

lished a report on the health of Dublin for the four weeks ending the 8th of September, by which it appears that the death-rate has been rather high as compared with the corresponding period of last year. The report gives valuable information concerning the present outbreak of cholera, calculated not only to allay panic, but pointing out the best means for avoiding the disease. It states that "nothing has occurred to show that cholera is not the most preventable of diseases, no person having perished who was living under healthful conditions." It has been stated that not one-half of the cases reported as cholera can be assigned to the plague. They are chiefly diarrhoeic, or choleraic cases, of more or less intensity, such as every year occur at this season.

In Dublin of the 181 deaths last week 55 resulted from cholera; and in Vienna during the week ending 8th instant the fatal cases of this disease had increased from 64 in the previous week to 107.

Dr. Mapother, of Dublin, obtained from the police magistrate an order for the immediate interment of a man who died in hospital of a contagious disease, and whom his friends wished to "wake,"—the first application of the kind under the recent Act.

The Committee of the Donnybrook Dispensary District sat to investigate a charge of neglect of duty brought against Dr. Murdoch, one of the medical officers, by a man named Aspill, whose wife died of cholera a few days ago. After a lengthened investigation the Committee separated with the understanding that there must be a Poor-Law inquiry on the subject.

The *Maidstone Journal* states that at Yalding, a large village in which there is a considerable acreage of hops, there has been a serious outbreak of cholera. The cases as yet are all imported ones, and the disease appears to be of a very virulent type, the persons attacked dying in the course of a very few hours. Hospital tents have been erected, and a temporary hospital hut has been built. The immigration of hop-pickers from London has been the means of introducing cholera to a considerable extent.

**A CORONER'S ARITHMETIC.** Dr. Lankester is an energetic and valuable public officer, but he can hardly be congratulated on his management of figures. He held eighty inquests on children found dead in one year, and he then assumes that there are no doubt eighty more murdered and never found. This is, however, pure hypothesis; and Dr. Lankester might as reasonably assume that there are two or three times as many, or half as many again, for one guess is as good as another. Then he assumes that there are just as many child murders in the other two coroners' districts in London; which is a guess also. Then, again, he says that the average age of child murderers is 20. Still more extraordinary is his assumption that women who kill one child kill only one. Of the eighty slaughtered infants who came before his notice how many does Dr. Lankester suppose to be the only one of a family of brothers and sisters not doomed to die? And how is the average age of the mothers ascertained, when, in a large number of instances, the mother is not known? Doubtless, too, it is the youngest mothers who are chiefly found out, the older being more skilful in the concealment of crime. On the whole, the calculation breaks down at every step, and whatever be the real frequency of the crime it never can be ascertained by these haphazard guesses, which serve only a sensational end, and terrify people into imagining that the evil is too gigantic to be arrested. (*Pall Mall Gazette.*)

## Association Intelligence.

### COMMITTEE OF COUNCIL: NOTICE OF MEETING.

The Committee of Council will meet at the Queen's Hotel, Birmingham, on **THURSDAY**, the 4th day of October, 1866, at 3 o'clock p.m. precisely.

To receive the resignation of the Editor of the **JOURNAL**, and to devise what steps shall be taken relative thereto; and other very important business.

T. WATKIN WILLIAMS, *General Secretary.*

13, Newhall Street, Birmingham, September 6th, 1866.

### WEST SOMERSET BRANCH: ORDINARY MEETING.

An ordinary meeting of the above Branch will be held at Clarke's Castle Hotel, Taunton, on Wednesday, September 26th. Dinner at 5 o'clock; after which, papers or cases will be communicated.

Gentlemen intending to be present at the dinner, or to read papers after, are requested to give notice to the Honorary Secretary.

W. M. KELLY, M.D., *Hon. Secretary.*

Taunton, September 4th, 1866.

### SOUTH-EASTERN BRANCH: EAST KENT DISTRICT MEDICAL MEETINGS.

The next meeting of this Branch will be held at the Pavilion Hotel, Folkestone, on Thursday, September 27th, at 3 p.m.

