

Unofficially, and thanks to the aid of a far-seeing adjutant, I was enabled to carry this system of "company chiropodists" into practice during the Salisbury Plain manœuvres of 1904, and to contrast the result with a regiment in which no trouble was taken to look after the soldiers' feet, and in which there was no chiropodist at all. One instance is absolutely conclusive of the superiority in marching of the battalion with the company chiropodists. A march of about thirty miles was made over bad country with a bivouac in the middle; both regiments performed practically the same duties, marched exactly the same distance, and had had the same previous training. The morning following the return to camp, the battalion I had trained in chiropody and in which the chiropodists had been supplied with powders, ointments, &c., to carry on the march, had 2.5 per cent. per company sick with sore feet, whilst the other battalion had over 25 per cent. per company. These figures are very high, but the men who reported sick were mostly newly-joined recruits and unaccustomed to marching, also it practically represented the sick of two days; but in whatever way it is looked at, it shows that much can be done to improve the efficiency of the soldier if proper attention be paid to the care of his feet.

A SHORT REPORT ON THE CUBICLES IN THE INKERMAN BARRACKS, WOKING.

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IN the year 1902, ninety-eight cubicles were fitted up in six barrack rooms as an experiment. The idea seems to have been taken from the Rowton houses, and the object in view was the improvement in the condition of living in barracks for the private soldier, and the ultimate attraction of a better class of men into the Army. There is no doubt whatever that the system is greatly appreciated by those who are fortunate enough to obtain a cubicle, but the great drawback from a commanding officer's point of view is (in this barracks at least) that a certain number of men are detached from their companies, and are apt to get out of touch with their comrades in the general barrack rooms. A better system would be to have part of a large barrack room, for one company, fitted up with cubicles, and thereby keep the men together. The loss of accommodation and the enormous expense of such an arrangement would be an effectual bar to the adoption of the cubicle system for the Army generally. For disinfection, on account of infectious diseases, they are inconvenient and require a larger expenditure of sulphur dioxide than barrack rooms, on account of their being cut up into so many small spaces, to say nothing of the enormously increased

area of paintwork to be treated by the Royal Engineers. As neither Notter and Firth nor Munson make any mention of cubicles, a short description may prove not uninteresting to my brother officers.

Three different styles of cubicles were erected; in two rooms the cubicle partitions, including the door, reach the floor on all sides; in the second model there is a space of 6 inches left beneath the door; and in the third style there is a 6-inch interval between the woodwork and the floor on three sides, the wall of the room forming the fourth side in all cases, of unplastered limewashed brick. The partitions are 6 feet 6 inches high throughout, of woodwork painted khaki colour. In two cubicles panels of a sort of *papier maché* or wood pulp material were put in, but they become disfigured by nail holes more easily than wood. The lighting is from the windows of the rooms on the first floor, and on the upper floor is supplemented by the skylights. The average window area is 7 square feet, and there is one electric light for every two cubicles. The size of the cubicles varies considerably, and is mainly determined by the position of the windows. Some have an entire window to themselves, whilst in others, the partition between two cubicles divides the window for some distance from the bottom in the first floor rooms, and quite to the top on the upper storey. This arrangement is calculated to cause friction between two neighbours, if they do not both happen to agree as to the advantages of fresh air. The men prefer those cubicles which are closed in all round, as there is no draught, and the dust does not blow in from the adjoining cubicles; but I think the movement of air in them is not sufficient to keep them sweet, and I prefer those with a space under the door, as they are better ventilated, and the draught is very slight.

The exact measurements of the cubicles are: length 12 feet 6 inches, width 5 feet, partition 6 feet 6 inches, door 2 feet wide, with 6 inches space below. Window 5 feet 6 inches by 3 feet. The average window area is 7 square feet.

The furniture of each cubicle is: an iron folding bedstead 6 feet 6 inches by 2 feet 3 inches, with a wire spring bottom. A cupboard on the wall above the bed 3 feet 3 inches by 1 foot 6 inches by 1 foot 3 inches, fitted with lock and key. The top of this cupboard serves as a shelf for clothes, &c. A small deal table (with drawer) 3 feet by 1 foot 6 inches. A Windsor chair, a hat rack with two pegs, and a rifle rack.

The men who occupy the cubicles are of good character, good shots, and smart men as a rule; in fact, the possession of a cubicle is a reward of good behaviour. I heard of one man who declined a Lance-Corporal's stripe, because he would have been required to give up his cubicle and live in a barrack room. The men decorate their sanctums with pictures, photographs, and various fancy articles, such as Japanese fans, screens, &c., and many of them look very smart with a rug on the floor, and a cover on the table. In a cubicle room the accommodation is reduced

by about one third, and the cubic space per man increased in an inverse ratio, though it appears to me the increase of space is not so advantageous on account of the interference with the circulation of the air. Where space allows, a barrack table and two forms are put in the room for general use, such as brushing clothes, games of cards, &c., but not for meals, which are taken on the ground floor in the company dining rooms. Taking them all round there is an average cubic space of 1,000 cubic feet per man. The warming is done by hot water radiators in the centre of the rooms on the first floor, and 4-inch hot water pipes around the walls on the upper floors; the men prefer the latter. There are fire places in all the rooms, but they are not used.

DYSTROPHIA MUSCULARIS PROGRESSIVA INFANTUM.

BY CAPTAIN W. C. CROLY.

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THE patient was a son of a Staff-Sergeant of the Supply and Transport Corps, Cannanore, India.

Family History.—The father of the patient is one of eight sons and four daughters, who are all healthy, the parents and grandparents also being long-lived and healthy. The mother is one of a family of seven girls, all of whom, as well as the parents, are very healthy. All the uncles and grandparents were very healthy and remarkable for longevity. In fact, there is nothing to show that the child's complaint is hereditary, so the father writes.

History of the Case.—The young patient, now aged $4\frac{1}{2}$, was first treated in this station for convulsions, November, 1904; next in January, 1905, for a small incised wound on the top of his head, which was slow in healing, and was the result of a fall off a balcony. It was noticed by his parents that the boy was fidgety and restless, and backward for his age in nearly every way, and he could not concentrate his attention to learn his lessons. Though muscular and apparently strongly built, he could not support himself from a horizontal bar for more than a few seconds, whereas his younger brother could do so for about three minutes and pull himself up and down. He was given syrup calcii lact. phosp., and ordered to the hills (Wellington) for the hot weather with his mother and two brothers.

On May 30th, after six weeks in Wellington, the boy's walking suddenly became very bad. He could not step over a two-inch doorstep without help, and was continually tumbling down on the floor, toppling over on the back of his head, and remaining there till picked up, as helpless as a tortoise on his back. The mother states that she brought the boy to the Station Hospital, Wellington, where he was seen by Lieutenant-Colonel S. Townsend and Captain Crossley, R.A.M.C. His condition