

ACCIDENT POLICIES AND PROFESSIONAL RISKS.

A decision of the United States Court of Appeals at St. Louis may be of interest to physicians. A dentist while operating on a patient received some particles of septic matter in his eye that were coughed or spat out by the patient, and it was alleged blood poisoning occurred, disabling him for many weeks. He recovered judgment against the Fidelity and Casualty Company of New York in the Federal Court at Denver for \$1,000, which judgment was reversed by the Appellate Court. This court held that a wound, within the meaning of an accident policy covering blood poisoning, must be an abrasion of the skin or membrane by which the germs are introduced into the blood. This may be a good legal technicality, but it will hardly receive medical approval. The ability of mucous membranes to absorb germs should be taken into account in any accident policy of this sort. The use of such a technicality on the part of an insurance company to evade its obligations is, we may reasonably assume, a violation of the implied understanding with which every physician takes out such a policy. All physicians are liable to serious risks, often unavoidable, and the question of determining the existence of an abrasion is sometimes a difficult one. It may exist without its subject either being aware of it or of being able to prove its existence afterward and the fact of blood poisoning through the skin is itself presumptive evidence of such lesion. On especially vulnerable parts like the eye the fact that an actual abrasion is not necessary for the production of serious results from the contact with toxins or germs should be recognized in every policy issued by an accident insurance company. It will be well for physicians to see that their accident policies cover all reasonable professional risks and take them out in companies that specifically recognize such liabilities.—*Jour. A. M. A.*, July 13, 1907.

Hauber reports 280 cases of spinal anæsthesia, without untoward result. It is especially the desirable form of anæsthetic in cardiac lesions, arterial disease and disease of the lungs, or after periods of great exhaustion, as in obstruction cases. It seems specially applicable to elderly persons. Rectal and vesical conditions are perhaps the most favourable, but hernia and leg amputations are also suitable.—*Arch. f. Klin. Chir.*

The Royal Victoria Hospital treated 226 cases of typhoid fever in 1906, with a mortality of 7.96 per cent; relapses occurred in 10.7 per cent; perforation occurred in 8 cases, six of which were operated upon, with four recoveries and two deaths.