

ASSOCIATION MEDICAL JOURNAL.

EDITED BY JOHN ROSE CORMACK, M.D.

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NEW SERIES.

TO CORRESPONDENTS.

COMMUNICATIONS FOR THE EDITOR AND GENERAL SECRETARY TO 37, RUSSELL SQUARE, LONDON:—on the 15th and 16th instant, to the Station Hotel, York.

COMMUNICATIONS received from Dr. MATTHEWS DUNCAN, PROFESSOR LAWRIE, Mr. WIGLESSWORTH, and Dr. DAVEY. The papers of Messrs. DUNN, MICHAEL, and WESTROFF, will appear in next number. After the Annual Meeting of the Association, we hope to publish a large quantity of Periscope Review, which is at present in type, and to which additional will be added.

BENEVOLENT COLLEGE SCHOOL. QUERIES. It would be very desirable if the Council of the Royal Medical Benevolent College (School Department) would publish, through the medical journals, their proposed curriculum and the names of their Professors, together with the terms for each Exhibitioner. Will the fagging system be allowed? A COUNTRY SURGEON.

MR. BRADY'S VACCINATION BILL.

THE subject of compulsory vaccination is again receiving the attention of the legislature. As was anticipated at the time of its passing, Lord Lyttelton's Vaccination Act, however well intentioned, has proved inadequate to the objects for which it was designed, and also unjustly onerous to the medical profession. Mr. Brady and Mr. Montague Chambers have, therefore, introduced into Parliament a new Bill, "to provide for the vaccination of the people in England and Wales". The Bill has been read a first time, and printed by order of the House of Commons; but, as it is not likely to pass into law during the present session of Parliament, the profession will have full opportunity of examining its provisions. In the meantime, we may point out the principal points in which Mr. Brady's Bill differs from Lord Lyttelton's Act, now in force.

It will be remembered, that various bodies of professional men, and several individuals belonging to the profession, have pointed out the special faults and shortcomings of Lord Lyttelton's Vaccination Act. Their opinions will be found in various parts of this JOURNAL for 1853 and 1854. The report of a meeting of the Metropolitan Counties Branch, held on February 14th, 1854, contains a letter to Lord Lyttelton, from a member of the Vaccination Committee of that Branch, in which are pointed out, in a summary manner, the details of the Act which specially require amendment.

The following is an extract from the letter referred to, which was published at p. 153 of the JOURNAL for February 17th, 1854.

"Feb. 11th, 1854.

"MY LORD,—I am greatly obliged by your Lordship's last communication regarding the amendment of the New Vaccination Act.

"As I stated verbally to your lordship, the principal defects of the measure seem to be five in number, viz.:—

"1. *The working of the Act being placed in the hands of the guardians of the poor.*

"The medical profession is very sensitive on this point; and the prevailing opinion is, that vaccination is a department of State Medicine, which is in itself quite distinct from the Poor Laws; and one which ought never to have been connected with them.

"2. *The want of professional supervision over the vaccinators.*

"3. *The want of any provision for the maintenance and distribution of supplies of lymph.*

"Under the present system it is often very difficult to obtain good lymph. If there were professional supervisors of vaccination, it should form part of their duty to supply pure lymph to medical practitioners.

"4. *The obligation to vaccinate a child before it passes the age of three months.*

"Many medical men make a rule of delaying vaccination till the infant is nine or twelve months old. Upon principle, I have never, during the last ten years, vaccinated an infant till it was above the age fixed by the Act.

"5. *The paltry fee bestowed upon the public vaccinators; and the want of any fee to the private practitioner for the certificates which he is required by Parliament to furnish.*

"Persons who are not objects of Poor Law medical relief ought to pay their own medical men for the vaccination of infants, or obtain vaccination gratuitously from a public charity, or a private practitioner; and the State ought, for the protection of the public, to exact from the operator, and pay him for a certificate of the operation having been efficiently performed."

