

Vital Statistics & Sanitation.

MORTALITY OF PRESIDENCY TOWNS.

CALCUTTA (Population, 433,219).

FOR WEEK ENDING.	SPECIAL DISEASES						Annual ratio per 1,000 of population.	Average death-rate for corre- sponding week of previous 5 years.
	Cholera.	Bowel-com- plaints.	Fevers.	Small-pox.	All other causes.	TOTAL.		
5th Oct. 1889 ..	4	29	61	..	112	206	24.8	25.2
12th " " ..	5	27	62	..	119	213	25.6	28.3
19th " " ..	7	34	78	..	131	25	28.7	28.3
26th " " ..	8	30	57	..	115	210	25.2	29.0
2nd Nov. " " ..	9	37	73	1	118	238	28.6	29.2

MADRAS (Population, 398,777).

4th Oct. 1889 ..	8	60	74	1	157	300	39.0	35.1
11th " " ..	4	53	89	..	175	321	41.7	33.3
18th " " ..	..	66	74	..	161	301	39.2	36.5
25th " " ..	1	33	83	..	174	291	37.9	35.4
1st Nov. " " ..	..	60	99	..	135	294	33.2	37.8

BOMBAY (Population, 773,196).

8th Oct. 1889 ..	..	28	112	..	247	387	26.0	28.1
15th " " ..	..	32	110	..	284	426	28.6	28.1
22nd " " ..	3	41	112	..	247	403	27.1	28.5
29th " " ..	4	33	117	..	233	387	26.0	28.6
5th Nov. " " ..	2	44	140	1	262	449	30.1	26.0

NORTH-WESTERN PROVINCES (AUGUST 1889).

City or Municipality.	Area in acres.	Popula- tion.	Number of persons to an acre.	Death-rate per 1000 of population for the month.	Actual death- rate per 1000 of popula- tion.
Moradabad ..	1,660	67,387	40	3.88	46.56
Bareilly ..	2,785	1,03,100	37	3.49	41.88
Shajehanpore ..	5,625	77,407	13	1.43	17.16
Meerut ..	401	60,948	151	3.21	38.52
Koel ..	400	62,443	156	5.20	62.40
Muttra ..	1,146	55,016	48	3.71	44.52
Furruckabad ..	2,551	74,872	29	3.74	44.88
Agra ..	14,452	1,38,094	9	3.03	36.36
Cawnpore ..	2,389	1,20,161	50	5.90	70.80
Allahabad ..	19,747	1,50,338	7	3.22	38.64
Goruckpore ..	2,920	57,922	19	3.81	45.72
Benares ..	3,141	2,08,083	66	3.57	42.84
Mirzapore ..	3,376	85,362	25	3.17	38.04

PUNJAB (FROM 26TH MAY TO 22ND JUNE 1889.)

Delhi ..	1,437	173,393	120	3.10	36.12
Umritsar ..	807	151,896	188	2.32	27.88
Lahore ..	461	149,369	324	1.42	17.03
Peshawar ..	500	79,982	159	1.39	16.70

BENGAL VACCINATION REPORT FOR 1888-89.

UNDER the orders of the Government of India, the vaccination report, which had previously been incorporated in the annual report of the Sanitary Commissioner, has been excluded from it, and will in future be submitted triennially, only brief notes on vaccination with statistical returns being submitted for the two intervening years. The note for 1888-89 and the returns have been submitted by

Dr. W. H. Gregg, who assumed charge of the department on the 25th August 1888 in succession to Dr. Lidderdale, who has retired from the service.

There has been an increase of 125,918 operations during the year. The Lieutenant-Governor notices with satisfaction an increase of 6,115 in vaccinations in municipalities, which had shown a steady decline since the year 1884-85.

The total cost of vaccination was Rs. 1,67,790-3, against Rs. 1,57,346-8-2 in the previous year, but the average cost of each successful case was the same, viz., 1 anna 6 pie.

Vaccination was for the first time introduced into the district of Chittagong, and up to the close of the year 8 out of 13 thanas of that district had been protected by the Government agency. It was extended to the four remaining thanas of Gya, and to six thanas of Balasore: some vaccination operations were also performed for the first time to suppress local outbreaks of small-pox in Sarun and Chumparun. It appears that the practice of inoculation is prohibited in all parts of Bengal, except the rural portions of the Durbhunga, Mozufferpore, Sarun, and Chumparun districts in Behar, a small portion of Balasore in Orissa, and the Cox's Bazar subdivision in Chittagong.

Correspondence.

IDENTIFICATION OF POISONOUS SNAKES.

TO THE EDITOR, "THE INDIAN MEDICAL GAZETTE."

SIR,—I shall feel much obliged if you or any of your learned readers would kindly enlighten me on the following:—1. Can bites of poisonous snakes be distinguished from those of innocent ones by their appearances? i.e., by the nature, number, and situation of punctures; 2. Supposing a person is bitten by a snake which is instantly killed, how can it be known to be poisonous before any symptoms appear on the person bitten? Can an examination of its jaw and mouth help in any way? The poisonous as well as some non-poisonous snakes have two fangs projecting from the sides of the jaw; their size of course varies in different snakes. Are there any characteristic features distinguishing the poisonous from innocent ones? These two points are of considerable practical importance, and their knowledge is of essential service for early and effective treatment of snakebite.

PORT BLAIR,
12th November, 1889.

Yours obediently,
SEA-SNAKE.

TRAGIA CANNABINA AND INVOLUCRATA.

TO THE EDITOR, "THE MEDICAL GAZETTE."

SIR,—I noticed in the "British Medical Journal" of the 28th September last, page 719, a communication from Mr. Oldacres, M.R.C.S., that by handling the plant named *Primula obconica* an obstinate rash is produced, attended with dyspeptic symptoms. I beg to bring to your notice that there are two plants in this part of the country, very common in shady places, known as the *Tragia cannabina* and *Tragia involucrata*, belonging to the natural order of Euphorbiaceæ; the plants are hairy, sting and very badly when touched, which is very painful; care should be taken in handling them. Boys are fond of playing with them by throwing the leaves on one another.

The dried roots of *T. Cannabina* are prescribed by native practitioners in dry coughs, to be boiled with cow's milk, and taken at bed time every night.

I remain,
Sir

TANJORE,
6th November, 1889.

Your obedient servant,
P. S. MOOTOOSAWMY.