillière, Tindall, and Cox. 1900. 3s. 6d.
Atlas und Grundriss der Lehre vom Geburtsakt und der operativen Geburtshilfe. Von Dr. O. Schaeffer. Munich: J. F. G. Hermann. 1900. 10s.
Die Leukämie als Protozoeninfektion. Von Dr. M. Löwit. Wiesbaden: J. F. Bergmann; and Glasgow: F. Bauermeister. 1900. 14s. 9d.
Über Missbildungen der menschlichen Gliedmassen und ihre Entstehungsweise. Von Dr. F. Klaussner. Wiesbaden: J. F. Bergmann. 1900. 8s.
Les Sanatoria Traitement et Prophylaxie de la Phthisie Pulmonaire. Par Dr. S. A. Knopf. Deuxième Edition. Paris: G. Carré et C. Naud. 1900. F. 22.

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