the diagnosis was based on bacteriological grounds only, were included, the case-mortality would be about 20 per cent. If well-marked clinical symptoms formed the basis of diagnosis, the case-mortality will reach 50 per cent. Kaup, referring to experience in the Austrian Army, was a firm believer in the prophylactic value of inoculation. The case-mortality amongst the inoculated varied from nil to 20 per cent; amongst the uninoculated it varied between 40 and 60 per cent. When inoculation against cholera is practised during the course of an epidemic, the number of cases is suddenly cut off some five to eight days after the inoculations. The protection conferred by inoculation does not last for more than three or four months, and antibodies are not to be found in the serum after then. In the Austrian Army re-inoculation is practised after three months if there is any danger of infection. For the purposes of re-inoculation a dose of at least two cubic centimetres of the official vaccine should be given; the dose of one cubic centimetre was not sufficient.

(To be continued.)

Correspondence.

[We have been asked to publish the following letter.—Ed.]

TO THE EDITOR OF THE "BRITISH DENTAL JOURNAL."

Sir,—As a dental surgeon, with two years' experience of work among the troops near the Front, I was delighted to read Captain Finn's paper in your issue of January 15. His remarks on the provision of dentures express my views exactly. There is far too much eagerness to "clear out" roots and decayed teeth, thereby putting the man "hors de combat" for a considerable time. A large proportion of these men subsequently fitted with dentures eventually carry the latter in their pockets or haversacks, where they get broken or lost, or break them on the first biscuit they attempt to eat. My plan has always been to preserve every scrap of tooth substance possible. Many a mouth, which at first view looks quite hopeless, when cleaned and the soft and decayed dentine cleared away, if the remaining cavities and roots are rapidly filled or capped with cement, after sterilization, can be rendered quite serviceable, and the man can carry on in comfort for several months. Half a dozen roots when opposed by teeth in the opposite jaw are of far more value out here than when replaced by the most perfectly-fitting denture. In my opinion it is waste of time and material to fit up middle-aged men with dentures who have not previously worn them, and who are proceeding to the Front.

I am, Sir, etc.,

C. L. MACKANESS,

19, Hanover Square, W. Captain Dental Surgeon, Att. R.A.M.C.

NOTICE.—The blocks for the illustrations in the article on "The Surgical Anatomy of the Synovial Membrane of the Knee-joint," by Colonel A. Fullerton, which appeared in our February issue, were kindly supplied by the British Journal of Surgery.