

## MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL.

### CASE OF CONGENITAL IRIDO-DIALYSIS WITH HETEROCHROMIA.<sup>1</sup>

W. H. H., aged 21, A.B., recently presented himself for treatment for some trivial ailment, when the peculiar condition of his right eye was noticed. The condition was apparently that of irido-dialysis, but the man stated that he was born with it, and not only so, but that his mother, who is dead, had a similar deformity of her right eye, and that she had told him that her grandmother was also similarly affected.

The iris of the right eye is of a rich brown colour, whilst that of the left is a light hazel with a tinge of green. The left eye is perfectly normal. The upper part of the iris of the right eye, for about a fourth of its circumference, is detached from its peripheral margin at its uppermost part, and heaped up above the pupil, its upper border forming a double curve. The shape of the pupil is that of a semicircle, the base uppermost; this becomes more conspicuous after dilatation with homatropine, which however, does not affect the shape of the upper opening.

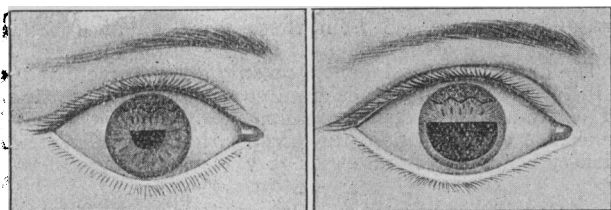


Fig. 1, before, and Fig. 2, after, dilatation of pupil with homatropine.

On illuminating the upper opening with a beam of light it is seen to be completely closed by the black choroid coat and its ciliary processes. Ophthalmoscopic examination shows both retinæ to be normal; a red reflex appears through the choroid in the upper opening when a beam of light is thrown through the pupil. The man's sight is unaffected; in fact, he uses his right eye to sight his rifle.

I can find no mention of irido-dialysis as a congenital deformity in the books at my command. As a rule, I believe, when caused by traumatism, the choroid is ruptured as well as the iris.

Fleet Surgeon VIDAL G. THORPE, R.N.

### THE *SPIROCHAETA PALLIDA* AND ITS VARIATIONS.

IN Professor Maclellan's description of the various phases of *Spirochaeta pallida* in the BRITISH MEDICAL JOURNAL, May 12th, page 1090, there is a remarkable resemblance to some of the phases observed in the life-cycle of *Spirillum obermeieri* as recorded in the JOURNAL of June 16th, page 1400, but in the case of the *S. obermeieri* great assistance is obtained in connecting up the intracorporeal cycle of the spirillum from the clinical symptoms of the patient. Since the spirillum is abundant in the blood during the pyrexia, but disappears completely during apyrexia and reappears in the succeeding relapses of pyrexia, the presumption is that it spends the interval between the relapses in the quiescent stage of sporulation within the body of the haemocyte, and the rise of temperature marks the liberation of the spores into the blood stream. It is at this stage, in my opinion, that infection is conveyed by the agency of the mosquito acting as intermediate host.

Ahmedabad, India.

W. H. Cox, Capt. I.M.S.

### DIONINE IN THE TREATMENT OF IRITIS.

As this drug is now in pretty general use it may be well to call attention to one of its dangers. Recently Dr. Hewkley and I had a case of serous iritis under treatment at the Western Ophthalmic Hospital, and had occasion to instil a couple of drops of 5 per cent. dionine in the right

eye, the pupil of which was fairly but not quite completely dilated by ung. atrop.  $\frac{1}{2}$  per cent., which the patient had been using thrice a day for several weeks. To our surprise it produced practically no chemosis but a very marked contraction of the pupil, so that in the course of about a quarter of an hour it was precisely the same size as the pupil in the unatropinized eye. Thinking there might be something wrong with the solution, I instilled it into several other eyes, but without producing a similar effect. The patient was kept under observation for a couple of hours, and atropine and cocaine instilled alternately, but without any effect.

Dr. Suker mentioned an exactly similar case at a meeting of the Chicago Ophthalmological Society in March of this year. In his case the myosis was extreme. "Two days later an iridectomy was performed, and it was found that in this short time attachment of the posterior surface of the iris to the anterior capsule had taken place." Several other members present had seen myosis after the use of the drug.

Dr. Suker's case and my own illustrate the danger of prescribing the drug for home use without having previously satisfied one's self as to its safety.

London. S.W.

CHARLES WRAY, F.R.C.S.Eng.

P.S.—The patient was seen on July 6th, and the pupil was well dilated, so that the myosis was but temporary.

