no doubt that the difficulty of feeding poor children would be materially lessened if the scraps of food which in many houses are thrown away as useless and worthless were utilised. I repeatedly mentioned to school inspectors and others the desirability of having female children instructed in housewifery and cookery, but it is only within the last few years that an earnest attempt has been made to give a systematic and practical training in these sub-jects. The full benefit of the teaching will not be realised until the Board of Education can see its way to make it compulsory for every female attending the elementary schools on reaching the age of 11 to receive efficient instruction in cookery and laundry work and at 12 in housewifery. I am afraid that the recent publication of the report of the alleged and inefficient teaching of domestic science will have a very deterrent effect on the minds of education committees who otherwise might be disposed to encourage and develop this instruction in the areas which they control. In conclusion, I cannot help expressing my regret that the report contains chiefly destructive criticisma few glaring instances of inefficiency being quoted as types of the general work undertaken in this subject in certain districts, while very little or no commendation is given to the really good work which is most certainly attempted and accomplished in many parts of the country.

I am, Sirs, yours faithfully, R. C. BROWN, M.B. Lond., M.R.C.P. Lond., Preston, May 4th, 1907. F.R.C.S. Eng.

### THE STATUS LYMPHATICUS.

#### To the Editors of THE LANCET.

SIRS,-Dr. L. Vintras in your issue of May 11th revives the old doctrine of states, temperaments, or diatheses. No doubt the recognition of different types of constitution with ten-dencies to special diseases is helpful. Three at least of Galen's nine temperaments besides his  $\epsilon i \kappa \rho a \sigma i a$  or balanced health held their place in the text-books at any rate until a genera-tion ago. I think it was Sir William Gull who remarked that the subjects of particular diseases had a family likeness; certainly many observers have been able to guess a man's disorder from his aspect and manner. But the comparative neglect of temperament in later British medicine to which Dr. Vintras alludes is capable of some explanation. Is it not due in large part to improved pathology, which has shown the true nature of many disorders, and so removed them from the class of uncertain constitutional states? and, secondly, to an unwillingness to generalise on conditions of which the causes are unknown? It is felt that in attempting to define temperaments and diatheses we are apt to stray into the land of obscurity and of assumptions. What one generation describes as a temperament consistent with health is found by another to have a definite pathology. Yet this neglect may be carried too far.

With regard to the status lymphaticus it may be questioned whether various disorders and tendencies to disorder are not included under this heading. Dr. Vintras quotes Trousseau's use of the term "lymphatic diathesis" in his ninety-first lecture. But surely this is in another sense. He is dealing with the etiology of adenia (lymphadenoma), and uses the expression "lymphatic diathesis" to represent the unknown cause of the disease, not to connote a state or temperament. Moreover, he lays stress on generalised enlargement of the lymphatic glands, a feature which finds no place in Dr. Vintras's clinical picture of the status lymphaticus. This clinical picture, although not without distinction, seems to include a diversity of conditions sometimes amounting to include a diversity of conditions sometimes amounting to paradox. Its subjects combine slowness of habit with high intelligence; they are shy, yet genial; listless, yet greatly interested; their pulses are slow, yet apt to remain above 100 for days and even weeks. Dr. Vintras does not mention blood pressure. There is a more restricted class of persons, with deficient capillary fulness, with unstable blood pressure most often lower than the average with blood pressure most often lower than the average, with excitable hearts, with weak muscles, and with proneness to effusions in the skin and serous cavities. Such persons are pale and have often been subjected to the strain of rapid bodily growth. The lymphatic circulation is sluggish. Albuminuria occurring in a cyclic form is often present. Strong reasons have been advanced for ascribing the albuminuria to a blood condition, of which the outstanding feature is deficiency in the coagulating power of that fluid, and this kind of albuminuria has been called

"hæmatogenous."<sup>1</sup> Deficient coagulability of the blood has also been found in other individuals of the class described in whom albuminuria was not present. I would suggest that blood conditions, which are taking an ever larger part in pathology, will be found at the root of the so-called lymphatic diathesis. Some experience, which I hope to record later, in testing the coagulation by Wright's method impresses me with the fluid character of the blood in lymphatic subjects.

I am, Sirs, yours faithfully, Weymouth-street, W., May 14th, 1907. R. HINGSTON FOX.

# PHARYNGO-KERATOSIS TREATED BY APPLICATIONS OF SALICYLIC ACID IN SULPHO-RICINATE OF SODA.

### To the Editors of THE LANCET.

SIRS,—I am sorry to trespass again on the hospitality of your columns, but Dr. W. Jobson Horne's letter in THE LANCET of May 11th, p. 1316, obliges me to make this further intrusion. The facts of the case are extremely simple and the correctness of my deduction must be obvious to any unbiased reader. At a stage when the condition of the two tonsils was identical (previous interrupted treatment having proved so far unavailing) a solution of salicylic acid in sulpho-ricinate of soda was applied daily by the patient to the right one, with the result of producing a marked diminution in the size and consistency of the keratotic points on it, the other tonsil remaining as before, and acting therefore as what is known in physiological experiments as a "control." The logical deduction from the fact is that the application was the cause of the improvement, the requirements of an experiment having been fully met. Dr. Jobson Horne is one of the secretaries of the London Laryngological Society and it is he who is responsible for the omission of the clear statement of this all-important fact in the report of my case, sent by him in his official capacity to the medical papers, thereby depriving it of its main interest. For this omission on his part I have received from the President of the Society a letter expressing the regret of the council for the injustice done, doubtless without intention, to my unpretentious communication. I am, Sirs, yours faithfully,

May 18th, 1907.

PS.—I may mention that the improvement was steady, although slow, and for some months there has been scarcely anything visible which could be recognised as pharyngokeratosis, while now there is none at all.

DUNDAS GRANT.

## A NEW METHOD OF PERCUSSION. *Io the Editors of* THE LANCET.

SIRS,—In the notes from Budapest in your issue of May 18th mention is made of "A New Method of Percussion." For several years I occasionally used this method of percussion and have demonstrated it in classes on physical examination and in the wards. I very rarely employ this method now for the reason that, in chest work especially, it does not so well afford that appreciation of resistance which is so valuable a part of the information to be obtained by the ordinary method of percussion. It is, however, a useful variation when it is desired to localise exactly a small area of deficient resonance, and Dr. Janos Plesch deserves credit for drawing the attention of the profession to a useful addition to the ordinary methods of physical examination.

ľ am, Sirs, yours faithfully,

Harley-street, W., May 20th, 1907. J. EDWARD SQUIRE.

# THE COLONIAL OFFICE AND THE PAY-MENT OF MEDICAL EVIDENCE AT CORONERS' INQUESTS.

### To the Editors of THE LANCET.

SIRS,—I beg to forward you the inclosed which appears to convey the situation. I was desired to attend an inquest and denied a fee. After practising a great many years it is a fresh experience to be examined as I was and not paid

<sup>1</sup> See a paper by the writer in THE LANCET, August 25th, 1906, p. 497.