

1907. Of these, 1305 were medical and 1775 were surgical. There were 1360 surgical operations. The average mortality was 4·09 per cent. In the extern department 29,433 were treated. The total number of cases (dental included) treated in the hospital, intern and extern, amounted to 32,513, while at the Martins Children's Hospital, at the Throne Convalescent Home, and in the consumptive department 334 convalescents were received and 116 children were treated, as well as 47 consumptive patients. The following figures give some idea of the work of the hospital. During the year 1583 ambulance cases were received, 1360 operations were performed, and there was an average of 465 patients treated every day in the year, of whom 223 occupied beds in the hospital. Financially for the first time in the history of the new hospital there was an excess of expenditure over receipts of £548. The Right Rev. Dr. Crozier, Bishop of Down, who presided, in moving the adoption of the report, spoke very warmly of the value of the institution in training the rising generation of medical men. Among the members of the medical profession who spoke at the meeting—which was very largely attended—were Dr. H. L. McKisack (secretary of the medical and surgical staff), Sir John Byers, and Dr. W. Calwell.

The Belfast Samaritan Hospital.

At the annual meeting of the supporters of this charity (the Lord Mayor presiding) on March 23rd it was reported by Dr. G. A. Hicks that during the past year 683 patients had been treated in the extern and 200 in the intern department of the hospital. Financially the debt at the end of the year was reduced to £89 and a sum of over £3000 is invested. In their report the medical staff suggested that as the wives of men of the labouring class as distinguished from the artisan class have from time to time to be refused admission owing to their not being able to pay the minimum fee of 10s. per week, such cases after admission should have a rate fixed by the ladies committee on inquiry into their circumstances. This procedure when used in other hospitals works satisfactorily.

The "Abbey" Sanatorium for Pulmonary Tuberculosis.

Mr. Robert Hall, physician to the Belfast union infirmary and to "The Abbey" sanatorium for pulmonary tuberculosis, has just presented to the sanatorium committee of the Belfast board of guardians a most interesting annual report as to the condition of patients who were treated for consumption in that excellent institution during 1907. During this period 311 patients were treated, of whom 163 (40 married, 14 widowed, and 109 single) were women and 148 (48 married, 13 widowed, and 87 single) men. Of these 115 are still under treatment. Of these 311 patients the following was the age incidence:—

From 5 to 10 years of age	...	...	...	...	6
" 10 ,, 20	"	"	"	"	59
" 20 ,, 30	"	"	"	"	100
" 30 ,, 40	"	"	"	"	82
" 40 ,, 50	"	"	"	"	45
" 50 ,, 60	"	"	"	"	14
" 60 ,, 70	"	"	"	"	5
Total	...	...	...	...	311

These are statistics which prove that advancing age does not give immunity from pulmonary tuberculosis. Of the 196 patients who left the sanatorium during the year 30 per cent. were so much improved that they returned to their ordinary avocations; 33 per cent. were considerably improved but were not able to do full work; and the remaining 37 per cent. remained in a stationary condition or the disease being in a too advanced stage on admission did not respond to treatment. 10 per cent. of the total number (311) treated died. Mr. Hall expresses the regret that so many persons when they are attacked by pulmonary tuberculosis either do not appear to realise the absolute necessity for early treatment or the gravity of their condition till they are completely broken down in health and frequently in a stage of disease when there is little or no hope of cure; if they did he thinks that there would not be so many hopeless cases admitted to the wards of the institution or so many homes poisoned by the germs emanating from the advanced cases. Mr. Hall says in admitting patients preference when possible was given to the "bread earners," and he points out the great benefit and possibility of an open-air life, for at least 25 per cent. of the patients slept on the verandahs during the winter. He advocates compulsory notification of pulmonary tuberculosis and he points

out that patients transferred from the union infirmary to the sanatorium showed a distinct advance in their progress. Quite recently (since this report was written) the hospital block has been opened for the reception of patients and has been almost filled by the transference of patients from the union infirmary—the number at present under treatment being 256. It is interesting to note that since Mr. Hall took the great forward step—nine and a half years ago—of separating the consumptives from the other patients in the Belfast union infirmary (the first union infirmary in Ireland where this segregation of consumptive patients was done) over 6000 such cases have been treated in the infirmary and sanatorium. The Belfast board of guardians and its excellent medical officer, Mr. Hall, have in their treatment of consumptive patients given an object-lesson to the rest of Ireland.

March 31st.

PARIS.

(FROM OUR OWN CORRESPONDENT.)

The Action of Radium on the Blood.