Members desiring to bring forward papers, should communicate with the Honorary Secretary without delay.

R. L. BOWLES, L.R.C.P., *Honorary Secretary.*

Folkestone, September 4th, 1866.

### SOUTH EASTERN BRANCH: WEST KENT DISTRICT MEETINGS.

The next meeting is appointed to be held at St. Bartholomew's Hospital, Rochester, on Friday, Sept. 28th, at 3.30 p.m. Dr. Burns will take the chair.

Dinner will be provided at the Bull Hotel, Rochester, at 5.30 p.m.

Papers promised (if there be time for the reading): On the acquired Blood-relationship of the Wife to her Husband.—Chorea: fatal, with Heart and Brain Complications. By Dr. S. Monckton.

FREDERICK J. BROWN, M.D., *Hon. Sec.*

Rochester, September 10th, 1866.

### SHROPSHIRE ETHICAL BRANCH.

The next annual meeting of the above Branch will be held at the Raven Hotel, Shrewsbury, on Monday, October 1st, at 1 p.m.

Dinner at 3.30 p.m. Dr. W. Slyman, of Newtown, in the chair.

Members intending to read papers, or to be present at the dinner, are requested to communicate with the Honorary Secretaries without delay.

JUKES STYRUP, L.K.Q.C.P. } *Hon.*  
EDWYN ANDREW, M.D. } *Secs.*

Shrewsbury, September 11th, 1866.

of the usual size of the various knives used in the subcutaneous operations in joints, but when opened, and the foreign body in it, it would certainly make the skin-puncture very large; but I also pertinently insisted in the paper that, once arrived near the skin-puncture, certain rules must be observed to avoid Mr. Heath's objection.

I am, etc.,

HENRY DICK.

London, August 28th, 1866.

## THE TREATMENT OF RHEUMATIC FEVER.

LETTER FROM THOMAS LANGSTON, Esq.

SIR.—After what we have read and heard about the natural course of disease, the uselessness of all medication, and the practice of some of our leading physicians, it is really quite a pleasure to hear from an associate the good news that something medical may be done, and that with advantage to the sufferer, in rheumatic fever.

No member of the profession has done more than Dr. Birkbeck Nevins to investigate and prove the relative value of the many drugs we possess. But somehow it seems fashionable to discard them in the treatment of disease, and that partly because many cannot see how they act. Is it not a fact beyond dispute, that the pathology of disease has been studied to the neglect of the treatment? Granted that no treatment can be conducted satisfactorily without an accurate pathology, it is still a fault to separate these studies, and one which can only result in the disgust of the patient and disappointment to ourselves.

I am convinced that we have around us remedies for the cure of many, if not of all, the diseases incident to humanity; but how to select and apply them seems a subject very much overlooked by our men of science in the profession.

I am ready to admit that the subject is a difficult one, and shrouded in obscurity; yet that is no reason why we should abandon it, but rather should be an incentive to us to work on and on, even though victory be distant. I have often thought how much might be done by a Therapeutical Society. Through it the profession might gain a vast amount of information on the subject. It is of little satisfaction to a patient suffering with acute rheumatism, to tell him that Nature will effect a cure in five weeks, and therefore he must bear the pain: our duty, as practitioners of the healing art, is to find out what will do good—what is the best remedy to shorten the duration of the disease.

I have used repeatedly iodide of potassium and quinine in acute rheumatism, with great advantage, and quite endorse Dr. Nevins's statements. I find cardiac complications rare with this treatment, and recovery more speedy than by any other plan. I have not tried the do-nothing treatment—a course of practice as bad as that of our forefathers, who dosed and bled and starved their patients. I have no doubt that the hypodermic method, originated by Mr. C. Hunter, would be found useful, and perhaps the best eventually.

I am, etc.,

THOMAS LANGSTON, L.R.C.P.Edin.

Broadway, Westminster, September 12th, 1866.

DR. RICORD, Member of the Academy of Medicine, etc., has been nominated Officer of Public Instruction.

