The motion was supported also by Mr. S. COWELL, who thought that the little abuse that existed at the Sussex County Hospital might be done away with if subscribers were more careful in the distribution of letters; and by

Mr. MORGAN, who said that the figures given for the Children's Hospital included patients from the country.

A Provisional Committee, consisting of the Rev. R. P. Hooper, Dr. Waring, Dr. Marsh, Mr. Greenyer, and Mr. Walter Dodd was appointed to take steps to secure the appointment of a representative committee.

A METHOD OF DISPOSING SAFELY OF TYPHOID DEJECTA.

It is generally admitted now that the B. typhosus may be found not only in the alvine but also in the urinary evacuations. It is in the former, however, that it is most dangerous. It leaves the body enveloped in a mass of organic matter convenient for its growth. The material is often transferred at once to a receptacle, containing an even larger amount of similar filth, and the whole "midden" becomes infected. Or, imperfectly disinfected, the motion is hurried into the trap of the watercloset, and thence (perhaps the second or third time the latter is used afterwards) it finds its leisurely way to the town sewer, to reach perhaps later, with its now multiplied descendants, the river supplying some neighbouring town. The disinfection of the bacillus is not a thing to play with. There are, of course, plenty of disinfectants quite capable of ending its career if properly applied. As most of these have the power of coagulating albumen it is of importance that the solution at first added to the motion should not be too concentrated. If it be, an insoluble casing is apt to be formed around many of the germs protecting them from the further action of the germicide. The first solution should be strong enough to prevent growth of the bacillus in the bedpan, yet weak enough to allow the liquid to assist in disintegrating the evacuations so that the stronger disinfectant, afterwards added, may actually get at the material to be disinfected. Both the first weaker solution, and the further strong chemical added to it later on, must each have time to do its work.

Too much zeal is apt to have bad consequences. Time must be given for each stage. The first may certainly be assisted mechanically, the piece of firewood used for this purpose being, of course, immediately burned. But even with this assistance considerable time must still be given to both the first and second stage. We rather press this point, for we have seen a trained nurse pour a little carbolic acid into a bedpan and send its contents at once down the closet. The carbolic acid was of course washed away by the flush, the bacilli scotched not killed.

Burying the motion is a practice not unattended with risk. A few inches below the surface organic substances may remain long undecomposed. Probably the typhoid bacillus finds a quiet resting-place, and is perhaps harmless till again disturbed, but it may not be killed.

It is said to be safer to put the fæces quite close to the surface, where the more active soil bacteria exist in greatest numbers. But the risk of accidents by this method are so obvious that few of us are likely to employ it. There remains the question of burning the peccant material. Where, as in some manufacturing towns, the pail system of night soil removal is in use, it is the habit of some of these authorities to send a special pail, coloured red or green, to every house where a typhoid case is known to exist. This pail is charged with a powerful disinfectant, is usually fitted with an airtight lid, and is removed at short intervals and its contents sent to the destructor. Attempts have also been made to burn the motions at home. There are difficulties about this process of a sufficiently obviously character. If it be determined on, the bedpan should first be lined with a layer of paper. On this there should be another layer about a third of an inch thick of peat moss. This can be procured from any hay and straw dealer. It can also be had specially fine and carbolised, or treated with an antiseptic obtained from the pine. In the latter form it is put on the market as "pinol." If the motion is very liquid, or accompanied by a large quantity of urine, the amount of peat may have to be considerably

increased. As this substance is highly absorbent, an extra quantity may be added if enough has not been put in at first to account for the whole of the liquid in the motion. The kitchen fire must have been kept in an active state. There must be several inches of bright red coal. Then a few coals are removed from the top, and the contents of the bed pan transferred carefully to the hottest part of the fire, the whole mass being lifted at once by means of the paper, and at once covered by the removed cinders. Some little knack is needed to carry out even this simple process without spilling anything. It is wise to see the nurse make a few blank experiments before trusting her so to deal with the *materies morbi* of typhoid. There is no real difficulty, but a certain amount of cool dexterity is desirable. Of course there are many variants of this method—absorbent cotton wool may be substituted for peat, even dry earth may be used, where neither is immediately attainable, but as it is not combustible it is not so good. Coal dust may be added or used along with earth. It is combustible enough, but not very absorbent, though, if used in sufficient quantity and finely powdered, it may help over an emergency. Sawdust may also be used. A piece of an old draw sheet under the paper (not instead of it) is serviceable. It enables the contents of the pan to be more easily removed. It must of course be burned. The bedpan itself may be afterwards rubbed out with a little more peat, and then filled with perchloride solution, 1 in 1,000, and this left in a couple of hours.

In reference to this subject, Dr. Henry Armstrong has sent us the following letter:

SIR,—*Appropos* of Dr. John D. Macdonald's letter in the BRITISH MEDICAL JOURNAL of October 30th, relative to the cremation of typhoid excreta, I beg to remind your readers that a specimen of the "Newcastle steriliser" for dealing with such excreta, devised by Mr. W. George Laws, city engineer of Newcastle, and myself, was exhibited in the Public Health Section of the Congress of the British Medical Association, held at Newcastle in 1893, and that a paper describing it was then read by Dr. C. U. Laws.¹

This apparatus, which consists essentially of a hermetically closed iron vessel of a capacity of 30 gallons, in which evacuations and other infected liquids are boiled under steam pressure, was used in the Cholera Hospital at Newcastle during the prevalence of the disease, and was found to work well. It is equally adapted for the sterilisation of infected discharges of enteric fever. The makers are Messrs. Goddard, Massey, and Warner, Nottingham, from whom full details may be had on application.—I am, etc.,

HENRY E. ARMSTRONG,
Medical Officer of Health.

Newcastle-upon-Tyne, Nov. 4th.

CORPORATE AND MEDICAL REFORM COMMITTEE.

WE are requested by Mr. George Jackson to publish the following letter which he has addressed to Dr. Glover, in reply to Dr. Glover's letter to him published in the BRITISH MEDICAL JOURNAL of November 6th, p. 1366:

DEAR DR. GLOVER,—Your letter of November 1st has been forwarded to me. I now beg to acknowledge and answer it. In doing so, I must say that I did not suppose you would object to our asking your approval of, or dissent from, the points we submitted, which had been answered favourably both by candidates and members of the General Medical Council (direct representatives)

I think you will admit that every movement must have a beginning; even the *Lancet* was not always the powerful paper it is now, and in its early days was scoffed at by the then leaders of the profession. Personally, I am quite willing to acknowledge your services in the cause of reform, and regret only, that owing to the opposition of the representatives of the corporations they have been of so little avail. That is to a great extent your misfortune, and not your fault. I quite agree with you that it is better that this unpleasant discussion should now cease. I nevertheless hope that all true reformers will have your assistance.—I remain, dear Dr. Glover, yours very sincerely,

Plymouth, Nov. 9th.

GEO. JACKSON.

¹ This paper was published in the BRITISH MEDICAL JOURNAL of August 12th, 1893, p. 366.