soft Turkish towelling is also useful, all to be packed in a valise. A few enamelled iron plates, cup and saucer, and other odds and ends that can be packed up in the bedding valise will be useful. A canteen is cumbrous and hard to carry. A small "Etna" for making tea or heating soup will be useful.

As regards clothes let the outfit be as limited as possible: 2 cotton khaki coats, 1 woollen khaki coat, 1 pair cotton khaki trousers, 1 pair woollen khaki trousers, and 1 pair pantaloons of thin Bedford cord, double-seated and strapped with leather inside the knees, 1 pair brown "Elcho" boots, 1 pair of brown shooting boots with spare soles and heels for each, and a pair of canvas shoes; underclothing of light flannel, with a few very light cotton shirts and short drawers. For head dress the regulation helmet must be taken, but a good brown felt broad-brimmed soft hat, with a khaki pugree, should also be carried; this can be folded flat and placed in the valise. A khaki service cap will also be required. For saddlery, a good hunting saddle and bridle, the former with small tree, a pair of wallets, and lots of D's to which to hang havresacks, etc. A small supply of horse clothing should be taken. For arms, of course, the regulation sword with "Sam Browne" belt, and a "Mauser pistol" being far more serviceable than a revolver, as it can be used either as pistol or sporting carbine.

A small supply of compressed soups and a few compressed drugs will be found useful. The smallest amount of "mufti" clothes, and no cloth uniform; the latter could be sent out later if wanted.

I would also strongly advise all officers going out to leave their families behind till matters are settled. Hotels will be found crowded, and other accommodation almost impossible to procure.

I have written this very hurriedly, so may have omitted various points, but I shall be happy to advise any officers of the R.A.M.C. further, either through your columns or privately .-- I am, etc.,

J. B. HAMILTON, Surgeon-General (retired pay), late P.M.O., South Africa. Junior United Service Club, London, S.W., Sept. 27th.

ILLEGAL CERTIFICATES.

SIR,—Being away on my holiday, I did not see until too late for immediate reply the further letter of Mr. Jackson and his friends. The attack they made upon me in their penultimate letter was that in my attitude on the midwifery question at the Stratford meeting I had violated my election pledges. They omitted to tell your readers that I took the precaution of reading my election pledges on the subject to that very meeting, and further that I proved in their presence that my action in regard to the matter had remained un-altered from the time I had taken the subject up long before my election to the General Medical Council.

Having again in my last letter reminded my critics of these facts, I certainly expected that some expressions of regret for aving so seriously misrepresented my position would have appeared in their last communication. I can only suppose pledges to them at Stratford, so they have accidentally forgotten the usual procedures of courtesy, though I note that they begin by oddly saying they "welcome" my letter. They do, however, now admit the unquestionable fact that just before my election in September, 1897, I circulated to every member of the profession my views in full on the midwifery question.

Instead of showing, as they were in honour bound to do, that I have in any way or at any time acted contrarily to that document, they now endeavour to ride off on a different route, and assert wholly unwarrantably that my general approval of one of a brief set of questions addressed to me by Mr. Jackson a few days after he had received my election pledges bound me to the novel policy of "blank negatives" which Mr. Jackson now adopts.

I will deal with this side issue while waiting for Mr. Jackson and his friends to refresh their memories by rereading my election pledges, and for them to candidly and frankly acknowledge to your readers that my present position is precisely what I stated in 1897 in those same election pledges. It is the fact as stated twice over by Dr. Tomlin in the BRITISH

MEDICAL JOURNAL of September 16th, that Mr. Jackson sent me a brief list of suggested reforms which we are all agreed are advisable, as I told him in my reply of October 4th, 1897. Let me, however, remind Dr. Tomlin, who was present at the Stratford meeting, and actually led the attack on me, that he Strattord meeting, and actually led the attack on me, that he did not explain, as he suggests in the BRITISH MEDICAL JOUR-NAL of September 16th, the "cause" of the Stratford meeting to be my reply to Mr. Jackson two years before. On the con-trary, Dr. Tomlin attacked me at Stratford for supporting some Bill which he did not specify. On my challenging him as to which among the numerous Bills on the subject he was referring to I obtained no satisfactory answer. On my sug-gesting that he meant the Bill of the British Medical Associa-tion he acquised tion, he acquiesced.

If he will kindly refresh his memory by the aid of your report of that meeting, he will discover his error in thinking and asserting that Mr. Jackson's letter was the foundation of his attack upon me. The only hint of violation of election his attack upon me. The only hint of violation of election pledges was first made by him and his friends in their penultimate letter a month ago.