PROFESSOR MATTEUCCI. The Academy of the Ten, a scientific society existing in Italy since the last century, has unanimously elected Professor Matteucci to be its president.

## Medical News.

### APPOINTMENTS.

#### INDIAN ARMY.

ADEY, Assistant-Surgeon A. W. G., to be Surgeon Bombay Army.  
BAILIE, Surgeon G., M.D., to be Surgeon-Major Madras Army.  
BAILIE, Surgeon H., M.D., to be Surgeon-Major Bengal Army.  
BRUCE, Assistant-Surgeon L. S., to be Surgeon Bombay Army.  
FLEMING, Surgeon J. B., M.D., to be Surgeon-Major Madras Army.  
M'DONALD, Surgeon D., M.D., to be Surgeon-Major Bengal Army.  
MACKENZIE, Surgeon D., to be Surgeon-Major Madras Army.  
SHAW, Assistant-Surgeon H. T., to be Surgeon Madras Army.  
SYLVESTER, Surgeon C. J., to be Surgeon-Major Bombay Army.

#### ROYAL NAVY.

BEAMISH, Richard, Esq., Acting Assistant-Surgeon (additional), to the *Victory*.  
CROWDY, Alfred S., Esq., Acting Assistant-Surgeon, to the *Royal Adelaide*.  
WILSON, Thomas G., Esq., Surgeon, to the *Basilisk*.

VOLUNTEERS, (A.V.=Artillery Volunteers; R.V.=Rifle Volunteers):—

TAYLOR, F. A., Esq., to be Honorary Assistant-Surgeon 11th Hants R.V.

### BIRTHS.

LATHAM. On September 14th, at Cambridge, the wife of \*P. W. Latham, M.D., of a daughter.

### MARRIAGE.

BAKER, Major Robert John, Madras Staff Corps, to Louisa Edith, second daughter of W. Harcourt Ranking, M.D., late of Norwich, at Ootacamund, India, on July 14.

### DEATHS.

GILLARD. On September 6th, at Hovingham, near York, aged 40, Sarah, the wife of \*Richard Gillard, Esq.

NIVEN. On September 12th, at Monkstown, County Dublin, Isabella, wife of William Niven, M.D., H.M.'s Indian Medical Service, Bombay.

\*NIXON, Daniel, Esq., at Stony Stratford, aged 64, on August 10.

CHOLEEA AT WIGAN. A sudden outburst of the prevailing epidemic has taken place at Wigan.

INSPECTOR-GENERAL JOSEPH SKEY, M.D., on the half-pay list, and late physician to the forces, died at Baker Street, Portman Square, on the 18th inst., in his 94th year. His commissions bore date as assistant-inspector or physician, July 18th, 1805; brevet deputy inspector, December 11th, 1823; deputy-inspector-general, October 26th, 1826; and inspector-general, February 15th, 1839. He was for many years stationed at Quebec.

MURDER OF A PHYSICIAN BY A LUNATIC. Dr. Greenup, formerly of Salisbury, for the last fourteen years superintendent of the Parramatta (New South Wales) Lunatic Asylum, holding also the offices of medical adviser to the government and examiner of Sydney University, has been stabbed by one of the patients in the asylum, and died in two days after much suffering. His last words were "No one is to blame for it." He fell a victim to his humane disposition, which led him to be too trustful even of men confined in the criminal division of the asylum. (*Sydney Morning Herald*.)

THE POISONOUS WATERS OF THE EAST END. An inquest has been held at Poplar on the body of John Davies. He drank some water from a pump, notwithstanding a man told him the water would poison him. Shortly afterwards he was seized with violent cramps, and on the next day he died from cholera. Some of the water from the pump was sent by order of the coroner to Dr. Letheby for analysis. The following is the professor's report. "The water contains

61.5 grains of saline matter per imperial gallon, besides 2.8 grains of organic matter, and much ammonia. The saline matter as well as the organic are chiefly derived from surface drainage, and the presence of ammonia indicates percolation from a sewer or cesspool. The water is quite unfit for drinking purposes, and from the nature of the pollution is very like to have occasioned choleraic disease, especially if drunk without previous boiling." The jury returned a verdict, that the diseased died from choleraic disease, occasioned by drinking polluted water drawn from a certain pump, and they recommended that the attention of the proper authorities should be drawn to the danger of leaving such a dangerous source of disease accessible to the public.

