LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

Communications for the current week's Journal should reach the Office not later than Monday post on Wednesday. Telegrams can be sent on Tuesday morning.

Communications respecting Editorial matters should be addressed to the Editor, 429, Strand, W.C., London; those concerning business matters, not connected with the Journal, should be addressed to the Manager, at the Office, 429, Strand, W.C., London.

In order to avoid delay, it is particularly requested that all letters on the subject of which special departments of the British Medical Journal are devoted will be found under their respective headings.

 Queries.

J. D. M. asks whether a soft water, free from organic impurities, but containing 4.5 parts of carbonate soda per 100,000, is to be regarded as wholesome; and, if not, how it can be rendered so?

Inquirer asks for advice as to the choice of a climate favourable to a patient suffering from frequent attacks of migraine. The patient has for some years been living in Norfolk; perhaps too dry and bracing a country. She has now the choice of residing in any of the following places: Derby, Bedford, Weymouth, Reading, Dunstable, Worcester, Leamington, Abingdon, Jersey, Guernsey, and London.

J. H. asks for suggestions in the treatment of a patient who complains of coated tongue and a sweetish taste in the mouth. This has lasted for years, and there are no other symptoms of digestive disorder, the patient being otherwise in apparently good health. Various remedies have been tried, including calomel, rhubarb, and saline purgatives, but with no apparent benefit.

M. O. writes: I should feel greatly obliged if any of your readers could give me a list of books (1) treating of the fevers of India, (2) tropical diseases, and (3) syphilitic diseases of the nervous system. Nos. (1) and (2) are required as works of reference in writing a thesis on the subject.

There has been no book on the fevers of India published since Fawcett's Climate and Fevers of India, and in it the subject is not treated of from the standpoint of the malaria organism of Laveran. Chowers, Moore, Maclean, Atten, Morehead, Martin, Annesley—all treat of the fevers of India. (2) Tropical diseases: Davidson's Hygiene and Diseases of Warm Climates is the most recent; Corne's Maladies des Pays Chauds and Roux on the same subject are the most recent French works. Our correspondent will find ample bibliographies in all of these works—partly in the French works. He should also consult Hirsch's Geographical and Historical Pathology and Davidson's Geographical Pathology.

Diagrams.

S. G. writes: Is there any society or company or private firm that lends out on hire large illustrated suitable to pin to a wall to illustrate popular medical lectures?

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There is no book on the subject of the present medical age, but the British Journal, Vol. 132, April 1893, has published in the Proceedings of the Royal College of Surgeons of London, a paper by the late Mr. G. S. Osborn, on the subject of the mucous membrane of the mouth, which is also the subject of the present communication. A copy of this paper may very probably be obtained from Angell of New York, or from the British Medical Journal, which is also the subject of the present communication. A copy of this paper may very probably be obtained from Angell of New York, or from the British Medical Journal, which is also the subject of the present communication.

A STRICTURAL QUESTION.

J. N. N.—(1) Greenstick fracture of the radius is usually the result of direct violence, and therefore might be caused by a stone. (2) In a boy aged 12 a blow from a stone would be more likely to cause complete than partial fracture, but the possibility of the latter cannot be excluded.

(3) In such an injury as J. N. N. describes, one would certainly expect to find some immediate external marks of injury. (It seems odd that such a boy, able to be struck with a stone weighing several pounds at a distance of twenty yards).

(4) The ecchymosis, if due to the contusion of the forearm, caused by the injury, whatever the nature of this injury might have been.

(5) In case of fracture by direct violence the differences in the external marks of injury would be simply differences of degree. If the forearm were covered in ecchymosis, there would be less confusion, but not a total absence of redness, swelling, and ecchymosis.

(6) The convexity would be found on the opposite surface to that on which the blow was received; the concavity would be on the side struck.

(7) The convexity of the bent or fractured radius being in front, it is very much less likely that the blow would have been applied to the posterior surface of the forearm. A blow on the front of the forearm would produce a posterior convexity which would, moreover, be favoured by the natural curvature of the radius.

The Staining and Mounding of Urinary Deposits.

H. M. S.—Dr. Byron Bramwell informs us that the solution of boracic acid employed in the first stage of the process of preparing urinary casts is saturated. It is only necessary to use the boracic solution in hot weather or when the urine has to be kept for some time. Under ordinary circumstances the tube casts are abundant, there is no need to mix the urine with the boracic solution.

NOTES, LETTERS, Etc.

Correction.

In the memoir on Dysentery and Tropical Liver Abscesses by Dr. C. M. Gough, published in the British Medical Journal of July 28, p. 127, second paragraph, third line, for "or diets" read "districts;" for "diagram" read "graph." In the same issue, p. 31, column 2, line 25 from foot, for "small box," read "lymphus.

The Medical Scandal.

Truth publishes the following article on Medicine: "Much praise is due to the British Medical Journal for an excellent issue which has caused a great deal of interest in the medical profession, and which is to be recommended to all medical students, who have been appealed to from several quarters to expose certain parties engaged in the dispensable business. Two considerations have prevented my responding to this appeal. In the first place the subject is an unsavoury one which nobody cares to talk about, and the discussion of which in a newspaper offends many over-sensitive readers. In the second place from the nature of the case it is almost impossible to obtain witnesses in support of specific allegations against particular individuals or particular establishments, unless it is possible to bring the matter to an issue by exposing and denouncing particular individuals. I prefer not to discuss the matter in the public press."

All my experience of journalism goes to prove that only by making specific allegations can any practical result be obtained. If a newspaper does not make allegations which it considers to be mere generalities, it is likely to do more harm than good. A medical journal, however, is in a very different position. The use and abuse of medical profession is professional questions which doctors are bound to face, and on which all members of the profession ought to be fully informed. A medical journal having thus broached the subject, I feel bound to add my testimony to the gravity of the evil. The inquiries which I have made leave no room for doubt (even if the professors of the business made less secret about it than some of them do) that in the name of management treatment there has been carried on in various parts of London and in the West End, an open and disreputable system of vice. Nor is there any room for doubt that it is a system peculiarly baneful in its effects, and the source of the most pernicious demoralisation to men and women. One of the first who called my attention to the subject, now several months back, was a physician in one of the foremost London hospitals, who had gained his knowledge in the course of his professional experience; he said that cases (facts directly from patients) were such as no decent person could contemplate. I have been asked: "Why do you not write an article?" I reply: "I take it, therefore, that there is one question, and one only, in this case, namely, how the evil is to be put down. Primarily, the existence of the evil in the medical profession is bad, but this is not the question. Every profession has its own peculiar mode of corrupting itself, and it is possible that it may be that, with the assistance of the public, it will continue surreptitiously, and in a form more difficult to detect than in the case of the medical profession. It is good that the British Medical Journal partially recognises this duty by suggesting the registration of qualified practitioners, but this is only the first step in a long career of difficulties in the way, they will hardly strike the unprofessional reader as insurmountable. The fact has to be recognised that the pro-