

Oxford Eye Hospital. In the former is a review of the work by Mr. R. W. Doyne, and in the latter the corresponding article is by Mr. Ogilvie. The *x*-ray apparatus has been obtained and is now in full use. The Oxford Eye Hospital has this great advantage that it is not too near any other large town, so that the patients, instead of wandering from hospital to hospital, as is so common in London and other large centres, remain to be seen and watched for years, and this greatly enhances the value of the work from a scientific point of view. The hospital also possesses another advantage in having linked with the surgeoncy the Margaret Ogilvie Readership in Ophthalmology, established in 1902 for the purpose of encouraging research in ocular matters. Mr. Doyne at present holds this office. It was at Oxford that Mr. Doyne first tried the administration of retinal extract for the treatment of certain diseases of the optic nerve and retina; these investigations are still being carried on, and we are looking forward to hearing the results of the more recent cases as well as the later results of those whose early history has already been published. The report is interesting, and the work will bear comparison with that done at any British hospital.

REPORTS AND ANALYSES

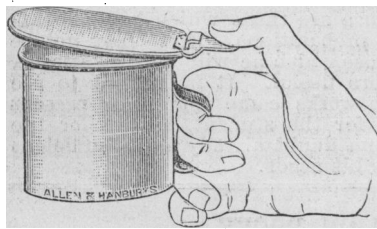
AND

DESCRIPTIONS OF NEW INVENTIONS

IN MEDICINE, SURGERY, DIETETICS, AND THE ALLIED SCIENCES.

MEDICAL AND SURGICAL APPLIANCES.

A Bedside Spittoon.—Dr. SYDNEY R. WILLIAMS (London, W.) writes: The numerous and weighty objections to the bedside spittoon in common use have been apparent for long, especially



to those who have the care of phthisical patients. In the ordinary earthenware pot with a loose funnel some of the sputum usually dries on the latter and becomes a source of danger, in addition to presenting an unsightly appearance. The same objec-

tion applies to all spittoons with loose covers. The difficulty of keeping them clean is the chief objection to the forms with hinged lids; sputum lodges and dries in the hinge, which is speedily destroyed if attempts are made to sterilize the spittoon by boiling. The various spittoons with loose paper or card linings are advisable, but their cost prevents their extensive use in hospital practice.

Whilst Resident Medical Officer at the Mount Vernon Hospital for Consumption consideration of how to overcome these objections by the provision of a suitable bedside spittoon led me to design one which has been made by Messrs. Allen and Hanburys, and has been in use at the hospital for some months. It is strong, being made of enamelled iron, cheap, and not unsightly. It is easily kept aseptic, as it is not injured by boiling, and it has no crevices in which sputum can lodge. As will be seen from the illustrations, the handle is placed lower down than is usual, and from this rim above it a small curved projection passes backward and engages a small slip in the lid, forming an efficient hinge. It will be seen that the lid is easily removed and is opened by pressing in its projecting process when raising the cup. The spittoons are made and sold by Messrs. Allen and Hanburys.



A Plug for Antral Perforations.—Dr. ALBERT WESTLAND M.D. (Aberdeen), writes: From occasional contributions to your columns it would seem that there is still felt a want of a satisfactory self-retaining plug for perforations into the antrum of Highmore which it is desirable to maintain open. I have recently had manufactured to my design a hollow indiarubber plug shaped like a slender soda-water bottle,

with a flat flange round the mouth, which, so far, has been found most comfortable and perfectly self-retaining. It is introduced by a straight probe without any bulge on the end, and is easily withdrawn by the finger-nail slipped under the edge of the flange. So far I have not tried it for very large perforations, but for such as are made by an ordinary dentist's burr it has answered admirably. The plugs are made for me by Messrs. Pettie and Whitehall, surgical instrument makers, Aberdeen. If an open drain is preferred to a plug, an opening can be made with a scissors on the side of the plug at any point.

