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"CHANGING THE DOCTQR."

INQUIRENS.—The incident related by our correspondent is a good illustration of the necessity for medical men to communicate with each other when patients are intending to change from one to the other.

Dr. C. acted quite consistently with ethics in attending for Dr. B., stating his position to the patient, and declining further attendance. It would have been well to have sent a line to Dr. B., saying what he had done. When the patient again sent for Dr. C. he should have declined attending until he was satisfied that Dr. B. had been communicated with and had acquiesced. The difference in the statements of the doctor and the patient more forcibly still points to the desirability of doctors not acting until some mutual explanations have taken place. Patients have a perfect right to change their doctors, but ethical propriety demands that doctors should not allow themselves and others by so acting as not only to maintain the dignity of the profession; but also the friendly relations which should exist amongst professional brethren. brethren.

NOTES, LETTERS, Etc.

ALIQUIS has not enclosed his card.

Dr. W. W. Farnfield (Resident Medical Officer of St. Mary's Day Nursery and Hospital for Sick Children, Plaistow) desires to state that that institution is in no way connected with the Plaistow Maternity Charity and Nurses' Home, Howard Road, Plaistow.

ERRATUM.—In the formula for the stain No. II, given in the abstract of Dr. Richard T, Hewlett's paper on Neisser's diagnostic stain, published in the BRITISH MEDICAL JOURNAL of September 3rd, p. 599, "Two grammes of benzoin" should read "Two grammes of vesuvin."

A DISCLAIMER.

MR. WM. ARMSTRONG, J.P. (Buxton) writes: A most annoying and improper mention of my name having been made in a laudatory article on Buxton and its treatment in Wednesday's Sun, I at once addressed a letter of remonstrance to the editor, and this duly appeared. I find, however, that unfair use is being made of the incident, and I venture to ask you to publish this disclaimer.

An Appeal on Behalf of the Family of the late Dr. Arthur Barlow.

We may recall attention to the appeal made in the British Medical Journal of May 14th, on behalf of the widow of Dr. Arthur Barlow, who died on March roth, at the early age of 37. Owing to ill-health he was prevented from making provision for his widow, who is without any means whatever, and is in exceedingly deficate health by the long strain of nursing her husband and the shock of his sudden death. It is proposed shortly to close the list. Subscriptions will be received by Dr. J. W. Moore, 46, Fitzwilliam Square West, Dublin; Dr. John Barton, 26. Upper Merrion Street, Dublin; Dr. G. J. Gibborn, 80, Ovoca Terrace, University Street, Belfast; Dr. L. H. Ormsby, 22, Merrion Square West, Dublin; Dr. Henry, 2, Lewisham Park, Lewisham, London; and Dr. A. Matson, 619, Holloway Road, London. The following additional su scription has been received on behalf of the fund:

Per Dr. Henry:

S. d.

Dr. Snook, Trinity Road, Weymouth ... 2 0 0

RAPID DILATATION OF THE OS UTERI.

DR. J. J. Ridge (Enfield) writes: I have just had a case of marginal placenta prævia occurring at the eighth month, without pain or warning. Being suddenly summoned without intimation of the nature of the case, I found severe hæmorrhage going on, and the os uteri only, sufficiently open to admit one finger, by which the placenta could be easily felt. I detached as much as I could reach from the lower segment of the uterus, and sent for my "Barnes's bags," but as the hæmorrhage continued, and there was evidently no time to be lost, I tried to dilate with my fingers, and with a little perseverance succeeded in getting first two and then three fingers through, after which the os dilated very quickly indeed, and I soon passed in the whole hand an performed podalic version, the child being born alive. Both mother and child did well, though the former was very blanched and faint. The whole affair was over in about 15 minutes.

A HYPNOTIC SUGGESTION.

BY W. F. C.

When you have done your level best To cure some nervous paroxysm, Don't give it up, or be depressed, The remedy is—hypnotism.

How does it act? Ah, never mind, The unknown claims to be believed. Forces are facts; e'en with the blind Light still is light, though unperceived.

"There are more things in Heaven and earth," You know the rest; nay, understand How some may find potential worth In strokes of an enchanter's wand.

So, when a special hand and brain Work on a special organism, What follows science can't explain, But puts it down to hypnotism.

DUBLIN HEALTH CONGRESS.

Socius writes: 'At the charming garden party given by the Viceroy I observed two persons dressed in ordinary tweeds and "bowler," standing not ten yards away from the Viceroy, and amusing themselves by smoking clay pipes, this, I suppose, to show how they despised mere formalities.

To add to the formality of the control of

To add to the favourable impression we all formed of our sanitary and

medical visitors, another medical gentleman rode up on his bicycle, and came in just as he was, clips on trousers, etc. We frequently provoke the indulgent merriment of our brothers across the Channel by and came in just as he was, clips on trousers, etc. We frequently provoke the indulgent merriment of our brothers across the Channel by our Irish bulls, but I am not without a hope that, at all events, our manners are better than might be gathered from such eccentricities of scientific genius.

manners are better than might be gathered from such eccentricities of scientific genius.

MR. A. W. Senior (Levenshulme, Manchester) writes: In or about the fourth week of many cases of scarlet fever one notices that desquamation is complete, with the exception of the hardened epidermis covering the heels and occasionally other like places. On this account the patients, although perfectly well of themselves, are kept in a state of irksome quarantine, until after trying first one method and then another the refractory skin is removed, and the patient is allowed to mix again with the world at large. A quick way to attain the desired result is as follows: A piece of lint is soaked in cold water and lightly wrung out. This is placed on the obstinate area; over this a larger piece of guttapercha tissue is laid, and a fiannel is bandaged over all. In about twelve hours the epidermis, thoroughly softened, peels away quite easily. If nasal or pharyngeal catarrh be absent there is, in my opinion, no reason why the patient should not be released from isolation at a much earlier date than the six weeks generally necessary. This treatment has yielded excellent results in the few cases on which I have tried it, and I firmly believe that if it were universally adopted it would make a considerable difference in the expenses of those hospitals where there are many patients suffering from scarlatina.

Datients suffering from scarlatina.

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