Medical Matters.

THE STERILISATION OF MILK.

In view of the announcement that Mr. John Burns, President of the Local Government Board, intends to introduce a Bill to legalise the action of local authorities in establishing depots for the supply of sterilised milk for infants, an influential deputation, representing the Infants' Health Society, has waited on Mr. Burns to voice the views of the Society. Sir Frederic Maurice, who introduced the deputation, pointed out that the members of the Society considered further investigation necessary before the sterilisation of milk had legal sanction. Sir Thomas Barlow said that the deputation had come to believe that sterilisation was only a "second best" process, and that it might bring certain evils in its train. There were serious objections to sterilisation. Once milk had been sterilised it was no longer possible to testify to the goodness of the supply. In all processes of this kind there was always risk of the method going wrong. There were instances of immediate harm having resulted. Certain maladies were induced by sterilisation. It was well known that children fed on sterilised milk developed scurvy and rickets.

As to an alternative, he said that experience had shown that if fresh milk was cooled down immediately it was taken from the cow, kept cool, and then put into vessels that had been properly sterilised, and every precaution taken to keep the milk cool in transit, then the problem was solved. Therefore the special object of the deputation was to ask Mr. Burns to consider the appointment of some expert committee to investigate the conditions of the milk supply. At present they asked for the investigation of the methods of cooling milk.

He was supported by Sir Lauder Brunton who said that the deputation deprecated the enforcement of the sterilisation of milk. They requested that before any decisive step was taken in regard to obtaining a pure supply of milk an investigation should be made as to the best methods of doing so, and when that investigation had been made the proper measures for enforcing the method decided upon should be adopted. There was a consensus of opinion that in the long run sterilised milk was injurious to children, although at first it might seem to do them good. He suggested an investigation by a joint committee, and that after their investigations Mr. Burns should receive a deputation so that they might bring their practical conclusions before him. He believed that all were agreed that the addition of preservatives to milk should be penalised.

Dr. Mayo Robson said that milk as usually supplied was unfit for the food of infants, and the infant mortality in this country was chiefly due to improper feeding. The loss of life which was thus occasioned was a national calamity and the malnutrition of infants was probably the chief cause of physical degeneration in youth and adult age. He expressed the view that sterilisation of milk destroyed in a great measure its nutritive value, and he advocated a process of refrigeration.

Mr. Burns replying, said that he knew sterilisation was not the last word in dealing with the problem of the milk supply, neither was refrigeration. He would be glad if a joint Committee would communicate to him the result of their investigations, and if the facts justified the adoption of the methods they suggested he should not hesitate to adopt them. They might rely upon it that he and his staff would give due consideration to their suggestions, but he could give no pledge as to adopting the course which they asked him to pursue.

As the supply of pure milk is a matter of vital national importance, it is to be hoped that some plan may be adopted which will satisfy leading medical authorities.

THE DIFFERENT VARIETIES OF SPUTA.

Dr. Albert T. Lytle, writing in the *Dietetic and Hygienic Gazette*, says:— For purposes of description sputa are distinguished as: *Mucus* when glassy and transparent or whitish-grey like white of egg, generally tough and somewhat consistent. *Muco-purulent* when consisting of mucus and pus in varying proportion, the latter recognised by its yellowish-green colour and its want of transparency, its distribution through the mass in opaque yellowish streaks or in large flecks or balls. *Purulent* when consisting of almost pure pus, of somewhat rare occurrence. *Serous* or *watery* when particularly fluid, consisting of blood serum more or less frothy. *Frothy* when containing so much air in bubble form that it resembles soapsuds. *Viscid* when thick and gelatinous, adhering to the container sometimes even if it be turned upside down. *Numular* when the muco-purulent masses sink to the bottom of the container and assume tablet or coin-like shapes. *Bloody*, *rusty*, or *prune-juice* when containing greater or less amounts of blood more or less decomposed.

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