

MEDICAL NOTES FROM THE NILE EXPEDITIONARY FORCE.

[FROM OUR OWN CORRESPONDENT.]

Suakin.

THE Royal Victoria Hospital, Suez, which has, during the past year, been under the Admiralty, and used as a Royal Marine hospital for the battalion of that corps stationed at Suakin and Suez, is now to be handed over to the War Office for a military hospital. This building was erected in 1867 by the Indian Government when the overland route was in existence, and prior to the opening of the Suez Canal. Many an Indian invalid, in those days, sought its friendly portal, and recruited his strength for the journey to Alexandria for home. The hospital, which contains accommodation for three hundred patients, is built of wood, on iron supports. Owing to neighbouring marshes and defective surface-drainage, intermittent fever is prevalent, especially in the summer season. The cases received from Suakin during the past summer were chiefly "typhoid" and "remittent" fevers, and, notwithstanding the acute character of these diseases, the death-rate was very small; in some cases, the poor fellows looked like skeletons, with the skin drawn taut over the bones. The climate is now very healthy, and there is no typhoid or remittent at present in hospital. During this summer, as in last, the establishment will be filled with the latter cases, as the occupation of this unsanitary town (Suakin) is a necessity. The hospital, up to this period, has been administered by naval surgeons attached to the Marine Battalion, who now accompany this corps to Suakin for the front. Staff-Surgeon Fleetwood Buckle, R.N., and Surgeons N. C. Ross and Charles W. Hamilton are the medical strength.

The authorities will commit no graver mistake than advancing at once to Berber and Khartoum, as the season is already growing hotter. It will be well if, putting aside the just and eager demand for vengeance for Gordon's sad end, the expedition will not start until the autumn; as, if it do, the climate, with paucity of water and shade, will, in the shape of sunstroke, cause many a poor fellow to lose the number of his mess. Of course, Osman Digna, outside Suakin, must be met and defeated as soon as possible—then the railway commenced.

Suakin is a low-lying town, built on coral-reefs, on the edge of the Red Sea; and, owing to the unsanitary habits of the natives, is thoroughly impregnated with sewage; there is thus, from the heat of the sun and in the rainy season, always a miasma, which causes typhoid and remittent.

The helmets worn by the corps are not suitable for this proposed expedition, as the temples are left exposed; there is a hat, at present worn by the Royal Engineers at Suakin, which, though not so smart-looking as the white helmet, is the one the authorities ought to supply to all hands. It is a thick pith hat with a wide brim, and comes over the nape of the neck and sides of the face, somewhat resembling a Sou'-wester. Spine-pads ought also to be served out generally, and their use made compulsory. In no position are the sun's rays more felt, or is one more exposed to them, than on the back of a camel. I regret to see that "insolatio" is prevalent at present amongst Lord Wolseley's troops.

Officers' and men's classes are daily held for instruction in first-aid-to-wounded, also ambulance-drill, under the superintendence of the surgeons.

COLLECTIVE INVESTIGATION.

LIST OF RETURNS RECEIVED DURING FEBRUARY 1885.

THE Committee desires to acknowledge the following returns received during the month of February.

East Yorkshire Branch: III, E. O. Daly, M.B.
Lancashire and Cheshire Branch: Chester District: II, S. Walker Foster, M.B.
Liverpool District: I, William Macvie, M.B.; II, J. E. Garner, M.D.; III, J. E. Garner, M.D.; A. Creswell Rich, M.B. (4); George Shearer, M.D., and a set of M.S. cases from Dr. Shearer; X, A. Creswell Rich, M.B. Manchester District: VII, XIII, Duncan J. Mackenzie, M.D.
Metropolitan Counties Branch: I, IV (2), IVa, V (2), George Eastes, M.B.; X, G. Parker May, M.D.; F. A. Hill, M.D. (7).
Midland Counties Branch: Lincoln District: X, Henry George.
South-Eastern Branch: East Kent District: I, Charles Parsons, M.D. West Kent District: I, Ernest Cusse; II, James Crawford; III, Charles Boyce, M.B.; X, Joseph Brown; George Wilks, M.B. East Surrey District: II (8), III, Holland H. Wright.
South of Ireland Branch: I, J. W. Martin.
South Wales Branch: III, T. Neil Whitfield (2).
Yorkshire Branch: VII, T. Tinley.
Erratum.—In the last list, a return from W. A. Thomson, F.R.C.S., was inserted by mistake in the West Surrey District instead of the South Midland.

MAHOMED MEMORIAL FUND.

THE following additional subscriptions have been received.

	£	s.	d.		£	s.	d.
J. S. Bartrum, Esq., F.R.C.S.	2	0	0	G. M. J. Giles, Esq., F.R.C.S.,			
Dr. Bower	1	1	0	Indian Medical Service	2	0	0
Dr. Oswald Currie	1	1	0	Cooper Keates, Esq.	1	1	0
Dr. Walter Dickson, R.N.	1	1	0	Robert Manser, Esq., I.M.D.	3	3	0
D. Elcum, Esq., Ind. Med. Ser.	5	5	0	Messrs. Nutter per Dr. Argles	2	2	0
J. H. Ewart, Esq.	5	5	0	Dr. Siorde	1	1	0

ARTHUR E. DURHAM, Treasurer.

JAMES F. GOODHART, }
W. H. A. JACOBSON, } Secretaries.

ASSOCIATION INTELLIGENCE.

NOTICE OF QUARTERLY MEETINGS FOR 1885: ELECTION OF MEMBERS.

Regulations for the Election of Members passed at the Meeting of the Committee of Council, October 12th, 1881.

1. There shall be a standing notice in the JOURNAL every week, of the meetings of the Committee of Council throughout the year; and stating that gentlemen wishing to be elected members of the Association must send in their names *twenty-one days* before the meeting of the Committee of Council at which they wish to be elected.
2. That a list of applicants be in the hands of the Committee of Council *fourteen days* before such meeting of the Committee of Council, and that the Branch-Secretaries be supplied with *several* copies of the list.
3. That no member be elected by a Branch, unless his name has been inserted in the circular summoning the meeting at which he seeks election.

Meetings of the Council will be held on April 8th, July 8th, and October 14th, 1885. Gentlemen desirous of becoming members of the Association must send in their forms of application for election to the General Secretary, not later than *twenty-one days* before each meeting, namely, March 18th, June 17th, and September 24th, 1885, in accordance with the regulation for the election of members, passed at the meeting of the Committee of Council of October 12th, 1881.

FRANCIS FOWKE, *General Secretary.*

COUNCIL.

NOTICE OF MEETING.

A MEETING of the Council will be held in the Council Room, Exeter Hall, Strand, London, on Wednesday, the 8th day of April next, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary.*

161A, Strand, March 14th, 1885.

COLLECTIVE INVESTIGATION OF DISEASE.

CARDS for recording individual cases of the following diseases have been prepared by the Committee; they may be had on application to the Honorary Secretaries of the Local Committees in each Branch, or on application to the Secretary of the Collective Investigation Committee.

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| I. Acute Pneumonia. | VIII. Paroxysmal hæmoglobin-
uria. |
| II. Chorea. | X. Habits of Aged Persons. |
| III. Acute Rheumatism. | XI. Albuminuria in the Appa-
rently Healthy. |
| IV. Diphtheria, clinical. | XII. Sleep-walking. |
| IVa. Diphtheria, saritary. | XIII. Cancer of the Breast. |
| VI. Acute Gout. | |
| VII. Puerperal Pyrexia. | |

An inquiry is now issued concerning the general condition, habits, and circumstances, past and present, and the family history of persons who have attained or passed the age of 80 years.

The replies to this inquiry will be most valuable when given by a medical man; but the questions have been so arranged that, with the exception of some on the last page, they may be answered by another person. *Partial information will be gladly received.*

There is also now issued an inquiry as to the occurrence of albuminuria in apparently healthy persons.

The Acute Gout card, which had been found too elaborate, has been made a great deal simpler, and is now re-issued.

Copies of these forms and memoranda are in the hands of all the local secretaries, and will be forwarded to anyone who is willing to fill up one or more of the forms, on application by post-card or otherwise to the Secretary of the Collective Investigation Committee, 161A, Strand, London, W.C., to whom all applications and correspondence should be addressed.

July, 1884.

BRANCH MEETINGS TO BE HELD.

SOUTH INDIAN BRANCH.—Meetings are held in the Central Museum, Madras, on the first Saturday in the month, at 9 P.M. Gentlemen desirous of reading papers or exhibiting specimens are requested to communicate with the Honorary Secretary. —C. SIBTHORPE, Honorary Secretary, Madras.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.—The next ordinary meeting will be held at Pontypridd, on Wednesday, April 15th. Members wishing to bring forward papers, communications, etc., are requested to send titles to one of the undersigned before March 29th.—A. SHEEN, M.D., Cardiff; D. ARTHUR DAVIES, M.B., Swansea, Honorary Secretaries.—February 25th, 1885.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will be held on Thursday, March 19th, at 8.30 P.M., at the Hackney Town Hall. The chair will be taken by Dr. C. T. Aveling. Dr. Bristowe will read a paper "On the Significance of a Peculiar Murmur in relation to the Diagnosis of Intrathoracic Disease, illustrated by Cases."—JOSEPH L. HUNT, Honorary Secretary, 101, Queen's Road, Dalston.

METROPOLITAN COUNTIES BRANCH: NORTHERN DISTRICT.—The next meeting of the Session 1885 will be held at the Great Northern Central Hospital, Caledonian Road, N., on Thursday evening, March 19th, 1885, at 8.30; C. Macnamara, Esq., President of the Branch, in the Chair. Dr. R. W. Burnet will recite a case of "Cerebral Hæmorrhage," with specimen and drawings. Mr. R. Marcus Gunn will exhibit several "Eye Cases." Mr. J. Macready will also give a case. All members of the Branch are invited, and may introduce a medical friend.—GEORGE HENTY, M.D., Honorary Secretary, 308, Camden Road.

SOUTH-EASTERN BRANCH: EAST AND WEST SUSSEX DISTRICTS.—A conjoint meeting of the above Districts will be held at the Grand Hotel, Brighton, on Tuesday, March 24th, at 4 P.M. Dinner at 6 P.M.; charge 6s., exclusive of wine. Charles J. Oldham, Esq., will preside. The following papers have been promised: 1. The Chairman, "A Case of Hydrophobia." 2. Noble Smith, Esq., "A Case of Incontinence of Urine from Malformation Cured by Operation." 3. Dr. Withers Moore, M.D., "A Case of Locomotor Ataxy with Anomalous Symptoms;" 4. "A Case of Meningitis." 4. Dr. Sutherland, "The Premonitory Symptoms of Insanity." 5. Dr. Ranking, "Cases of Fæcal Tumours." Messrs. Krohne and Sesemann will show some new instruments.—G. B. COLLET, T. JENNER VERRALL, Honorary Secretaries, 95, Western Road, Brighton.—March 3rd, 1885.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.—The next meeting of this district will be held at the West Kent General Hospital, Maidstone, on Friday, March 27th, at 3.30 P.M., Charles Hoar, Esq., M.D., in the chair. The dinner will take place at the "Star" Hotel, Maidstone, at 6 P.M. precisely; charge, 6s., exclusive of wine. Gentlemen who intend to dine are particularly requested to signify their intention to Dr. Hoar, 3, Rocky Hill Terrace, Maidstone, not later than March 26th. All members of the South-Eastern Branch are entitled to attend this meeting and to introduce friends.—Papers to be read: 1. Charles Frith, Esq., M.D.: "Two cases of Thoracic Aneurysm, with specimens." 2. J. E. Meredith, Esq., M.D.: "A case of complete Atresia of Vagina, with severe constitutional symptoms." 3. C. Boyce, Esq., M.B.: "A case of Intestinal Obstruction: Stercoraceous vomiting for five days; recovery." 4. M. A. Adams, Esq., F.R.C.S.: "Clinical Notes on Amaurosis." 5. A. H. Hallowes, Esq.: "Surgical Cases of Interest." Dr. Ground will exhibit some specimens of Pathogenic Micro-organisms. At 3 P.M. Messrs. Mayer and Meltzer will exhibit some new Surgical Instruments.—H. LEWIS JONES, Honorary Secretary, St. Bartholomew's Hospital, Chatham.

SOUTH-EASTERN BRANCH: EAST KENT DISTRICT.—The next meeting of this District will be held at Faversham on Thursday, March 26th, at 3 P.M.; Mr. Garraway in the chair. The following communications have been promised. 1. Dr. Bowles: "Cases illustrating the difficulties of the Diagnosis of Aneurysms." 2. Mr. Wachter: "A case of Puerperal Fever treated with Warburg's Tincture." 3. Dr. White: "A Hospital for the Insane in the United States." 4. Dr. Eastes: "Empyema." The dinner will take place at the Ship Hotel at 5 P.M.—T. WHITEHEAD REID, Honorary Secretary, March 5th, 1885.

WEST SOMERSET BRANCH.—The spring meeting of this Branch will be held at the Railway Hotel, Taunton, on Thursday, March 26th, at 5 o'clock. The following question has been settled by the Council as the one on which members should be invited to express their opinion at the said meeting after dinner: "What is your opinion on Vaccination, with reference to the three following points: 1. Is there any diminution in its prophylactic value? 2. Is calf or humanised lymph preferable? 3. Have you noticed any diseases occasioned by it?"—W. M. KELLY, M.D., Honorary Secretary.—Taunton, February 26th, 1885.