## REPORTS

ON

### MEDICAL AND SURGICAL PRACTICE IN THE HOSPITALS AND ASYLUMS OF THE BRITISH EMPIRE.

#### SUSSEX COUNTY HOSPITAL, BRIGHTON.

##### A CASE OF PERI-URETHRAL ABSCESS WITH THE FORMATION OF CALCULI.

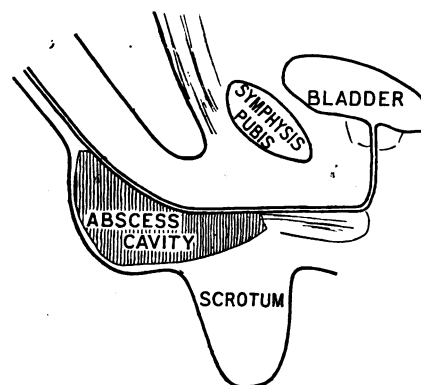
(Reported by GEOFFREY BATE, M.B., B.C.Cantab., Senior  
House-Surgeon.)

THE following case seems worth recording in that the external closure of a urinary fistula led to the deposition of lime salts in such quantity as to produce numerous calculi in a sac in the substance of the penis. The patient, a policeman, presented himself at the Hospital complaining of a painful swelling on the under surface of the penis:

**State on Examination.**—An elongated tumour was found on the under surface of the base of the penis, merging posteriorly into the contour of the scrotum, and reaching in front to within about an inch of the corona glandis. The swelling was about an inch in diameter, inflamed and fluctuant, but under the fluctuation there was felt the definite grating suggestive of a bag of stones.

**History.**—The history of the case was that an abscess had burst just in front of the scrotum sixteen years previously;

following this there had been for some years a urinary fistula which had gradually got smaller, and had been entirely closed for five or six years; the patient had noticed a painless swelling at the base of the penis for about two years, but during the week previous to his admission to hospital the swelling had greatly increased and had become very painful.



**Operation and Result.**—On an incision being made a quantity of very foul pus escaped, and thereafter fourteen faceted stones were removed from a large smooth-walled sac. No communication with the urethra could be found, although it was obvious that one had at some time existed, and a No. 10 catheter was passed without meeting any resistance. The cavity was well scraped out and the wound sewn up, the catheter being tied in, in the hope that healing might take place. For some days the wound remained dry, but later a minute fistula formed, and this still (a year later) persists, the

<sup>1</sup> Communicated by the Director-General, Medical Department, Admiralty.

law the statistical individual derives half his hereditary characteristics from his parents, a quarter from his grandparents, an eighth from his great grandparents, and so on, illustrating that the variations do not occur haphazard, and according to Pearson it is now possible to assign values to the coefficient of hereditary correlation between brothers and between a person and his parents or more remote ancestors. In instances this may appear to work out wrong, and we cannot foretell in what degree any given infant may depart from the statistical mean. If it is said that such conclusions are not applicable to mental characteristics, the reply must be that the data seem to justify the conclusion that approximately the same coefficient fraternal correlation applies to mental characteristics. Statistics which give the results for a large representative numbers of the population afford the only reliable data for scientific generalization. In natural selection there is a progressive elimination from below upwards, and if moral considerations permitted, we could unquestionably improve the human race by applying the methods of the cattle breeder. But something may be done by the pressure of public opinion and by a fuller realization of the principles of heredity to encourage the perpetuation of the best stock and to discourage the marriage of degenerates. We must be on our guard to avoid a fallacious mode of argument when treating with natural selection under social conditions of human life. It is often stated that since natural selection is dependent on the struggle for existence, it follows that natural selection is constantly in progress among mankind. It does not necessarily follow; it only follows that in so far as under this struggle men and women are prevented from marrying and begetting children. Natural selection is still operative in human evolution, as is best seen in the statistics of disease.

In a civilized race in which disease has been prevalent the inhabitants are less susceptible to attacks than those people among whom it has not been prevalent. It may be due to acquired immunity or to the weeding out of susceptible persons. This latter Dr. Reid accepts, though all are as yet not satisfied. The natural conclusion to draw is that the doctor and temperance reformer are in some degree enemies to the cause of progress, for under this theory the more people drink the less susceptible do they become to its effect.

If hereditary possibilities are to a very large extent beyond our control, all the more is the call on us to better the conditions of life as to enable men and women to make the very most of the existing hereditary possibilities. This can be done by legitimate social means. Granting that we can do little to raise the hereditary possibilities, we can do much to improve the conditioning environment.

#### ENTERTAINMENTS.

Of the various social gatherings little need be said except that the visitors much appreciated the kindness of the hosts and the organizers of the excursions.

## MEDICAL NEWS

At the monthly meeting of the Wigan Infirmary held on July 5th Dr. Roocroft was appointed Chairman of the Board of Management.

A QUARTERLY court of the Directors of the Society for Relief of Widows and Orphans of Medical Men was held on Wednesday, July 11th, at 11, Chandos Street, Cavendish Square; Dr. Blandford, President, in the chair. Fourteen members were present. The death of Dr. John Clarke, who was elected a member in 1847, and had been one of the vice-presidents since 1867, was reported. Four new members were elected. The sum of £1,358 10s. was voted for the half-yearly grants to the annuitants of the charity. Five letters had been received from widows of medical men since the last court asking for relief, and this had in each instance to be refused, owing to the fact that their husbands had not been members of the Society. Mr. Edward J. Blackett was re-elected Secretary. The membership of the Society is open to any registered medical man who at the time of his election is in practice within a radius of twenty miles from Charing Cross. Full particulars and application forms may be had from the Secretary at 11, Chandos Street, Cavendish Square, W. The next election is on October 10th, and names of intending candidates must be received on or before September 19th.

