

## Ireland.

THE Central Babies' Clubs' Committee, an organization working under the Women's National Health Association, has forwarded a resolution to the Local Government Board pointing out that the mortality among nurse children in Dublin is exceedingly high, and asking that persons desiring to take children to nurse should be compelled to register.

The Rathdown Board of Guardians has instructed its solicitor to apply for a mandamus against the Local Government Board, which has refused to sanction the appointment of a temporary medical officer of military age.

The epidemic of measles, which exists in some parts of England, prevails to so serious an extent in Dublin that nearly all the infants' schools have been closed, in accordance with the request of Sir Charles Cameron, M.O.H.

### THE IRISH AUTOMOBILE CLUB AND WOUNDED SOLDIERS.

The report of the Irish Automobile Club's Ambulance Transport Service states that it now consists of fourteen ambulances carrying fifty-six regulation army pattern stretchers, and six ambulances carrying twelve regulation army pattern stretchers, or a total carrying capacity of sixty-eight stretchers. The decision of the military authorities to use only the regulation stretchers for unloading hospital ships had rendered it impossible to continue to make use of vans kindly lent by Dublin traders, as they were too short to take the army pattern stretcher. During the year covered by the report fifteen hospital ships had been met and 3,924 cases transferred to Dublin hospitals. Members and non-members of the club attended with their touring cars on every occasion, and assisted in transporting the sitting-up cases to hospitals. The total number of wounded soldiers carried by the ambulance service for the year was 12,640, exclusive of the rebellion period, and not including men carried in private cars. Having dealt with the work of the association during the rebellion period, the report recorded services in connexion with recruiting for the mechanical transport section of the Army Service Corps, the Wounded Soldiers Reception Committee, and for the provision of comforts and entertainment for soldiers.

## Correspondence.

### FOOD REQUIREMENTS OF CHILDREN.

SIR,—In the admirable series of recommendations on rationing and "how to save food," recently issued by the Controller, there are certain recommendations with regard to the diet of children that appear to call for revision. The recommendations of the Controller are based on the following statement: "Children need plentiful food. A child of 8 needs half as much as a grown-up; a child of 12 three-fifths as much; a girl of 16 needs as much as her mother, and a boy of 16 may eat as much as his father."

I am aware that this represents the teaching of standard textbooks on the subject, though I have never been able to ascertain the exact data on which the original recommendation by Atwater was founded. I venture to think, however, that this teaching is wrong, and is to be deprecated as a guide at the present time. My opinion is based both on practical observation and special investigation. The food requirements of a healthy schoolboy, say of 12 years, can be fairly accurately gauged from observation and a comparison with those of his parents on the same régime. If this test be applied, it can, I think, safely be said that the average boy of 12, in a household of the professional class, eats as much as his father. Corroborative information is obtained from the laboratory standpoint. Some time ago I made a detailed study of the actual amount consumed by healthy children in a series of medical families, every precaution being taken to ascertain the exact amount of food consumed. The ages

of the children ranged from 4 to 6 years. The result showed a daily average of:

Protein	...	...	...	...	71 grams
Fat	...	...	...	...	67
Carbohydrates	...	...	...	...	198
Total calories, 1,725.					..

The supply of protein—the main food element in the dietary of children—consumed by a child of 6 years and under is shown to be greater than that allowed for by the Controller for a boy of 12.

Fully grown subjects may with safety and positive advantage to health accept the standard laid down for the average adult by the Food Controller. It is, however, not advisable to restrict the feeding of children to the extent indicated in the Controller's recommendations. A wise economy in regard to the feeding of children should be looked for in the selection of foodstuffs rather than in a reduction of quantity below the pre-war standard.—I am, etc.,

Edinburgh, March 17th.

CHALMERS WATSON, M.D.

### THE PROPHYLAXIS OF VENEREAL DISEASE.

SIR,—Some of the remarks made by Dr. T. C. Mackenzie and others in the course of the correspondence on this question seem to show that there is still considerable misconception concerning the chief point at issue between the advocates and the opponents of the use of prophylactic applications. The real question is tersely and clearly stated and irrefutably answered by your correspondents, "A Medico-Legal D.P.H." and Mr. Arthur Cooper, in the JOURNAL of March 10th. Dr. Mackenzie, however, erroneously assumes that those who hold it to be the duty of a medical practitioner to spread the knowledge of effectual preventives against venereal infection by all means in his power, are ignoring the value of all other attempts, whether of morally persuasive or coercive nature, to diminish the evils of indiscriminate sexual intercourse. Nothing that I or, as far as I know, any others who have taken part in this correspondence have said justifies this implication. There is, therefore, no point at all in Dr. Mackenzie's suggestion that "if Sir B. Donkin and Mr. Elliot leave alcohol out of their scheme of scientific prophylaxis they will be disappointed in the results." Most people know, whether they be medical or not, that alcohol is a frequent excitant of sexual desire, but the consideration neither of this nor of any other of the many excitants of such desire has any relation to the purely medical question as to the use of a direct preventive known to be effectual.

Dr. Mackenzie asks me whether I still maintain that this "subject is essentially and exclusively medical, and whether I admit the importance of certain social and legislative measures . . . into all of which the moral factor enters." My answer is that the subject, as interpreted by Dr. Mackenzie in this double-barrelled question (which is a good example of the *fallacia plurium interrogationum*) has never been said by me to be a medical question, and that I certainly adhere to my statement that the question of the duty of making known the use of effectual preventives against infection is a purely medical one, and is properly answerable by the medical profession alone, as, indeed, it is now being answered very widely in the affirmative.

To argue against prophylactic measures on the ground that they will not "get rid of venereal infection in a day or a generation" is clearly beside the point. If not duly used, no remedy—prophylactic, palliative, or curative—can be effectual. The only sound argument against any given method of prevention is to prove that when properly used it is not preventive.

Lastly, Dr. Mackenzie attempts to traverse my statement that Dr. Otto May urged that this question of prevention was a purely medical one. I did not say that Dr. Otto May used these particular words. But he said, as reported in the JOURNAL of February 10th, that he "was aware that any popular propaganda on the subject of prophylaxis would meet with a good deal of opposition in many quarters, but, all the same, he thought it ought to be persevered with. The sooner the whole question of morality was divorced from methods of treatment of disease the better. The two aspects—the moral and the medical—must not be confused." Dr. Mackenzie's