Mr. Jackson's question to me in 1897 ran as follows:

"Whilst opposing the registration of midwives will you

support "6. The insertion of a provision in any Act of Parliament for the training or registration of nurses that whereas such nurses have no medical training, their presence in no way relieves those who may be concerned of any responsibility to provide medical attendance, and that by undertaking or pretending to undertake any medical care of any case, or to render medical attendance on any case, any such nurse renders himself or herself responsible in the first degree for any injurious consequences of such interference, or of any delay thereby occasioned, besides any disciplinary consequences for misconduct as a nurse.

"7. The insertion of a provision into any such Act that whereas the successful treatment of patients and their effiwhereas the successful treatment of patients and their en-cient nursing require the teaching, training, and control of nurses by medical men, any Council or other body or bodies to be created for the purpose of regulating such teaching, training, and control consist of registered medical practi-tioners only, and be brought under the authority of the General Medical Council.?"

To this I replied that I was quite willing to support the in-troduction in any Bill (proposed by Mr. Jackson or anybody else) of provision to secure the pre-eminence of medical prac-titioners over nurses, and I am still ready to fulfil that and the second provision respecting the training of such nurses the second provision respecting the training of such nurses through the General Medical Council. Nay, more, while Mr. Jackson has done nothing to push forward the adoption of his own proposals, I have fought for them in the Association and in the Council.

To assert, therefore, that I have not acted up to my general acquiescence in Mr. Jackson's propositions, is like the other assertions of my critics—the outcome of very treacherous memories combined with a serious lack of precise knowledge of the facts.

But Mr. Jackson and his friends having chosen to raise this But Mr. Jackson and his friends naving chosen to raise this new side issue in order to press the adoption of their new cry of "no legislation at all," and their new policy of "blank negatives," must now answer for their own change of front. Mr. Jackson's question begins by saying: "Whilst oppos-ing the registration of midwives," will you support certain alterations in an Act of Parliament for nurses? What does this mean?

this mean? It means, first, to indirectly assume that I opposed the Bill then before the House of Commons for the opposed the Bill then before the House of Commons for the registration of midwives. I certainly did, and do still, and did in my election pledges which Mr. Jackson had before him while writing his questions, so that he knew precisely what my position was. But what means the reference to an Act of Parliament for nurses? This refers really to a Bill which was actually put forward by Dr. Rentoul and the Association of Incorporated Practitioners for the registration of all nurses, midwifery or otherwise. Mr. Jackson has forgotten, I think, when he now boldly and incorrectly charges me with having altered mv views on this

incorrectly charges me with having altered my views on this subject, and when he now says there must be no legislation at all, that he and his Association, of which he was once Pre-sident, stood committed to perhaps the most cumbrous and futile proposals for a Registration of Midwives Bill that were

ever drafted. That Mr. Jackson has perhaps forgotten and certainly changed his policy of two or three years ago does not qualify him for making grave charges of inconsistency against myself, whose opinions have never altered at all.

I observe that the draughtsman of Mr. Jackson's last letter asks when and how I was requested to sign the memorials which were the origin of this correspondence. I have much pleasure in answering this or any other question of major or minor importance. The memorial was brought to my house by Mr. R. B. Anderson for my signature, and after I had signed it he called and took it away. It may perhaps be of assistance to his memory if I remind him that about the same time he visited a colleague of mine for the same purpose.

I further note that my critics who charge me with breaking "election pledges" and with "insincerity" say in their last paragraph that they are not by their letters "attacking" me. Doubtless this is meant sincerely, and I can only suppose that either they have forgotten all that they have said or that this is another triumph of their secretary's draughtsmanship. Personally I feel inclined to recommend to their captain, Mr. Jackson, that he should change his bowler.—I am, etc., Bustington Sent. 24th. VICTOR HORSLEY.

MEDICAL ORGANISATION.

SIR,-I am surprised to find my friend Dr. Brassey Brierley throwing cold water on a scheme which seems to many practitioners likely to meet the wants of the present day. I am a warm admirer of the way in which the Lancashire and Cheshire Branch conduct their voluminous business, but at the same time I humbly submit that it is quite impossible for a Branch with a thousand members to deal in a practical manner with the grievances of the profession. As to Dr. Brierley's recommendation to attend the annual meeting of the Association, I would merely make this remark, that until the Association determines to bring about some drastic reforms in its way of arranging the business at such meetings it is not probable that his recommendation will have much weight with the members generally. As Dr. Brierley is a member of the Council I would recommend him to use his influence in bringing about a practical scheme for the better government of the Association. When he has succeeded in establishing an executive committee of the Council; and when he has succeeded in abolishing the life appointments of non-representative members of the Council, he will be in a better position to offer advice to gentlemen who are doing their best to promote the better organisation of the profession.—I am, etc., Cardiff. Sept. 23rd. T. GARRETT HORDER.

SIR,—The circular issued by Dr. Crawshaw comes at a very opportune moment. The medico-political platform is a very good one and embraces subjects which are burning questions for many of us in the North of England. We are looking for-ward to a conference shortly to be held in the North, when topics of great importance to the profession will be discussed. I hope that in Manchester a similar conference may be held at an early date.