AN urgent appeal is being circulated for immediate help to the Factory Girls' Country Holiday Fund, which this year has received 1,000 more applications than usual. The fund sends female factory hands into the country for a week or a fortnight, the girls saving up their money and paying the major part of the expense. In previous years we have pointed to the value of this society; the address of its Honorary Secretary is St. Peter's Rectory, Saffron Hill, London, E.C.

A LARGE and influential Committee has been formed in Wimbledon (with Lord Rathmore as Chairman) to secure subscriptions for the purpose of establishing a permanent memorial to the late Dr. Poole Collins, who died in May last, and whose death was announced in the BRITISH MEDICAL JOURNAL of June 30th. Dr. Collins was one of the best-known medical practitioners of Wimbledon, and took a very keen interest in the Cottage Hospital at Copse Hill. Consequently the suggestion that the memorial should be associated with the Cottage Hospital has been very favourably received by his many friends and admirers, and a ready response has been given to the appeal for funds for so worthy a project.

At the statutory meeting of the Hampstead Garden Suburb Trust, Limited (32 and 34, Theobald's Road, W.C.), held on July 17th, the accounts submitted showed that a sufficient number of shares and debentures have been taken to make the progress of the scheme assured. A large number of applications for allotments have been received, but land still remains for disposal. The mapping out of the estate and the building regulations have been carefully planned, so that each occupant of a house, whether large or small, will be able to enjoy the view of the surrounding country, and the ground rents will be arranged so as to meet all purses.

THE occurrence of an epidemic of diphtheria has given rise to a good deal of excitement in the village of Fleckney in Leicestershire and led to the holding of an open-air meeting. At this much dissatisfaction was expressed at the manner in which the District Council was dealing with the matter, and several alternative proposals were put forward as to what should be done. In the end it was resolved to make an appeal to the County Council direct. The disquiet felt is by no means unjustified, for a large proportion of the houses of what is, after all, but a small village have been attacked. A few years ago the total population had fallen very low, but of late years has risen rapidly, owing to the erection of several hosiery factories. The place now appears to be overcrowded and to lack a proper water supply and efficient sanitary arrangements.

THE thirteenth annual meeting of the Governors of the National Society for the Employment of Epileptics was held on July 16th. The reports submitted and adopted showed that during the year 150 more acres of land have been acquired at the Chalfont Colony, raising its total to 360 acres, and its accommodation to 198 patients. In spite of the rapidity with which the Society has extended its operations, it has been found impossible to keep pace with the applications for admission, the result being that candidates have to wait an undue time for a vacancy. The Council expresses deep regret that this should be the case, because it is above all things desirable that cases should come under treatment in an early stage. The honorary medical staff supports this view, and adds that until opportunities for early treatment have been acquired the curative possibilities of colony life cannot be considered to have been tested.

THE average number of Europeans resident in Ashanti during 1905, according to the recently-issued Colonial Office Report, was 259, of whom 53 were officials, and their general health as compared with that of the white population of the coast towns is described as good. Five deaths occurred, representing a mortality of 19.3 per mille, and 32 persons—10 official and 22 civilian—were invalided. The medical staff consists of 6 medical officers, 2 of whom are stationed at Kumasi. Small-pox threatening the capital, all the troops, together with their wives and children, to the total number of 1,361 persons, were vaccinated, and no cases occurred either in or near the town. At the native hospital nearly 18,000 out-patients were treated and 815 in-patients were admitted. A new native hospital and out-buildings were completed before the end of the year, and a European hospital is now in course of construction. Particular attention is being paid to sanitation; street drains are now cemented and all cess-pools have been done away with. Surprisingly rapid progress is being made in Kumasi, the capital showing greatly increasing importance as a trade centre, so much so that the fact is specially mentioned as "one of the most encouraging features in the political situation in Kumasi."

diately afterwards she said she felt sick, sat down, and expired. The incident had passed as so many of these do and seemed inexplicable, but was vividly recalled by a perusal of Dr. Taylor's article, which set me thinking. Being uncertain what drug I prescribed in the first instance I forthwith consulted my prescription book, and felt grieved to find that I had given tincture of digitalis and citrate of iron and ammonia. Of course, when I discovered the real nature of her disease, for safety I ordered tincture of nux vomica and tincture of opium. It must remain a mystery whether the 80 minims of tincture of digitalis contributed towards the fatal result; but one must admit that it seems a strange coincidence that a patient who was able to work until three days before death should die after such a small quantity of digitalis. There may be other general practitioners who could recite similar experiences and thereby prove, as Dr. Taylor says, "that clinical knowledge and experience constitute the most valuable form of medical observation." Indeed, sir, if every general practitioner were to contribute his experience through your columns, it might do more to settle the vexed question of digitalis in aortic incompetence than laboratory experiments.—I am, etc.,

June 27th.

