

7lb. of sulphur candles to 1000 cubic feet of air space. With these rigid measures observed in every instance of the disease the outbreak was in a manner controlled during the summer months of 1895, but with the advent of winter the disease seemed to take a fresh start, having been re-introduced from time to time from the country parishes where it existed to quite an extent. In the fall of 1895 a very rigid vaccination campaign was inaugurated by the Board of Health, and the work was not stopped until the entire city had been canvassed by a large and efficient corps of physicians, who systematically, by districts, went from house to house offering and urging free vaccination. During this campaign 53,437 people were vaccinated and re-vaccinated. After this systematic vaccination campaign was over, and the influx of darkies from the country parishes had ceased, the disease steadily decreased. In March, 1896, we had the greatest number of cases of any month during its prevalence, reaching a total of 334 cases. Since the introduction of the disease in February, 1895, we have had 1126 cases with 291 deaths, making a death-rate of 25.84 per cent."

ICHTHYOL IRRIGATION OF THE URETHRA FOR GONORRHOEA.

WE publish in another column an interesting account of eighty-two cases treated in this way which have been recorded by Dr. Werner. Gonorrhœa so often proves intractable and the complications and sequelæ connected with it are so numerous and severe that every new method employed in its treatment is worthy of careful attention. The intractability of the disease is really due to the difficulty which exists in bringing an efficient antiseptic in contact with the gonococcus without injuring the mucous membrane. Janet's method of irrigation is especially useful in that the fluid pressure distends the urethra, and so obliterates the folds of the mucous membrane which shelter the organism from ordinary injections; but the method is by no means free from risk, for the inflow of the solution used may carry gonococci with it, and so cause not only an extension backwards of the urethritis, but also cystitis and epididymitis. Ichthyol is a fairly good antiseptic, and as the cases quoted show, can give much better results than the permanganate of potassium originally used by Janet.

SWINE FEVER.

THE Departmental Committee of the Board of Agriculture appointed to inquire into the etiology of swine fever have issued their second Report, containing experimental and other evidence of great interest. The committee refer to pneumonia of the pig and to swine erysipelas, two diseases distinct from swine fever, and incidentally referred to in the first Report. Pneumonia of the pig is recognised by American veterinary surgeons as a disease distinct from swine fever and is regarded as identical with the disease known in Germany as *schweineseuche*. The same bacterium has been found in both countries in association with this disease. The committee obtained cultures from Dr. Salmon of America and from Professor Schütz of Germany, but they found that the cultures had only a feeble effect on pigs, though highly virulent to rabbits and pigeons. The committee isolated a bacillus, indistinguishable from the *schweineseuche* bacillus, from the lungs of English pigs affected with pneumonia complicating swine fever, and they conclude therefore that the pneumonia of the pig, which is occasionally encountered as an independent disease and sometimes in association with swine fever, is to be ascribed to organisms which are "generally saprophytic and only in particular circumstances able to multiply in the air passages, and thus induce pneumonia." With regard to swine erysipelas the committee have not been

able to find any outbreak of the disease in an acute or epizootic form in the United Kingdom, but they made the interesting discovery that the bacillus of swine erysipelas was present in twenty-eight out of thirty-eight cases of verrucous endocarditis. Further inquiry did not lead the committee to conclude that the frequently encountered cases with chronic heart disease represented pigs that had survived an acute attack during an outbreak of the disease; and attempts to infect healthy pigs by feeding them with blood or cardiac vegetations containing the bacilli, or with artificial cultures, gave in every case negative results, though the bacilli were virulent to mice and pigeons.

THE HERMITE PROCESS AT BOMBAY.

THE Hermite process, which consists of the use of electrolysed sea-water for the deodorising and sterilising of sewage, and which was reported upon by THE LANCET Special Analytical Sanitary Commission on the Hermite Process of Sewage Treatment by Electricity,¹ has already been tried in Worthing, Netley Hospital, Havre, and elsewhere, and is now about to be adopted at Bombay. The plant has been erected at Carnac Bridge and an agent has arrived to superintend the experiment. The Hermite system is, we should imagine, specially adapted to a city like Bombay, where the sewers are defective and the sewage can be run into the sea.

THE SURREY COUNTY HOSPITAL AND HOME VISITS.

THERE has lately been much discussion in Guildford as to the visiting by members of the Surrey County Hospital staff of sick persons, patients of the hospital, at their own homes. A scheme has been considered by which the hospital authorities are to work with the townsmen who are promoting the Jubilee commemorations, and the townsmen offer £50 annually to the hospital if 200 tickets for home visits are supplied and an out-patient letter given with each. The chief opposer of the scheme argued that it would fall through by the introduction of out-patient tickets, that £50 for 200 tickets was a most inadequate sum, that the country subscribers would say that the town of Guildford obtained too much advantage, that it was the duty of the committee to oppose a scheme which would tend to pauperise a portion of Guildford, and that the home visits were likely to introduce infection into the hospital. The hospital committee are greatly in favour of the scheme being adopted. With regard to the objections given above we agree with them all except the last. Unless the staff of the hospital are to be debarred from all private practice, we do not see why the visiting of a poor patient should be more likely to introduce infection than a visit to a patient who is better off. Disease is no respecter of persons, station, or wealth, and a medical man is as little likely to carry infection from a hovel as from a palace. As to the practice of hospital staffs visiting hospital patients at their own homes, it is one of which we do not approve; hospital patients when they are discharged from the wards should cease to be hospital patients other than as out-patients.

THE ELECTRO-CAUTERY AS A HÆMOSTATIC.

A HÆMOSTATIC application of the electro-cautery is reported by Dr. Alexander J. C. Skene in the *New York Medical Journal* of March 27th. This consists in its employment instead of the ordinary torsion artery forceps and the compression forceps. In the case of the artery forceps a thin platinum plate is attached to the distal extremity of either blade, but isolated from it by a sheet of mica. The proximal ends of the plates are attached to copper wires, also isolated, which pass along the proximal end of the forceps

¹ THE LANCET, May 26th, 1894.