

medical gentlemen, Mr. Lucas divided the genio-hyo-glossi muscles with a pair of strong scissors, having first made a section of the mucous membrane of the mouth in their vicinity, and carefully avoiding the Whartonian ducts, ranine arteries, &c. The hæmorrhage, although entirely venous, was not inconsiderable, and retarded the steps of the operation, which, however, was completed with very little pain to the patient in a few minutes. After the muscles were fairly divided, the increased freedom of the tongue became at once apparent; he could turn it upwards with the greatest facility, and pronounce without difficulty words beginning with *d, l, n, t, &c.*, giving them their proper sound. The pronunciation of words commencing with labials was of course not benefited.

A continued report of this interesting case shall appear in a future number.

GLOUCESTERSHIRE MEDICAL ASSOCIATION.

PETITION TO THE HOUSE OF COMMONS.

THAT the bill now under the consideration of parliament, for the continuance of the poor-law commission, and for the further amendment of the laws relating to the relief of the poor, affords an opportunity for improving the present imperfect and unsatisfactory provision of medical relief.

That in the year 1838, a committee of your honourable house examined several medical practitioners, who were unanimous in suggesting certain amendments of the present system, several of which were approved of and recommended by that committee, and have since been agreed to, although not adopted by the poor law commissioners.

Your petitioners therefore humbly pray that provisions to secure the general adoption of these measures may be introduced into the said bill; and in particular,

First, That a medical director may be appointed to superintend all matters relating to the medical relief of the poor, to which department his whole time and attention may be devoted.

Secondly, That the disgraceful and injurious system of appointing union medical officers, by tender, may be abolished; and that a rate of remuneration, calculated to secure an adequate supply of medicines and medical attendance to the sick poor, may be ensured to those officers by the enactment of maximum and minimum limits to such remuneration, thus protecting, on the one hand, the rate payers; and, on the other, the medical profession; thus also allowing the guardians of each union to determine the precise amount of payment within the prescribed limits, according to the custom and peculiar circumstances of the respective localities, and subject to the final decision of the medical director, in case of dispute.

Thirdly, That certain limits, to the extent and population of medical districts, may be defined.

And fourthly, That no future practitioner may be eligible to the appointment of medical officer, unless he shall prove his competency to practise by passing examinations in medicine, surgery, and midwifery.

By the enactment of the above provisions, your honourable house would humanely confer a most essential benefit on more than a million poor, annually suffering from sickness, combined with destitution,—would afford important protection to the public in general, and would grant encouragement to the members of a useful profession in the performance of the most laborious and arduous department of their duties.

And your petitioners will ever pray.

LETTER FROM MR. GELL.

TO THE EDITORS OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

GENTLEMEN,—In a late number of your Journal I find a contribution on the subject of Medical Reform from the pen of Dr. Macartney. By the majority of your readers it may be taken in an offensive light, that a stranger to them

and the members of the Provincial Medical Association should presume to make any comments upon the fact above stated. But when we look to England and Scotland at the present moment, where leaders in the cause of Medical Reform are most wanted, where are we to find them? What are the guarantees for the *purity* of their *motives* and the *benevolence* of their *designs*? We find that the general practitioners in England have had to take the burden on their own shoulders; and the same with regard to Scotland. In Ireland (despised Ireland) only do we find men of the highest eminence in their profession, and moving in the highest stations of society, coming forward, at the moment of need, to lend their talents and characters to the sacred cause of reform in the medical profession. It is to such men as Dr. Macartney and Mr. Carmichael that the medical public ought to look at present—theirs are not names of yesterday!—their opinions are not those of novices, taken up on the spur of the moment to be abandoned at the next capricious impulse! The one is a retired professor of one of our most respected universities, the contemporary and co-equal of John Abernethy and Astley Cooper; the other holding the same position in the eyes and hearts of the Irish public as the virtues of the scarcely cold Sir Astley Cooper experienced from the public of Great Britain. The worthy Doctor, in my opinion, takes an excellent and comprehensive view of the most vital points connected with the question of Medical Reform, and it is only surprising that so much matter could have been condensed into so small a compass. His communication ought to be published by the Provincial Medical Association, in the form of a letter, a copy (or copies) of which ought to be sent to every active member of parliament—the House of Lords as well as the House of Commons,—*no matter what their political bias may be*, as it is only by holding up the truth in its simplest form that we can expect a question of such importance to be understood by gentlemen not connected with the profession. There is time enough for this to be done before the second reading of Mr. Hawes's bill, and honourable members voting for its second reading would not be precluded thereby from suggesting any details in committee, which they might think necessary. The same in the House of Lords. With the views of such men as Doctors Kidd and Macartney in print before them, could they for a moment doubt the necessity of a different system from that at present existing in the medical institutions of the United Kingdom?—I am, your obedient servant,

Cairn Castle, Feb. 1841.

TOBIN GELL.

HOUSE OF COMMONS, FEB. 15.

MEDICAL REFORM.

SIR R. VIVIAN presented two petitions from the Cornwall Medical Association, the one praying for a consolidation of the three branches of the medical profession into one faculty, to be effected as speedily as possible; and the other, complaining of the administration of medical relief under the poor laws, and praying for the appointment of a medical poor-law commissioner, whose duty should be to attend to that department only.

On the same day Mr. Macaulay presented a petition from the Royal College of Physicians in Edinburgh, praying that the house would take into its serious consideration the present state of medical education.

ROYAL COLLEGE OF SURGEONS IN LONDON.

LIST OF GENTLEMEN ADMITTED MEMBERS,

On Friday, February 19, 1841.

Nicholas Lockyer Dolling, John Edmund Currey, James Stephens, Charles Carpenter, Henry Gibbs Dalton, Frederick Bird, Charles Henry Butler Lane, Edward Cair Tyte, Alexander Cummings Air, Charles Thomas Davenport, Henry Montagu Champnes.