FIDELITY.

#### PREVENTION OF THE AËRIAL DISSEMINATION OF INFECTIVE MATTER BY DUST.

SIR,—There is a point in the prevention of tuberculosis and other diseases which are spread by the aërial distribution of infective micro-organisms in dust, which is of great practical importance, but does not appear to be adequately dealt with.

I refer to the provision of spittoons in public buildings and thoroughfares wherever the notice "not to spit" is placed. Expectoration of mucus is physiological in this country, and such excretion should be received, as other excretions are, into receptacles, in view of its possible pathological properties. It is insufficient to forbid such an act unless it is accompanied by facilities for such as spittoons for the reception of sputum, and this applies to public thoroughfares, especially if the dangerous custom of "dry sweeping" is still in force. In certain parts of England the latter unwholesome habit still prevails, though it has long been discarded by French sanitary authorities. Such dust is either inhaled or settles on food which is directly exposed for sale, and is thus ingested. In any case, moistening of the dust, or washing it away, followed by brushing, is rational and hygienic, and is recommended by the National Association for the Prevention of Consumption.

The spittoons placed in the gutters of streets might be of simple and inexpensive pattern, but in certain buildings in Paris, as at the Pasteur Institute, there is a model which has advantages. A metal globe is mounted on a pedestal, and the upper hemisphere lifts up; this action automatically flushes with water the lower half for the reception of the sputum.—I am, etc.,

Brighton, July 7th.

F. G. BUSHNELL.

## OBITUARY.

MARK ANTONY MACDONNELL, M.D., M.Ch., EX-M.P. We regret to announce the death of Dr. Mark Antony MacDonnell at the comparatively early age of 54, after a lingering illness of two years' duration, which he bore with the most cheerful resignation and fortitude.

In the late Seventies Dr. MacDonnell possessed a lucrative practice in Liverpool, where he held several valuable and responsible appointments. For several years he was Visiting Surgeon to the Toxteth Infirmary, and Surgeon to the Cancer Hospital, and only resigned those appointments on his removal to London, where he soon gravitated to Harley Street, and there lived for several years. His professional career was cut short on his entering the House of Commons as Member for one of the divisions of Queen's County in 1892, when he joined the Irish Party, to whose fortunes he remained true almost to the end; for he only ceased to represent his division at the late General Election.

It is no empty flattery to say that Dr. MacDonnell was a general favourite on all sides of the House of Commons. For many sessions he was invariably elected

on the Kitchen Committee, and his shrewd common sense and professional knowledge of dietetics will be much missed in that body; there were no more frequent inquirers at his Wimbledon residence during his trying illness than his fellow members on that Committee.

Amid all the divisions and ruptures in the Irish Party, during the Parnell split and on subsequent occasions, it is the simple truth that Dr. MacDonnell never made an enemy, either in the House or elsewhere. He held strong views as an Irish Nationalist, but he expressed them in a way that left no sore behind. His hospitality, both at Harley Street and at Wimbledon, was, to say the least of it, not discreditable to his race, and the writer, who has known him and his family from his youth, has never seen him happier than when entertaining a large party of his political associates. He will be a distinct loss to his profession, as he kept a most efficient watch over its interests in the House of Commons, and owing to his widespread popularity he was always able to obtain supporters from all parties in divisions on medical questions.

He was younger brother of the Right Hon. Sir Antony MacDonnell, K.C.S.I., etc., Under-Secretary for Ireland, and he has two other brothers in the medical profession. All the four were alumni of Queen's College, Galway.

His remains were removed from his Wimbledon residence on June 13th for interment in Liverpool. His wife, an American lady, survives him, and he leaves four sons, the eldest of whom is a law student in London; two of the younger are at Stonyhurst College in Lancashire.

J. J. G.

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF LONDON.

#### ST. BARTHOLOMEW'S HOSPITAL AND COLLEGE.

*Scholarships.*—The following scholarships, medals, and prizes have been awarded at St. Bartholomew's Medical School: Lawrence Scholarship and Gold Medal—value £45 in Medicine, Surgery and Midwifery—to G. C. E. Simpson. Brackenbury Scholarship—value £39 in Medicine—to P. L. Giuseppe and J. K. Willis (equal). Brackenbury Scholarship—value £39 in Surgery—to R. H. Bott. Matthews Duncan Prize in Midwifery to D. W. Hume. Burrows Prize in Pathology to P. L. Giuseppe. Skynner Prize in Morbid Anatomy in reference to Scarlet and Rheumatic Fevers—to A. E. Cockayne. Willett Medal for Operative Surgery, to J. C. Mead. Wix Prize for an Essay on the Life and Works of Sir William Savory, to K. Macfarlane Walker. Shuter Scholarship in Anatomy and Physiology—value £50—to H. T. H. Butt, of Christ's College, Cambridge.

