

modern sanatorium method of treating phthisis is. I believe I have a good conception, too, of most alternative methods which have been or still are used to combat this disease. Personally I cannot understand how any one who really knows what is comprised in the sanatorium open air method of treatment could possibly fail to appreciate it, even though he saw partial failure or death follow such treatment in many a case. It comprises, according to my ideas, much more than simply "the open window." It has aptly been called "systematized common sense." The skilled supervision, for example, of rest and exercise, which helps to control as far as possible auto-inoculations, is perhaps as important as fresh air. The intelligent patient, whether an advanced consumptive or a slight and early case, learns not only the full value of a due amount of fresh air, but also many rules for his future guidance in maintaining improved or perfectly good health. He learns, too, how he can avoid being in any way a danger to other people.

Whatever disease a man may be suffering from, but perhaps especially in the case of chronic pulmonary tuberculosis, it appeals to me as sensible to send him to school for a period that he may learn as far as he can how Nature intended a man to live. It is easy to abuse the artificialities of modern civilization, but it is not always so easy to teach the wayward, and at times stupid, backslider from a healthy way of living the error of his ways. Surely that which gives the invalid suffering from consumption the best chance is to raise as quickly as possible the general health to its highest possible pitch, and to teach him as quickly as possible how to maintain it there; and my experience has taught me that neither of these things, but especially the former, can be accomplished without the use of "open air." By such means the power of resistance is restored, the best possible chance of arresting the disease given, and lastly, but of equal importance, if arrest is brought about, the best chance is given of keeping the disease arrested long enough to justify the assumption that the disease is cured.

Preventive medicine aims at preventing the human machine from getting out of gear, and curative medicine aims at so helping and controlling natural processes that they bring back to a healthy condition the complicated mechanisms of the human body—mechanisms for the most part still entirely beyond our direct control in spite of recent advances in vaccine treatment, "ergo-therapy," organo-therapeutics, etc. From my own experience I feel convinced that I should have taken far longer than I did to learn what constitute risks to my good health; exactly what my capacities for labour, mental and physical, are; and what requirements my body demands if I had never been under sanatorium treatment. In fact, I would go further, for I believe it is quite possible I should never have learnt much about such things had I not had the advantage of living in a sanatorium for a time, for I should quite possibly have died of phthisis years ago.—I am, etc.,

Mundesley, Aug. 14th.

S. VERE PEARSON.

THE NATURE OF EROSION OF THE CERVIX.

SIR,—In your brief preliminary report of the discussion which followed Professor Gottschalk's lantern demonstration the microscopical appearances of erosions of the cervix, at the annual meeting of the British Medical Association, the following remarkable sentence appears: "It was pointed out to Professor Gottschalk that the term 'erosion' does not to the British gynaecologist imply any adenomatous growth as it seems to do in Germany." If your reporter had used the word "English" instead of "British" I should not feel called on to correct him, but even then it appears that he would be wrong.

I take Drs. Bland-Sutton and Giles's *Gynaecology* as representative of English opinion; I take Drs. Hart and Barbour's *Gynaecology* as representative of Scotland; and, for want of a better, I take my own as representative of Ireland. In the first named I read of "Adenomatous disease (formerly called *erosion*) of the cervical endometrium." In the second named I read, "The raw-looking surface" (of erosions) "is therefore a newly-formed glandular secreting surface, resembling in structure the cervical mucous membrane." In the last named I read, "The altered tissue" (of an erosion) "closely resembles the structure of an adenoma, and consequently the condition is sometimes described as an adenoma of the cervix."

I for one was certainly of opinion that no other view than that contained in these extracts was held by "British" gynaecologists, and I should be very interested to learn who was Professor Gottschalk's instructor. It is a pity that we should appear to be more ignorant than we really are.—I am, etc.

Dublin, Aug. 10th.

HENRY JELLETT.

SURGICAL APPOINTMENTS IN ENGLISH HOSPITALS.

SIR,—Will you kindly insert in your next issue the appended copy of a resolution passed by the Council of the Association of Fellows of the Royal College of Surgeons, Ireland, at the meeting held on August 16th, in reference to an advertisement appearing in your issue of August 13th last, inviting applications for the post of Honorary Assistant Surgeon to the Manchester Royal Infirmary and Dispensary, and specifying that applicants must be Fellows of the Royal College of Surgeons, England?—We are, etc.,

F. G. ADYE-CURRAN,

President.

ANDREW CHARLES,

ROBT. P. McDONNELL,

Honorary Secretaries.

The Association of Fellows of the Royal College of Surgeons in Ireland, Royal College of Surgeons, Dublin, Aug. 17th.

The attention of the Association of Fellows of the Royal College of Surgeons, Ireland, having been drawn to an advertisement of the Manchester Royal Infirmary and Dispensary for an honorary assistant surgeon, where it is stipulated that candidates must be Fellows of the Royal College of Surgeons, England,

This Association hereby protests against such invidious distinctions being drawn between the Irish and English Colleges, inasmuch as the Fellowship of the Irish College is in every way equal to that of the English College, and also that some of the most eminent surgeons in England at the present time are Fellows of the Royal College of Surgeons in Ireland.

MESSAGE IN BERI-BERI: A DISCLAIMER.

SIR,—My attention has been drawn to a paragraph in the *Times* of August 17th concerning the treatment of beri-beri at the Seamen's Hospital, Albert Docks, London, E., with which my name is connected. I wish to state that I have nothing to do with the treatment of cases of beri-beri at the hospital, nor have I heard of Swedish movements and massage being employed in the treatment of beri-beri.—I am, etc.,

London, W., Aug. 17th.

JAMES CANTLIE.

The Services.

ROYAL ARMY MEDICAL CORPS.

EXAMINATION OF MAJORS FOR PROMOTION.

WITH reference to footnote to Appendix XIV. of the King's Regulations, it is notified that the subjects selected for the year 1911 will be as follows:—

Subject 3. (i.)—The Medical History of the German Campaign in South-West Africa. A report on this subject will be found in the numbers of the *Journal of the Royal Army Medical Corps* for August and September, 1910, entitled "A Report on the German Campaign in South-West Africa, 1904-1906." (Summarized from *Sanitäts-Bericht über die Kaiserliche Schutztruppe für Südwestafrika während des Herero und Hottentotenaufstandes vom 1. Januar 1904 bis 31. Mai 1907. Erster Band. Administrativer Teil.*)

Subject 3. (ii.)—The Medical Service of the Austro-Hungarian Army, with special reference to its organization (and that of Voluntary Aid) in time of War. Book recommended: "Handbook of the Medical Services of Foreign Armies, Part III, Austria-Hungary."

A LEA-FRANCIS bicycle which recently came under notice was found to be fitted with aluminium pedals, studded with rubber. They were light and seemed to give a firmer grip than ordinary pedals. The device has been patented. The make of a pedal is a small item, but it is by attention to small details that the Lea-Francis and other high-grade machines have built up their reputations.

UNDER the will of the late Mr. Peter Hubert Desvignes of Weybridge, Guy's Hospital receives a sum of £6,000 and the residue of the estate, which would appear to amount to a further £8,000. Bequests of £500 each are made to the Weybridge Cottage Hospital and the British Medical Benevolent Fund.