

DR. F. LE HAVILLAND HALL (Wimpole Street, W.) writes: I would advise K. B. to try pilocarpine (gr. $\frac{1}{2}$) subcutaneously three times a day. In a case of hiccough which I recently saw with Mr. A. W. Harrison, I suggested pilocarpine, as other remedies had failed. The hiccough, which had been constant for a fortnight, at once lessened, and soon ceased entirely.

TYPE-WRITING.

J.H.S.—1. The acquisition of the art of type-writing is very useful to everyone, but not so peculiarly applicable to medical practice as to justify recommending it to the heavily-charged medical student and assistant as part of his studies and functions to a principal. 2. The services of a good type-writing clerk (lady clerks are the best and least costly) cost about 30s. to £2 a week. The lowest tariff for type-writing with which we are acquainted is that of Rayne and Co., 40, Norfolk Street, Strand—Medical documents, 1½d. per folio of 72 words; typing from dictation, 2s. 6d. per hour, or after 6 o'clock 3s. 6d. per hour.

URETHRAL CARUNCLE.

MR. ROBERT O'CALLAGHAN, F.R.C.S. (Carlow), writes: In answer to J. F. D., if he will carry out the following simple treatment, he can destroy the largest growth, or general caruncular condition of the urethra, with absolutely no pain.

Apply a compress of lint soaked in a 15 per cent. solution of cocaine to the affected urethra; leave this on for ten minutes, and then with a Paquelin's cautery remove the growth, and destroy its base thoroughly, not being afraid to use the cautery freely.

HOW TO ADMINISTER RHUBARB TO CHILDREN.

M.CH.—Thick substances like jam and treacle require some time for their removal from the mouth; therefore fluid vehicles are preferable for the administration of nauseous powders. It is very difficult, if not impossible, to cover entirely the taste of rhubarb. We find that liquorice disguises it to a very large extent, and if the powder be given in liquorice water—a preparation appreciated by most children—there is seldom any difficulty experienced in administering the medicine. The liquorice water can be made by dissolving half an ounce of Solazzi juice in one pint of hot water.

NOTES, LETTERS, ETC.

ERRATUM.—In Dr. Murphy's letter on the treatment of peritonitis in the BRITISH MEDICAL JOURNAL of November 26th, p. 1198, the period during which the child mentioned had suffered from tuberculous peritonitis should have been stated as four weeks.

DR. ALTHAUS writes to say that the observation that he made at the Medical Society on November 21st was to the effect that in cases of syphilitic hemiplegia in children he had always been able to discover other symptoms of the dyscrasia, such as old keratitis, notched teeth, peculiar deformities of the skull, scars, varicocele, etc., pointing to the specific nature of the affection.

IMPERISHABLE FISH.

MR. J. LAWRENCE HAMILTON (Brighton) writes: Fish is made imperishable by bleeding before blood-clotting, immediate gutting, cleaning inside and outside with abundant flowing fresh (sea) water, then draining and cooling with subsequent dry-air refrigeration. Chemicals, melting ice, water, moisture (including damp air and fogs), each rot or ruins dead fish.

VENESECTON IN APOPLEXY.

DR. CHARLES J. R. LAWDAY (Stretc, near Dartmouth) writes, with reference to Dr. Patterson's case of apoplexy treated by venesection, to point out that that method of treatment is more likely to be of use in cases in which symptoms are produced by cerebral congestion than in those in which they are due to actual hæmorrhage. The complete recovery in Dr. Patterson's case appears to show that it belonged to the former category. Dr. Lawday recommends ice to the head, which should be kept well up, a soap-and-water enema, and calomel on the tongue, as the most reliable treatment.

TREATMENT OF SPHYLLIS BY INJECTIONS OF SERUM.

MR. EDWARD COTTERELL (West Halkin Street, S.W.) writes: In the EPIHOME of November 19th it is stated that only two observers—Tommasoli and Sartori—have as yet tried this treatment. Kindly allow me to state that I tried it in August of this year. Permit me to add to your remarks in the BRITISH MEDICAL JOURNAL of November 19th that, in order to secure a good result, it is essential to use serum freshly prepared.

OFFICIAL AND OFFICIAL.

DR. A. H. DORSON (Whitechapel) writes: The terms official and officinal are frequently used by writers on materia medica and kindred subjects as synonymous. As the examiners for the triple qualification at Edinburgh fall into the same error, it may be advisable to point out that there is a wide difference between the words. Official (*officium*, an office) means "emanating from, or sanctioned by authority." Officinal (*officina*, a shop) means kept in a shop. Olive oil is official; hair oil is officinal.

HOSPITAL ATHLETIC CLUBS.

THE SECRETARY OF THE AMALGAMATED ATHLETIC CLUBS (St. Thomas's Hospital) writes: In your paragraph on "Guy's Hospital Clubs" in the BRITISH MEDICAL JOURNAL of November 26th you mention that "though schemes on somewhat the same lines have been introduced at other institutions, it cannot be said that at the present time any of these have met with unqualified success." May I be allowed to point out that at St. Thomas's Hospital, which, I presume, is one of the institutions to which you refer, we amalgamated our athletic clubs in October, 1888, and that the experiment has proved a most complete success? We have now a large and yearly increasing balance in hand, and are endeavouring to find a suitable ground within easy access of our hospital which we can make our own, and use for all athletic purposes. I believe it was the success of our scheme which prompted the clubs at other hospitals to unite with a similar object.