BORDER COUNTIES BRANCH.—The spring meeting will be held on Friday, March 20th, at Maxwell's Commercial Hotel, Galashiels. The chair will be taken by the President, Dr. Muir, at 4 P.M., when a discussion on Pneumonia will be introduced by Dr. Lookie, of Carlisle. Dinner at 7 P.M. Notices of papers for reading, morbid specimens or patients for exhibition, should be sent to the Secretary, H. A. LEDIARD, Carlisle.

QUARANTINE IN EGYPT.—A Reuter's telegram, dated Alexandria, March 4th, says:—"Quarantine is now imposed upon arrivals from Bombay and Madras. At yesterday's sitting of the Sanitary Commission, the Austrian delegate proposed that the Sanitary Board should undergo a thorough re-organisation, and that the number of the Egyptian delegates should be reduced. The president refused to allow the motion to be put to the vote, on the ground that it dealt with a matter not within the competence of the board. The Austrian, French, German, Spanish, Greek, and Turkish delegates have protested against the president's decision."

UNIVERSITY DEGREES FOR LONDON MEDICAL STUDENTS.

A GENERAL meeting of the Metropolitan Counties Branch was held on March 6th, at the School of Mines, Jermyn Street, to receive and discuss a report of the Council "On the steps which should be taken to facilitate the obtaining of degrees in medicine by metropolitan students." The attendance was among the largest that had ever been known at a meeting of the Branch. The chair was taken, at 8 P.M., by Mr. MACNAMARA, Treasurer of the Association, and President of the Branch.

The PRESIDENT, in opening the proceedings, said: Gentlemen, we have met this evening to consider a report on a very important subject—that of university degrees for London medical students. The report, which we have before us, is one which has been drawn up by Dr. Gilbert Smith, and I am sure you will all join with me in thanking him for the trouble and labour which he has expended upon it. It divides itself into two principal parts. The first part deals with certain facts and certain figures, upon which, I think, there can be very little doubt. You will all agree with me that they prove incontestably that London medical students are at a disadvantage, as compared with those in other parts of the United Kingdom, with respect to obtaining a degree in medicine. And, further, this report shows, I think, incontestably, that the number of our London medical students has been decreasing steadily during the past few years. The second part of the report refers to the means which the Council of this Branch of the Association consider most likely to gain the objects which we have in view. Those objects are distinctly stated upon the first page of the report; and they consist in this, "that it should be within the power of all well educated medical students to obtain a degree in medicine; which degree, while implying such general and scientific culture as befits men of education, should mainly indicate the possession, on the part of its holder, of a good knowledge of the theory and practice of medicine, and of the sciences which are specially related thereto." Now, the report is of considerable length, and therefore I hope that the meeting will receive it as read. It has been in the hands of most of you for a considerable time; and, if the meeting will receive it as read, we shall be enabled to proceed with the resolutions which have been prepared. Of course, after these resolutions have been proposed and seconded, it will be in the power of any member present to offer any amendment that he may think proper. [The meeting signified its assent to the report being taken as read.] No doubt there is some diversity of opinion as to whether it is desirable that an increased number of medical students shall obtain degrees in medicine; but it seems difficult to understand why medical students should not be able to obtain degrees in medicine in the same way that their brother students at Oxford and Cambridge can obtain degrees in arts; and this fact must be clearly understood and clearly faced, that, whatever our opinions may be with regard to the advisability of students obtaining degrees in medicine, in all other centres of medical education, not only in this country, but in Europe, medical students can obtain such degrees. It is in this metropolis, and in this metropolis alone, that the difficulty arises with which we have to contend, and which we are met to consider this evening. Those difficulties arise largely from the curriculum and from the examinations of the University of London. Now, while one can readily sympathise with a considerable number of the graduates of the London University—I say, with a considerable number, because we have had communications with many graduates of the University who entirely sympathise with the movement which is now in progress—while we sympathise with some of them in hoping and wishing that anything that shall take place now shall not affect the value of the degrees granted by the University of London, still we have this fact to deal with, that London students cannot obtain degrees, or do not obtain degrees; and that, in consequence of this, a very considerable number of them are leaving London, and migrating to other parts of the United Kingdom, and obtaining degrees in other localities. It happens that, this very morning, without any reference whatever to this meeting, or to anything connected with this meeting, I received a letter from a gentleman who had consulted me regarding a young man who is about to enter the medical profession. It was decided that he was to enter at one of the London medical schools in October, and I received a letter dated from Brighton yesterday, in which he says that he understands that the University of Edinburgh is able to grant degrees, and therefore they have made up their minds to send this young man to Edinburgh, rather than to enter him at one of the London schools.

This is what is occurring over and over again, and we must deal with the matter, if we possibly can, in a common-sense and practical manner. I wish particularly to state that there is nothing in this report which in any way countenances a lowering of the examinations of the University of London, as far as regards all matters directly connected with medicine and surgery. What we hold is this, that, after a young man has matriculated and entered as a medical student, the few short years that he can then devote to preparation for his profession should be entirely given up to such subjects as will best enable him to practise that profession. I do not say it is the opinion of all the Council, but it is the opinion of a large majority of the Council, that it is therefore a mistake, at the very outset of a student's career, to compel him to spend a year in the study of experimental physics, zoology, botany, and certain branches of chemistry. I hold that, however valuable these subjects may be, still the knowledge of them hardly tends to make a man a more efficient medical practitioner. Over and above this we hold, and we have the best evidence for believing, that the majority of those men who go in to these examinations have to cram up the subjects, and we cannot help believing that any system which compels the majority of students to commence their career by a system of cramming, must be a very bad system; I hear that there is a letter in one of the medical journals, to the effect that this is not the fault of the examinations, but of the teachers. That may be so, at any rate, let us try to overcome the fault, wherever it may be. What we propose is that, with your consent, the Council should approach the Senate of the University of London, and try to prevail upon them to alter their examinations, not in any way to lower the standard of all that tends to the practice of medicine and surgery, but to expunge from their curriculum, as far as possible, those subjects which are not absolutely necessary to the training of a medical student. Students of more than average ability should demonstrate their exceptional powers, as at Oxford, by taking honours, and so being placed either in a first, second, or third class. All the existing graduates of the University should be placed in the first class. Supposing that the University is unable to accede to our request, or to propose any alternative scheme to relieve us from the existing muddle, then we ask you to permit us to turn to other educational bodies, in the hope that they may combine together, and form a degree-giving power whose degree shall not be of less value than that of the University of London, but in giving which less consideration shall be paid to the subject of examination, but more to medical education and training, so as to fit our students to become thoroughly practical medical practitioners.

Dr. BRISTOWE: The resolution which has been placed in my hands is the following.

"1. That the report of the Council of the Branch on university degrees for London medical students, be adopted; and that the Council be directed to petition the Senate of the University of London to receive a deputation of members of the Branch in support of the objects aimed at in the report."

I need scarcely say that I feel a great deal of pleasure in rising to propose this resolution, because I feel fully with the Council of this Branch of the Association the importance of the subject which is dealt with in this report; but at the same time I approach it with a good deal of trepidation, because I know how unequal I am, in spoken language, to express the feelings which I have to express, or to make myself clear to those who are about me. I take it for granted that every one here has read the weighty report by Dr. Gilbert Smith, and has considered it thoroughly. There is no doubt, I think, that every one here feels, as I feel, that the medical profession in England labours under a very deep grievance in respect of medical degrees, and that has been shown largely of late years, by correspondence in the medical journals, by leading articles in the different medical periodicals, and, more recently, by the action which has been taken by a body formed to promote university teaching in London; and, I might also add, by the College of Physicians, and, I think, the College of Surgeons, privately. They have, during the last few years, been considering this very question, as to how far this grievance might be met. But the most important proof that we labour under a grievance, is furnished by the statistics which Dr. Gilbert Smith has accumulated in the latter part of the report, and they are very striking. In the first place, with regard to the prevalence, if I may call it so, of the degrees in the different countries, England, Ireland, and Scotland, we find that in England 32 out of every 100 medical practitioners have degrees in medicine; in Scotland 70 per cent. have; in Ireland 38; and in the army and navy 42.4 per cent. You see that the proportion of graduates in England to the number of men practising is much less than it is in Scotland, and less than in any other part of the British dominions or in any of the services. The facts be-

come more striking as showing a grievance when we examine into the degrees which are held in different sections in this country. Taking England, we find that, of those having degrees, nearly 63 out of every 100 hold Scotch degrees, 9.7 have Irish degrees, 6.9 have foreign degrees, and only 20.6 have degrees obtained in English universities. The discrepancy becomes still more marked if, instead of taking the metropolis, we take the parts outside the metropolis. London is the metropolis for the three divisions of the kingdom, and, in comparing England, Scotland, and Ireland, I say it is fair to leave out the metropolis. What, then, do we find? That out of every 100 practitioners possessing degrees, only 16 possess English degrees; 68, or more than four times as many, possess Scotch degrees; and the Irish and foreign degrees are equal to those derived from English sources. Now, compare what happens in England with what happens in Scotland. Out of every 100 practitioners in Scotland, 98.7 have Scotch degrees, not one-half per cent. have English degrees, and about one-fifth per cent. have Irish degrees. You see that, in Scotland, nearly every man who has a degree has a Scotch degree. In England, the majority of the degrees are Scotch. In Ireland, we find that the Irish degrees form 72 per cent., Scotch degrees 26 per cent. Then look at it from another point of view. In Scotland, there are 1,557 men practising with degrees; all but 20 of these possess Scotch degrees; while of 5,219 practitioners with degrees in England, 4,143 have Scotch degrees. What I have said with regard to England, Scotland, and Ireland, holds good with regard to the army and navy. What do we find there? We find, in the army and navy, 53 per cent. of the graduates are Scotch graduates, 41 are Irish graduates, 4 are English graduates, and one is a foreign graduate. If we consider the question in reference to the population of the countries, the thing becomes more striking still. Here is London, with a population of four millions, Scotland has a population of about two millions and a half—two-thirds of that of London—and Ireland has a population of a little more than five millions, or only about one-fourth as much again as London; and yet you see how Scotch and Irish graduates prevail throughout England and throughout the services. Now, what is the explanation of this? It is not in the quality of the students, and it is not, I believe, in the quality of the teachers. I think every one will allow that, notwithstanding the admitted ability of Irishmen and Scotchmen, our English students are as clever and hardworking, and our English teachers, if not better, are at least equal to, those in Ireland and Scotland, and there are many more of them. I say the fault does not lie in the students or in the teachers; it depends on the system, and on the facilities which are afforded. What are the facilities afforded? We find that, in Scotland, every town which has a school of medicine has an university connected with it. In Ireland, at the present time, the same thing prevails. Every student entering at a Scotch school of medicine, if he choose to work, can obtain a degree. In England, we have many universities—Oxford, Cambridge, Durham, the Victoria University, and the London University. Oxford and Cambridge are admirable universities; but who ever regards them as being universities for the teaching of medicine? I am very glad to see they have of late years been making important changes, and have been becoming potent agents in the promotion of medical education and collateral sciences; but still, let them do as much as they please, so long as they are simply Oxford and Cambridge Universities in provincial towns, they will supply but few medical men, and give but few degrees; and they will be degree-giving bodies, not for the general bulk of the practitioners, but for those who have money at their command. No man can be admitted there unless he has a considerable amount of money at his disposal, or his friends are prepared to pay largely. I admire these universities, and say nothing against them; but they cannot be popular universities; they cannot take in England the position which Edinburgh does in Scotland. The Durham University has been recently established, and is proceeding most successfully; the school is increasing largely, and they have two hundred pupils. It is an university which, if properly conducted, will be a rival to the Scotch universities, and be of immense service to the north of England. The Victoria University, no doubt, will have a career of great importance, and will be instrumental in educating successfully a very large body of practitioners. But its success will be attained very much by taking pupils away from London. London, which is the largest field for clinical observation in the world, which, by its large number of schools, constitutes the greatest collective school of medicine in the world, has no university practically in connection with it; and, as the President has said, those men who want degrees in virtue of education in London have to finish their education elsewhere; and unless we have something to weigh against this in the metropolis, the result

