cardia occurred. These paroxysms began suddenly, but often passed off gradually.

The attacks occurred at intervals of a few months for twenty-nine years. Then I began to take calcium lactate for chilblains, and found to my intense relief that it abolished the fibrillation, etc.; since then—that is, for twelve years—I have been nearly free from it, but the extrasystoles remain as before. I am now in my eightysecond year, and can still pass for a healthy man. I have some old-age defects, but no digestive trouble, no neurosis.

Two of my sisters have the same trouble, but are living in fair health, though over 70. My father had almost the same symptoms as myself, but his heart held out to the end, at 75. A brother and a sister and several relatives on the father's side have died of gradual cardiac failure in old age. Thus I was familiar with all the symptoms of the abnormality long before they were described in standard books. I have several times tried treatment with digitalis and similar drugs, and have always found them increase the trouble: I am sorry for the patient who receives this routine treatment from his doctor. For years I obtained partial relief in the attacks by taking sedatives such as chloral and bromide, until at last I found the correct remedy in calcium lactate, since when I have taken 10 to 15 grains every night.

It is probably significant that along with the cardiac trouble I had a long-standing tendency to intestinal sepsis, and that the two troubles were simultaneously cured by calcium lactate. I had always suspected that the cardiac irregularity was due to auto-intoxication, and the late Professor W. E. Dixon agreed in the opinion. It seems probable that the trouble is usually due to a chemical cause.—I am, etc.,

August 16th.

" CARDIAC."

Air-Raid Precautions

SIR,-I agree with the member of the Representative Body who at the recent Representative Meeting protested that the resolution against gas warfare was of a political nature (though it had all the futility of such pious opinions). It is not for us, as doctors, to lay down how wars should be conducted. We are going beyond our brief. Who cares what the doctors in any country say about the matter? If there were a world-wide strike of chemists and scientists against poison-gas manufacture and research, well and good, but there is little likelihood of this with such a chauvinistic spirit abroad and everyone afraid of his neighbour. It is notorious, too, that the U.S.A. favour poison gas as an instrument of warfare, considering it not more inhumane than high explosive, and constantly using it in cases of civil riot. To think that our civil population, in spite of any undertakings to the contrary, can count on being spared from gas attacks in a future war is simply to act the ostrich. Gas attacks, or the threat of them, are too useful a means of immobilizing doctors, nurses, and other trained workers, who might otherwise be at the front (if any "front" there be), not to mention the effect on morale. We on our part must be prepared to retaliate in kind.

Turning now to Dr. Gerald Slot's letter (*Journal*, August 3rd, p. 229), I must say, speaking as a commissioner of the St. John Ambulance Brigade in charge of two counties, and as one who is responsible for anti-gas training in my units, that it appears to be unduly severe and pessimistic. To sit with folded hands would surely be suicide. What is Dr. Slot's alternative? The measures laid down in the new manual would certainly not be nugatory if intelligently carried out in good time, but they will certainly entail a good deal of work and expense for the local authority. Fairly soon all units of the St. John Ambulance Brigade and the British Red Cross Society will have been adequately trained in anti-gas measures, and will be of immense help, if and when the emergency arises, not forgetting their splendid fleet of ambulances.

All I would say in conclusion is that it would appear very desirable that all new houses should be provided with cellars.--I am, etc.,

Shrewsbury, Aug. 12th.

R. L. E. Downer.

Shifting Sands of the Architecture of Medicine

SIR,—The extraordinary statements made by critics of homoeopathy invariably reveal ignorance of even the elements of the subject. So consistently does this happen that one is led to the conclusion that all who have taken the trouble to study homoeopathy must have become homoeopaths, or at least have found nothing in its tenets to criticize. In the past it has been customary for these critics to attempt to hide their ignorance behind an imposing attitude of authority and scientific omniscience, and it was therefore refreshing to read Dr. Hort's letter in the *Journal* of August 10th, and to find in him one who admits the possibility that he walks in darkness and even goes to the extent of asking for light.

The law of similars, so far as remedies are concerned, has a far wider scope than Dr. Hort suggests. It includes every factor which is capable of acting as a stimulus to the organism, and therefore may be applied to such immaterial agents as heat, electricity, x rays, radium emanations, etc. Moreover, it does not postulate the *necessary* existence of a "specific remedy for every symptom group of disease," but supplies a scientific method of finding it should such a remedy exist. Hahnemann's philosophy is based upon this method of discovering the curative remedy, and Dr. Hort's attempted *reductio ad absurdum* misses fire because it disregards this point. "Find the *simillimum* and you'll cure your man" is a fairer summing-up, and one that no homoeopath will dispute.

I cannot of course tell what Dr. Hort would consider an "outstanding measure of success." To me the important point seems to be that we treat disease with a measure of success sufficiently outstanding to make us prefer our system to the systems we were taught as students, and which many of us were practising before we investigated homoeopathy. The art of the homoeopath is a difficult and arduous one, and, speaking for myself, I can assure Dr. Hort that I am of far too lazy a disposition to continue practising it if I did not know that the superiority of its results fully repaid the extra labour entailed.

I am naturally in full agreement with Dr. Hort when he suggests that it would be in the public interest that the unenlightened should learn the principles of homoeopathy. It would be presumptuous, however, to expect you, Sir, to allow in the correspondence columns space sufficient to do the subject justice. A mere summary of the principles without adequate elaboration and explanation would probably lead to misconception, and there is plenty of that abroad—as witness our critics—without my adding to it. A summary has its uses, but it should constitute an epilogue, not a prologue, to study. I must therefore refer Dr. Hort and any interested in the subject to the literature obtainable from the Homoeopathic Association, 43, Russell Square, W.C.1.—I am, etc.,

St. Annes-on-Sea, Aug. 12th. G. RUTHVEN MITCHELL.