help to bring victory to our cause in this war, few, I think, dare to object to its use, but the striking example of Russia, under what I imagine are even more adverse and

trying climatic conditions, should surely give us pause. In the *Illustrated London News* for February 13th (p. 206) is a photograph of a Russian A.S.C. detachment beneath which is written "With the army whose field kitchens carry hot soup to the firing line." Is it certain that in this metter was not taking a networked stop in that in this matter we are not taking a retrograde step in serving out rum whilst failing to give hot liquid food, the value of which is beyond question?—I am, etc.,

C. KILLICK MILLARD,
Medical Officer of Health.

Leicester, March 21st.

SIR,-Dr. Lyon Smith complains that statements he made in another journal have not been refuted by myself or "any other antialcohol crusader." I have now read

those statements, but they carry us no further.

He refers to Professor Besredka's paper on anaphylaxis produced by subcutaneous injections of serum toxin, and says the condition resembles death from septic pneumonia. I do not agree that these conditions are clinically parallel, but, letting that pass, it is extraordinary that any one should suggest the usage of alcohol based on Protessor Propositive and the state of the state

Besredka's work.

Reference to his original paper shows that he tried the old experiment of giving a narcotic before injecting a poison which acts on the nervous system, and he describes two such experiments. In the one he found, as others found long ago in investigating septic fever, that deep anaesthesia with ether inhibited the so-called nerve shock of anaphylaxis. In the second experiment he made a guinea-pig dead drunk with alcohol, and when it woke up he found that injection of serum produced no anaphylaxis. The injection of the toxin, however, had to be made within twenty-four hours. This is not unnatural, as the guinea-pig would have got over its alcoholic debauch to a

large extent in a couple of days.

According to these experiments, then, our troops would have to get dead drunk with rum every night to profit by Dr. Lyon Smith's teaching of the prophylactic value of alcohol. He positively quotes septic pneumonia! Surely if any clinical fact is well ascertained, it is that the resistance of the alcohol taker to any infection causing pneumonia is not so good as that of a total abstainer. Perhaps Dr. Lyon Smith has some facts—indeed, lower down he hints he has—which would traverse this universally accepted position. If so, I trust he will publish them in full detail, and then we can examine them.

The same criticism applies to his own experiments, of which he kindly informed me some time ago. When he which he kindly informed me some time ago. When he publishes them in full detail we shall be able to consider them also. Further, as I am collecting literature on the very point, I trust he will give us the reference for his statement that he has "good evidence to show that colossal doses of whisky taken at once may neutralize an otherwise fatal amount of snake venom."

Finally, he attacks my "logic." He does so by employing the method known as suggestio falsi. Without the slightest explanation that half the assertions are his own, he puts them forward as mine and so tries to

his own, he puts them forward as mine, and so tries to convict me of an absurd deduction.—I am, etc.,

London. W.. March 27th.

Victor Horsley.

London, W., March 27th.

\* We cannot continue this correspondence.

## COLOUR VISION THEORIES.

SIR,—I have to thank Dr. Lynch very heartily not only for his kind remarks, but for his determined efforts that the true facts of colour vision should be widely known. He has shown in his admirable *Psychology* how inconsistent two hypotheses, each supposed to support the same theory, may be.

The theory given by Mr. Greenwood is not the Young-Helmholtz theory, but an interpolation in the second edition of Helmholtz, edited by König, and is not to be found either in the first or third editions. I have heard stated very strongly that it does not represent the views of Helmholtz correctly. The Young Helmholtz theory is given quite accurately in the textbooks of our leading physiologists, as, for instance, those of Starling, Halliburton, and Waller.

Mr. Percival first very unfairly charged me with not replying, though I was not present when he read his

paper, and I immediately sent an explanation to the Ophthalmoscope. This was followed by a letter in which he stated that he was not aware that any physicist had written on the Benham top, thus showing that he did not know of the work of Bidwell and others. He has not given a single fact against my theory, but he has made many dogmatic assertions. I call upon him to substantiate any one of the statements made in his last letter, or to

apologize in his next.

The references to Bidwell on the Benham top are as The references to blowen on the bennam top are as follows: "In every case when the spectroscope showed that the glass transmitted red light, the tinfoil strip became red, but never otherwise" (*Proceedings*, Royal Society, vol. lx, p. 372). "Though the image of the needle was colourless when the patch was illuminated by the greatest red it appeared red the greenish yellow rays of the spectrum, it appeared red when the same hue was formed by combining red and green rays" (Ibid., vol. lxviii, p. 280). Bidwell states that the red border can be seen with spectral light up to  $\lambda 5740 - \lambda 5860$ , though in this case it is feeble (Ibid., vol. lxviii, p. 278).—I am, etc.,

London, N.W., March 27th.

F. W. EDRIDGE-GREEN.

PETROLEUM AS AN HABITUAL LAXATIVE. Sir,—It is to be hoped that Dr. Hayes Newington's timely criticism of those who have conjured up the cancer bogey in regard to liquid paraffin will be carefully thought upon by your readers. It would be a thousand pities if the benefits of this valuable remedy were to be denied our patients without some very weighty reason. Taking, for example, the large army of sufferers from neurasthenic and psychasthenic conditions, liquid paraffin offers the most suitable means of combating the habitual constipation so prevalent in these disorders. Whatever be the pathological basis of the common neuroses and psychoneuroses, there can be no doubt that the attainment of a clean colon is an essential part of successful treatment; and, speaking from a not inconsiderable experience, I have found the preparations of liquid paraffin a most valuable adjunct in the purifying process.—I am, etc.,

EDWIN L. ASH, M.D.

## WASTE AND OVER-EATING.

Sir,—Dr. James Oliver, in your issue of February 27th, appears to have taken some of the assertions made in your

helpful leading article of January 30th too literally.

For example, he quarrels with the following statements: "The cheapest American cheese is as nutritive as Stilton or Roquefort"; "the herring is as nourishing as salmon."

Strange to say, while he condemns certain American cheeses because they contain less fat than the other cheeses you mentioned, he disparages the herring because there is more fat in it than in salmon.

Seeing that most foodstuffs contain more than one of the cardinal elements of diet, and that these elements are present in very different proportions, it is no doubt difficult or impossible to estimate their comparative nutritiveness or food value. Their respective food values in the matter of, say, protein element alone may be compared, but it is difficult or impossible to take account of their nutritiveness with respect to all the necessary elements of

If for some reasons it were desirable to make an attempt at estimating the comparative food value of different kinds of stuffs, the proportion of waste matter (including water) present might be taken as a criterion, the nutritiveness being regarded as being in inverse proportion to the amount of such waste matter; or, of course, the number of calories available might be estimated. These methods, after all, would perhaps only give us the theoretical relative food values, for as Dr. Oliver suggests, the question of digestibility, assimilability, absence of irritating properties, etc.. might have to be taken into consideration. We may properly ask, however, whether these latter considerations should be taken into account in the case of persons with normal digestions, with which class, I take it, we are chiefly concerned in this connexion.

Dr. Oliver's principal grievance, however, seems to be based on these considerations (of digestibility, etc.), and he acutely resents your statement that "margarine is as nourishing as butter." He compares certain foreign and vegetable fats (such as palm oil, peanut oil, or cottonseed oil) very unfavourably with milk fat. I, for one, would be