### THE LONDON HOSPITAL.

#### *Distribution of Prizes.*

THE Secretary of State for War, Mr. Haldane, distributed the prizes to the successful students and nursing probationers at the London Hospital on July 13th in the library of the Medical College. Mr. Haldane delivered an address on medical science, in which he observed that in both medicine and surgery it was now necessary to recognize that the work of the nurse was as important as the work of the physician and surgeon. In the art of surgery and the science of medicine much had been learnt in recent years, and, as in other great advances, progress had been due to the realization of fresh conceptions. Two remarkable addresses within the last few months had been delivered by Sir Frederick Treves dealing with the great thought that a living organism—the human body, for instance—was no mere mechanism in which the parts could be treated separately. It was now recognized that the parts of the organism were more like the citizens of a State than like the pieces of a machine. At the present time they knew that things which were once taken to be mere evils in themselves were really beneficent manifestations of the power of the living organism to throw off the poison affecting it. The new conception of medicine and surgery was to let Nature alone as far as possible and assist in her work by every means. The science of medicine at the present day had many branches, and the questions to be solved were now being studied in a way to which our forefathers were strangers. Science influenced and affected profoundly the teaching of the surgeon, the physician, and the nurse, and that was why the standards of a generation ago were useless at the present time. Those who were responsible for dealing with the organization of society ought to recognize that without economic science and legislative science and science of different kinds it was impossible to have clear principles and plain ends in a definite fashion before the mind. In that respect he thought the science of medicine afforded a lesson by teaching that the healing of the body was dependent on the understanding of the principles upon which life was governed. Science was now recognized as the guiding star of work, and afforded

a sure promise that the story of our race would be one of progress.

A cordial vote of thanks to Mr. Haldane was proposed by Lord Stanley, seconded by Mr. Hurry Fenwick (Chairman of the London Hospital Medical Council), and carried with acclamation.

Mr. Haldane, in responding, said that his presence there was not quite disinterested, for when he looked at the nurses present the word "mobilization" came to his lips, and the London Hospital seemed likely to be a tower of strength to the army if a moment of national emergency arose.

#### ST. MARY'S HOSPITAL MEDICAL SCHOOL.

##### *Distribution of Prizes.*

Surgeon-General Sir Alfred Keogh, Director-General of the Army Medical Service, presented the prizes to the successful students of St. Mary's Hospital Medical School on July 16th in the Library of that institution. In the course of his address to the students, after giving away the prizes, Sir Alfred Keogh said that St. Mary's Hospital Medical School was well represented in the public services, especially in the army. If he were asked to choose a medical career for a student, he would be inclined to say, Join the Royal Army Medical Corps, and follow the drum and the colours; leave behind all chance of a lucrative practice, and join the army, where there is less money to be made than in civil life, but perhaps more glory and honour. The path of those entering the medical profession was undoubtedly thorny, but he was happy to think there were fewer men going in for the medical profession at the present time than when he qualified. The improvement in the outlook for medical men was due, he considered, to the action taken by the General Medical Council.

##### *Unveiling of a Memorial Bronze.*

Sir Alfred Keogh afterwards unveiled the memorial bronze erected in the entrance hall of the Clarence Wing to the memory of members of the Hospital and Medical School who lost their lives during the South African war. The memorial is the work of the artist Mr. Tweed, and the inscription on it runs as follows: "To the memory of the members of St. Mary's Hospital who lost their lives while serving in South Africa. Arthur Baird Douglas, Lieutenant-Colonel 3rd Battalion Sherwood Foresters (Derbyshire Regiment); Robert H. E. G. Holt, Captain R.A.M.C.; George William Guy Jones, Lieutenant R.A.M.C.; George Umacke Jameson, Second Lieutenant 1st Battalion The Border Regiment; Cecil Courtenay Parsons, Civil Surgeon; Reginald Percy Fort, Civil Surgeon; Edith Manley Gardener, Sister Army Nursing Service."

#### UNIVERSITY OF EDINBURGH.

##### *Lecture in Psychology.*

The Edinburgh University Court at its meeting on July 16th appointed Dr. W. G. Smith to the recently-instituted George Combe Lectureship in General and Experimental Psychology. Dr. Smith has already occupied similar lectureships in Smith College, Massachusetts; in King's College, London; and at Liverpool University.

