Correspondence

on the problem with which they deal. I am at present trying to obtain a suitable case of syphilis, in order to see if the *Treponema pallidum* is or is not a granule-shedder.

I am, &c.,

Wellcome Research Laboratories,
Gordon College, Khartoum.
April 23rd, 1911.

ANDREW BALFOUR, M.D.
Director.

TO THE EDITOR OF THE "JOURNAL OF THE ROYAL ARMY MEDICAL CORPS."

DEAR SIR,—With reference to the short note on granule-shedding in spirochætes which I sent you from Khartoum, on April 23rd, I have now, thanks to the courtesy of Major F. F. Carroll and Captain McK. Saunders of the Egyptian Medical Service, had an opportunity of examining by the dark-field method a preparation put up by Captain R. G. Archibald from a case of syphilis. It consisted of serous fluid obtained by scraping the surface of a buccal mucous tubercle which had previously shown the presence of *T. pallidum* in fair numbers. The hanging-drop was prepared without any addition of salt or citrate solution four hours after the patient had received a dose of 0.3 gramme of salvarsan subcutaneously.

On examination Captain Archibald and I found at first many motile, highly refractile granules recalling very strongly those found in fowl spirochaetosis. There were also motionless and empty "periplasts" or cell membranes. After some search a *T. pallidum* was discovered actively engaged in granule-shedding, apparently in a manner identical with that displayed by *Sp. granulosa penetrans*. It would, therefore, seem that the hypothesis advanced in my former note is correct, that under the influence of a drug like "606" the spirochaete of syphilis sheds granules which are doubtless resistant forms and may be of a "spore" nature. The bearing of this observation on the treatment of syphilis is probably sufficiently obvious and, in any case, the phenomenon would seem to prove that the second suggestion advanced by Messrs. Gibbard, Harrison and Cane, as possibly explaining relapse after intravenous injection, is the correct one.

I am, &c.,

Wellcome Research Laboratories,
Gordon College, Khartoum.
April 27th, 1911.

ANDREW BALFOUR, M.D.
Director.

MILITARY WIDOWS' FUND—BRITISH SERVICE.

TO THE EDITOR OF THE "JOURNAL OF THE ROYAL ARMY MEDICAL CORPS."

SIR,—I would like to bring the above Fund to the notice of any of the officers of the Corps who may not know of its existence. This Fund was established many years ago for the benefit of the widows and children of
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deceased officers of the British Service in India. The subscriptions are small, varying from Rs. 2 to 4 a month, according to the subscriber's pay, there being no entry subscription for an officer who joins the Fund within six months of his arrival in India, or within six months of his marriage, if that takes place in India.

In the event of an officer's decease while on the Indian Establishment, the Fund pays to his widow a sum varying from Rs. 2,400 to Rs. 3,600, according to the subscription he was paying at the time of his death, and in addition, if the widow is in India, Rs. 1,500 for herself, Rs. 500 for each child over 12, and Rs. 300 for each child under 12, as passage money to England. These amounts are paid irrespective of the financial condition of the deceased officer's estate, or the amount for which his life may have been insured.

The present Honorary Secretary of the Fund is Major A. F. Cumberlege, R.E., and the offices are at Simla. Probably the majority of officers know of this Fund, but there may be some who do not, and so I venture to draw attention to it.

I am, &c.,

W. R. P. Goodwin,
Captain, B.A.M.C.

Fyzabad,
April 18th, 1911.

THE ROYAL ARMY MEDICAL CORPS COMPASSIONATE FUND.

TO THE EDITOR OF THE "JOURNAL OF THE ROYAL ARMY MEDICAL CORPS."

Sir,—Lieutenant-Colonel Wilson's letter in regard to the above Fund is sad reading.

Two things occur to my mind in reading it: (1) That the companies are not subscribing enough; (2) that many officers are not subscribing at all. If I may be permitted to make a suggestion, it would be that a special effort be made this (Coronation) year to put our Compassionate Fund on a more prosperous basis.

The suggestion is that each company be asked to give £5, and that each officer be asked to subscribe. The officer's donation should be in proportion to his rank, and retired officers at 10s. a head. If this were carried out, it would bring in a good sum, calculated as follows:—

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<th>Groups</th>
<th>Amount</th>
<th>Notes</th>
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<td>12 Surgeons General, at £1</td>
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