At a meeting of the Biological Society held on March 14th M. Aubertin and M. Delamarre communicated the result of some researches which they had made as regards the action of radium upon the viscera and especially upon the blood-forming organs. White mice were submitted to radium emanations, the effects brought about being very similar to those produced by the x rays. After exposure to the emanations for one hour marked leucocytosis occurred. Sometimes, however, during the second hour a marked diminution in the number of leucocytes occurred, which persisted more or less after the radium had been withdrawn. During this period the blood counts showed an excess of polynuclear cells, and leucocytes in course of histolysis were found in the blood. Daily exposure to the emanations brought about marked leucopenia and a diminution in the number of red cells. Prolonged exposure to the rays gave rise to necrosis of the follicles of the spleen and a fragmentary condition of the Malpighian bodies (*noyauux*). An irradiation of less duration did not give rise to any splenic lesion but leucopenia was very marked.

An Ambulance drawn by a Dog.

Lieutenant Puisais, of the camp at Ruchard, proposes the employment for ambulance work of a wheeled stretcher drawn by a dog. The ambulance is mounted on a spring four-wheeled carriage. The front wheels are 49 centimetres in diameter and the hind wheels 60; the axles are removable at pleasure. A trial of this method of transport was made at Poitiers with a policeman acting as the wounded man and the dog mounted without difficulty a gradient of very considerable pitch; on the return journey, instead of the policeman, the stretcher was loaded with 90 kilogrammes of sand (about 14 stones). The weight of the stretcher and the carriage is 30 kilogrammes and in the absence of the dog can easily be drawn by a man or even by a child.

Quinine in Algeria.

The Syndicate of Pharmacists of the department of Algiers has approved in principle of the sale of quinine at a price and in a form laid down by the Government. The syndicate hopes, by giving its approbation to these regulations, that the risk of the sale of quinine falling into the hands of foreigners will be avoided.

The Treatment of Hæmarthrosis.

At a meeting of the Surgical Society held on March 11th M. Lucas-Championnière recommended light massage applied directly to the muscles in the treatment of hæmarthrosis, and, contrary to the experience of some other observers, he considered that massage alone was sufficient to obtain muscular regeneration. Gentle massage of the joint should also be practised with passive movement, but care should be taken that no pain is produced. Any active movement should be made with great caution and should only last for a very short time. As to the regeneration of the muscular tissue M. Lucas-Championnière thought that no good result could be obtained by demanding a maximum of effort from the muscle at the outset, for this demand, he said, would be very likely to bring about muscular atrophy.

Jubilee of Dr. Magnan.

Quite recently the pupils and friends of Dr. Magnan,

Member of the Academy of Medicine and physician to the Asylum of Saint Anne, presented him with a medal in honour of his completion of 50 years' professional service. The President of the Council of Ministers and many professors of the Faculty of Medicine were present. Various speeches were made, amongst others one by M. Bajenoff in the name of sundry scientific societies of Moscow, and one by M. Lodame, speaking for Swiss experts in mental diseases. Dr. Magnan, who was much moved, warmly thanked those present in an eloquent speech. The medal, which is the work of M. Paul Richer, a Member of the Academy of Medicine and of the Academy of Fine Arts, bears on one side the bust of Dr. Magnan, while on the other he is shown surrounded by his patients and friends.

March 30th.

ITALY.

(FROM OUR OWN CORRESPONDENT.)

Small-pox Scares.

SPORADIC cases of "vaiuolo nero," or black small-pox, occurring in Rome (but immediately isolated, with further spread of the disease circumscribed) have been magnified by report into something like an epidemic, much to the alarm of the public, resident or migratory. Hardly had this scare died down when another, this time affecting Naples, loomed large on the hygienic horizon, to disappear in turn under the searchlight of the public health officer. On March 24th the steamship *Montevideo*, of the "Compagnia Transatlantica" of Barcelona, hailing from Vera Cruz, dropped anchor in Neapolitan waters and immediately the rumour got abroad that ten cases of death from malignant small-pox had occurred among the passengers. The vessel was at once put in quarantine and a rigorous inquiry was instituted by the sanitary authority. Not one case of small-pox was verified but measles affecting 20 of the children on board was noted. The little patients were forthwith conveyed to the "Ospedale Cotugno" and the *Montevideo* was allowed to resume its voyage.

The "Bitter Cry" of the Cliniques.

Commenting on the recent State trial in Italy and the malversation to personal or political interests of funds reserved for schools and universities, THE LANCET drew attention to the deplorable condition of research and clinical work in Italy as "literally starved" in comparison with the same work in other nations. On March 26th His Excellency Signor Rava, Minister of Public Instruction, had a prolonged interview with a deputation of Piedmontese Members of Parliament on the "cliniche chirurgiche" in the University of Turin, all insufficient as these are for the requirements of the city and school. In the course of discussion His Excellency pointed out that Turin did not stand alone in asking from the Government increased support for its clinical accommodation and equipment—the Lombard school, represented by Pavia, being only another of the many seats of medical instruction clamouring loudly for similar aid. The Piedmontese deputies, however, had small difficulty in strengthening the claims of Turin to exceptional consideration and support, as the cost of land and of manual labour was much higher in the sub-alpine capital than in other Italian centres. His Excellency thereupon undertook to consult his colleague of the Treasury in the interests of Turin, with the result, it is hoped, of accelerating the measures required to put that great medical school on a level with its French, its Swiss, and its German sisters.