Pessary for Prolapsus Uteri.—Mr. DERHAM-REID (Bolton-le-Moors) writes: I notice in the BRITISH MEDICAL JOURNAL of May 21st a communication from Dr. Hughes Davies commenting upon my pillared-ring pessary for the treatment of procidentia uteri, recently figured and described in the pages of the JOURNAL, and referring to an invention of his own as "essentially forestalling that now put forward by Mr. Derham-Reid as a novelty." I trust that you will find room for more than a simple contradiction, and insert a brief description contrasting the two instruments, which will at once and conclusively refute my critic's contention. Dr. Davies's instrument consists of a rigid Hodge pessary supported by a widely-forked stem; the extremities of the fork are attached to opposite points of the lateral margin of the Hodge by means of hinged joints which permit the pessary proper to move freely through an arc of about 45 deg. It is especially claimed for this freedom of oscillation that it permits the instrument to adapt itself to the "swing of the broad ligaments." My pessary consists of a flexible ring supported by an undivided stem, the upper end of which is fixed in the centre of the plane of the ring, where it is sustained by a transverse spiral spring in the diameter of the ring. By this device the easy lateral compression of the ring to facilitate introduction is not interfered with. Finally, a front spring extends from the central pillar to the anterior margin of the ring. This is an important feature of the design, my contention being that if the descent of the anterior margin of the ring can be prevented the instrument cannot be expelled. It will thus be perceived that the points of difference between the two instruments are numerous and fundamental. In conclusion, I am anxious to refute even the most remote suggestion of plagiarism, and to assure Dr. Davies that prior to the publication of my design in the JOURNAL I had never seen his pessary or heard any description of it whatever.

Erratum.—The name of Mr. Sheffield Neave, whose improved microscope razor sharpener was noticed in our issue of January 16th, is as now stated, and not as previously published. He is now using a more finely-ground powder than that then described.

THE PLAGUE.

PREVALENCE OF THE DISEASE.

INDIA.

DURING the weeks ending May 7th and 14th the deaths from plague in India numbered 41,607 and 35,413 respectively. The principal figures during the two weeks were: Bombay City, 373 and 265; Bombay Districts, 2,335 and 1,623; Calcutta, 171 and 134; North-West Provinces and Oudh, 2,229 and 1,303; Punjab, 34,685 and 30,723; Kashmir, 313 and 227; Karachi, 175 and 123; Central India, 296 and 100. Plague is reported to have broken out at Kalka and every effort is being made to keep the disease from reaching Simla.

ADEN.

Three cases of plague were reported at Aden on May 15th.

SOUTH AFRICA.

Cape Colony.

Port Elizabeth.—During the weeks ending May 14th and 21st the fresh cases of plague numbered 1 and 2 (Europeans), and the deaths from the disease 0 and 1. Six cases remained under treatment on May 21st.

No cases of plague in human beings elsewhere, not were any rats found suffering from plague, except at Port Elizabeth, where of 1,047 rats and mice examined during the two weeks in question, 74 were found infected.

Transvaal.

During the weeks ending May 28th and June 4th, the fresh cases of plague in the Transvaal numbered 5 and 2; and the deaths from the disease 3 and 1 respectively.

The total of suspected and proved cases since the commencement of the outbreak to June 4th amounts to 139 (24 whites).

MAURITIUS.

During the weeks ending June 2nd and 9th the fresh cases of plague numbered 3 and 0, and the deaths from the disease 2 and 0.

HONG KONG.

During the weeks ending May 28th and June 6th, the fresh cases of plague numbered 27 and 36; and the deaths 27 and 37 respectively.

QUEENSLAND.

On April 8th a case of plague occurred at Brisbane; the last fresh case in Brisbane was reported on February 18th. Between March 30th and April 7th the rats found infected with plague in Brisbane amounted to 7.

PERU.

According to a telegram from Guayaquil, Ecuador, and published in the *Times*, June 13th, bubonic plague is spreading rapidly at Puyta, Peru, and a state of panic prevails. Ten persons died on June 10th.