will be that our schools will diminish, as they have been doing of late years, until at length they will be nothing more than clinical schools for men, who have completed their curricula elsewhere, to come to learn that practical experience which they could not gain in the university towns where they were educated; and we, who have all the opportunities and facilities for furnishing a complete medical education, will be left out in the cold. It may be replied to this, "You have the University of London." We admit it; but what has the London University done for us? It is a very respectable body; it has taken a very high aim in the matter of education; it has assumed, from the beginning, that it must educate men to a high standard; and, as time goes on, it becomes more and more narrow in its views. It has put obstacles in the way of men becoming graduates, which are deterrent in a high degree. A proof that the London University is not our university is shown by the small number of its graduates. During the five years ending 1883, to which Dr. Gilbert Smith's statistics go up, we find that the yearly average of degrees granted by that university was 39; but, recollect, those 39 are not all men who have been taught in London. The University of London is for the whole of the British dominions, and men obtain degrees there who come from Scotland, from the north of England, and even from the colonies, so that, no doubt, only a proportion of the number represents students educated in London. Can you call that a successful university, or a university which is to raise the profession in England? I think not. Whilst the University of London, mainly in connection with London, is granting 39 degrees in the year, the universities of Scotland between them are granting ten times as many, and there is no sign, that I can see, that the University of London is increasing in popularity. Why is it that it has failed? for I confess I think it is a failure. I said just now that the University of London has formed a very high standard of education, and you find in the report a quotation from their own Registrar which expresses their views in the clearest language, namely, that their object has been not to educate a large number of medical practitioners above what they would have been educated without the University, but to educate a small number of practitioners highly. Now, is that the way in which medical education should be promoted throughout the country? Is not the proper method to educate a large number of medical men a little above what they would have been without the University? However, that is the view which has guided the proceedings of the London University. But how is it that, practically, it has failed? It is not because its medical examinations are too difficult, it is because the preliminary examinations, as the President told us, are too difficult and too uncertain for men to go up to. The examinations to which I refer are the matriculation and the preliminary scientific. Now everyone who has had anything to do with the matriculation examination knows that it contains very many subjects, and for anyone to pass it, however able he may be, or well educated, it is necessary that he shall grind. It promotes grinding more than any other examination, I think, in this kingdom. It seems to me that the examination should be in a much smaller number of subjects, if you like, much deeper in those subjects; and at the same time, if I had my way, I should make the matriculation examination a varying one; I mean that there should be a certain amount of choice for candidates going up, which would enable those who had been educated in one way to pass in a certain direction, and those who had been educated in another way to pass in another direction. The object of a matriculation examination is simply to show that a man has learned something, and that he has in him the capability of still learning. It is not to show that he is able to get up a large amount of knowledge by cramming, which, I repeat, is all that this matriculation examination attains. With regard to the preliminary scientific examination, the same thing holds good. There is no more unsatisfactory examination, I think, in existence than that for the purpose for which it is held. The preliminary scientific examination includes subjects of very great difficulty. I do not believe any one of them is necessary for a medical man. I think it a desirable thing that he should know one or more of them, and many who are clever would know a great deal of all of them no doubt, but they are not essential; and many men who become most able practitioners and ornaments of their profession, are, I have no doubt, quite unable to pass that examination. The most difficult part of that examination, I think, is that in Natural Science. I do not say it is difficult for a man who has studied mathematics or science thoroughly, but it is very difficult for boys who have come from schools, and have not had much training, to pass such an examination. I will tell you what happened three or four years ago. I met a distinguished chemist and mathematician, a Fellow of the Royal Society, and I was talking with him about this very subject after one of the examinations. He said:

"These papers came before me; they seemed exceedingly difficult, and I handed them to a young German professor of physics, who is paying a visit to me. He looked through them, and he said, 'There are two or three of those questions that I myself could not answer.' " I do not suppose he meant to say that if he sat down in his study and thought them out he could not answer them, but he could not do so in the examination time. Fancy expecting boys who have only learned up to the requirements of the examination, being expected to answer such questions! Shortly after, I wrote a letter, of which some of you have heard, to the Chancellor of the University upon this subject. A preliminary examination took place. I saw it, and I was rather horrified to find that the questions were more difficult than I think they had ever been before. About 53 per cent. of the candidates were plucked on that occasion. I spoke to one of the members of the Senate afterwards, and said, "How is it you can allow such questions to be given to the candidates?" He said, "That has been a matter of consideration in the Senate; it has come before them, and distressed them very much; but the fact is, these questions are supposed to be submitted to a member of the Senate, who is a mathematician, and if he objects to any, they are cut out. They were submitted to him; but he happens to be a very high mathematician, and one who supposes that everybody else must be a great mathematician, and he saw no difficulty in them." I believe that those are the main difficulties in the way of providing an university for London. I may say, finally, that I agree very much with the recommendations of this report. I will read two or three things which I jotted down the other day, not with regard to this speech, but with reference to another meeting connected with the formation of an university for London, which I had to attend, and in relation to which I prepared a few remarks. "In order to meet the requirements of the present time, the University of London should come to some friendly arrangements with the Colleges of Physicians and Surgeons, so that its matriculation examination should be the recognised portal to a medical education in the London schools. To this end, it would be necessary to diminish the requirements of the examination, so far at least as concerns the number of subjects of examination. Further, in my opinion, it would be desirable to allow the candidates some choice of groups of subjects to meet the exigencies of the difficult kinds of education which prevail. The University should bring itself into alliance with the medical schools of the metropolis, of which there should be elected representatives on its Senate. Further, there should be a board of studies, elected partly by the University and partly by the schools of medicine, to superintend or advise, in respect both of the teaching in the schools and of the examinations. There should be some arrangement in virtue of which men who have failed, from any cause, to enter the portals of the University at the commencement of their career may (on adducing evidence that they have complied with the essential requirements of the University) be allowed to go through the same examination for a medical degree at the shortest possible interval; and further, men who have been in practice for (say) twenty years, should be allowed to obtain a degree on simply passing the professional examination." The last essential is not a view that is mentioned in this report. I dare say many would agree with it, and I entertain it very strongly. I may be allowed to say why I refer to the last of these paragraphs. I recollect that many years ago the University was not so strict in its requirements as it is now, and the late Dr. Sibson, a very distinguished man, who had been in practice some little time, applied to the London University and was allowed to go through all his examinations as quickly as he could, and he did them very rapidly. Why should not that be allowed now? It is not allowed, and to show that it is not, I will refer to the experience of the late Dr. Mahomed, a most distinguished man, a teacher in Guy's Hospital, who would have been an ornament to the University of London. He had not matriculated, and he applied to the London University late in his career to know if he might do what Dr. Sibson had done. No, he must begin at the beginning, and certain intervals must elapse; and he went to Cambridge and obtained a degree there. Now, why should not Dr. Mahomed have been an ornament of the London University? In conclusion, I should like to say that what I have said is not intended to be in any way disrespectful to the University of London. I am a graduate of it; in a certain sense, I am proud of being so; but I should be very much prouder to be a graduate with ten thousand graduates in the medical profession than with only six hundred. It seems to me, if the London University is to become the university for the metropolis and outlying towns which have no university connected with them, if it would be that, in the liberal spirit which I and others have indicated, it would become, so to speak, the Edinburgh University for London; it would bring under its wings all the medi-

cal schools in London and other towns; it would have a large base, on which it would rise to eminence; and, instead of having merely six hundred or seven hundred graduates on its lists, it would have very nearly ten thousand. In other words, if the University of London had been for London what the University of Edinburgh is for Edinburgh, our graduates would have been counted by thousands at the present time instead of by hundreds; and I say that would have been a great advantage to the medical profession in England, a great advantage to the schools in London, and an infinitely greater advantage to the University, which would have become, by this time, by far the most influential university in the world, which is what I hope it will be.

The PRESIDENT read a communication just received from Sir Andrew Clark, who had promised, if possible, to address the meeting, but was prevented from doing so through indisposition.

Mr. RIVINGTON, in seconding the resolution, said: After the very full and able exposition of this subject by the President and Dr. Bristowe, it is neither necessary nor desirable that I should detain you more than two or three minutes. There is a practical grievance to be remedied, and there is a need to be supplied. Naturally, in the first instance, we look to the University of London to see whether they can meet any of our requirements. In adopting this report, it is not necessary that we should pledge ourselves in any way to the very letter of the report, nor to the very letter of all the suggestions that are made at the end. These are merely suggestions, and they are put forward as a basis upon which discussion can take place, and they form a very good basis on which we can appoint a deputation to go to the Senate of the University of London, and ask them whether they can supply our need at the present time. As a teacher of some standing in one of the schools of the metropolis, I can bear my testimony to this fact, that a number of men leave our hospitals every year who would have been undoubtedly ornaments to the University of London, who would have passed the professional part of the examination with great credit, and, I believe, have taken high honours; but, for some reason or other, partly, and chiefly, probably, because they have not been able to devote the necessary time to the early examinations in order to get up the multitudinous subjects for matriculation, or, not being equal to the effort of passing through the straight and narrow gate of the preliminary scientific examination, they have not felt justified in spending the time with the risk of failure, because the examination is not at all an equal one; it is very often capricious in its results. Chiefly on this account, I think, they have not become alumni of the University of London; and some of the best men at our schools leave, who would, as I say, be ornaments to the University of London, and very much strengthen that University, if the wise policy had been adopted of having some method by which they might be admitted within its portals. I believe the Senate of the University is very anxious and ready to receive us. One of the chief objects of this resolution which I have the honour to second is, that a deputation shall be appointed to wait upon the Senate in support of the object aimed at in the report. We can discuss the matter with them in a friendly spirit, and I have no doubt they will receive us with perfect courtesy and great readiness. Perhaps they may be able to meet us half way in our requirements. I hope it may be so. If not, it will be necessary to adopt some other means to gain the end which we have in view; because I think we cannot submit any longer to the disastrous condition of things at the present time, which is resulting in driving men away from London, where the best clinical material for education is to be found, into the arms of Scotch universities and new universities up in the northern regions. I have very great pleasure in seconding the resolution.

Mr. S. J. HUTCHINSON: I do not wish to propose any correction of this very valuable proposition which has been laid before you to-night. It is very evident it carries the sympathies of the whole meeting with it. But I would ask what it is that we are seeking to establish. We are seeking to establish a degree in medicine with the title of Doctor. I believe that is the chief idea; and the reason why I have ventured to propose an amendment is this, that there are two grand divisions—the public and the profession. The public recognises any man who is qualified in medicine and surgery as a doctor, and styles such a man doctor; but the profession knows the value of the degrees conferred by different universities, and of the diplomas conferred by different examining bodies. The amendment I venture to propose is this, that this Metropolitan Counties Branch should present a petition to the Legislature, which should endeavour to provide that every man who is duly qualified to practise medicine and surgery by examination by the existing medical bodies be registered as a practitioner of medicine and surgery, and

should be entitled to call himself Dr. if he wishes to do so, or Mr., if he prefer to retain that distinction as a pure surgeon. In America, every man is called Dr. by right, and the public only recognises a man who practises medicine and surgery as a doctor. I think that is really the desire of the medical profession in England, that every man qualified to practise medicine and surgery, either separately or conjointly, should be called Doctor. I therefore venture to propose, as an amendment, that we should have some sort of law which would recognise every man qualified to practise medicine and surgery as a Doctor. I wish to say one more thing, and that is, that it is only the medical profession that recognises a difference between different degrees. The London University should be left exactly as it is. Its examination might be made as stiff as you like, because then the profession will know who are the picked men. I would have all the examinations—those of the College of Surgeons and the College of Physicians—just as they are, because the public only recognises a man who is duly qualified to practise medicine and surgery as a Doctor. I am afraid I have not put my sentiments very clearly, but I have tried to do so; and I have tried to separate the whole body corporate into two sections, the medical profession and the public. The public only recognises a medical man as a Doctor, but the profession recognises a difference between the University of London and Apothecaries' Hall. No notice has been given of my amendment, and therefore I doubt whether I shall have a seconder; but I would propose that the Legislature be petitioned by the British Medical Association, and by the medical profession at large, to allow any man who is duly qualified by any examining body recognised by the Medical Council, to practise medicine and surgery, to be registered as and be called a Doctor.

Mr. BRINDLEY JAMES: I do not mind seconding the amendment, but it does not seem to be an amendment. It has nothing to do with the resolution at all. It is quite different from the resolution: it has to do with the Legislature, and not with the London University.

Dr. BRIDGWATER: I rise with some reluctance to address this meeting, as I am one of those who entered the portals of the University in a year when we thought the approach was difficult and dangerous, but which, in the present stage of advanced science, is considered to have been by comparison an easy one. With an affection for that University, and recognising, as I have done through a long series of years, the advantages of a body which has stimulated a certain portion of this community to increased efforts to work, I do not like personally to feel that we are undermining that system without some very good reason. I have not got up in the spirit of opposing anything that has gone before, because, as one of the Committee of the Council who have drawn up these suggestions, I have gone both in heart and spirit with the movement; but I think we have to consider seriously two points with regard to the University's work. There is nobody present who would wish to see the medical examinations diminished in their searching character; and I think moreover that, though we may recognise, and I do recognise myself, that there has been a growing tendency in the University to increase the difficulties and the seriousness of the early examinations, none of us would like to ask that University to admit any number of our body into the privileges of its examination at a weaker portal than any other body of men. I think we must seriously contemplate that view. We know that the matriculation examination to many people is a serious question. I can remember myself, thirty years ago, having left school for something like four years, with what horror I contemplated what I had to do; but I set to work to do it, and I did it; and I believe I only did what any other man in this room could do if he made up his mind to do it. But at that time the object was really to test what a man had learned at school. Now, I cannot but fancy that the examinations are calculated, in the spirit of some of the army-examinations, to sift out, and rather to deter men from getting in. I think that if, by this meeting, or by a combination of our body, we bring a force to bear upon the University, acknowledging a certain stringency of examination, but beyond which we do not intend to go, we shall succeed better, when we visit the University, than if we merely have broad platitudes or lamentations. Let us feel we are equal to anything they ask; but, if we differ from them, it is because we think they ask too much.