**BIOLOGY.** In his address to the Section of Biology at the recent meeting of the British Association, Professor Huxley said that he wished to consider for a short time the object of the science indicated by the new term Biology, and the scope of those persons who pursue it, and subsequently the position which had been given to its various branches in this Section of the Association. Suppose him to be provided with an egg and a bean, he would draw the attention of his listeners to their contents. Neither of them contains anything but an incomplete rudimentary foreshadowing of what they will produce. Imagine the egg incubated, or the seed placed in the ground. After a time, a being full of life and activity, and possessing even mental powers, will come from the egg; the chick will become a fowl. So, too, the bean will become a beanstalk. In the whole set of changes undergone there is a definite order and succession of forms, to which the name Development is applied. In studying each stage of this development, we only study a series of distinct *forms*. It is only form which is studied in development. The inquirer does not ask how or why these changes take place, but simply what they may be. When our chick or bean has arrived at maturity we have not a homogeneous mass. There are muscles and bones in the one and fibres and tissues in the other. The study of the form of the internal parts is called Anatomy, and it is anatomy whether on a small or a large scale. The size does not affect the nature of the study; it is anatomy whether we deal with parts one inch or one-thousandth of an inch in diameter. He would lay particular stress on this, because some persons had a confused notion on the matter; microscopic anatomy, or histology, is anatomy. In all this we deal with *form*. So, in considering the relation of being to being, we observe that the *form* of an oak is more like that of a beanstalk than it is like a man's; again, a man is more like a monkey than he is like a crocodile. This study is that of Taxonomy, Classification, Systematic Zoology and Botany. *Form* has still another study, that of Distribution, not only in space, but in time. The life on our earth is not a thing of yesterday, but goes back so far into past ages that the record breaks off ere we find its first commencement. Palæontology is the biology of the past, and a fossil animal differs only in this regard from a stuffed one, that it has been dead ages instead of days. We have, then, Development, Anatomy, Classification, and Distribution, all relating to form, constituting Morphology; its methods are Observation, Classification, and Registration. The facts concerning form are questions of force: every form is force visible; a form at rest is a balance of forces; a form undergoing change is the predominance of one over others. How has form come about? how does it commence? how does it end? The question *why* belongs to Physiology in its broader sense. In a narrow sense it has been used only in regard to the properties of individuals,

as we say the Physiology of Man. But there is another physiology, dealing with the causes of life, the foundations of which as a science have been laid by Mr. Darwin. Such is a view of the relations of the various branches of biological science. Two things are wrapped up in it; Form and Cause. The study of physiology requires great preparation; over the door of the physiological department might well be written, "Let no one enter here who is not a thesist and a physcist". If there were such a thing as scientific education in our schools, we might keep our Biological section well together in one room; but as it is there is no chance for this. The stick won't beat dog, dog won't bite pig, and so the old woman can't get home. The university won't recognise natural science, and hence the public school won't teach it to the boys, and consequently all men are not versed in all the subjects of it. Hence the Council have provided a department for the medical physiologists, another for the students of ethnology, as a matter of convenience. The division is not philosophical, but it is expedient. We give off buds like an animal of low organisation, but, unlike this animal, we retain the power of reabsorbing those buds. Dr. Humphry, of Cambridge, attempted to defend his university from the charge of indifference to science. He considered physiology the very highest and noblest of the sciences, and thought it was wet-blanketed by the Association. He wished that a separate Section might be formed for it. Dr. H. Bennett, of Edinburgh, agreed with Professor Huxley, but wished for two equal sections of Morphology and Physiology. Sir J. Lubbock observed that the success of the Physiological subsection of former years had been like that of the broom-seller, who made a few brooms and stole the rest; the physiologists had got a few legitimate papers, and had stolen the rest from the morphological department.

