

we are able to refer to the actual text of Dr. Simpson's report to the municipality of Calcutta on the subject, we are in a position to set out more definitely than has yet been done, what is the actual stage which has been reached in these experiments.

Since M. Haffkine arrived in British India he has inoculated not less than 25,000 people with the preparation which he alleges and believes to be preventive of cholera. Having succeeded in engrafting the cholera bacillus on animals, and in subsequently cultivating it indefinitely on them, he secures that which he calls—or rather, we think, miscalls—a “vaccine.” He then prepares two “vaccines,” one mild and the other strong; and he inoculates the human subject first with the mild vaccine, which produces some pain, discomfort, and fever for about a day; and then, after a lapse of about five days, a second inoculation with the stronger preparation is given, the immediate consequences being much the same as when the mild vaccine was used. But in the absence of the means of differentiating somewhat accurately between the effect of prevailing cholera on those who had submitted to the preventive inoculation and those who had not, the mere number of M. Haffkine's inoculations carried but little weight. When, however, the cholera season of 1894 began in Calcutta, M. Haffkine, with the aid of Dr. Simpson, was enabled to make some experiments which, to say the least, are of distinct interest and importance. He was able, in localities where cholera was actively prevailing, to induce some of the inhabitants to submit to his inoculations and to watch the result both on them and a number of other persons living under the same circumstances, but who for one reason or another had not been subjected to the inhibitive inoculations.

The results were watched with care by Dr. Simpson, on behalf of the municipality, and in his recent report to that body he gives some instances which appear striking. The following is one of these: “In Mungloo Jemadar's house a fatal case of cholera occurred on March 29th. On the 31st eleven members of the family, out of a total of eighteen, were inoculated. It so happened that cholera again breaking out in the house and attacking four persons, of whom three died, selected four of the seven not inoculated, while the eleven inoculated remained perfectly free.” Other examples of the same sort are given, and though the numbers included in each example are small, yet it is noteworthy that, whereas in each of them cholera did attack one or more of those who had not been inoculated, it failed to attack anyone of the inoculated. Such an experience is unquestionably of interest when it concerns a community such as that of Calcutta, where cholera is not only endemic, but where it also appears periodically in epidemic form. And hence Dr. Simpson urges

upon his municipality that they should for a while secure the services of M. Haffkine in order that he may continue his experiments.

Dr. Simpson wisely urges caution in arriving at any hasty conclusion. He properly refers, of course, to the very limited means as yet available for the formation of any final opinion, and he adds that tests such as those he records would have to be made “over and over again” before any ultimate conclusion could be arrived at. We may, therefore, trust to him for the caution needed in this respect. But another caution is also needed, Dr. Klein, repeating M. Haffkine's earlier experiments, has found that whilst intra-peritoneal injection of the bacillus of cholera in non-fatal doses did in the case of guinea-pigs confer an immunity against what would otherwise have been fatal doses of the same bacillus, yet the same immunity against the cholera bacillus was produced by the injection of a number of other and even of non-pathogenic bacilli, such as bacillus coli. And he drew the inference that whilst it was quite possible that all these different species were alike as regards their intra-cellular poison, yet this poison and any protection, whether evanescent or permanent, given against it must be distinguished from those poisonous substances which are elaborated by one or other of these species in nutritive media, including the medium of the human body. Having regard to these considerations, we trust that the greatest practical accuracy of observation will be observed in the experiments which can hardly fail to follow the appeal which has been made to the municipality of Calcutta by their able and untiring health officer, and under such circumstances the continuance and perfecting of the experimental measures adopted give promise of results which, in one or other way, will have interest for all scientific men, and especially for those who are concerned with the health and well-being of the population of India. But we cannot conclude these remarks without expressing one further hope—namely, that no inoculation experiments will be allowed to stand in the way of the active pursuit of those measures of sanitation by means of which alone Calcutta and other towns, whether in India or elsewhere, can ever be freed from the scourge of cholera.—*Ed. Lancet.*

CLINICAL DEMONSTRATIONS.

Mr. Jonathan Hutchinson was “at home” on the afternoon of the 27th ult. for his usual demonstration of clinical cases at his Clinical Museum in Great Portland Street. These “afternoons,” judging from the attendance of practitioners, are fast becoming very popular, a fact which is by no means surprising, considering the halo of attraction which environs all Mr. Hutchinson's work as a