

two in number, and each one the elected representative of his county. As a scheme of medical representation, such would be an exceedingly imperfect one: but, nevertheless, what weight would attach to the actions and the opinions of our ideal congress! How respectfully would each member be listened to by his brethren! With how much interest would the press attend upon and describe the meetings! And how vastly would the profession be elevated in the opinion of the public, not in consequence of an increased perception of its merits, but simply because a method had been found of concentrating and applying its prodigious social influence. It would at once be evident that, although the members of our profession may tolerate the public existence of persons who live by medical agitation, they would never, by their suffrages, place them in positions of trust and of honour. The chosen representatives of the medical profession of this country, or the representatives chosen by the members of our own Association, would be men eminent alike for ability and for respectability, whose characters would alone give them great influence, but whose influence would be increased a thousandfold by the weight of the constituencies by whom they were elected. It would be felt on all sides, that these gentlemen were engaged in the discharge of an important public duty; and the good wishes of the profession, as well as the sympathies of the public, would assist them in bearing unfair criticism and personal attack from bad persons, which the honest performance of such duty might entail.

To obtain the obverse of the picture, let us imagine the same gentlemen assembled in a private, and not in a representative character; purposing to hold a little discussion on medical affairs, and to wind up their proceedings by a pleasant dinner. If they could only insure a certain degree of privacy, so as to avoid the presence of objectionable persons, they might undoubtedly have a most agreeable meeting; the sum and substance of which would be, that fifty-two men of education and intelligence, at the cost of some neglect of their veritable occupations, had formed a pleasant party, had talked some excellent sense, had dined comfortably, and had dispersed to their respective homes. But, if their meeting were convened by public advertisement, and open to every one who could find funds for the necessary travelling expenses, although its efficiency for good would be in no way increased, its proceedings would certainly be hindered by foolish or worthless agitators, throwing in the elements of discord for the advancement of their private ends, or the gratification of their private enmities. And a little of this vile leaven leaveneth the whole lump. In an assemblage where personal interests have place, and where personal feelings are permitted to influence public conduct, each man is compelled to suspect his neighbour, and there is an end to every hope of union, and every prospect of utility.

We are sure that our readers will cordially join with us, in congratulating the American Association on having chosen the better path; and in desiring for it a future

career which shall accord with its past energy, and shall abundantly fulfil its present promise.

There is much which our own Association may learn from a study of the history of the American Medical Association; though very little which it could absolutely copy. We have within our body the seeds of even a better system than that which it has now been our pleasant office to explain and to praise.

TO CORRESPONDENTS.

ORIGINAL COMMUNICATIONS. In addition to the papers already announced, the following have been received, and will be inserted as soon as possible.

1. ANDERSON, W. J., Esq. Remarks on the Treatment of Procidencia Uteri.
2. FLETCHER, John S., Esq. Abscess in the Broad Ligament of the Uterus.
3. LINDSAY, W. L., M.D. Clinical Notes on Cholera. [No. vi. Premortory Diarrhœa; the Cholera Exanthem; Character of the Typhoid Stage.]
4. PRICHARD, Augustin, Esq. Injuries to the Eye, and Extirpation.

MEDICAL REFORM. A draft of a new Medical Reform Bill has been received, along with an explanatory letter, from Mr. Hastings. They shall appear next week.

PERISCOPIC REVIEW. We are obliged to postpone our summaries of Practice of Medicine, Midwifery, Materia Medica, etc., till after the Manchester meeting. The desire to publish before the Manchester meeting all that bears upon Association, polity and Medical Reform, is the cause of this deviation from our usual routine. It has, in fact, been a matter of necessity rather than of choice.

GRATUITOUS MEDICAL SERVICES. Mr. CHARLES having resigned the Honorary Secretaryship of the Gratuitous Medical Services Committee of the Metropolitan Counties Branch, in consequence of his going abroad, Dr. HALLEY, of 14, Queen Anne Street, Cavendish Square, has undertaken the duties of the office. The Report of the Committee will, we learn, be laid before the next meeting of the Branch.

HEALTH OF LONDON. (*From the Registrar-General's Return.*) In the week that ended last Saturday, August 26th, the number of deaths arising from all causes was 2,039. In the ten corresponding weeks of the years 1844-53, the average number was 1,114, which, if raised in proportion to increase of population, becomes 1,225. The cholera has produced an excess, amounting to 814, above the corrected average. In the thirty-fourth week of 1849, which ended August 25th, the total number of deaths registered was 2,456. In that week the mean temperature was 62.9°; last week it was 61.2°, which is 1.1° above the average.

From cholera the deaths in last week were 847, while those from diarrhœa were 214. In the corresponding week of 1849 cholera carried off 1,272 persons. In the present summer its weekly progress is traced in the following numbers: 5, 26, 133, 399, 644, 729, and 847. In the first seven weeks of the epidemic of 1849 the deaths were 9, 22, 42, 49, 124, 152, 339. In that year it commenced about the end of May, the healthiest part of the year; it began six weeks earlier than the present epidemic, and its progress was slower, but in the fourth week of August, as has been shown, it had reached a higher rate of mortality than the disease which now prevails has yet attained.

2,783 persons have already died of cholera; and 1,706 of the number have fallen on the low grounds of London, out of 595,119 people whose dwellings are not 10 feet above the Thames; 705 have died out of 648,610 on the higher ground, extending from 10 to 40 feet above the same level; and only 345 out of the 1,070,372 who live on the ground that has an elevation extending from 40 to 350 feet. The mortality from cholera to 100,000 living at the three elevations is 287 at the lowest, 109 at the middle, and 32 at the highest region.