#### UNIVERSITY OF GLASGOW.

##### *Graduation Day.*

The graduation address on July 17th was delivered in the Bute Hall by Professor J. G. McKendrick, who said that he had probably been selected for the duty in order to afford him one more opportunity of addressing the University before quitting the position he had held for thirty years. It was forty-two years since he had graduated, and during that time he had seen an astonishing development in connexion with universities, and more especially in connexion with the University of Glasgow, the methods and means of teaching had been vastly improved, much more was done in the way of demonstrations, and greater facilities were afforded to students for doing work for themselves. Subsidiary branches of science were cultivated by the establishment of lectureships; thus at the present time there were five lectureships in the chemical department—chemistry, organic chemistry, metallurgical chemistry, physical chemistry and physiological chemistry. "Had it fallen to me," Professor McKendrick continued, "to develop the physiological department in the new laboratories, it was my intention to subdivide the subject, so that we would have had at least five teachers, namely, physiology, experimental physiology, more especially in connexion with nerve and muscle, histology, physiological chemistry, and experimental psychology. I have no doubt my successor will work on similar lines. We have also lectureships on practical anatomy and embryology, and probably others that have not come under my observation. I cannot help alluding to the new laboratories for medical jurisprudence and public health, for materia medica and pharmacology, and for physiology. To indicate what is being done, I will only again mention the circumstance, alluded to in my valedictory address to the summer class, that for thirty years I have worked in five rooms, but my successor will have the command of twenty-five rooms, for various purposes. No doubt all this development will cost money, and I do not wonder that those who take charge of the finances of the University are fearful as to the future. But let them take courage. Expenses will be heavier, but the University and the country at large

will get full value for all the expenditure in increased efficiency, in the progress of science, and, consequently, in the welfare of the public. I have myself no fears. Convince the public that the advancement of the University—or rather I would say of all universities—is of the utmost importance to our national well-being, and money will be forthcoming." So much progress had been made in medicine and surgery and gynaecology that some of those he was addressing might possibly feel discouraged and think that little was left for them to do, but that would be a great mistake, for marvellous as had been the progress of the last thirty or forty years, he believed that science was on the road to great discoveries, which might as regards some details of practice, revolutionize the medical art. "Ideas," he said, "precede discoveries in the onward march of science. The secrets of Nature are not revealed at haphazard. Sometimes one with merely an inquisitive mind discovers a new phenomenon, apparently almost by chance; but the best work is done by the thinker, who meditates over phenomena with which he is familiar, and who invents a working hypothesis to explain the facts. Then he appeals to observation and experiment. The observations and experiments are then not at haphazard. The investigator knows what to look for, and he knows the kind of experiment that must be tried. Thus great general principles are established. It seems to me that we have in our day striking examples of this process of human thought. New ideas are everywhere in the air." Practical medicine was no doubt an art, not a science; it was based on knowledge derived from physiology, pathology and pharmacology, branches of knowledge which were becoming more and more closely connected. There were gradations both in health and disease, ups and downs, different planes of health as it were; it was becoming more and more clear that each organ might have more than one function, and that if one organ was the seat of disease, other organs might, within limits, act vicariously for it. Morbid changes had a beginning, and if only they could be detected at this stage, it might be possible to employ therapeutic methods which would avert the morbid changes, or at least modify their progress. "We also see," he said, "that the body has numerous protective arrangements for defending itself against enemies, such as micro-organisms or poisonous substances generated even by itself. This is an idea only dimly perceived by our forefathers. The acidity of the gastric juice, the portal circulation, the abundance of adenoid tissue crowded with leucocytes in some of the so-called blood glands and in the alimentary tract, the influence of internal secretions—are all examples of what we may term a protective mechanism. The old physicians wrote much about a *vis medicatrix Naturae*. They had a glimmering of the truth. There is no *vis*—there is no principle that thus acts; but there is a tendency on the part of every tissue to resist attack, and, if altered in a morbid direction, to revert to the condition that is normal. In your future work you will recognize these ideas, and they will help you in your practice." After referring to toxins and antitoxins, opsonins, and to the theories of Ehrlich, he said: "Another idea that is taking possession of the medical mind is that by therapeutic measures, while we cannot cure the disease, we can help the body to carry on its functions, not, certainly, on the high level of perfect health, but on a lower level of comparative comfort and efficiency. Physicians do not invariably attempt to treat actively a new set of symptoms that may make their appearance in a chronic case. They are afraid to do harm when they cannot see clearly that they can do good. This is well brought out in a remarkable book I have recently been reading, *Principia Therapeutica*, by Dr. Harrington Sainsbury, and which I would strongly advise you all to peruse. He tells us of a case under the care of Sir William Jenner which illustrates the point: The patient had been long under his guidance for chronic renal disease, when, in the course of a journey abroad, active symptoms developed, were at once taken in hand, and as actively treated; within a short time the patient succumbed. A lady recounted the case to Sir William, spoke her regret that he had not been present, for then, as she expressed it, her friend would not have died. The answer came that this was unreasonable, seeing that the patient had an incurable disorder. 'Ah, yes, doctor,' she replied, 'but then you would not have attempted to cure it.' Drugs could not work miracles, they could not materially alter the condition of a diseased heart or of degenerated kidneys, but he added 'if we recognize the idea that the body as a whole has wonderful compensatory arrangements and adjustments, by which life may be beneficently prolonged, we can do much by therapeutic means to assist Nature. I frankly confess that as I have become older the crude scepticism of early years as to therapeutic measures has given place to a recognition of how much may be done to help by the judicious use of our materia medica.'

