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TO CORRESPONDENTS.

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PARAGRAPHS FROM OUR PORTFOLIO.

XVI. MEDICAL REFORM. The difficult task of organising the medical profession for equal self-government has been made impossible, for the present at least, by the opposition of the selfish and the indifference of the unselfish part of our profession; and it has given place to the far more easy, though very disagreeable duty, of opposing injurious projects. Of this we have had several samples during the last twelve months. First, there was a Bill which its promoters never imagined to be perfect—the Bill of the PROVINCIAL MEDICAL AND SURGICAL ASSOCIATION—which, though honestly designed, was voted by certain parties to be not merely bad, but hopelessly so, and not capable of being so amended as to be the basis of legislation. Then, and very soon after, some of those most active in its extinction were supporters of an attempt to make the Universities legalising bodies for the profession, and were nowise squeamish about the admission even of non-medical Universities, and of Universities in a medical sense effete and obsolete, to the right of determining the fitness of medical gentlemen to practise medicine, surgery, midwifery, and pharmacy. It was like an attempt to revive the state of physic in the middle ages, when physic was the business of the church, and archbishops the fountains of medical privileges: it was accordingly resisted by various parties. Of two *bad bills* in which this attempt was embodied, one was consequently made innocent, and the other was thrown out of the House of Commons. This, one would think, might have shown that the destruction of *bad bills* is a game which can be played successfully by more parties than one. But wisdom is of slow acquisition; and, accordingly, an attempt now made to lay the whole of the medical profession prostrate at the feet of the Universities serves to show that its authors, whoever they may be, have not yet profited sufficiently by the errors of adversity, and that we must take the trouble of defeating another *bad bill* for their instruction. We would refer all who doubt the necessity of doing so to a document published at p. 358 of to-day's JOURNAL—a Report of the Royal College of Surgeons of Edinburgh—in which this new *bad bill* is dissected and anatomised.

If we cannot get our profession invested with something like the right which other professions have of managing their own affairs, let us at least resist a so-called improvement of it, which would rob it even of those germs of such a right which it now possesses: and, if we cannot get medical privileges and medical qualifications made more equal and uniform, in the name of common sense, let us not suffer the eleven Universities to make them as various as are their own constitutions and their own fitness for undertaking a delicate duty.

XVII. THE DECREASE IN THE POPULATION OF JAMAICA which has been long going on, and which is still continuing, affords, on a scale of great magnitude, an instructive illustration of the terrible evils which flow from the systematic neglect of those hygienical and medical resources which are within the reach of all civilised communities. Gross superstitions, quack medicines, filth, and vice, have apparently nearly supplanted not only medical practice, but even the exercise of common sense, upon all that concerns health, in that devoted island. Two years ago, the admirable official reports of Dr. Milroy on Cholera and the Sanitary Condition of Jamaica, furnished facts by which this statement can be fully substantiated; and we allude to the subject now because it has been recently awakening the attention of several of the island newspapers, and may possibly be pressed upon the notice both of the Local Legislature and the Imperial Parliament. Dr. ASHENHEIM, of Falmouth, writing a few months ago to the Hon. Edward Jordan, Member of the Legislative Council of Jamaica, said, "*Our population I believe to be annually decreasing*"; and then refers to "sanitary reform" as the only "means of eventually saving a whole people and a whole island from otherwise certain decay". (*Falmouth Post*, Jan. 23, 1855.) We shall soon have to discuss questions affecting the public health in their relations to sanitary legislation at home; and it may then be seasonable to disinter from the Blue Books some of the extraordinary disclosures contained in the valuable works of Dr. Milroy, to which we have referred. Any additional and later information, which Dr. Ashenheim or any of our other Jamaica readers can supply, will be acceptable. Dr. Ashenheim complains that, in Jamaica, "a fatality seems to attend professional warnings". Alas! so it is at home: in England, as well as in Jamaica, the medical profession is jealously excluded from the emoluments and duties of all pertaining to the momentous interests embraced in that familiar but little comprehended phrase—"The Public Health". Dr. Richardson's Quarterly Journal may, we trust, materially assist in preparing the mind of the community for adopting rational and reasonable means, under skilled guidance, of checking the ravages of epidemics, and removing preventible diseases from our town populations, our fleets, and our armies. To intrust the regulation of such affairs to mere politicians and amateur doctors is a disastrous form of national insanity, which we trust is still within the means of cure.

XVIII. BRITISH SAILORS are now being cruelly sacrificed to the caprices of the Red Tape Lords of the Admiralty. How long is this to continue? Our profession—especially the younger branches of it—have nobly spoken out on the policy by which the British Navy has been prevented from obtaining a sufficient number of naval assistant-surgeons, and on the scheme by which unqualified tyros of eighteen and nineteen years of age have been bribed to undertake the necessary service, under the designation of "dressers". The question is one which concerns the honour of the medical profession; but it is undoubtedly