Dr. SANSOM: I should be very sorry to interfere between the meeting and this resolution, with which I very much agree; but, inasmuch as I opposed it in Council, I am only consistent in opposing it now. I beg, with very great deference, to submit this amendment—that all reference to the University of London be expunged, but that everything else be retained which suggests the conferring of the title of Doctor, and everything of advantage that can accrue from it, on those who have been properly educated medical students, and who have

passed the examinations in medicine and surgery of the Colleges of Surgeons and Physicians. I yield to no one in my desire that every one who has passed such an examination shall be entitled to place the magic letters after his name which shall put him on a par with those who have obtained a degree in any university in England, or anywhere else, but I do say that it is a matter of impolicy to apply to the authorities of the University of London. I was almost afraid that I should be in the very feeblest minority, but I am very much encouraged to find that there are some, at any rate, who think with me in these matters. With the highest respect for, and with the most perfect co-operation with, my colleagues on the Council of this Branch, and especially the chairman, I cannot but feel that they have been under the influence of something of a fallacy. One of these resolutions seems to imply what I consider, at any rate, to be a fallacy. It says certain things have arisen in the metropolis, with regard to the reception of degrees by medical students, owing to the University of London not having adapted its requirements to those of the medical profession. Now, the University of London never was intended to adapt itself to the requirements of the medical profession exclusively. I take it that the University was established in order to confer a benefit on all the faculties, and you will easily understand that the medical faculty is only one among several; and that the faculties of arts and laws, and science and literature, and music, are all governed by the Senate of that University. The fallacy underlying the suggestions to be submitted to the Senate by the Council of this Branch is, that the University of London exists only for the benefit of the medical faculty. (*Dissent.*) I only say that was the impression made upon my mind. I am perfectly ready at once to accept that my impression was wrong; but I must ask you to take it as a fact that the University of London is not for medicine only, and is not an university for medicine particularly; but it is an university of which the medical faculty is only a branch, and not the most extensive branch. At any rate, I think it is not politic for us with regard to this great question, which is really a most important one, and one which I should like to see pushed through as fast as possible, to approach the University of London. Let us think what you will do. You approach the Senate; the Senate will take the subject into consideration. The Senate has always gone on the principle that it shall raise the general standard of human knowledge so far as in its power lies. You will perhaps get some encouragement, but it is much more likely that you will not, because the Senate will say it is bound by its past traditions. But, supposing the Senate were concurrent, would it be possible for such a great change to be made without consultation with Convocation? Certainly not. In Convocation, it is not to be expected that you will get this thing passed very rapidly. Surely there will be a very large amount of time lost before you will get one step in advance; that is what you have to think of before you pass these resolutions in their entirety. I want to know what you would like to suggest to the University of London, that is to say, to the Senate in *limine*, as a practical scheme. In the first place, I hear diverse opinions. I hear on the one side, that the standard of the matriculation examination is not to be lowered; but still, would that accomplish what you want? If you say the standard of the matriculation examination is not to be lowered, remember that at least 50 per cent. of the candidates fail to pass that examination. Very well, then 50 per cent. of your medical students, who are perhaps qualified to pass a simpler preliminary examination, would fail to pass, and therefore you are reduced to 50 per cent. In the next place, you want to decrease the severity of the preliminary scientific examination, and you rather blame the University because it interposes that examination in a medical curriculum; but, subject to correction, I think the great anxiety of the University is that the preliminary examination shall be passed before any student enters into any medical school at all. If I am wrong, I shall be corrected; if I am not, I think you are under an hallucination. In the next place, I hear from my friends that you do not wish the severity of the first M.B. and second M.B. examinations to be lowered at all; and it strikes me that those examinations are very nearly as difficult, and the proportions that pass them are very nearly the same, as in the other case, so that you will not meet the end you have in view. I guard myself by saying they are not so comparatively stiff. But, then, you must remember that the able men have been sifted out; and it is probably the men who have got through the more difficult part who will get through the other examinations. The object of my remarks is to show that, even if you had what you wish, your great object will not be gained; you will not get the number of men through with the advantage of applying the letters to their names which imply the taking of an university degree. I say it will be a much more simple plan, if you use the great powers that this Branch

and the Association in general will give you, not to approach the University of London, which is governed by such traditions as I have mentioned, but to endeavour to get for the London medical students in all the hospitals a power to append to their names after they have passed the College of Surgeons and the College of Physicians the degree which they want, and to which they are as much entitled as a man who has passed the University of Edinburgh. It may be that that will be a difficult thing, and that it will be met by opposition on the part of other universities. Then, I say, make a new title. New titles have been made lately, such as B.Sc., Bachelor of Surgery. Let there be a new title, as M.C.D., Doctor of Medicine and Surgery. I think it would be rather a more honourable title than any we have already, and would be second to none in importance. Old Hudibras says:

"The value of a thing
Is just as much as it will bring;"

and I think the honour and value of a title like that will be measured by the honour and value of those who obtain it. I propose, as an amendment, that all the terms of this resolution referring to the University of London be omitted, the rest to stand as at present.

Dr. RAYNER: I second the amendment. I certainly should wish that we should not in any way endeavour to alter the University or to appeal to it to diminish the regulations now in force. We have seen the result of its actions in the past, and I hope that, instead of diminishing the stringency of its examinations and the length of the periods which must elapse between different parts of its examination, they may be increased.

Sir JOSEPH FAYRER: If all reference to the University be left out, what will remain?

Dr. SANSOM: I carefully considered that, and I think everything remains that is of value. My amendment will read: "That the report of the Council of the Branch on university degrees for London medical students be adopted, with the exception of those portions which relate to the University of London."

Mr. NELSON HARDY: Surely we should understand what is involved in this before we are asked to vote upon it. The fact of the adoption of the report itself includes everything to which Dr. Sansom has objected; and, further, the seconder of the proposition tells us that he does not pledge himself to everything contained in it, particularly to the three most important suggestions at the end.

The amendment was then put and lost, as was also Mr. Hutchinson's amendment.

Mr. VICTOR HORSLEY: I wish to ask a question. We have heard from the chair and from Dr. Bristowe that a part of the Council of this Branch think that the preliminary scientific is not of particular importance to a practical medical man. Am I to understand that, by the adoption of the report, that view would be endorsed? Until that question is answered, I should not be able to tell which way to vote.

The PRESIDENT: That is not included in the report. It was Dr. Bristowe's private statement and my own. I took care, in mentioning the matter, to say it was my own private statement, and that it was not the feeling of the whole of the Council.

Mr. VICTOR HORSLEY: Therefore it will not be put forward by the deputation to the Senate?

The PRESIDENT: Certainly not.

Mr. SMITH TURNER: Before you put the resolution, I would venture to call attention to the paragraph which is annotated as "Injury to Medical Education." If my memory serve me, in that paragraph there are three or four London schools mentioned as exemplifying the anomalous position in which London medical students are placed. Personally, I do not care much about those small matters, but I have heard this fact commented upon, that certain schools should be mentioned in the report, and perhaps it would be better if the names were left out, and some such term were adopted as London medical students, or London practitioners who have studied in London. There are other schools in London quite as great as those named. I think if we want to gather strength for a movement of this kind, we should avoid all causes of offence. I do not make any resolution, but simply call attention to that.

Dr. GILBERT SMITH: Perhaps, as Honorary Secretary to the Subcommittee, I had better explain. The paragraph alluded to by the last speaker refers "to men educated in the metropolis of this great empire, at hospitals such as St. Bartholomew's, St. Thomas's, Guy's, the London, and others." Those hospitals were specially mentioned because they were so large. It had nothing to do with the largeness or smallness of the schools. The question was discussed both at the Subcommittee and at the Council as to whether all the schools should be named or none, and it was thought better to point out the fact

that, at hospitals of such dimensions, the men were practically denied.

Mr. TURNER: I take it the practical relation of a school to a hospital is a very important one. I therefore move that the names of these hospitals be eliminated from the report.

Dr. LAUDER BRUNTON: I second Mr. Turner's amendment. We gain nothing by putting in the names of those hospitals, and we may alienate several useful friends by inserting them. Otherwise, I thoroughly agree with all that is contained in the report, and I only wish to omit those few words.

The PRESIDENT: I can only confirm what Dr. Gilbert Smith has said with regard to this matter.

The amendment was carried, after which the original resolution was agreed to *nem. con.*

Dr. ROBERT BARNES: I did not come here prepared to make a speech, and it is quite unnecessary to do so. Anyone who has gone through that most able report, and has reflected, as I have been obliged to do for several years past, on those letters sent to the London University by Dr. Bristowe years ago, must be convinced on this point. Any teacher in London, who has observed the course of medical education, and the effect of the University of London on the schools, needs no more. As I have said before, and my words have been found fault with, the University of London has been acting as a blight on the medical schools. It does not apply merely to the medical faculty, but more or less to other faculties besides. It is impossible not to see the fallacies that surround some of the arguments brought forward for maintaining the London University as it is. It may fairly claim to have started a new era in medical and general education; it certainly raised the hospitals from the state of nepotism, jobbery, and iniquity under which they were governed. That was greatly due to the action of University College in the first place, which brought men as teachers to London simply on the score of merit, and without reference to their degrees or titles; and all the schools in London had to follow the example, in order to keep pace with University College. Then there came the University of London, supplanting it, and the hospitals became more open to outside men who had not paid heavy fees, and no doubt medical education was very much improved under the first impulse of the University; but, having started that great movement, it is now far behind its own work, and the whole system of medical education in London is suffering in consequence. It is not simply a question of the teachers' interests. For myself, I shall soon pass away; I shall not long occupy the position of a teacher, and it is of no importance to me as a teacher, but it is of vital interest to the public that the best medical education should be stamped with the highest title; but here the very best trained men in Europe or the world, as medical men, are stamped with inferiority, because they cannot get the degree which they would obtain elsewhere. That is a danger to the public. The men so trained, making the most admirable practitioners, are at a disadvantage with the public, who mistake them for inferior men. I think that is a matter of far more importance than even the interests of the schools. The London University must now reform its policy, and endeavour to keep pace with the onward progress of medicine, with which it may be said to have started. I will not say a word on the points referred to by Dr. Bristowe about the matriculation and other examinations; but I may answer an objection raised here to-night. We do not propose to lower the matriculation examination; there is no proposal to lower it; but Dr. Bristowe offered an alternative—to allow a man to have a choice of subjects, which is infinitely better. No one who has gauged the average mind of the student can fail to see that some men are gifted in one department, and some in others. They cannot all be Admirable Crichtons, which the London University thinks it can create. It may be said that it is important to keep up the London University, that the public may recognise the picked men by those who have gained degrees. A grosser fallacy was never uttered. The picked men, who have taken high honours and high degrees, are not necessarily the picked men in the profession in after years, but often will be passed aside by men who have not been crammed to pass the examination for the degree, who have had souls within to work independently, and who had cultivated the spirit of original research. These men, as a rule, do not shine at the examining boards, but they become distinguished men hereafter. Therefore, I say, that is not an argument for maintaining a select and artificial sort of Chinese standard for men who are celebrated because they have passed high examinations. You cannot impose upon the public or the profession by a false title of that kind; they must justify it by after-work, and men who have had the opportunity of cultivating the spirit of original research will justify their work. I am afraid of trespassing on the meeting, as I did not come at all prepared to make a speech,

but I cannot accept the alternative, except as a *pis aller*, of the colleges uniting to give the degree of M.D. We have an University of London imposed upon us, and we have a right to look to that to meet the requirements of the progress of science. I am not at all confident that we shall have much weight with the University, because it is not ruled by a body of the medical profession, but by men whose sympathies are not medical. It is no use blinking that fact; and I think some of the restrictions imposed on medical degrees are not intended to raise the number of practitioners, but perhaps the contrary. A title of M.D. from the colleges will never have the same influence with the public as an university degree. It can only be a nominal thing. They will say, "That is a mere title; he is not an university man;" and it will not compete in the public estimation with the M.D. of the London University. Then my friend Dr. Sansom, to whom I always listen with great satisfaction, proposes a compound title. Medicine is an unit in its essential nature. The M.D. is quite enough, and embraces everything else. I will not encroach any longer on the meeting, but I will say that, if we cannot get the London University to take a new view of its duties, so as to meet the requirements of the great medical schools of this country, we must look to some other means of putting pressure upon them; for I am perfectly persuaded that pressure must come upon them before you will get them to move. I propose:

"That, failing to obtain concessions from the Senate of the University of London, the Council be empowered to take, in conjunction with the Royal College of Physicians of London and the Royal College of Surgeons of England, such steps as they may deem necessary to facilitate the obtaining of degrees in medicine by London medical students."

The PRESIDENT: As confirming what Dr. Barnes has said, I may read a few lines written by one of the most distinguished *alumni* of the London University, whose name I may not mention, because he has requested me not to do so. He entirely agrees with this report; and he remarks that, whilst attaining to the high honour-list of the London University, he personally rather regretted that he did go in for honours, because it had taken him several years to recover from the mental strain of the examination; and he believed he should have been all the better a practitioner had he been content with passing the M.B. examination in the second division, instead of taking first-class honours.

