of grain. Our analysis of the extract enables us substantially to confirm the more important analytical data quoted by the proprietors, while we are unable to agree entirely with some figures of minor importance. The "Extract" is the substance which gives the name to the other food preparations of the proprietors. "Frame Food Diet," previously known under the name of "Frame Food Porridge," is a fine dry powder of the character of a biscuit food. It is a cooked wheaten food containing "Frame Food Extract." Both preparations are well manufactured, and are free from adulterants and from objectionable impurities. A slight improvement in the manufacture of the "Extract" would probably prevent the presence of a certain proportion of non-soluble matter in it, the value of which is doubtful. The claim made as to the powers possessed by these preparations for developing the growth, and maintaining the healthiness, of the tissues of the body; and as to strengthening powers, require necessarily to be put to the test of long practical experience, but the idea of the patentee is a good one, and the preparations are deserving of adequate trial. Upon theoretical grounds they ought to be found very useful.

LOOFAH FLESH RUBBERS.

THESE loofah flesh rubbers are very ingeniously devised and conveniently arranged. They are strong, as the tape which goes through the loofah is doubled, fastened at the ends, and well secured in the handles. It can be applied to any part of the body, and in virtue of the method of arrangement can be used

as a dry rubber for stimulating the skin after a bath. The arrangement of handles and covers will, no doubt, extend the already considerable popularity of loofah as a flesh rubber and for use after the bath. They are sold by Mr. J. Favets, Sheppy Yard, Minories.

NASAL BOUGIES.

Mr. W. R. H. STEWART (Devonshire Street, W.) writes: In the BRITISH MEDICAL JOURNAL of July 16th, Dr. Richardson Rice, of Coventry, draws attention to nasal bougies for the treatment of nasal diseases as something novel. Might I be permitted to suggest a reference to page 378 of the 4th edition of the *Practitioner's Handbook of Diseases of the Ear and Naso-Pharynx*, published conjointly by Macnaughton Jones and myself? Dr. Rice would there find "medicated nasal cylinders" quoted as an improvement on "the old-fashioned nasal bougie," for the cylinders do not obstruct the breathing space, and respiration is therefore unimpeded by the treatment.

THE SO-CALLED GOLD TREATMENT OF INEBRIETY.

IN our issue of the 16th inst. we published extracts from a letter written to us by Dr. Keeley. We have since been requested to publish the whole letter, which we accordingly do. (The paragraph in smaller type was published last week.)

SIR,—I regret to have to trespass upon your hospitality again in order to answer the statements which appear at pages 36, 49, and 85 of the BRITISH MEDICAL JOURNAL.

1. As to the English gentlemen who propose to found institutes in this country for the cure of drunkards upon my methods, whether they subscribe £150 or £150,000, is no more relevant to any professional issue than is the question whether Dr. Kerr should charge 1s. or 1s. 6d. for visiting his patients in Lisson Grove.

"I have already stated that my remedies do contain gold. I now also state that they do not contain either strychnine or atropine. You are being misled by Dr. Kerr's rubbishy (*sic*) analyses. Your JOURNAL, at page 1370, states that my remedies contain 'various potent and lethal drugs,' yet at page 85 it states, on the authority of an anonymous analyst, that my remedies (No. 1) contain nothing either 'potent or lethal,' except 27.55 per cent. of alcohol. Surely these statements are due to a writer who lacks something in the way of editorial supervision. As to the 27.55 per cent. of alcohol, this may be very shocking, considering that one teaspoonful of this is taken seven times a day. But I do not intend to deprive my patients of alcohol, I merely put them on their parole that they get no alcohol except what I give them, and it is well known that if they break their parole I dismiss them. This punishment almost invariably prevents them from breaking their parole. As to alcohol, I neither segregate my patients nor do I deprive them of liquor. The essence of my treatment is that I neutralise the drink-crave."

When they have their first treatment a four-ounce flask of the best whisky or brandy is given them to carry in their pocket and to drink when they choose. They are told to come back and get their flask refilled as they need it. The result is that on the second or third day they almost invariably bring back their flask and ask to be relieved of it, saying they have lost their taste for liquor. But, if I did incarcerate my patients instead of relying on their parole, if I did prohibit my patients from taking liquor, the innuendo contained at page 85 is a libel, inasmuch as you compare me with the men who pretend to cure drunkards by selling them disguised rum under various names. And considering that every pharmacy in London sells its preparations with from 86 to 30 per cent. of alcohol, why should you blame me because one of my remedies is a tincture containing 27.55 per cent. of alcohol?

3. I have already stated that from 1,500 to 2,000 inebriate physicians have made a pilgrimage to Dwight, and placed themselves under my treatment. In all, more than 70,000 drunkards have made a like pilgrimage to my institutes and placed themselves under my treatment. Among this vast congregation of drunkards there are not only troops of physicians, but troops of clergymen, and lawyers, and journalists, and men whose brains lead in the work of the world. Of these an enormous proportion have been cured of their drink crave, and have regained their positions in society, and since have done useful work in the world.

You are correct in stating that some of these patients have died. Among these 70,000 drunkards and opium eaters there have been the usual percentage of insanes, of epileptics, of men with tumours of the brain, of men with thickened arachnoid, of men with worn-out viscera. I did not undertake to put into these men new viscera, nor to provide them with the elixir of life. But from the tone of your articles I gather that these inebriates, these cases of delirium tremens, these ruined drunkards, never die in your London hospitals. If that be so, I can only say that in our hospitals a definite proportion will die, and that I am prepared to compare my deaths among these cases with those of corresponding patients in the London hospitals.

4. It is true that I reserve, for the present, the details of my treatment; and that, when Dr. Kerr called upon me, I refused to give him my prescriptions in order that he might use them in his blundering way, and bring me into disgrace. But this is a point of mere professional etiquette, and before I discuss etiquette with Dr. Kerr, I must see that his conduct squares with common honesty of purpose. I do not yet understand his explanation of his conduct. He called upon me three times. As I understood, he called in order to make my acquaintance as a professional brother. It was only on the last occasion that I was able to see him; but he then paid me nothing but compliments; he was effusively complimentary as to "the great work you have done," and he never led me to imagine that he did not regard me as a "respectable member of the profession." He did not even confine himself to verbal compliments; he brought me presentation copies of his books and papers, and, in the flyleaf of his book he had been kind enough to write me complimentary phrases. Yet in his recent performance as "President of the Society for the Study of Inebriety," he admits that he went behind my back to Bishop Barry, and, without notice to me, made some statements which he has not ventured to repeat in print. I now again state that I am still in London, and ready to answer any statements that may be made about myself or about my treatment of my patients, and I now call upon Dr. Kerr to say anything he can say against me in the pages of the BRITISH MEDICAL JOURNAL, so that I may answer it. I submit to you that his proper course would have been to attend the meeting under Bishop Barry's chairmanship, and there make his statement in a manly way, where I could have answered him. Why should he suggest that Bishop Barry was not competent to manage a public meeting in such way as to avoid any disservice to the public? His suggestion that Bishop Barry had no business to take the chair at a meeting called to consider some new proposals for the cure of drunkards, except subject to Dr. Kerr's approval, is an absurd evasion.—I am, etc.,

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