On examining the provisions made on these points in Mr. Brady's Bill, we find the following results.

1. It is proposed to place the public vaccinations, after Jan. 1st, 1856, under the control of the General Board of Health, and to be under the immediate direction and management of a medical superintendent; the public vaccinators to be appointed by the Board, at a salary to be arranged with the Treasury. Within a month after the passing of this Act, the superintendent is to be appointed.

2. The Board of Health will appoint medical inspectors, under the superintendent, for the purposes of public vaccination, and for carrying out the provisions of the Act.

3. The Medical Superintendent of Public Vaccinations is to be required, with other duties, to compile and issue from time to time "regulations regarding the best mode of performing the operation of vaccination, the precautions to be observed in the selection of lymph, and all other things which may be required to render vaccination the most effectual safeguard against small-pox."

4. The obligation to have children vaccinated before the age of three months, it is still proposed to retain.

5. Those medical men who are appointed public vaccinators will be entitled to a fee of 2s. 6d. for every child successfully vaccinated at or within two miles of the vaccinator's residence, and 3s. 6d. if beyond that limit. Medical practitioners, not public vaccinators, will be entitled to 1s. for every child whose name is entered by them and transmitted to the Board as having been vaccinated.

Other parts of the Bill provide for the appointment of vaccination stations, for the vaccination of persons who have not previously undergone the operation, or who have not had small-pox, and for the vaccination of strangers coming to reside in England and Wales.

The above are some of the leading features of Mr. Brady's Vaccination Bill. We intend to print the Bill in an early

number, in order that its details may be carefully examined by the members of this Association. In the meantime, we abstain from comments, as our object is to elicit the opinions of those who are practically able to enlighten the profession and the legislature on this important question.

A very valuable communication on the subject of State Vaccination, from the pen of Dr. Spencer Thomson, of Burton-on-Trent, will be found at p. 747 of this number.

THE ROYAL MEDICAL BENEVOLENT COLLEGE ACT.

At p. 749 we reprint *in extenso* an Act of Parliament which has lately received the Royal assent, for the incorporation of the Royal Medical Benevolent College. The provision which is especially worthy of notice is that which enables other bodies throughout the country, having similar objects, to join the College. Two societies are specified by name; and the general provision is thus expressed in Section 7.

"It shall be lawful for any association or society formed exclusively or partly for the purpose of affording aid to medical men or their families, by any or either of the ways and means aforesaid, and either generally or within certain defined local limits, to transfer their funds or to subscribe money from their funds to the said College, either gratuitously for the furtherance of the general objects of the College, or any one or more of them, or upon and subject to such terms and conditions for securing special advantages to the objects (being medical men or their families) of their own immediate foundation; and it shall be lawful for the College by their council, but subject to the bye-laws and rules of the College for the time being in force, to enter into such agreements with any such association or society as aforesaid, with respect to any such special advantages as aforesaid, as they may think proper, and such agreements, if confirmed by three-fifths at least of the members of the association or society party thereto, present at a meeting of such association or society specially convened for the purpose, and also if confirmed by three-fifths at least of the governors of the College present, at any extraordinary general meeting of the said governors, and by the visitor of the College, shall be binding upon the association or society party thereto, and the College."

ORIGINAL COMMUNICATIONS.

ON THE THERAPEUTIC PROPERTIES OF CARBAZOTIC ACID, ETC.

By T. MOFFAT, M.D., F.R.A.S., etc.

[Read at the Annual Meeting of the North Wales Branch, July 3rd, 1855.]

At the meeting of the British Association at Liverpool, in September last, Professor Grace Calvert, of the Royal Institution, Manchester, read a paper on the Physiological Properties of Carbazotic Acid. The author stated that Dr. Bell, Physician to the Royal Infirmary, Manchester, had cured several cases of intermittent fever with this acid. He also stated that he should be happy to furnish any physician with a small quantity of this substance, so that its real medical value might be ascertained. He also described the process by which pure carbazotic could be procured from carbolic acid; and impressed upon the meeting the value of the pure acid as a yellow dye for silk.

