(3) Another test depends on the application of Weber's test. A large tuning-fork is set in vibration, and the hearing of both ears tested. The sound is of course heard best in the unaffected ear. The tuning-fork is then placed on the forehead. If there is any interference with the mechanism of conduction in the middle ear the sound is heard best on the affected side; a malingerer will nearly always say that he hears it better on the unaffected side, or that he cannot hear anything. If the sound ear is then plugged and the test repeated, a man whose hearing is really deficient in one ear will hear better with the ear which has just been plugged; a malingerer on the other hand usually says that he cannot hear anything at all.

(4) If Rinne's test is employed a malingerer will usually say that he fails to hear the tuning-fork when it is placed on his mastoid process.

(5) One tube of a binaural stethoscope is tightly plugged, without the knowledge of the person to be examined; the stethoscope is then placed in his ears, the plugged tube leading to the sound ear; a sentence is then read out to him and he is asked to repeat it; if he does so he must have heard it with the defective ear.

(6) A solid plug is shown to the malingerer and he is told that it will be used for testing his hearing; a similar but perforated plug is then placed in the sound ear. A malingerer will usually say that he cannot hear anything. He is then shown the plug, the perforation being pointed out, and is told that the test will be made again. On the second occasion the solid plug is placed in the sound ear. If, as is probable, he now hears well, it must be with the defective ear.

C. E. P.

The Cause of Arterio-sclerosis.—Saltykow (Münch. med. Woch., October 17, 1911, p. 2,232) thinks that arterio-sclerosis is most frequently caused by some infective process. The actual species of the exciting micro-organism is of no great significance if we can rely on animal experiments. Next come chemical poisons, of which alcohol holds the first place. The beginning of arterio-sclerosis often dates from youth, though its evil effects may not be apparent until late in life.

C. B.

Correspondence.

MOBILIZATION OF FIELD MEDICAL UNITS.

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

SIR,—In a lecture on "The Mobilization of Field Medical Units," published in the May number of this Journal, there occur some statements which are not in accordance with the Regulations for Mobilization, nor with the procedure which would be carried out. As it is desirable that there should be a clear understanding on this important subject, I venture to draw attention to these. I take them in the order in which they occur. For definition of a unit see para. 2, Regulations for Mobilization.
Correspondence

Matériel.—Under the heading "matériel" it is stated that the special articles—namely, Wolseley helmet, brassard, field dressing, &c., are obtained by the company. This is not the case, as they are stored with the Mobilization Equipment of the unit and would be drawn by it (para. 111, Mobilization Regulations, and para. 4, Clothing Regulations, Part III.). The same remark applies to waterproof sheets and blankets which are on the mobilization store table of a unit, and must therefore be drawn by it. Emergency food is not issued by the company but by the unit (para. 116, Mobilization Regulations).

Duties of Officers Commanding a Company of the Royal Army Medical Corps.—"Recall all on leave." This has since been altered; it is now only necessary in the case of a partial mobilization (para. 197, Mobilization Regulations).

"Render Army Form D. 418 (Separation Allowance)" and "Render Army Form O. 1796 (Allotment of pay)." These should be rendered by the unit in whose pay the soldier will be—i.e., by the officer commanding the unit formed on mobilization.

Verification of entries in A.B. 64. This is the duty of the officer commanding the unit (para. 213, Mobilization Regulations and A.O. 33(4) of 1906).

"Draw supplies and issue emergency food." This could not possibly be carried out by the officer commanding the company. They are part of the war outfit of a field or line of communication unit and would only be issued to it (paras. 17, 115, and 116, Mobilization Regulations).

"Draw and issue the special articles, &c." These duties are carried out by the officer commanding the unit. See previous remarks under heading "matériel."

In the suggestions for facilitating mobilization it is assumed that "as is usually the case a company of the Royal Army Medical Corps has to furnish personnel for several field units who are all mobilizing in the close vicinity." A reference to Table III, Mobilization Instructions, Army Medical Service, will show that the place of mobilization is very often at a distance or even in another district from the company which provided the personnel.

Duties of the Officer-in-Charge of a Field Medical Unit on Mobilization being Ordered.—It is stated that this officer should proceed to the headquarters of the company of the Royal Army Medical Corps, and having collected any available personnel should proceed with them to the place of mobilization.

According to para. 144, Mobilization Regulations, it is his duty to proceed at once to the place of mobilization to take command of the personnel who report there for duty.

I am, &c.,
Woolwich, T. P. Jones,
June 10, 1912. Major, R.A.M.C.