The Garibaldi Hospital.

True to his humanitarian ideal, the knight-errant of Italian freedom and unity left, among his death-bed dispositions, an injunction to found a hospital for the ailing or infirm poor among the islanders of the Straits of Bonifacio. His wishes have at length been complied with and the "Ospedaletto Giuseppe Garibaldi" on the Maddalena is now in effective working. With the exception of the "ambulatorio" (out-patient department) the hospital had recently been closed for reasons relating to the *personnel*. Donna Costanza Garibaldi (to whom the hospital owes so much) now writes to the *Tribuna* that the wards were reopened on March 25th (Feast of the Annunciation) under the supervision of a new directress who (she says) has been trained "nei primari ospedali Inglesi" (in the leading English hospitals).

Obstetric Aid to the Poor.

Thanks to the presence of a public-spirited physician in

her communal council, Florence is now provided with organised aid to necessitous females "nei casi imprevisi e gravi del puerperio" (in unexpected and serious cases during and after parturition). Dr. Guido Banti, professor of pathological anatomy in the Istituto di Studi Superiori (the common councilman in question) was able to announce on March 27th that this service, instituted and organised by him, is quite gratuitous, one of the contributors to it being his colleague, Dr. Giuseppe Resinelli, professor of obstetrics and gynaecology, with the *personnel* attached to the "clinico d'ostetricia" in the same school. The movement is quite in keeping with Tuscan initiation in matters medical, of which (as I write) another instance reaches me from Rovizzano, where a series of popular lectures is to be addressed to mothers of families on the health conditions to be observed in their households. Dr. Lapo Falcioni of Florence will inaugurate the course on April 5th.

March 28th.

VIENNA.

(FROM OUR OWN CORRESPONDENT.)

Retirement of Professor Chrobak.

Professor Chrobak has resigned his position as professor of gynaecology and obstetrics, six years before reaching the legal limit, on account of his opinion that the work in the new clinic must be conducted by a younger man. He took leave of his former pupils and his fellow workers in the hall of the new clinic which will be available for the use of the public in a short time and a bust of him, beautifully executed by his daughter, was unveiled on this occasion in the hall as a good omen for the future of the new house. The assemblage included all his former assistants, most of whom are now professors and *privat-docenten*, representatives of the University and the medical staff of the army, his successor, and the staff of the medical faculty. Professor Chrobak thanked them for the many marks of kindness which they had shown to him and expressed confidence that the new clinics and the new hospital would once more as in former years attract the best men from all parts of Europe to work in Vienna. Continuing, he said that above all scientific work the physician and the surgeon must keep in mind that their first duty must be, "help, not harm"; and they must always do their best, whether in operation or in advice. Professor von Rosthorn, a former pupil of the retiring surgeon and now his successor, then described the remarkable individuality of Professor Chrobak who introduced the axiom that the function of medical or surgical intervention is only to help physiological processes. He said that in Professor Chrobak's operating theatre and lecture room the students would find displayed on the walls the admonition, "Primum non nocere." Professor Chrobak, who 19 years ago was with difficulty induced to accept the post of director of the clinic and clinical lecturer, soon made the clinic a notable place by the exactness of his diagnosis as well as by his surgical skill and the adoption of the newest methods of treatment. Dr. Peham, who is at present Professor Chrobak's first assistant, will act as temporary director of the clinic until Professor von Rosthorn takes over the new premises, which will not be before May or June.

A New Method of Approaching the Bulb of the Internal Jugular Vein.

Acting on a suggestion given by Professor Tandler, Dr. Bondy recently employed a new method of approaching the bulb of the internal jugular vein in a case of sinus thrombosis after acute mastoiditis, and the patient, who was a girl, was shown at a meeting of the Gesellschaft der Aerzte. She had been suffering from acute mastoiditis of two weeks' duration. As her temperature rose to 104.5° F. the mastoid process was opened and thrombosis of the sigmoid sinus was found. The thrombi were removed, but only the upper part of the sinus was afterwards freed for circulation. The lower portion of the thrombus could not be reached. As the temperature remained high and a rigor occurred it was resolved 24 hours after the first operation to open the bulb. The jugular vein had been ligatured the day before. The two incisions were united, thus exposing the sterno-mastoid muscle, which was retracted, and the spinal accessory nerve and the jugular vein were brought into view up to the jugular foramen. The facial nerve was also laid bare on the stylomastoid foramen, the apex of the mastoid process was removed, the biverter muscle was