

promote freedom in the expression of opinion, and abuse could always be checked by the exercise of the editorial veto. Similarly, if a *nom de plume* were allowed, and its inviolability recognised, we might extract many interesting personal experiences and reminiscences which the authors might be chary of recording if their identity were revealed; parenthetically, it may be added, that here also the editor might control any threatening epidemic of the Gilbertian malady—"a taste for faultless fact." Or, again, why should not the Journal take up the cudgels in our defence when ill-informed, irresponsible anonymity vilifies us by parading mendacious "facts" in the columns of contemporaries? I do not believe in taking abuse "lying down," or turning the other cheek to the smiter; ethically, no doubt, it is very commendable, but in a workaday world it pays better to hit back, and hit hard.

Lastly, the *clientèle* of our Journal is necessarily limited, and even if every officer subscribed financial success would scarcely be assured. Why not therefore make a bid for an extended circulation by giving more encouragement to our brethren in the Reserve Forces to discuss questions in which they are more directly interested? Such expansion, moreover, might well mean increase in advertisements.

I apologise for the length of this letter, but the subject appears to me to be an important one; and I may be allowed to express the hope that, having raised it, others will favour us with their views, so that we may gauge what is the true path to that success whose attainment is comprised in the triple formula, instruction, general interest and concomitant popularity.

Yours faithfully,

Bombay,

December 11th, 1906.

R. H. FORMAN,

Colonel, R.A.M.C.

THE TREATMENT OF SCABIES BY BALSAM OF PERU.

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

DEAR SIR,—Since Lieutenant-Colonel S. C. B. Robinson, R.A.M.C. submitted his paper on the above subject to the Director-General in August last, this method has been subjected to further trial (to the exclusion of all others) in the Military Hospital at Colchester.¹ The results have been absolutely satisfactory. In no case has the patient ever complained of itching, either on the first night after the application or subsequently. This would appear to prove that the parent *Acarus* is killed within a few hours. As regards the ova, it is uncertain whether the fumes of the balsam have the power of penetrating the capsules at all stages of their development, or whether it is necessary for them to arrive at some stage of maturity before it is effective. I have referred this

¹ [An account of the method employed at Colchester was published in the Journal for January, 1907, p. 52.—Ed.]

question to Dr. James Galloway, a member of the Advisory Board, and an authority on skin diseases. He replied as follows: "So far as I know no authentic data can be given as to the actual death of the ova of the *Acarus scabiei* after the application of a parasiticide to the skin. Any statements as to the probable duration of life are derived from clinical experience only." It was on account of this uncertainty that bathing was forbidden for one month after the application of the remedy. From further observation it has been found that, provided the initial bathing and application are *faithfully* carried out, there is no necessity to prohibit bathing for so long a period. The later cases have been allowed a bath after fourteen days, and in future it is intended to gradually reduce this period. It is very probable it will ultimately be found that it will be quite safe to allow bathing after two or three days, as is done in some of the continental armies where this treatment is carried out. The patient should be kept in a *very hot* bath for at least half an hour and soap plentifully used. The other day I caught a patient standing in a tepid bath and washing himself without soap. Such a case would have been quoted as a relapse. The varnish must be evenly and continuously applied to the whole surface of the body. Three ounces of balsam mixed with 1 ounce of glycerine is required for a man of average size. The whole treatment *must* be supervised by an intelligent orderly.

I am, &c.,

F. J. W. PORTER,

Major, R.A.M.C.

Colchester,

December 24th, 1906.

THE "ALLIES" OF ENTERIC FEVER IN INDIA.

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

SIR,—Lieutenant-Colonel S. Glenn Allen, R.A.M.C., in his interesting article "The 'Allies' of Enteric Fever in India," in the January number of the Journal, mentions "the Thornhill system of trenching" as being one of the dangers of the Indian conservancy system. With the rest of his article I am in general agreement, but in this particular I feel bound to differ from him. The problem of enteric fever in barracks in India depends, in my mind, in the first place on the question of removal, in the second place on the question of removal, and in the third place on the question of removal; and under "removal" I include custody of excreta pending removal. The question of "disposal" I look on as entirely secondary. Given a good system of removal, a system, that is, which follows the old maxim of *cito tuto et jucunde*, and which removes to a safe distance and safe position, and the method of disposal is, in my opinion, *quod* causation of enteric fever, a matter of small importance.

The crux of the matter is the safe distance and the safe position. As regards the former I would say at least two miles; as to the latter the prevailing wind, and in strategically important stations the possible permanent or temporary extension of the cantonment must be taken into consideration.