PROVINCIAL MEDICAL AND SURGICAL ASSOCIATION.

COUNCIL MEETING, HELD FEB. 23, 1841.

Resolved,—That the Council do not consider that the Provincial Medical and Surgical Association is pledged to support the bill which may have been adopted by the conference of the medical associations in London, since some of the delegates appointed by their Council have not attended,* and others have resigned,† and the Council are ignorant of the nature of the clauses of the proposed bill.

Resolved,—That this Council think it desirable that the reform proposed by the medical corporations in London should be submitted to them for consideration.

Resolved,—That the resignation of the delegates, Dr. Forbes, Dr. Cowan, and Dr. Hennis Green, be accepted, and that no other delegates be appointed.

* Mr. Crosse, of Norwich, and Dr. Barlow, of Bath, never attended the meetings of the conference.—Ed.

† We believe that Dr. Macartney, the chairman, has also long since resigned.—Ed.

OPINIONS OF THE MEDICAL CONFERENCE

ON CERTAIN LEADING POINTS CONNECTED WITH THE SUBJECT OF MEDICAL REFORM.

1. That the legally-qualified members of the medical profession in Great Britain and Ireland, should be incorporated into three faculties, or corporations, one in England, a second in Scotland, and a third in Ireland. The legal qualification is understood as being possessed by persons who are graduates, members, fellows, or licentiates, of any of the existing chartered, or otherwise legally-constituted universities, colleges, or corporations, established in these realms, and by all persons otherwise legally qualified to practise medicine throughout the same.

2. That the government of each of the aforesaid corporations, or faculties, should be vested in a council, elected by the votes of the commonalty.

3. That an uniform test of qualification should be ordained for, and that equal legal rights, immunities, and privileges, should be enjoyed by the members of each faculty.

4. That it is most desirable that uniform arrangements should prevail throughout each portion of the United Kingdom, with regard to the education of all persons who may become candidates for a license to practise medicine.

5. That, in the opinion of the conference, the two latter objects would be most effectually promoted, through the intervention of a general medical senate.

6. That a board should be established in each capital of the empire, for conducting the examinations of persons who may be desirous to obtain a license to practise.

7. That such license should be granted (after successful examination) by the councils of each kingdom, and that no unlicensed person should be allowed to practise medicine for remuneration or gain in any part thereof.

8. That a register should be kept, and an annual list published, of all legally-qualified medical practitioners.

9. That the conference respects, in the fullest manner, all existing medical universities, colleges, and corporations, so far as they are compatible with incorporation of the whole profession, representative medical government, and uniformity of qualification of those persons who shall receive a license to practice medicine in Great Britain and Ireland.

By insisting upon uniformity in the qualification of all persons who may be licensed to practise, the conference must not be understood as wishing to interfere with the power of any university or college to grant degrees, diplomas, or titles in medicine and surgery, or to make its own regulations, with respect to the admission of members. Neither is it the desire of the medical associations to deprive those bodies of the funds required for the due maintenance of their several establishments. At the same time

the delegates beg to express their strong conviction, that, in justice to the public, no less than to the medical practitioner, honorary degrees and titles should be conferred by the universities and colleges of each country, on some clearly-defined and uniform principle.

10. In the opinion of the conference, it is highly necessary to the public health, that measures should be taken by the legislature to secure a proper superintendence of the trade of chemists and druggists, although it has not been considered expedient that any provision, in reference to this subject, should be introduced into a Bill for the amendment of the laws relating to the medical profession.

A deputation from the conference had an interview with the president and censors of the Royal College of Physicians on Thursday last.

N.B. We received the above, with some additional information, at 11 o'clock A.M. on Friday, 26th.

MR. HAWES'S MEDICAL BILL.

MR. HAWES withdrew his bill last week from the House of Commons, and obtained leave to bring in an amended one on Friday last. The withdrawal of the bill was, we believe, rendered necessary by a form of the house, which requires that any bill affecting a trade should originate in a committee of the whole house.

BOOKS RECEIVED.

THE Touchstone of Medical Reform; in Three Letters to Sir R. H. Inglis, Bart. By JOSEPH HENRY GREEN, F.R.S. Highley, London. 1841. 8vo. Pp. 72.

A few Hints to Medical Students on the Parisian Hospitals. By A PHYSICIAN. Churchill, London. 1841. 12mo. Pp. 56.

TO CORRESPONDENTS.

The letter of Omega has been received.

A Reformer will find in another part of the Journal the true reason of the withdrawal of Mr. Hawes's bill.

An Apothecary.—It is perfectly true, as we stated in our last number, that the chemists and druggists expunged the words "minor cases" from one of their resolutions. The pretensions of these gentlemen to practice the whole range of medicine was thus openly asserted.

A.—There are now two vacancies in the Council of the College, occasioned by the deaths of Mr. Howship and Sir Astley Cooper.

ADVERTISEMENTS.

PROVINCIAL MEDICAL AND SURGICAL JOURNAL, Edited by Dr. HENNIS GREEN (London), and Dr. STREETEN (Worcester).

At a late branch-meeting of the Provincial Medical and Surgical Association at Bridgewater, it was unanimously resolved, "That the meeting take this opportunity of strongly stating their satisfaction that the PROVINCIAL MEDICAL AND SURGICAL JOURNAL has been established, and pledge themselves to give their cordial support to the Editors in their laudable undertaking."

The chief objects of the JOURNAL are—1st, To represent in an adequate manner, Medical Science in the Provinces. 2d. To serve as an organ of communication between the members of the different Associations throughout the Kingdom. The JOURNAL (being stamped) can be forwarded by post to any part of the British dominions.

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