CLUBS AND TOUTING.

MR. E. PANTER, compositor (Plymouth), writes: What is the medical profession coming to? Is this the result of competition, or the eagerness live to and get on, the overplus and growth of the fraternity everywhere? It seems to me by the enclosed I send you that some men do not care two straws about the dignity of their profession, but simply to make money. The enclosed leaflet was thrown under my doorway some time ago, and now I have just received the enclosed card in an envelope, put under the door. I thought the medical profession had a body of some sort which took up such cases as this, and brought them to the notice of their colleges. I don't believe this man is a doctor, but only a surgeon. We have two or three medical men sending round a man to know if you will belong to Mr. So-and-so's club. Only a few weeks ago my wife answered the door to a man who asked her if she would belong to a boot club.—No! Well then, a tooth club (the dentist)?—No. Well then, a sewing-machine club?—No. Well, I know what you will belong to—a doctor's club, 1d. a week.—No. And the poor man went away horribly disappointed to think she would not belong to any of these so-much-a-week clubs. I am only a poor man myself, earning weekly wages, but I am disgusted to see such behaviour, and that the other medical gentlemen associate with them and meet them in practice.

** Our correspondent encloses a pink circular of a "public dispensary" and a visiting card, on which appear the words "with compliments" beneath the practitioner's name.

THE FINAL F.R.C.S. EXAMINATION.

A REJECTED CANDIDATE writes to protest against the custom of setting a long paper for the Final Fellowship Examination. If the examiners must make it a four-hour paper, surely, he argues, they might at least set questions of such a length as to be capable of answer within the time allotted. He continues:

When I presented myself last week I found a paper containing four questions which I could have answered fully had I been allowed sufficient time. As it was, I was obliged to start writing at once, and I did not cease until ordered to do so at the end of the four hours, by which time my hand was thoroughly cramped, and I had a splitting headache. One was not even permitted to think before writing.

What I would suggest is this: Let two papers be set, each of three hours' duration, one upon Surgery and Surgical Therapeutics, the other upon Surgical Pathology, and let them be of so moderate a length as to permit of being completely answered in the three hours allowed.

I do not complain of my rejection, but I do protest against the unfairness of a paper which no one could answer fully in the time.

A DAILY RAILWAY JOURNEY.

F.R.C.S. writes: In the BRITISH MEDICAL JOURNAL of November 19th, "Enquirer" asks whether travelling daily to Brighton is injurious to health. The question is a little indefinite, for we are not told where from (presumably London), the state of health of the traveller, or the class of carriage in which the journey is made, whilst all are factors.

Some years ago the question of the effects of frequent railway travelling upon personal health excited a considerable amount of professional attention; and I then devoted some time to the investigation of the matter in persons most so engaged—namely, engine drivers, firemen, and guards. Briefly stated, the evidence was negative. The impression left upon my mind, however, was that not improbably three factors at least played a part in the issue—namely, the selection of men above the average of general health, their remarkably abstemious habits (many were total abstainers, and none either drank or smoked to excess), and, lastly, all were in the employ of one of our northern railways, where the equipment of the line was as complete and perfect as it could be made. Now in marked contrast to this, on all our southern lines this latter condition, unfortunately, does not hold, but the very reverse. The carriages are lightly built, the jolting and noise, when in motion, almost indescribable, but most fatiguing to body and irritating to mind; further, the carriages are often extremely dirty; if to these disadvantages and discomforts is added an average speed of twenty-five to thirty miles an hour only, making a journey of sixty miles a matter of two to two and a half weary hours, with unpunctuality and a dim oil light into the bargain, the sum of railway travelling misery is about complete. Under such circumstances, a medical opinion is unnecessary as to the physical injury and mental worry and strain involved, but the degree is, of course, a matter of individual experience. I have seen frequent instances of severe head- and backache, sense of great weariness, prostration and general *malaise*, lasting twenty-four hours or more after a journey of sixty miles on the South Coast lines. In consequence, my custom is to advise patients not to subject themselves to these discomforts, and in some instances, as I think, near or remote actual dangers. The southern lines are largely made use of by the invalid classes, and it seems to me they have a right to have their needs and claims regarded.

MR. T. MADDEN STONE (Wimbledon) writes in reply to "Enquirer": I beg to inform him that some years ago I contemplated residing permanently at Brighton, for which purpose when stopping there for a few days I occasionally visited the departure platform to notice the passengers about my own age ("three score years and ten") on their way to town. I saw several, and on speaking to the locomotive superintendent on the subject he pointed out several then on their way to town; and subsequently asking Mr. Cock, the late President of the R.C.S., then on our way to his residence at Kingston by rail, he said, provided I did not run to catch the train, he saw no reason why I should not; if I secured a comfortable first-class carriage, and did not read a newspaper or any journal, he thought I might safely do so.

LOCAL REGISTRATION OF MEDICAL QUALIFICATIONS.

MR. S. EVANS, L.R.C.P. Ed. (Birmingham) desires to make the following suggestion as to unqualified assistants:—That every practitioner practising in a parish or district should be registered in that parish or district, quite apart from, and in addition to, the general registry now in use. That all practitioners should be registered in two groups (1) principals, (2) assistants. That every practitioner who wishes to keep an