upon automobilism as one way out of the ever-pressing problem of the stable account. But we are not yet convinced. Everyone will admit that there are roads on which a motor could not safely be taken—indeed, could not be taken at all; and that now and again there is weather in which starting a motor might be a difficulty, although a modern motor once started ought to go even in very cold weather. But it must be remembered that there are roads on which one cannot take a carriage with any comfort, and that there are days when one's horses, if they are worth anything, don't go out. Practically, it seems to become a question chiefly of roads. For the elderly or delicate man, who must always drive up to the door, the ordinary means of locomotion will probably always remain the best; but for the strong man, who is ready to use his legs when occasion requires, the automobile, as it seems to us, offers great advantages in districts where the roads are decent and the gradients are not too heavy, allowing him with great facility to get within easy walking distance of most of the places he wants to visit.

OPEN-AIR "CURES" AND OPEN-AIR WORK.

Now that the public mind has become fairly broken in to the idea of the utility of open-air in the treatment of consumption, it would be well to impress upon those who are threatened with tuberculosis, as well as upon those who, by aid of sanatorium treatment, are as brands plucked from the fire, that it is as a preventive rather than as a cure that "open air" finds its greatest field of usefulness. People are so apt to regard a "treatment," or, as it is now fashionable to call it, a "cure," as a thing to be taken like a pill and be done with, and to look on all therapeutic measures as intended to restore them to their original condition and to enable them to do again the very thing that had led them into difficulties, that it is very hard to persuade them that the occurrence of their disease is not entirely due to the "infection" to which they are now taught to trace back its origin, that the fact of their being attacked by tuberculosis shows that they have a tendency that way, either from constitution or mode of life, and that the sanatorium treatment, the open air, the high feeding, and all the other things on which they are taught to pin their faith, should not be regarded as means of cure in their interpretation of the word, that is as means by aid of which they may be restored to their old work and their old surroundings, but that they ought to be regarded as means by which they may be lifted once more out of their difficulties, and be given one more chance of reforming their surroundings and leading a more healthy life. Men want to "get back to work"; that is, to get back to the mode of life which has proved disastrous to them. What to do with those who are recovering from, and with those who are threatened with, tuberculosis is a very serious problem. It is easy—at least, it is only a matter of money—to set up sanatoria for those who are ill. But these people are not ill; they are only unfitted for the work to which alone they are accustomed. They ought to be farmers, to spend their days in the open air, and to sleep in properly constructed sanitary dwellings, and that not merely for a few weeks while undergoing a "cure," but permanently, and unfortunately not much of a living is to be got out of it. It is clear, however, that if sanatoria are used

merely to prop people up, and enable them to get back to the old modes of life which have produced the mischief, much of the money spent will be thrown into the gutter. The sanatorium should be the gateway opening up an open air country life, frugal perhaps, but healthy. That, however, would be a large business, and we fear unacceptable even to the recipients of the benefits it would offer.

SCURVY AMONG THE TROOPS.

A PAPER from the pen of Professor A. E. Wright, of Netley, appeared in last week's *Lancet*, which is worthy of attention for other reasons besides the point raised by the author. Professor Wright's point is that scurvy is due to the food containing a considerable excess of mineral acids over bases, and that the proper prophylaxis and treatment of the condition consists in the administration of salts of oxidisable organic acids, such as the lactate of soda, inasmuch as such treatment would lead by the most direct means to the retention or restoration of the normal alkalinity of the blood. All this, however, by the way. Just at the present moment the interest in these cases lies in the fact that such cases of scurvy should be met with in men from Ladysmith arriving at Netley in May and June. Most of the cases had gone through the siege of Ladysmith, where they had no doubt suffered quite enough to give them scurvy a dozen times over, but when one reads the detailed description of the miserable plight in which these poor fellows arrived at Netley, and the apparently active condition in which their scurvy still remained so long after the cessation of the hardships to which they had been exposed, one can but ask first whether these patients had ever been fit to put on board a transport, and, next, what sort of rations they had had during the voyage?

PRELIMINARY RASHES IN MEASLES.

DR. THURSFIELD,¹ of the Hospital for Sick Children, draws attention to the preliminary rashes which are apt to occur during the so-called incubation stage of measles. In a small outbreak in one of the wards at the Children's Hospital, out of the seven children attacked five had the preliminary rashes, which were so obvious and striking as to appear worthy of more consideration than they have received at the hands of most writers. Dr. Thursfield says that he believes these rashes are familiar to the medical officers of the Metropolitan Asylums Board's hospitals, where they come in as cases of scarlet fever. The eruption appears to take the form of a blotchy scarletiform, or a fine papular rash, and it occurs during the febrile period which precedes the true measles rash. In one case it is described as a brilliant scarletiform eruption round both elbows and extending some distance up the back of the arm, while the next day the patient had a brilliant erythema which developed in patches over the face and trunk, the face being scarlet with a well marked "oval ring." Clearly from their showing themselves so soon after the commencement of the pyrexia, and from their character, it would be easy to mistake these rashes for that of scarlet fever, especially when, as often happens in private practice, one is forced to come to an immediate diagnosis.