#### UNIVERSITY OF LEEDS.

A CONGREGATION was held in the Library of the Medical School on July 13th.

Before conferring degrees the Pro-Vice-Chancellor, who presided, took occasion to refer to the recent resignation by Professor de Burgh Birch of the office of Dean, and to welcome his successor, Professor Grünbaum, to the position.

The degrees of Bachelor of Medicine and Bachelor of

Surgery were conferred on Messrs. F. G. Dobson, E. R. Flint, S. R. Gloyne, J. J. Hummel, and F. E. Kendall.

The thesis of Mr. W. J. W. Anderson on Urinary Calculi for the degree of M.D. was approved.

Candidates have been approved at the examinations indicated:

SECOND M.B. AND CH.B. EXAMINATION.—*Part I*: W. H. Butler and J. B. T. Keswick. *Part II*: C. S. Brown, J. P. Musson, A. Riley, C. G. K. Sharpe, W. Shaw, R. E. Smith, J. N. L. Thoseby.

FINAL M.B., CH.B.—*Part I*: W. L. Dibb.

#### UNIVERSITY OF BIRMINGHAM.

THE following candidates have been approved at the examinations indicated:

M.D.—T. W. Fowler, R. B. D. Hird, A. E. R. Weaver.

M.CH.—*Official*: F. Marsh. *Under Ordinary Regulations, Class I*: A. W. Nuthall.

M.B., CH.B.—*Past Students of Birmingham Medical School, Class II*: F. N. Deakin, Ch. Maskew. *Under Ordinary Regulations, Class II*:

\*R. H. Astbury, J. S. Austin, A. C. Hincks, C. Johnson, H. B. Jones, \*W. R. S. Roberts.

FOURTH M.B., CH.B.—*Class I*: \*J. Fenton, \*A. A. Sanders, F. B. Young. *Class II*: E. J. Boome, H. N. Crowe, E. T. Gaunt, J. K. Gaunt, P. J. Mason, N. C. Penrose, A. J. Smith, R. W. Thompson, N. V. Williams.

THIRD M.B., CH.B.—*Pathology and Bacteriology, Class II*: J. Adams, Charlotte Bailey, tJ. Dale, G. H. C. Mold, D. P. Smith, E. V. Whitby. *Materia Medica and Pharmacy, Class I*: J. Adams, tJ. Dale, H. A. Evans, E. V. Whitby. *Class II*: Charlotte Bailey.

SECOND M.B., CH.B.—*Class II*: W. C. Blackham, N. A. Boswell, H. G. Browning, \*H. F. Humphreys, Violet M. McCready, C. Walker, K. D. Wilkinson. *Passed Part of the Examination*: J. H. Bampton, J. S. Edwards, C. E. Molino, Ethel A. Waldron, H. A. Whitcombe, H. Wilks.

FIRST M.B., CH.B.—*Class II*: E. W. Assinder, O. M. Holden, Elizabeth S. Impey, L. G. Jordau, R. D. Nelson, H. Richmond.

\* Bracketed for a Queen's Scholarship.

† Queen's Scholarship.

#### ROYAL COLLEGE OF SURGEONS OF ENGLAND.

A QUARTERLY council was held on July 12th, Mr. John Tweedy, President, in the chair.

##### Harvard University.

A letter dated June 12th was read from the Secretary to the Faculty of Medicine of Harvard University reporting the adoption of the following resolution, namely:

"That the Faculty of Medicine of Harvard University gratefully accepts the valuable collection of prints and engravings of physicians given to them by the President and Council of the Royal College of Surgeons, England, through Victor G. Plarr, M.A., Librarian, and Walter G. Chase, A.B., M.D."

##### The Midwives Act.

The following resolution, moved by Mr. Ward Cousins, and seconded by Mr. R. J. Godlee, was carried:

That in the opinion of the Council it is essential for the efficient working of the Midwives Act that adequate provision be made to secure just remuneration for professional services rendered by medical men when called into attendance by midwives practising under the Act.

##### Lecturers for the Ensuing Year.

The following appointments were made:

*Hunterian Professors*.—William Sampson Handley (two lectures); John William Thomson Walker (two lectures); John Howell Evans (two lectures); William Wright (three lectures); Cecil Fowler Beadles (three lectures).

*Arris and Gale Lecturers*.—John Faulkner Dobson (two lectures); Bertram Louis Abrahams (one lecture).

*Erasmus Wilson Lecturers*.—Wilmot Henderson Evans, Reginald Cheyne Elmslie, Kenneth Weldon Goadby (one lecture each).

##### Election of President and Vice-Presidents.

Mr. Henry Morris was elected President. Mr. Edmund Owen and Mr. R. J. Godlee were elected Vice-Presidents.

##### Next Meeting.

The next meeting of the Council was fixed for Thursday, July 26th.