**MEDICAL EDUCATION AND THE EDUCATION OF DRUGGISTS.** In delivering the introductory address in the Chemical Section at the recent meeting of the British Association for the Advancement of Science, the President, Dr. Bence Jones, made the following remarks:—"My predecessor, Professor Miller, last year told you that 'some years will no doubt elapse before science is admitted to take equal rank, as a means of education, with the study of classical literature. Still, it is but a question of time. The practical instinct of the nation is becoming alive to the necessity of making certain portions of the training of our youth consist in the systematic study of the elementary parts of properly selected branches of science.' Although we may say with Mr. Gladstone, that time is on our side, and although we are beginning to ask how our present formula for education has arisen, and why it remains almost unchanged while all natural knowledge is advancing, and although an entire change in everything except the highest education has taken place, yet public opinion is affected so slowly, and the prejudices of our earliest years fix themselves so firmly in our minds, and the belief we inherit is so strong that an education far inferior to that which a Greek or a Roman youth say twenty centuries ago would have received is the only education fit to make an English gentleman, that I consider it is of no use, notwithstanding the power which this Association can bring to bear on the public, to occupy your time with the whole of this vast question. But there is an outlying portion of this subject which personally touches each one of us here present; and this, with much diffidence, I venture to bring before this section of the British Association. I allude to the present

state of education in natural knowledge of that portion of the community who may at any moment be asked to tell any of us here present what mechanical means should be used to lessen or increase the mechanical actions of the body, and what chemical substances should be taken to lessen or increase the different chemical actions within us when they rise or fall to such a degree as to constitute disease." Dr. Bence Jones, having described the present peculiar characteristics of medical education, proceeded to observe: "At present, so far from physicians possessing more knowledge of food and of medicine than any other class of persons in the community, the analytical and pharmaceutical chemists are rapidly increasing in knowledge, which will enable them not only to understand fully the nature and uses of food and medicine, but even to detect the first appearances of a multitude of chemical diseases. Their habits of investigation, and their knowledge of the nature of the forces acting in the body, will gradually lead them to become advisers in all questions regarding the health of the community; and from this they will, like M. Bouchardat in Paris, become almost, if not altogether, practitioners of medicine. No doubt chemists are very far from being medical practitioners at present; but remember that there is no limit to natural knowledge, and that each moment the chemical knowledge of things around us is progressing, and that chemists are becoming able better to answer every question that can arise regarding the air, water, food, drink, and medicine which by means of forces that exist in them act upon the forces within us, and give rise to the phenomena of health and of disease; while, as if to lessen the time that might be devoted to acquiring natural knowledge, the authorities who regulate medical education, only this last spring, have determined that, in addition to Latin, every medical man shall possess a competent knowledge of Greek, in order that the derivation of hard words may be obtained from the brain instead of a dictionary. In confirmation of my opinion of the direction in which the treatment of disease is progressing, I may just refer to the cattle-plague, which in 1745 was treated by Dr. Mortimer, at that time secretary of the Royal Society, and therefore one of the most scientific physicians in the country, with antimony and bleeding. In 1866, two chemists, Dr. Angus Smith, Ph.D., F.R.S., and Mr. Crookes, F.R.S., gave the only useful suggestion for combating the disease—namely, by the arrest or the destruction of the poison by chemical agents. There is yet another point of view in which chemists will see the harm that results from our present medical education. The use of Latin in our prescriptions requires that the pharmacists should learn at least sufficient Latin to read what we have written. Many errors have arisen, and will arise, from the dispenser being unable to give the directions rightly. To avoid such mistakes, a portion of the time that ought to be given to the attainment of the highest possible amount of chemical acquirement, and a perfect knowledge of the English language, or some foreign language wherein he might learn the discoveries in chemistry and the improvements in pharmacy of other countries, must be devoted to the learning of Latin, in which the physician writes his directions. All our druggists in England ought to be what they are in Germany and in France—chemists capable of any analysis that might be required of them, and able to satisfy themselves and the medical men that the substances they sell are what they profess to be—pure, unadulterated chemical compounds.