Dr. HICKMAN: I second the resolution proposed by Dr. Barnes, and, as one who has taken considerable interest in this question, and has been somewhat prominent in bringing it publicly before the profession, I may be allowed to say a few words. In the first place, I desire to thank the members of the Committee for the great and evident pains they have taken in considering this subject, and for the very full and valuable report they have presented to us. It is in no carping spirit, therefore, but with an honest desire to help towards a practical and permanent solution of this great question, that I submit to this meeting a few remarks and criticisms on the report, and the recommendations of the Committee. It is a curious fact, whether accidental or so arranged I know not, that nearly every member of the Committee is a graduate of some University, one English, one Irish, and three Scotch Universities being represented on it. Considering the nature of the report, I am inclined to think that this fact rather adds to its value, and gives it a disinterestedness which otherwise might have been, however unjustly, suspected. It leaves room, however, for the facts to be viewed from another standpoint, and far different, whilst equally reasonable, inferences to be drawn from them; and it may account for the much greater prominence given to some aspects of the question than to others, which a non-graduate would consider of more importance. But a perusal of the statements and facts the Committee have brought together, and of the remarkable and interesting tables they have compiled, must convince anyone of the great disadvantages under which English schools of medicine, English students, and English practitioners labour, as compared with those of other parts of the United Kingdom, and more especially of Scotland. Three great facts are brought out by the report: 1, the gradually increasing exodus of English students to the medical schools of Scotland, and not only of English but of Irish, and also of the Indian, colonial, and foreign students, who find their way to our shores in search of a medical education: 2, the consequent decline in prosperity of the English schools of medicine: 3, the gradual displacement, amongst English practitioners, of English by Scotch qualifications. These facts are really much understated in the report. Table II, for instance, proves clearly enough the gradual increase in the numbers of medical students in the Scotch schools, with the corresponding decrease in the numbers at the English and Irish schools; but a careful analysis of the *Medical Students' Register*, from which

this table is taken, shows that, in the year 1883, for instance, instead of 817 entries at English schools of medicine, there were but 623 (377 in London, and 246 in provincial schools); the balance, 194, is made up of Indian and foreign students, and of English students registering the commencement of their studies by "pupilage at a dispensary," or "with a registered medical practitioner." The majority of these would eventually find their way to Scotland, and have to be added to the number (596) of entries at the Scotch schools. There is no doubt that the actual number of students at the medical schools attached to the three Royal Infirmarys of Aberdeen, Glasgow, and Edinburgh, is fully equal to the number at the medical schools in connection with the twenty large hospitals in London and the provinces. I could easily corroborate this by other figures if the time would allow; but I will only now add that, if the number of students for the year 1883 had been equitably divided between the three divisions of the United Kingdom on the basis of the proportionate number of practitioners in each, the numbers would have been, for England, 1,380; Ireland, 191; and Scotland, 189. Parallel to and consequent on this invasion of Scotland by English students, is the return raid on England by Scotch graduates. We find that, of the total number of 5,219 graduates in all England, the degrees of no fewer than 3,274, or 63 per cent., are of Scotch origin, and this proportion, or rather disproportion, is annually very rapidly increasing; 20 per cent. are of English origin, and this proportion is as rapidly decreasing. The proportion of graduates to practitioners in Scotland is 70 per cent., and the average annual number of degrees conferred is 14 per cent., exactly enough to supply the whole country every seven years. In England, the proportion of graduates to practitioners is 32 per cent., two-thirds of whom, of course, are Scotch, and the average number of degrees conferred is half an one *per annum*. If the proportion and average were the same in England as in Scotland, there should be in England at least 11,416 graduates, instead of 5,219; and no fewer than 2,240 degrees would be annually conferred, instead of 80, as at present. There is, however, another great fact and another very great grievance which has been but very lightly touched upon by the Committee. We have to take into account, not only the disadvantages of our present and future English medical students, but also the invidious position of some past generations of English medical students, of a large number of the present general practitioners of England, of 3,000 or so licentiates of the Royal College of Physicians of London, a body of highly educated gentlemen who have had an education and training, gone through a curriculum, and passed some very stringent and carefully conducted examinations all quite up to the standard required for an ordinary degree, and who must be admitted to be equally worthy of the title of Doctor of Medicine with the 70 per cent. of Scotch practitioners, in the towns and villages of Scotland, or with the 63 per cent. of Scotch graduates, who compete to such advantage with them in the towns and villages of England. In endeavouring to find a remedy for the condition of things which has been described, there are the usual three courses open to us; (1) to bring down the standard of the London University degree to the level of an ordinary qualifying licence; (2) to establish a brand new university, which should grant its degrees on such terms as will open them to every industrious and intelligent student; or (3) to confer the power on the Royal Colleges of Physicians and Surgeons to grant the degree of Doctor of Medicine, in lieu of their present licences. The objections to lowering the standard of the London University are many and various. I quite agree with what Dr. Sansom said just now, that the University of London has been, very unjustly it seems to me, held responsible for the present state of things. There was a time, well within the memory of many of us, when a medical degree was but very lightly esteemed, and the English practitioner was well content with his medical and surgical licences. The degrees of the London University were little known, and were numbered by units, the undergraduates merely by scores, and Scotch degrees conferred no right to practise in England; but after the Act of 1858 was passed, and Scotch degrees were made legal qualifications in England, London University graduates gradually attained position and eminence, and the University became renowned as a medical university, degrees rose in value, and Scotch degrees became more and more sought after by those who cared not for the labour and trouble of obtaining the London degree. The country has become more and more flooded with Scotch degrees, until at last in self-defence, and from the mere instinct of self-preservation, the English general practitioner is compelled to go anywhere to get a degree, at any expense to his feelings or patriotism. The London University is not a technical university. The object of the London University has never been to adapt itself to the require-

ments of any particular community of the medical, legal, or any other profession, but to establish and maintain the highest attainable standard of professional acquirements in each branch of knowledge; and it is the recognition of this fact, both by the public and the profession, which gives its medical degree the pre-eminence in which it is held. The graduates of the London University, such as the mover of this resolution, are the Alpine Club men of the profession, to whom its difficult approaches and comparative inaccessibility are the great attractions; and I am quite sure that, if there were 10,000 medical graduates of the London University, Dr. Bristowe would seek another degree at some other university. There may be faults in the University of London; no human institution is without them; but it is acknowledged by all to have raised the standard of medical education, as well as of education generally, and to have elevated the character of medical teaching throughout the country. It will be much better for it to be wound up and extinguished altogether than to be modified out of all recognition, and made the *corpus vile* for a series of crotchety experiments. The Senate has always been very favourably disposed towards the Medical Faculty of the University, constituting as this does the great source of its renown; it may be induced to make some slight alterations in the regulations, and it will probably be willing to add to the number of local centres for examination, to arrange that every examination should be held at least twice a year, and perhaps to make some modification in the preliminary scientific examination by alternative subjects; but I trust that there is not the slightest chance of its diminishing the severity of the matriculation, or of its lowering the standard of the professional examinations. With regard to some other of the suggestions of the Subcommittee, it must be remembered that the London University consists of four faculties; one-third, however of the members of the Senate are medical men, most of them actually or recently distinguished teachers in various London medical schools; but, even if all the suggestions recommended by the Subcommittee to the Senate were carried out; they would be quite inadequate for the end we have in view, of allowing English students to obtain degrees on equal terms with their Scotch brethren, and some other method of bringing this about must be devised. With regard to a new university, there is no call whatever for one on the part of the faculties of arts and laws. The distinguished legal gentlemen who have spoken on the subject, have kept very silent about their own faculty, and have contented themselves with urging the advantages of one to the medical profession. A general university has many and diverse interests to consider; not only those of medicine and science, but those of arts and literature, law, pedagogy, and theology; but none of the other professions think of handing over the management and reputation of their affairs to universities or any other bodies. What would the Inns of Court, or the Incorporated Law Society, for instance, say if the London University were to propose to interfere in any way with them, or with their qualifications for practice? Are we absolutely incapable of managing our own affairs, and should the great ancient profession of medicine be tied to the apron-string of this new corporation, of whose aims and objects every one who supports it has a different idea? There is, sir, an easy and simple remedy for all the evils which have been described. Let the two Royal Colleges of Physicians and Surgeons be amalgamated into one great Royal College of Medicine, and obtain a new charter empowering it to grant medical degrees. This will give us at once a complete medical faculty; this will be, in fact, a new medical university; it will reduce instead of increasing the number of qualifying bodies; and a new body in name only, it will look back to a venerable antiquity associated with the most illustrious names in the history of medicine. The materials and machinery for such a college are ready to our hands, and only require fitting together by skilled and sympathetic workers. It would make no demand on the public purse, and impose no fresh taxes on the profession; comprehending, as it would, every examiner and teacher of eminence, there would be no lack of sympathy between the schools and the College, no want of touch (whatever that is) between the examiners and the teachers. The requirements of the profession would be satisfied, and the general and scientific culture of its members would be maintained. It should, of course, be retrospective in its action, and admit at once all those who have obtained the double qualification of the two London colleges, a qualification which, as the report declares, implies by its possession a high degree of special education. One of the great advantages of this plan is, that it might be carried out during the present session of Parliament, and might come into operation by next October. If such should be the case, I venture to predict that the entries of London students will be at least doubled, and the London schools will commence an era of prosperity that will enable them to make of still greater value the enormous wealth of

clinical material with which this huge city rather too much abounds. This amalgamation will, moreover, remedy the mistake of centuries, and put an end to that division of the profession into two ranks, which is so great a puzzle to the public, and distinction between which is as difficult for them to discriminate as it is for ourselves to define. The whole profession will be raised in political and social influence, and the President of the United College, the future occupant of the double chair of Chelsden and Linacre, of Harvey and Hunter, of Paget and Jenner, the chosen head of the great medical profession of this country, will occupy a position of dignity and brilliancy which a Prime Minister might envy, and to which a peerage could add no lustre. In a degree-conferring Royal College of Medicine, formed by the amalgamation of the two Colleges of Physicians and Surgeons, we have a scheme which can injure no legitimate interest, which will be found most widely acceptable, which can be very easily and quickly carried into execution; we have a cure for our ills which will satisfy the most ancient canons of judicious treatment, complying, as it does, with the well known maxim of Asclepiades, *Curare tuto, cito, et jucunde*.

The resolution was carried unanimously.

THE PRESIDENT: Before we part I am sure you will agree with me, that the least we can do is to record a vote of thanks to Dr. Gilbert Smith for the admirable report which he has drawn up for us. Without his aid, without his energy, it would have been utterly impossible for the Branch to have accomplished the work it has done. I am, therefore, perfectly convinced you will all agree with me in according him a vote of thanks.

Dr. GILBERT SMITH: What I did was merely my duty, and without the aid of each member of the Committee and many members of the Council I could not have done it.

The proceedings then terminated.

SOUTH-WESTERN BRANCH: QUARTERLY MEETING.

A QUARTERLY meeting of the Branch was held at Chubb's Hotel, Plymouth, on February 3rd, 1885. In the absence of the President, Dr. Lewis Shapter, of Exeter, from illness, Mr. W. Square, of Plymouth, was called to the chair.

New Members.—The following were elected members of the Association and Branch: Mr. H. Appleton, M.R.C.S., L.S.A., the Lizard, Cornwall; Mr. A. E. Hayward, M.R.C.S., L.S.A., Brixham, Devon. The following members of the Association were elected as members of the Branch: Fleet-Surgeon Longfield, R.N., H.M.S. *Royal Adelaide*, Plymouth; Mr. J. T. Ashton, Paignton; Mr. A. W. Dalby, Torquay.

Papers.—The following papers were read.

1. Mr. W. E. C. Nourse: a Case of Syphilitic Periostitis, followed by Paralysis, Intestinal Obstruction, and Phthisis.—Mr. W. Square and Dr. Bampton made remarks.

2. Dr. P. M. Deas: Note on the Use of Permanganate of Potash in cases of Insanity, associated with Amenorrhœa.—Dr. Bampton, Dr. Aldridge, Mr. W. Square, and Mr. Nourse made remarks.

3. Mr. J. B. Carlyon: Notes of a Case of Intestinal Obstruction.

4. Mr. J. Jackson (Plymouth): Remarks on the Medical Aid Sick Association. This was read by the Secretary, in the absence of Mr. Jackson. The paper explained the objects of the Association, mentioned facts showing the very satisfactory progress which it was making, and urged its claims on the consideration of the members of the Branch; regretting that, so far, a very small proportion of those eligible had joined; and concluded by expressing a wish that a Committee should be appointed to further the aims of the Association.

The following resolution was moved by Mr. W. A. BUCHAN, and seconded by Dr. BAMPTON:

"That a committee of members of the South-Western Branch be appointed, to whom it should be an instruction to take steps to bring the Medical Aid Sick Association more forcibly under the notice of the members and others, and generally to promote its extension."

This was carried unanimously, and the following members were appointed to act on the committee—Mr. G. Jackson, Mr. W. A. Buchan, Dr. Bampton, and Mr. G. Thom.

5. Mr. F. G. H. Whitley showed a patient with exostosis of the frontal bone, arising from a kick at football.

6. Dr. A. Kempe exhibited and explained the advantages of a new form of long midwifery forceps, the feature of which was that the handle of one blade was constructed with a screw, so that it could be removed while the blade was being applied, and then screwed on again afterwards.

The South Devon and East Cornwall Hospital.—Before the meeting, members had the opportunity of attending the formal opening, by Lord Mount Edgumbe, of the new buildings of the South Devon

and East Cornwall Hospital, and of inspecting what, as regards situation, construction, and internal arrangements, may fairly be regarded as a model of what a hospital ought to be.