#### SCHOOL OF MEDICINE OF THE ROYAL COLLEGES, EDINBURGH.

At a meeting of the Governing Board of the School of Medicine of the Royal Colleges, Edinburgh, the Secretary and Registrar, Mr. R. N. Ramsay, reported that the number of students attending the school during the winter session 1905-6 was 1,284, and during the summer session 1906 the number was 996.

#### EDINBURGH DENTAL HOSPITAL AND SCHOOL.

THE Directors of this school entertained the students and friends of the institution at an "at home" on the evening of July 12th, when the medals and prizes were presented by Dr. John Smith, LL.D., F.R.C.S.E.

The Dean submitted his report, in which he mentioned that there were 49 students on the roll and 16 pupils in the work-room; 40 students had taken the L.D.S. Diploma during the previous twelve months. Observing that most of the students

had attended the classes and courses for the First Professional Examination before beginning dental hospital practice, he went on to say: "This means that their powers of observation, their general intelligence, and their memories are so far trained and cultivated before they reach us. They are, as a consequence, more receptive and more retentive than they would be without this valuable educational experience. They are easier to teach and more likely to do their teachers credit. Students, in short, who have been well grounded in chemistry and physics, anatomy and physiology, are alone capable of completely understanding, appreciating, and assimilating instruction in dentistry, or, indeed, in any other branch of medicine or surgery."

Dr. John Smith congratulated the prize-winners, and pointed out to the unsuccessful competitors that profit lay not alone in the winning of a prize, but also in the effort to deserve it. He trusted that those who had now finished their course at the hospital, and were about to qualify, would always try to do credit to their old school and the training they had received there, a training which he thought was equalled by few similar institutions, and surpassed by none.

Rev. D. Glasse moved a vote of thanks to Dr. Smith, alluding in feeling terms to the reverence and esteem in which he was held by his professional brethren and the citizens generally.

The proceedings, which were much enjoyed, were enlivened by a programme of vocal and instrumental music arranged by Mr. Douglas Logan, L.D.S., and Mr. W. J. Cave.

## MEDICO-LEGAL AND MEDICO-ETHICAL.

### A LIBEL ON THE PROFESSION.

A YEAR ago, under the heading "A Libel on Hospitals," we drew attention to an article in the *Grand Magazine*, written anonymously but purporting to be by a medical practitioner, which gave a wholly misleading and inaccurate account of hospital work. We regret to see that the same magazine has recently published, under the title "Fads of the Faculty," a libel nearly as bad upon the medical profession, to which a medical practitioner has not scrupled to affix his name. The article gives, but in an ironical and depreciatory manner, some partial account of the modern history of medicine and surgery, dwelling more upon failures than on successes, where, unable to deny that progress has been made, the author is careful to point out any false steps made by those who were painfully groping towards these new discoveries, and magnifies in a way that is neither generous nor fair any unlucky incidents which may have been connected with the earlier stages of these advances. For example, the article relates that ether was discovered by a Boston dentist, introduced into England and there "used for about a year, successfully fulfilling its purpose," but was superseded by chloroform, because its introducer was a "fashionable physician and a professor at an important medical school"; the mortality from chloroform and ether is contrasted, and it is implied that a large number of innocent persons were sacrificed to the fad of the fashionable physician. But not content with this, the writer says that under the use of ethylene dichloride and isobutyl chloride, "people died like sheep, and those who did not had a very narrow escape," sacrificed again to a professional "fad" for novelty. The episode of Koch's tuberculin is described as a time when "every man, woman and child consumptive or suspected of being so, or even conscious of having a great-grandmother so affected, received dose after dose with the hypodermic syringe"; the result being that "if you became very very ill you were assuredly consumptive; if you got off with a mild febrile attack you weren't, or perhaps the complaint was latent." Such language cannot be taken seriously, it is too childishly inaccurate, yet the author has the assurance to add that "the most trivial exercise of prudence at the outset would have obviated all the fuss and subsequent disappointment." Antitoxin in diphtheria is a "fad" because "any ordinary case of diphtheria has always yielded immediately to sufficiently full and sufficiently frequent doses of sulphurous acid." It is hardly credible that a medical practitioner could make such a statement, but in the next paragraph he attributes any increase in body weight which may result from the use of cod-liver oil to the production of "an enormous fatty liver" . . . "that is how it does it"! The explanation of the cod-liver oil "fad" is that "Hughes Bennett" was a Scotsman—a statement which may be taken as typical of the writer's accuracy; yet he dares to tell the public that there is nobody in our medical schools to "teach such unimportant and unscientific matters as how to treat people with ordinary everyday complaints," and adds "What would be thought of an engineer who had always gone about in kid gloves, had learnt his trade mainly from books, and had never oiled a wheel or stoked a fire?" Whatever may be the shortcomings of English medical education every one knows that it is and always has been practical, and such language would be only foolish if it were not capable of doing much mischief when printed in a popular magazine. The search for parasites in malignant growths is spoken of as if it were a wilful waste of time, "the causes being well known to lie in quite other directions"; recent suggestions for the treatment of cancer are not only unsuccessful but unnecessary, although "much