## OPERATION DAYS AT THE HOSPITALS.

MONDAY.....Metropolitan Free, 2 P.M.—St. Mark's for Fistula and other Diseases of the Rectum, 9 A.M. and 1.30 P.M.—Royal London Ophthalmic, 11 A.M.

TUESDAY.....Guy's, 1½ P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.

WEDNESDAY...St. Mary's, 1 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—St. Bartholomew's, 1.30 P.M.—St. Thomas's, 1.30 P.M.

THURSDAY....St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Great Northern, 2 P.M.—London Surgical Home, 2 P.M.—Royal Orthopaedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.

FRIDAY.....Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.

SATURDAY....St. Thomas's, 9.30 A.M.—St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 P.M.—Lock, Clinical Demonstration and Operations, 1 P.M.—Royal Free, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.

## TO CORRESPONDENTS.

\* \* \* All letters and communications for the JOURNAL, to be addressed to the EDITOR, 37, Great Queen St., Lincoln's Inn Fields, W.C.

COMMUNICATIONS.—To prevent a not uncommon misconception, we beg to inform our correspondents that, as a rule, all communications which are not returned to their authors, are retained for publication.

CORRESPONDENTS, who wish notice to be taken of their communications, should authenticate them with their names—of course, not necessarily for publication.

FAIR PLAY solicits the opinion of the Editor in the following case, in the answers to correspondents.

A. and B. are medical men practising in a country town. They are on friendly terms. A. has attended at The Hall for twenty years. B. is aware of it. A. at the present time is attending a member of the family, and his visits have been paid daily. He calls one morning; and, in conversation, the husband of the lady patient expresses a desire for a further opinion. A. suggests Dr. — of D.; and the husband agrees to telegraph to Dr. —; and, on receiving his answer, to send his carriage to the station to meet him, pick up A. on the way, and bring them up together. The same afternoon, between two and three o'clock, the husband goes to the town, inquires for B.'s residence, calls upon him, and requests him to attend his wife. B. goes, and takes the case; and the same evening, about six o'clock, A. receives a dictant note from the husband, stating, "that his attendance will not be further required, as he has found it to be desirable to place his wife in other hands." A. takes no further notice of the case. B. continues his attendance, but does not call upon A., or offer any explanation by letter or otherwise afterwards.

The question is: Is B.'s conduct, knowing, as he did, that they were A.'s patients, and that "A." was in immediate attendance upon the case, professionally correct or otherwise? Is B., by acting thus, guilty of a breach of professional etiquette or not?

[Our correspondent will admit the right of a patient, or a patient's friends, to change his or her medical attendant. This being granted, and the correctness of A.'s narrative being assumed, if the lady's husband in the case described thought proper to substitute B. for A., as her medical attendant, and if B. was distinctly informed that A. was no longer in charge of the case, we cannot see that B. was guilty of unprofessional conduct. It would, however, have been an act of courtesy on B.'s part to communicate with A., and satisfy him that the patient had come under his (B.'s) care through the mere desire of her friends. EDITOR.]

COMMUNICATIONS have been received from:—Dr. FREDERICK J. BROWN; Mr. R. GILLARD; Dr. G. H. PHILIPSON; Dr. EDWYN ANDREW; Dr. WHITTON; Dr. WOAKES; Dr. G. B. MEAD; Mr. H. J. ALFORD; Dr. EADE; Dr. WARDELL; Dr. J. S. WARTER; and Dr. JAMES RUSSELL.

## BOOKS RECEIVED.

1. On Vitality. By the Rev. H. H. Higgins, M.A. Liverpool: 1866.
2. Lady Nurses for the Sick Poor in the London Workhouses. London: 1866.
3. Report of the City of Glasgow Fever Hospital. By Dr. J. B. Russell. Glasgow: 1866.