SPECIAL CORRESPONDENCE.

PARIS.

[FROM OUR OWN CORRESPONDENT.]

The Depopulation of France.—*Boldo.*—*Lead-Poisoning from preparing Charcoal.*—*Ozonometric Observations.*—*Cholera in the Army.*—*Recent Regulations concerning Army-Surgeons.*—*Adulterated Mineral Waters.*—*A Proposed Electrical Laboratory.*—*Catalepsy forbidden by the Police.*

THE discussion at the Académie de Médecine on the depopulation of France was resumed at the last meeting, and M. Fournier gave some interesting statistics concerning the influence of syphilis on infant-mortality. The mortality among new-born infants from syphilis reaches 28 per cent. If a mother have contracted syphilis a year before the birth of her infant, it is sure to die in infancy. M. Fournier has personally observed forty-four instances of women becoming pregnant during an early period of syphilis; only one of the children born lived beyond its infancy. Among 100 syphilitic women, there were 208 pregnancies; 60 living children resulted, and 140 dead; consequently, the rate of mortality was 71 per cent. These statistics are furnished by notes taken in private practice. Hospital statistics would probably give a higher rate of mortality. Dr. Coffin stated that, at the Lourcine Hospital, among 28 pregnant women, there was only one who had a living child. M. Fournier estimates that, at the St. Louis Hospital, among 148 pregnant women, 125 lost their children in early infancy.

The plant known by the name of Boldo, which is common in Bolivia, and much used there, has recently been studied in France. In 1874, M. Dujardin-Beaumetz made some experiments with it, and observed that it acted on the urinary organs and produced somnolence. About a year ago, M. Chapoteau extracted a substance from boldo leaves, which was entirely free from any alkaloid. M. Laborde has made some experiments with this substance, which have always been attended with the same results. The substance, extracted by M. Chapoteau is an orange-yellow fluid, with a strong smell of thymol. The injection of twenty-five grammes of it into a guinea-pig throws the animal into a somnolent condition. After a few hours, the animal recovers its normal condition, and presents symptoms of faulty motor co-ordination, which persist for some time afterwards. Rabbits are not thrown into such a deep sleep; they are the most difficult of all animals to narcotise, but when the first effects of the poison pass away they appear to be more intoxicated than do the guinea-pigs. Two or three grammes are sufficient to hypnotise a small dog; noise fails to awaken it. After two or three hours of deep sleep, it wakes up voluntarily, makes a good meal, and does not appear to have been under the influence of a toxic substance. Insensibility is the invariable result of experiments with boldo. If the dose be increased, death takes place during a profound sleep, unaccompanied by convulsions or contractions. The accessory phenomena are, loss of the sense of hearing, stimulation of the urinary and biliary secretions, and local anæsthesia. Boldo apparently acts on the brain; the phenomena above described are not produced if it be administered to a frog when its cerebrum is removed.

At a recent meeting of the Société Médicale des Hôpitaux, M. Gérin Roze and M. Duguet described three cases of lead-poisoning. The patients were employed in a factory for making chemical charcoal. They were in perfect health before working in the factory, and many of the factory-workers preserved their health, whilst following their occupation, during many years, until the workroom, which was on the third floor, and was large and airy, was removed to an underground room, which was ill ventilated. The sufferers in question were employed in drying and packing the particular kind of charcoal known as *braise*, after it has been immersed in lead-nitrite, which renders it more combustible. Meat cooked over this *braise*, when consumed, may provoke lead-poisoning.

M. Pamard has presented to the Academy of Medicine a note on ozonometric researches made at Marseilles, Toulon, Avignon, and Orange. It was observed that there was more ozone in the garden of a hospital than in its wards, especially in those containing cholera-patients; but the relation of mortality with a given proportion of

optional to candidates to take them together or separately; and that a man who, having taken the two, should fail in one, might take that at the next examination. The intermediate examination might also be held twice in each year, and a like division of the subjects adopted, which would be preferable to the present postponement of one to the following year, involving as it does a serious loss of time.

No alteration seems called for in the final examination for the M.B., for not only are the failures fewer than in the previous examination, but no loss or injury is inflicted on a legally qualified man by his being required to pursue his practical study of medicine for another year.

But a reform is wanted elsewhere than in Burlington Gardens. It is rightly said, that there is a want of sympathy between the university and the medical schools. The fact is, that the medical schools have grown up around the hospitals; instead of the hospitals being attached to the medical schools, as in every other university town at home and abroad, the schools are mere appendages of the hospital. Chemical, physical, and biological science, can no more be taught out of the laboratory than anatomy can be out of the dissecting room; yet, at the majority of the London schools, no such provision is made, except as regards chemistry, and often that is of the scantiest. Laboratories demand an outlay on apparatus and a staff of demonstrators, such as cannot be supported but by endowments, or by the fees of a large number of students pursuing science apart from medicine, as are found, for example, at University College. The consequences are seen in the enormous proportion of rejections at the preliminary scientific among the candidates from other schools, and the fact, that a considerable number of men enter at University College, and Owens College, for the preliminary scientific examination, pursuing their subsequent professional studies elsewhere. Those who do not avail themselves of the science-schools of University, King's, and Owens Colleges, are compelled to rely on book-work and cram, which too often proves a broken reed, and which it is the especial aim of the university examiners to discourage. The knowledge that they do acquire deserves to be characterised as *apparent* and *unreal*; but a sufficient and very real knowledge—robbing the examination of its terrors—can be, and is, easily acquired where opportunities for practical study exist.

The days are past for relegating the teaching of botany and zoology to junior members of the hospital staff for whom no higher (?), that is, more lucrative, chair is available. The London schools ought to combine around three or four centres at which regular and well furnished science-schools, with laboratories, etc., and where teachers, devoting their whole time to their work, might be engaged in instruction and in research. I would even go further than this. The professor, the true teacher, *nascitur non fit*; and students know it but too well. Some of us can look back for twenty years or more on men whose very tones still echo in our memories, who imparted to us their own modes of thinking, and whose characters have moulded ours; and, again, on others the subjects of whose lectures we felt we could learn much better from books, and to whom we listened with weariness or impatience.

Union is strength, and the combined schools I have proposed could find among the members of their united staffs men who would ably fill the reduced number of chairs of medicine, surgery, obstetrics, pathology, therapeutics, and forensic medicine, as Regius professors of the University; the others acting as clinical teachers in their respective hospitals, or taking up such subordinate specialties as each might feel himself best fitted for by inclination or experience. Anatomy and physiology should be taught, like other branches of science, by men devoting their whole time to these subjects, and who would impart to their students the enthusiasm with which they were themselves inspired.

In conclusion, I do not hesitate to state my strong conviction that the Senate of the University must be entirely reconstituted by a fresh charter. At present, it is a gross anachronism that an University which can boast among its graduates the leading members of the medical, legal, and other professions, should be governed by persons who, however distinguished, do not belong to, and can have no real sympathy with, it; while Convocation, that is, the University itself, is powerless. The Senate should, as in the older universities, be composed solely of graduates and teachers in the component colleges, and elected, say in equal numbers, by the members of the University and the Crown.—I am, sir, yours, etc.,

EDWARD F. WILLOUGHBY, M.B. London.

THE Marquis of Hertford and Lord Aylesford have, upon the nomination of Lord Leigh, the President, been appointed Vice-Presidents of the Warneford Hospital, Leamington.

THE PRELIMINARY SCIENTIFIC EXAMINATION OF THE UNIVERSITY OF LONDON.

SIR,—Professor Lankester, in his letter extolling the merits of “thoroughly organised colleges which exist for the purpose of teaching science,” gives a warning which will not, I think, frighten those who belong to the institutions which he considers “a disgrace to the community.” If the curious details of the so-called successes be as significant as the general conclusions arrived at by the medical readers of his letter, it would be well if he would publish them.

I have had a long experience of the preliminary scientific examination, and I admit that the students who attend the lectures of the examiners have a great advantage over others; and it is difficult to avoid this, if London University examiners hold such opinions of other teachers as those expressed by Mr. Lankester in his letter.

The real truth is, that science, as it is now taught in the “organised science-schools,” is not in the least adapted to the requirements of the medical profession; it aims at the unattainable. I know, at the present time, a young medical student of more than average ability, who has spent three terms at Cambridge University, getting up the anatomy of the earthworm, the embryology of the amphioxus, and dissecting the other animals included in their schedule, which is not unlike that of the preliminary scientific examination of London University. This gentleman, after his academic year's work, had come to the conclusion that an earthworm had a single ovum, which he conceived to be an organ. He did not know what a “cell” meant, yet he knew the manner in which the amphioxus is developed. He could describe the kidney of a frog, but had no conception of the general structure or significance of a gland. It is very useful, no doubt, to begin with concrete rather than abstract ideas; but why select an earthworm or a river-mussel? As a matter of fact, the whole system degenerates, with nine students out of ten, into a system of cramming of the worst kind. What students preparing for the medical profession want is a knowledge of principles and methods, not of details, which are only useful to fit them for absurd examinations, conducted by specialists who know nothing, and care nothing, about the requirements of medical education. For many years, science, especially biological science, grew by the researches of medical men; now it is specialised, like everything else. The science of the specialist is usually useless to the medical practitioner; and I would ask, *Cui bono* is a student of medicine to waste a year, sometimes more, and to spend thirty or forty pounds in fees, to learn to dissect an earthworm, or to work out problems in mechanics which would be more useful to an engineer? This is surely a *reductio ad absurdum*. Let us have a simple examination in the principles of biology, unencumbered with the anatomy of invertebrates or the lower forms of vertebrates, held twice a year; and the University of London will certainly be more popular than it is at present, and much more useful. If the other examinations were also made practical, and shorn of all the elaborate technicalities with which they bristle now, the requirements of the London student would be within measurable reach of being fulfilled. It is the scientific men outside the medical profession who are damaging the cause of medical education. Let zoologists by all means educate zoologists, but let medical men educate those who are to become medical men. The profession commits a fatal error in encumbering medical education with useless and extraneous subjects.

—Faithfully yours,

BENJAMIN T. LOWNE.

65, Cambridge Gardens, Notting Hill, W.

UNIVERSITY INTELLIGENCE.

UNIVERSITY OF OXFORD.

THE TEACHING OF PHYSIOLOGY.—A decree to provide for the expenditure of the working of the department of Physiology, namely, £300 for gas, water, etc., together with £200 for the salary of a Demonstrator of Histology for three years, was submitted on Tuesday last. The decree was supported by the Dean of Christ Church and the Warden of All Souls (Sir William Anson); the opposition being led by Canon Liddon and the Bishop of Oxford. Following the policy of the water-companies, the antivivisection party thought to starve out Professor Burdon Sanderson by cutting off his water and supplies, and leaving the University with a building, on which £10,000 has been spent, practically useless. After Sir Henry Acland, Regius Professor of Medicine, had pointed out that the inevitable consequence of adopting such a course would be to check the progress of medicine and the

acquisition of knowledge which bade fair to diminish the sufferings, not only of mankind, but of the lower animals, the meeting became exceedingly impatient; and the words of Professor Dicey, who wished to speak for, and Professor Freeman, who tried to speak against, the decree, were both drowned by cries of "Divide, divide," from members of Convocation, and a great uproar among the undergraduates. The Proctors then proceeded to take the vote, and announced that 412 had voted for the decree, and 244 against it; there was, therefore, a majority of 168 in favour of the grant. Thus ended the most crowded and most vociferous Convocation that has been held for many years. Common sense, and an earnest desire to render medical teaching more worthy of a great university, have, therefore, signally triumphed. A lecturer on Human Anatomy will now be shortly appointed, and the Physiological Laboratory will be ready for occupation by the end of the summer, so that, by the beginning of October term, the University will be in a position to undertake the teaching of Human Anatomy and Physiology, together with a complete system of instruction in the subjects of the first B.M. Examination, and of the first and second Professional Examinations of the Conjoint Board of the College of Physicians and the College of Surgeons in London. We trust that, after so significant an expression of opinion on the part of the members of Convocation, Professor Burdon Sanderson may be allowed to carry on his work free from petty hindrances, to the lasting benefit of a medical school only too long delayed.

OBITUARY.

Ebenezer Pye-Smith, F.R.C.S.

AMONG the practitioners in the city of London forty years ago, few were better known or more respected than the subject of this notice. He was the son of the Rev. John Pye-Smith, D.D., F.R.S., a learned nonconformist divine, whose theological and scientific writings are not yet entirely forgotten. He was educated at Mill Hill School, under Thomas Priestley, and always kept up his knowledge of Greek and Latin. On leaving school at the age of 17, he was articled to Mr. Ashwell, a practitioner of good standing in the city, who afterwards took his degree, and became obstetric physician to Guy's Hospital. At the same time, he became a pupil of that medical school, where he followed Astley Cooper, Bright, and Addison, and dressed for Aston Key. He also attended the practice of Travers and Green, at the neighbouring hospital of St. Thomas. His chief friends were John Blackburn, the author of an early and valuable essay on excision of joints, who was lost at sea while still young; Henry Ewen, afterwards a well known practitioner in Lincolnshire; John Hilton, and Thomas Hodgkin. To the last named eminent pathologist he was warmly attached, and afterwards took part with the late Sir Stephen Lushington and others in the protest against the exclusion of Hodgkin from the hospital-staff.

