Boots should be fitted when the man is carrying a full marching load. A couple of sand bags of the required weight might be kept in the quartermaster's store for this purpose. The individual should put on the boots and march up and down the room for a few times before accepting them. Any tendency merely to hand to the individual a pair of Army boots of the size similar to those normally worn in civilian life is to be deprecated. All boots should preferably be dubbined and each pair should be worn on alternate days in barracks. Should a polished pair be considered necessary for appearance sake on parade, the dubbined pair should be worn frequently.

In spite of all that one can do, blisters and abrasions will appear. The treatment of these conditions varies with the individual's tastes and experience. There is one method which I strongly recommend and have personally carried out in a large number of cases, it is particularly efficacious for large intact blisters. The blister is first aseptically punctured and thoroughly drained through a large hypodermic needle which is left in situ. Through this needle a quantity of a solution of 20 per cent tannic acid in 1:1,000 Hg perchloride, sufficient to distend the blister, is injected. The needle is then withdrawn and the aperture sealed with collodium. In this way the solution is kept in contact with the underlying raw surface. Within an hour or two it will be found that the raw base of the blister will be healed and perfectly dry and hard. I have proved this by removing the pellicle of the blister. It strikes me to be a particularly good and effective treatment. Blisters so treated in the evening will be completely healed up next day. Exposed abrasions after thorough cleaning may be treated as above, the solution being applied on a dressing.

To conclude, one cannot lay too much stress on the proper fitting of boots and the necessity for their thorough moulding into shape.

A treatment has been described which, I think, is worth a trial.

SEPTIC ABORTION TREATED WITH "PRONTOSIL."

By Captain R. St. J. Lyburn,
Royal Army Medical Corps.

The patient, aged 35, the wife of a non-commissioned officer, had on two previous occasions successfully brought about abortion by using sea-tangle tents. On this occasion in spite of preliminary sterilizing of the tents in alcohol for twenty-four hours, the procedure was unfortunately followed by acute metritis and septicæmia.

The patient was admitted to the Military Families Hospital, Moascar, on March 22, 1937, two days after the complete or partial expulsion of the foetus had occurred, suffering from hyperpyrexia, repeated rigors, and acute pain in the left iliac fossa. She was very ill, in spite of stating that she felt extremely well—the condition of euphoria.
The pulse was weak and thready—rate 132. The white cell count was not unduly raised. There were no signs of peritonitis. Blood cultures were not taken as the patient was undoubtedly septicemic.

On the evening of admission five cubic centimetres of "Prontosil" soluble were given intramuscularly and repeated every four hours.

The following day the patient still looked very ill and was delirious. Headache and sleeplessness were very troublesome.

On March 24 the temperature had fallen to 101·7° F. and the pulse was 104. The pain in the left iliac fossa had diminished considerably. As Bayers recommended that "Prontosil" tablets be used with the "soluble" brand in severe cases, these were procured and one tablet (5 grains) was given three times a day.

Next day she was much improved. Temperature was 98·2° F. and pulse 92. The "Prontosil" soluble was discontinued and the tablets alone given (5 grains) three times a day. The improvement in the patient's condition from the previous day was remarkable.

On March 26 the temperature and pulse were normal. Appetite was returning. There was no headache. She slept well. "Prontosil" tablet (5 grains) given twice a day.

On March 28 the patient was convalescent. "Prontosil" therapy discontinued.

The patient was discharged from hospital on April 2, 1937.

When she has regained her normal health an investigation will be
made to ascertain whether, or not, any foetal fragments are left in the uterus.

Recently "Prontosil" has been acclaimed to be a very effective cure in staphylococcal and streptococcal septicæmias.

This case would appear to support this claim.

I am indebted to Lieutenant-Colonel S. M. Hattersley, M.C., Royal Army Medical Corps, Officer Commanding, Military Hospital, Moascar, Egypt, for permission to send these notes for publication.

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**Echoes of the Past.**

**WAR EXPERIENCES OF A TERRITORIAL MEDICAL OFFICER.**

BY MAJOR-GENERAL SIR RICHARD LUCE, K.C.M.G., C.B., M.B., F.R.C.S.

*(Continued from p. 414, vol. lxviii.)*

CHAPTER XXIV.—Life in Jerusalem.

Life in Jerusalem during the months we occupied the German Hospice was by no means unpleasant. Our quarters were comfortable, almost luxurious. Good German beds and bedding, which included even the well-known German 'eiderdown' covers, were very pleasant to campaigners who had been away from such luxuries for nearly a year. The Hospice combined the characteristics of a first-class hotel, a palatial residence for the Kaiser or any of his family who might care to visit Jerusalem, and a monument placed on the most imposing site in the vicinity of Jerusalem to be a constant reminder to the inhabitants of the greatness of the nation who had placed it there. The magnificence of the place itself and the beauty of its surroundings were most stimulating, while the thought that we had succeeded by our victory to the prestige of the builders, could not fail to stir the imagination of even the most matter-of-fact and most prosaic of British soldiers.

The only drawback was the cold during the winter months. There was not a particle of fuel to be had in Jerusalem and exposed as the building was to all four quarters of the heavens, not even its double windows could keep out the cold. We sat shivering in our greatcoats at our work and crept gratefully under our eiderdown pillows as soon after dinner as was legitimately possible. The weather in winter, though frequently