As I have said before, each county should have its medical union for defensive and offensive purposes (by defensive I mean the protection of doctors; by offensive I mean asserting proper rights and rewards, and putting down the unqualified practice of medicine). The building up of a proper confer-ence must begin from below and not from the top. When the county unions are formed then they may be invited to send their delegate to a named conference.

If the British Medical Association is as rich as Dr. Brierley asserts perhaps he could persuade the Council of the Association to make a grant of $f_{10,000}$ towards the furtherance of the above organisations. The Association would not lose, but considerably gain by so doing.-I am, etc.,

Durham, Sept. 26th.

EDWARD JEPSON, President County of Durham Medical Union.

THE INFECTIOUS DISEASE (NOTIFICATION) ACT AND ITS SHORTCOMINGS.

SIR,-Since the passing of the Infectious Disease (Notification) Act more than one difficulty has arisen as to the proper construction of some of its clauses. A point of common contention is whether, when more than one practitioner has been

called to a case notifiable under the Act, each is required to notify to the sanitary authority; and whether in event of every practitioner who so notifying, the authority is bound to pay every practitioner who so notifies. There can be little doubt that the better interpretation of the Act is that the authority is bound to pay every practitioner who notifies a case of in-fectious disease notifiable under the Act, but there is another point which up to the present has not received much atten-tion, namely, as to the legal obligation of a practitioner, who has been called to a person whom he finds dead on arrival, to notify, where from the history of the case it is clear that the cause of death was one of the notifiable diseases. Such a case has occurred to my knowledge, and the practitioner there notified to the sanitary authority, and at the same time pointed out the difficulty to the medical officer of health and to the clerk to the authority. It was decided in this case to pay the usual fee, but that does not settle the legal point. It is clearly of great importance for the protection of the public that such cases should be notified, but strictly speaking the

words of Section III: Every practitioner attending on or called in to visit the patient shall forthwith, on becoming aware that the patient is suffering from infectious disease to which this Act applies, send to the medical officer of health a certificate, etc.

can scarcely be said to apply to a person found dead, whom the practitioner has never seen alive. It is not even competent for him to certify as to the cause of death. In such a case he can only express an opinion before a coroner's jury, and it is their verdict, endorsed by the coroner's certificate, that constitutes the only legal notification as to the cause of death. Some time, however, must elapse before this can be brought to the notice of the sanitary authority, and it is evident that there is the utmost necessity for an early notification. Although the body is usually removed at once to the public mortuary to await the inquest, as the rapidity of the death presupposes virulence of the disease, a prompt disinfec-tion of the premises is urgently required. It does not seem then, as the Act now stands, that a practitioner is under any legal obligation to notify such a case; neither is it clear that a sanitary authority is empowered to pay for such notifica-tions. This is a blot that ought to be remedied when the first opportunity arises of amending the Act. There should be no doubt as to a practitioner's obligations under such circumstances.—I am, etc.,

Hackney Road, N.E., Sept. 24th.

MAJOR GREENWOOD.

ALCOHOL AND ITS RELATION TO HEREDITY.

SIR,-I have read Dr. Reid's address with great interest. Without going into the vexed question of heredity and the transmission of acquired characteristics, I would like to point out what appears to me to be a great oversight in Dr. Reid's evolutionary theories, which entirely vitiate any conclusions which might be drawn from his arguments. I am so thoroughly convinced of the truth of evolution, and that it is of almost universal application, that I think it is highly desirable so important a question should be viewed from the evolutionary standpoint, but I object that Dr. Reid's evolution is not suffi-ciently thorough; he confines himself to physical evolution, and ignores a moral, instinctive, and sentimental one.

I will accept his four propositions: (1) Individuals differ in their liking for alcohol; (2) alcohol is a poison; (3) races, like individuals, differ in their liking for it; (4) those nations who have longest used it crave least for it. This Dr. Reid attributes to the elimination of those who indulge to excess; but he leaves out of consideration the evolution of public opinion. Those nations who have had a long and sad experience of alcohol tend to evolve a public sentiment against its excessive use, just as lower animals evolve an instinctive objection to eating poisonous herbs, the result of experience of their injurious effect.

Thus custom and fashion are quite as potent in preventing the acquired taste, as Dr. Reid's "natural method" is in eliminating the hereditary tendency to excess. The last twenty years has effected a great change in our people, and yet this is much too short a period for elimination to act. Usit not not be a more and continent of continent of continents.

to act. Is it not rather a moral and sentimental evolution pre-

venting acquired taste re-enforcing an hereditary tendency? Dr. Reid says "temperance reform is antagonistic to Nature." Here I disagree. Temperance reform simply tends