At the end of his course of study in London, Mr. Pye-Smith spent several months in Paris, where he attended Magendie's lectures as well as walking the hospitals. Here he made the friendship of Dr. Gustave Monod, and of M. Bovet, of Neuchâtel. He became a good anatomist, and a skilful pathological draughtsman. It was intended that he should next go to Edinburgh and take his degree, with a view to devoting himself to obstetric practice; but a flattering offer of partnership persuaded him (probably, in the end, for his own happiness) to enter on general practice in the city. He soon after married, and took a corner house in Billiter Square. Here he practised successfully, for most of the time without a partner. Besides his professional friends, Risdon Bennett, of Finsbury Square, Henry Oldham, of Devonshire Square, Samuel Solly, of St. Helen's Place, and Thomas Peacock, of Finsbury Circus, he was intimate with Quekett, the conservator of the Museum of the College of Surgeons; Ward, the inventor of the botanical case which bears his name, and Conrad Loddiges, the orchid-grower. Dr. Cooke, of Trinity Square, introduced him to the Hunterian Society, of which he afterwards became secretary, and he was one of the original members of the Pathological Society. To both he contributed cases both clinical and anatomical.

His practice gradually extending from the city to the suburbs of Hackney, Clapton, and Walthamstow, he removed from the city, and spent the last twenty years of his professional life in that district. In 1873, he retired from practice, and, after a year's travelling in Italy, bought a house and garden at Sevenoaks, where he spent his latter years in peace and comfort, expecting the end without impatience and without dread. It came after only a few days of rapid and almost

painless decay on March 9th, at the close of his seventy-seventh year.

His strict integrity and honourable professional life, his skill and sympathy in practice, his unselfish patience and charity, his warm affection and deep religious faith, were remarkable throughout his long course. In two particulars he was peculiarly happy; first, in having never had a funeral from his house during fifty years of married life, and in seeing his wife and eight children around his death-bed; secondly, in the success of the pupils whom he had in his house during the earlier portion of his career. Beside the late Dr. Oldfield, of the Indian army, Mr. James Oldham, of Brighton, and one of his sons, who is surgeon to the Sheffield Hospital, and others who did him credit at the London University or in practice, three of his pupils—Dr. Habershon, Dr. Pavy, the late Dr. Phillips—and lastly, his own son, were successively appointed physicians to his own *alma mater*, the hospital and school in which he ever took a loyal and devoted interest.

W. A. F. BROWNE, LL.D., L.R.C.S. Ed.

ON the 2nd instant, at Dumfries, in his seventy-ninth year, died Dr. W. A. F. Browne, late Commissioner of Lunacy for Scotland. Dr. Browne, almost the last representative of the elder generation of psychologists, had throughout his long life held a distinguished position, professionally and officially. The son of an officer in the Cameronian regiment who lost his life in the great war, Dr. Browne distinguished himself as a student at the University of Edinburgh. He was there President of the Medical Society, and a friend and disciple of George Combe, whom he assisted in his phrenological researches, and for whom he sometimes lectured. Soon after commencing the practice of his profession at Stirling, he was offered the appointment of Medical Superintendent to the Hospital for the Insane at Montrose, the duties of which office he discharged with skill and high credit. During his tenure of this office, he published, in 1837, his most important work, entitled *What Asylums Were, Are, and Ought To Be*, a work which, teeming with the well matured results of careful experience, directing wise and humane suggestions, anticipates, in conception, most of the great reforms which have since taken place in the treatment of the insane, and some of those which still remain to be effected. With regard to a question much debated at the present time, Dr. Browne clearly indicated the total difference between the personal interests of the officers of public asylums and the proprietors of private ones; and he advocated the change from private to public asylums, for the purpose of "preventing any act to which a humane and intelligent body of the community were not parties, and of divesting the care of the insane of every occasion for the exercise of selfish and unworthy motives" (p. 175).

In 1839, Dr. Browne accepted the appointment of Medical Superintendent to the new Hospital for the Insane at Dumfries, which had been founded by the munificence of Dr. Crichton, whose name it bears. He retained this appointment eighteen years, discharging its duties with admirable success in every respect. By his humane and skilful treatment he founded its connection and established its fame, he husbanded and improved its resources, and he developed it, and left it as an institution which will endure as a monument of the best work of his own most useful life. After eighteen years in the Crichton Asylum, Dr. Browne left it for higher public service on receiving the appointment of Commissioner in Lunacy for Scotland, an office first created in 1857, and to which he was appointed with the late Sir James Cox as his colleague. Reformed legislation in respect of the care and treatment of the insane came late to Scotland; and the Scotch have had the great advantage of standing upon the shoulders of English experience, the consequence of which has been that the condition of the insane at the present time in Scotland is greatly in advance of its condition in the country whose wealth and civilisation ought to render it inferior to none. It is needless here to dwell upon the diligence and wisdom with which the new Scotch Commissioners applied the new law. The general contentment of the community with which, at the present time, it is regarded in Scotland, while over the border there is general discontent, is a sufficient proof of this.

In 1870, Dr. Browne, while on official circuit, was thrown from his carriage, and so injured that he entirely and permanently lost his sight. During his long night of fifteen years which succeeded, he fought for and maintained his intellectual vision, so that few men were more conversant than he with the knowledge of the day and the current of events. All the best books he had read to him as they were published, and he was himself not an unfrequent contributor to periodical literature. He had ever been an elegant writer and an eloquent speaker, and his successful struggle against his calamity was a fine

do odd jobs in his spare time, and clean the vestry's door-plate. If the medical profession respond to this tempting bait, we shall be curious to see what sort of sanitary work will be the outcome of so dignified an appointment. Metropolitan medical officers of health are supposed to be specialists in hygiene, and most of them take high rank in their profession. Does St. Luke's really expect to secure the entire services of a *savant* for £150 a year? The notion is ridiculous, and it says little for the intelligence of those who entertain it. The parson of Goldsmith, who was 'passing rich on forty pounds a year,' was not much worse off in his day and generation than will be the poor modico who, having gone through years of costly training, consents to sell the whole of his opportunities to the Vestry of St. Luke's for little more than the salary of a working bricklayer."

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, March 5th, 1885.

Emmett, Richard, St. George's Hospital.
Inmon, George Arthur Ferdinand, King's College.
Parr, Arthur Charles Edward, King's College.

MEDICAL VACANCIES.

The following vacancies are announced.

- BELMULLET UNION.**—Medical Officer, Knocknallow Dispensary. Salary, £110 per annum and fees. Applications to Mr. O'Donnell, Honorary Secretary, Kilcommon Lodge, Belmullet. Election on March 20th.
- BURTON DISPENSARY.**—Dispenser. Salary, £80 per annum. Applications to Mr. Allen, 69, Branstone Road, Burton-on-Trent.
- CHELSEA HOSPITAL FOR WOMEN.**—Resident Medical Officer. Salary, £60 per annum. Applications by March 31st.
- CHESTER GENERAL INFIRMARY.**—House-Surgeon. Salary, £80 per annum. Applications by March 28th.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST,** Victoria Park, E.—Resident Medical Officer. Salary, £100 per annum. Applications by March 26th.
- COLONIAL HOSPITAL, Fiji.**—Dispenser. Salary, £150 per annum. Applications to Mr. R. Bremridge, 17, Bloomsbury Square, W.C.
- CROOM UNION.**—Medical Officer, Adare Dispensary. Salary, £145 per annum and fees. Applications to Mr. O'Flaherty, Honorary Secretary. Election on March 23rd.
- EAST LONDON HOSPITAL FOR CHILDREN,** Shadwell, E.—Resident Clinical Assistant. Applications by March 19th.
- GENERAL HOSPITAL, Birmingham.**—Resident Medical Officer. Salary, £130 per annum. Applications by March 28th.
- GENERAL INFIRMARY, Hull.**—House-Surgeon. Salary, 100 guineas per annum. Applications to the Chairman of the House-Committee by March 21st.
- HALIFAX INFIRMARY AND DISPENSARY.**—Junior House-Surgeon. Salary, £50 per annum. Applications by March 26th.
- HOSPITAL FOR INFECTIOUS DISEASES, Bootle-cum-Linacre.**—Resident Medical Officer. Salary, £100 per annum. Applications to the Chairman of the Health-Committee, Town Hall, Bootle-cum-Linacre.
- LITTLEMORE PAUPER LUNATIC ASYLUM,** near Oxford.—Resident Assistant Medical Officer. Salary, £100 per annum. Applications by March 15th.
- NATIONAL DENTAL HOSPITAL AND COLLEGE,** 149, Great Portland Street.—Lecturer on Dental Materia Medica. Applications by March 20th.
- NETHERFIELD INSTITUTION FOR INFECTIOUS DISEASES, Liverpool.**—Resident Medical Officer. Salary, £80 per annum. Applications to Robert Calder, 4, Commercial Court, 17, Water Street, Liverpool, by March 19th.
- NEW ROSS UNION.**—Medical Officer. Fethard, No. 1 Dispensary. Salary, £115 per annum and fees. Applications to James Neill, Honorary Secretary, Arthurstown. Election on March 16th.
- PARISHES OF WESTRAY AND PAPA WESTRAY, Orkney.**—Medical Officer, Public Vaccinator, and Officer of Health. Salary, £82 per annum. Applications to J. Scott, Inspector of Poor, Westray by Kirkwaid, by March 25th.
- PARISH OF STRATH, Skye.**—Medical Officer. Salary, £180 per annum. Applications to R. J. Gibson, Inspector of Poor, Broadford, Skye.
- PORTSMOUTH LUNATIC ASYLUM,** Milton, near Portsmouth.—Assistant Medical Officer. Salary, £120 per annum. Applications by March 16th.
- PROVIDENT MEDICAL INSTITUTE.**—Medical Officer. Salary, £150 per annum. Applications to the Secretary, 4, Bath Street, Bath, by March 17th.
- ROYAL ACADEMY OF ARTS.**—Professor of Chemistry. Applications by March 23rd.
- ROYAL ALBERT HOSPITAL, Devonport.**—Assistant House-Surgeon for six months. Applications by March 17th.
- SUSSEX COUNTY HOSPITAL.**—Assistant-Physician and Assistant-Surgeon. Applications by March 25th.
- ST. LUKE'S (MIDDLESEX) VESTRY.**—Medical Officer of Health. Salary, £150 per annum. Applications endorsed "Medical Officer" by March 24th.

- ST. MARK'S HOSPITAL FOR FISTULA,** etc., City Road, E.C.—Honorary Surgeon and Honorary Assistant-Surgeon. Applications by March 19th.
- ST. MARYLEBONE GENERAL DISPENSARY,** 77, Welbeck Street, Cavendish Square.—Honorary Physician. Applications by March 23rd.
- ST. PETER'S HOSPITAL FOR STONE AND URINARY DISEASES,** etc., Henrietta Street, Covent Garden.—House-Surgeon for six months. Honorarium, 25 guineas. Applications by March 21st.
- TIVERTON INFIRMARY, Devon.**—House-Surgeon. Salary, £100 per annum. Applications to the Honorary Secretary, Old Blundells, Tiverton.
- VENTNOR CONSUMPTION HOSPITAL.**—Clinical Assistant. Applications to Dr. Coghill, St. Catherine's House, Ventnor.
- WEST LONDON HOSPITAL,** Hammersmith.—Assistant Surgeon. Applications by March 30th.

MEDICAL APPOINTMENTS.

- CUTHBERT, C. Firmin, M.R.C.S., L.S.A.,** appointed Honorary Assistant-Surgeon to the Children's Hospital, Gloucester.
- LAKE, Wellington, M.R.C.S.Eng.,** appointed Surgeon to the Walthamstow Town Dispensary, *vice* F. A. Best, M.R.C.S.Eng., retired.
- POLLARD, Reginald, M.B.Durh., M.R.C.S.Eng.,** appointed Assistant House-Surgeon to the Western General Dispensary, Marylebone Road, N.W.
- ROSE, James, M.R.C.S., L.R.C.P.Lond.,** appointed Honorary Assistant-Surgeon to the Liverpool Eye and Ear Infirmary, *vice* G. Stone, L.R.C.P. and S., resigned.
- SMITH, Eustace, M.D.,** appointed Consulting Physician to the Merchant Seamen's Orphan Asylum.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d. which should be forwarded in stamps with the announcements.

BIRTH.

- EVANS.**—On February 27th, at Sutton Coldfield, Warwickshire, the wife of Alfred H. Evans, M.R.C.S., of a son.

DEATH.

- EVANS.**—On March 3rd, at Sutton Coldfield, Warwickshire, Helen, the dearly loved wife of Alfred H. Evans, M.R.C.S.

