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EDITED BY JOHN ROSE CORMACK, M.D.

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TO CONTRIBUTORS. We have received within the last week several MSS. accompanied by a request for payment if they were inserted. We therefore take this opportunity of stating that no literary work is paid for unless executed in accordance with a previous agreement. To secure unity of plan and harmony of sentiment, it is essential that the editor communicate directly and frequently with those who assist him.

Letters referring to the commercial department ought to be addressed to MR. HONEYMAN, 37, Great Queen Street, Lincoln's Inn Fields; and communications for the Editor to Essex House, Putney, London, or to the Office. The Editor is generally at the Office on Wednesdays, from four to five P.M.

MEDICAL METEOROLOGY.

At the present time, when Physiology, Chemistry, and the Revelations of the Microscope are so extensively pressed into the service of medical observers, and made to elucidate the origin and nature of various diseases, it would be strange if we remained contented with vague notions on the important subject of Meteorology in its relations to medicine. To dilate upon its great importance would be a mere waste of time; for the fact that, in all times and places, the common sense of mankind has ascribed to atmospheric changes a serious effect upon the health of human beings, is just as clear and unquestionable as another fact—that, of the nature and operation of atmospheric changes upon the human body in health and disease, we have many guesses, some vague notions, but *no strict science*. In this interesting region of inquiry, that inductive science which has explored the bowels of the earth, and has classified the productions of its surface, has hitherto done little. The atmosphere and its changes, though immediately surrounding us, and constantly affecting our daily experience, are less understood than the movements of distant stars and planets!

Our present object is, I. To notice the present vague condition and defective study of Meteorology in its medical aspect; and II. To suggest the modes in which this interesting branch of study may be more scientifically and advantageously cultivated. Great are the difficulties—as in all beginnings; but we believe that, by a judicious division of labour, earnest cooperation, and a strict adherence to the inductive method of research, victories may be achieved here, as in other departments of science.

I. We already have observations on Meteorology in some sort of connexion with disease and death; but they are not definite enough for our purpose. This is the first point on which we must insist. Let us first notice the Registrar-General's weekly tables of mortality in London. These give

the week in which the deaths were registered; not the times when the deaths occurred. What can be induced, in a medico-meteorological point of view, from such facts?—Nothing. Let us suppose a case:—that a patient was seized by an attack of *bronchitis* on the seventh of April in any year, and during the prevalence of a cold north-easterly wind; that the patient died on the fourteenth; and that on the seventeenth the death was registered; but meanwhile, that, on the thirteenth, the wind had changed to a mild south-westerly breeze: it is obvious that the registration of the death on the seventeenth could have no value as a medico-meteorological fact. The dates especially *wanted* are those of the first seizure, and also of the changes of weather, and the symptoms during the progress of the disease.

The Registrar-General, in his returns for the week ending March 19th, 1853, remarks that—"The effect of sudden changes of temperature does not immediately become perceptible to its full extent in the register of deaths." The fact is, we want, for medical purposes, a correct registration of the very day on which the attack of disease commenced, and of the meteorological observations of *that day*, side by side; and this will be the new and important feature of the tables to be inserted in this Journal. Obviously, medical men are the only persons who can be competent to make the two-fold observations on meteorology and pathology which we require. It must always be kept in mind that our observations have not a *general* scientific purpose; but a *specific* aim—the advancement of *medical science*.

Dissatisfaction with *vague observations* is common to all who have thought on the relations of Meteorology with Pathology. Dr. Addison of Maidstone, and Dr. Moffat of Hawarden, in their excellent letters inserted in this Journal (pp. 80, 129), have already insisted on the necessity of *daily* observations. As examples which may serve to indicate the course to be pursued, we may briefly allude to the valuable papers by Dr. Tripe, in the *Medical Times* (1848-49). During a long and extensive experience of scarlet fever, Dr. Tripe has observed that, in London, a high barometrical pressure is frequently coincident with a low rate of mortality from scarlatina; that extreme and long-continued variations of the barometer indicate a condition of the atmosphere adverse to the progress of the disease; that the mortality from scarlatina is low in a cold January, and *vice versa*; but that, in the summer quarter, a temperature lower than the average is somewhat favourable to increased mortality from scarlatina. This is not the place to inquire into the certainty of these results of Dr. Tripe's researches; but we refer to them as good specimens of that kind of investigation which is required with regard to the connexion existing between meteorological changes and several diseases. For another example, we may refer to the valuable paper of Mr. R. D. Grainger, "On the Influence of Noxious Effluvia on the Origin and Propagation of Epidemic Diseases"—at pp. 164, 184 of the *ASSOCIATION JOURNAL*. We would suggest that, in addition to the *local* causes, so well described by