Through a mutual friend, Professor Grace Calvert sent me a supply of carbazotic acid, carbazotate of ammonia, and carbazotate of potassa. I prescribed the articles in several cases; and it is with his leave that I bring the result of my experience before this meeting.

I may here state, that carbazotic acid was discovered by

Welter, and is sometimes called Welter's bitter. It has been chiefly studied by Gay Lussac, Chevreul, Piria, and Dumas. It is formed by the action of nitric acid on indigo, aloes, silk, and other organic substances. It forms yellow shining scales, soluble in water, to which it gives an intense yellow colour and bitter taste. The process recommended by Liebig for preparing it consists in boiling ten parts of diluted nitric acid on one of indigo, and adding to the liquid, when cold, a quantity of potassa. The potassa combines with the carbazotic acid, and forms carbazotate of potassa; which, in its turn, is decomposed by the addition of another acid, by which the carbazotic is set at liberty, and is deposited in brilliant yellow crystals. It is soluble in alcohol and ether. It unites with salifiable bases, and forms compound salts. The name is derived from its composition, which, according to Liebig, consists of

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|--------|---|---|---|-----------|
| Carbon | . | . | . | 15 atoms. |
| Azote | . | . | . | 3 " |
| Oxygen | . | . | . | 15 " |

Professor Grace Calvert's process I do not know; but, as I have before stated, the carbazotic is procured from carbolic acid, which, you are no doubt aware, is one of the products obtained in the distillation of coal tar.

Carbazotic acid, prepared according to the process of Professor Grace Calvert, I am informed, is a much cheaper* and a better article than that procured from indigo.

In a therapeutic sense, carbazotic acid and the carbazotates may be ranked with the tonic and astringent classes of remedies; but their astringent qualities, I believe, act indirectly; *i.e.*, they restrain discharges, by improving the general tone of the system. I have prescribed the remedies in the following cases.

The first case in which I used the carbazotic acid was that of a woman suffering from an attack of continued fever, complicated with subacute peritonitis and tympanitis. When the case had progressed to that stage in which the use of tonics and stimulants is indicated, I prescribed grain doses of the remedy three times a day. The woman got well just as if quinine had been administered.

The next case was that of a woman suffering from anæmia. She was recovering under the use of quinine and iron. I suspended the quinine and chalybeate treatment, and gave carbazotate of ammonia, in grain doses, three times a day. She lost ground while taking the carbazotate, and again improved on resuming the quinine and chalybeate remedies.

The next was that of a child ill of scarlatina maligna. Carbazotic acid and wine were administered. The child died.

I prescribed it next in a case of chronic eczema; and the patient got well.

Believing that carbazotic acid, in combination with ammonia and potassa, possessed tonic qualities, I felt inclined to try it in combination with metallic bases; and, at my suggestion, Professor Calvert prepared some carbazotate of iron and carbazotate of zinc. At the time I received them, I had two cases of cephalalgia under my care. One was of long standing. In one, I gave grain doses of carbazotate of zinc; and in the other (that of long standing), I prescribed the same quantity of carbazotate of iron three times a day, in combination with extract of conium. The carbazotate of zinc produced nausea and other unpleasant feelings; and the woman said I had poisoned her. I stopped the carbazotate of zinc, and gave carbazotate of iron, as in the other case. This did not produce any unpleasant effects. Both cases improved: indeed, one case got quite well; and that of long standing got so much better that I have not been called upon to prescribe for it since, and a month or more has elapsed since the remedy was administered. The quantity taken by each patient was thirty-two grains, in a period of fourteen days. In both cases, quinine and iron were tried, in combination with the same extract; and, in the case of long standing, sulphate of zinc and strychnine were taken without relief.

* Carbazotic acid, by this process, as I hear, can be prepared for about 5s. to 6s. per pound.