VICTORIA HOSPITAL FOR CHILDREN, CHELSEA.—It has long been considered desirable to alter the situation of the out-patient department, which is now immediately under the wards of the in-patients; but the committee of management have been unable to undertake the task from want of funds. They have now, however, decided to commence the building on the land already the freehold property of the charity, at a cost of £6,550, of which sum £3,000 has been given or promised, and it is earnestly hoped the balance will soon be made up. The ceremony of laying the memorial stone has been undertaken by Her Royal Highness the Princess Louise, and will take place during the month of June. Donations should be sent to the treasurer, Mr. Martin R. Smith, 1, Lombard Street, E.C.; or to the secretary, at the hospital.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

- MONDAY.**—Royal College of Surgeons of England, 4 p.m. Professor William Arthur Brailey: On Some Points in the Anatomy and Physiology of the Eye.—Medical Society of London, 8.30 p.m. Dr. Routh: The Alleged Constitutional Treatment of Diseases of the Uterus and its Appendages. Mr. Walter Pye will show a case of Natural Repair, after Gangrene of the Scrotum.
- TUESDAY.**—Royal College of Physicians of London. Dr. Hermann Weber: Croonian Lecture on the Hygienic and Climatic Treatment of Consumption.—Pathological Society of London, 8.30 p.m. Dr. Dickinson: Violet Pigment-Discharge from the Mouth. Dr. Samuel West: Aneurysm of the Splenic Artery rupturing through the Stomach. Mr. Treves: A Congenital Deformity. Dr. Turner: Superficial Slough in the Stomach (card); Growth of the Kidney invading the Vena Cava (card). Dr. Silcock: Osteitis Deformans. Mr. D'Arcy Power: Synovial Cysts in connection with Joint-Disease. Mr. Battle: Primary Sarcoma of the Penis. Dr. Norman Moore: Cavity in the Lung of an Infant; Renal Disease in an Ox (card). Mr. Stephen Paget: Dislocated Hip. Dr. Percy Kidd: Fatal Hæmoptysis from an Hydatid of the Lung. Dr. Chaffey: Pyo-salpinx in a Child aged 4 (card).
- WEDNESDAY.**—Royal College of Surgeons of England, 4 p.m. Professor William Arthur Brailey: On Some Points in the Anatomy and Physiology of the Eye.
- THURSDAY.**—Royal College of Physicians of London. Sir Andrew Clark, Bart.: Lumleian Lecture on Some Points in the Natural History of Dry Pleurisy.—Harveian Society of London, 8.30 p.m. Mr. W. Adams Frost: The Early Treatment of Concomitant Squint. Mr. F. Treves: Resection of the Intestine.
- FRIDAY.**—Royal College of Surgeons of England, 4 p.m. Professor William Arthur Brailey: On Some Points in the Anatomy and Physiology of the Eye.—Society of Medical Officers of Health, 7.30 p.m. Mr. A. Wynter Blyth: The Action of Disinfectants on Micro-Zooides.

OPERATION DAYS AT THE HOSPITALS.

MONDAY.....	St. Bartholomew's, 1.30 P.M.—Metropolitan Free, 2 P.M.—St. Mark's, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Royal Orthopædic, 2 P.M.—Hospital for Women, 2 P.M.
TUESDAY	St. Bartholomew's, 1.30 P.M.—Guy's, 1.30 P.M.—Westminster 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—West London, 3 P.M.—St. Mark's, 9 A.M.—St. Thomas's (Ophthalmic Department), 4 P.M.—Cancer Hospital, Brompton, 2.30 P.M.
WEDNESDAY ..	St. Bartholomew's, 1.30 P.M.—St. Mary's, 1.30 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern Central, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—St. Peter's, 2 P.M.—National Orthopædic, 10 A.M.—King's College, 3 to 4 P.M.
THURSDAY	St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Charing Cross, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Hospital for Women, 2 P.M.—London, 2 P.M.—North-west London, 2.30 P.M.—Chelsea Hospital for Women, 2 P.M.
FRIDAY	King's College, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.—Royal South London Ophthalmic, 2 P.M.—Guy's, 1.30 P.M.—St. Thomas's (Ophthalmic Department), 2 P.M.—East London Hospital for Children, 2 P.M.
SATURDAY	St. Bartholomew's, 1.30 P.M.—King's College, 1 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—Royal Free, 9 A.M. and 2 P.M.—London, 2 P.M.—Cancer Hospital, Brompton, 2.30 P.M.

HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

CHARING CROSS.—	Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30 Skin, M. Th., ; Dental, M. W. F., 9.30.
GUY'S.—	Medical and Surgical, daily, exc. Tu., 1.30; Obstetric, M. W. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu. F., 12.30; Skin, Tu., 12.30; Dental, Tu. Th. F., 12.
KING'S COLLEGE.—	Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., M. W. F., 12.30; Eye, M. Th., 1; Ophthalmic Department, W., 1; Ear, Th., 2; Skin, Th., 3; Throat, Th. 3; Dental, Tu. F., 10.
LONDON.—	Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p. W. S., 1.30; Eye, W. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9.
MIDDLESEX.—	Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; o.p., W. S., 1.30; Eye, W. S., 8.30; Ear and Throat, Tu., 9; Skin, F., 4; Dental, daily, 9.
ST. BARTHOLOMEW'S.—	Medical and Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, Tu. W. Th. S., 2; Ear, M., 2.30; Skin, F., 1.30; Larynx, W., 11.30; Orthopædic, F., 12.30; Dental, Tu. F., 9.
ST. GEORGE'S.—	Medical and Surgical, M. Tu. F. S., 1; Obstetric, Tu. S., 1; o.p., Th., 2; Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopædic, W., 2; Dental, Tu. S., 9; Th., 1.
ST. MARY'S.—	Medical and Surgical, daily, 1.45; Obstetric, Tu. F., 9.30; o.p., M. Th., 9.30; Eye, Tu. F., 9.30; Ear, W. S., 9.30; Throat, M. Th., 9.30 Skin, Tu. F., 9.30; Electrician, Tu. F., 9.30; Dental, W. S., 9.30.
ST. THOMAS'S.—	Medical and Surgical, daily, except Sat., 2; Obstetric, M. Th., 2; o.p., W., 1.30; Eye, M. Th., 2; o.p., daily, except Sat., 1.30; Ear, M., 12.30 Skin, W., 12.30; Throat, Tu. F., 1.30; Children, S., 12.30; Dental, Tu. F., 10.
UNIVERSITY COLLEGE.—	Medical and Surgical, daily, 1 to 2; Obstetric, M. Tu. Th. F., 1.30; Eye, M. Tu. Th. F., 2; Ear, S., 1.30; Skin, W., 1.45; S., 9.15; Throat, Th., 2.30; Dental, W., 10.30.
WESTMINSTER.—	Medical and Surgical, daily 1.30; Obstetric, Tu. F., 3; Eye, M. Th., 2.30; Ear, Tu. F., 9; Skin, Th., 1; Dental, W. S., 9.15.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS respecting editorial matters should be addressed to the Editor, 161A, Strand, W.C., London; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 161A, Strand, W.C., London.

In order to avoid delay, it is particularly requested that all letters on the editorial business of the JOURNAL be addressed to the Editor at the office of the JOURNAL, and not to his private house.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL, are requested to communicate beforehand with the Manager, 161A, Strand, W.C.

CORRESPONDENTS who wish notice to be taken of their communications, should authenticate them with their names—of course not necessarily for publication. CORRESPONDENTS not answered, are requested to look to the Notices to Correspondents of the following week.

PUBLIC HEALTH DEPARTMENT.—We shall be much obliged to Medical Officers of Health if they will, on forwarding their Annual and other Reports favour us with Duplicate Copies.

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

THE TITLE OF DOCTOR.

SIR,—In the JOURNAL of January 31st, at p. 255, Dr. Balfour, Vice-President of the Royal College of Physicians of Edinburgh, has written to inform the Licentiates of the College that they have no right to the title of Doctor of Medicine. From time immemorial, the Licentiates of the London College had the title of Doctor conceded to them by courtesy, just as the sons of dukes have the title of "Lord." This continued till the College of Edinburgh began to license physicians in general after the Medical Act, 1858. Then the London College made their former Licentiates Members, and made a lower degree of Licentiates, whom they called Surgeons. The Dublin College of Physicians always gave their Licentiates the title of Doctor; and it was understood that the Edinburgh Licentiates had as good a right to the title as those of any of the other Colleges of Physicians, at least as good right as the M.B.'s have to it who put it on their door-plate and cards, and have done so from time immemorial in England, without any objection being made; but, no sooner did the Edinburgh Licentiates begin to use it, than the Universities made a great outcry against them using it. We say, let the M.B.'s give up using the title, then the Licentiates may be urged to give it up, but not till then. As for myself, this does not concern me, as I have the title otherwise.

But there is another thing we have to speak about in the conduct of the Edinburgh College of Physicians—namely, the last list of the College was sent to the Licentiates with the title of Surgeon (printed). Now, the Edinburgh College of Physicians have no legal right to create surgeons, and no right to call their Licentiates surgeons. The proof of this I find in a "Ratification in Parliament of a gift and patent granted by King William and Mary in favour of the Surgeons of Edinburgh," wherein the charter of Charles II to the Edinburgh College of Physicians is mentioned as follows: "Atque similiter quum in memoriam revocamus in literis illis patentibus a Serenissimo Rege Carolo Secundo beatissimæ memoriæ concessis quibus Medici Edinburgenses in Collegium eriguntur Chirurgorum et Chirurgorum-Pharmacopœorum Edinburgensium privilegia sarta et tecta seu integra et indemnâ Chirurgis ibidem reserantur et præstantur atque cautum est et declaratum quod non obstantibus predictis literis patentibus predictos Chirurgos et Chirurgos-Pharmacopœos solos et omnino potestatem Edinburgi habere curandi omnia vulnera genera collisiones ossium fracturas et dislocationes contusiones tumores ulcera et similia et omnia accidentia ab his orta quæ solius Chirurgiæ operationum sunt subjecta at morbi omnes internæ originis medicis solis committendi sunt (exceptis ut supra excipitur). Atque si quæ inter Medicos et Chirurgos-Pharmacopœos lis aut controversia de hisce rebus oriatur, ratum esse et iudicatum volumus predictum Medicorum Collegium nullam habere potestatem erogandi mulcturam in Chirurgos," etc.

Then the King and Queen's grant says: "Et volumus et definimus hos veros rectos et fixos inter utramque artem futuros perpetuo limites. Et ut omnes Judices nostri atque subditi hæc in commodum Chyrurgorum et Chyrurgorum-Pharmacopœorum cum omni favore quantum admitti potest interpretantur. Et denique ut in omni controversiâ inter Medicos et ipsos Chyrurgos Magistratus et Senatus Edinburgensis sint soli et in primâ instantiâ, Judices," etc.

Now, sir, as from these charters it is seen that the Edinburgh College of Physicians has no power to give the right, privileges, nor title of Surgeon, but "omnium privilegiorum quibus permissi ejusdem Collegii fruuntur participes facit," its Permissi or Licentiates, why should it withhold from them the title of Medicus (Physician), by which they are entitled in the charters, and by which they can appeal to the judges to admit them into the privileges of a Physician (Medicus), as stated in the charter, that is, "the cure of all internal diseases," or "from internal origin"—I am, yours, etc., 32, South Tay Street, Dundee.

W. GALLOWAY, L.R.C.P.E.

PREVENTION OF HABITUAL ABORTION.

SIR,—I would suggest to your correspondent "J. G.," whose letter appeared in the JOURNAL of January 10th, page 109, to try the virtues of viburnum prunifolium, or black haw, as a preventive of abortion, providing, as you yourself suggest, there be no "specific cause" as a factor in its production.

For some years, it has been tried on this side of the Atlantic by physicians in good standing with decided success; but I have not observed its use recorded in British journals.

In my own practice, I have many times during these last nine or ten years had every reason to be pleased and satisfied with its results in cases where the uterus had acquired the habit of aborting. In one well marked case, a lady who had seven successive abortions about the third month, with no evident change in her circumstances or condition other than the administration of viburnum, was enabled to carry on gestation to the full period, and delivered of a healthy well developed child. The preparation that I have used chiefly is Parke, Davis, and Co.'s fluid-extract, in doses of 20 minims to half a drachm three times a day; but, if symptoms are threatening, these doses should be given every hour for a day or two. It can, I think, be obtained in London at Burgoyne and Burbridge's, Coleman Street.—Yours, etc., WILLIAM GRAHAM.

Brussels, Canada.

THE MENSTRUAL WAVE.

SIR,—In a short contribution, entitled, "The Menstrual Wave," which appeared in your impression of February 14th, attention is called to the important truth that menstruation is not merely a local, but, in every sense, a constitutional process, and reference in support of this view is made to the comparatively recent investigations of Dr. Reiml, of Frænzensbad, on the temperature during the catamenial and intermenstrual epochs. As the attention of many may be called by the above annotation to the bibliography of the subject, allow me to recall to your notice the work done by Dr. Wiltshire in this direction, part of which has appeared in the pages of this JOURNAL.

I believe no man in this or any other country has shown so profoundly as Dr. Wiltshire, how deeply the whole of the female organism is affected at the time of menstruation, not only in respect of temperature, but also as regards the vascular and other systems. To my knowledge, he has taught and demonstrated these facts for more than ten years at St. Mary's Medical School; and in the Lettsomian lectures given before the Medical Society in January, 1877, he further developed his views. Again, his valuable lectures on the Comparative Physiology of Menstruation, published in your columns in March, 1883, demonstrated how profoundly the systemic phenomena of the rut were also manifested in the lower creatures; while some condensed abstracts of his lectures on the Physiology and Pathology of Menstruation, which appeared in the JOURNAL of February, 1884, show the wide and comprehensive survey he has for many years instituted into the systemic phenomena of reproduction.—I am, etc., MONTAGU HANDFIELD-JONES.

