

CORRESPONDENTS are particularly requested by the Editor to observe that communications relating to advertisements, changes of address, and other business matters, should be addressed to the Manager, at the Journal Office, 161A, Strand, London, and not to the Editor.

#### THE INTERNATIONAL MEDICAL CONGRESS.

SIR,—In an annotation under the above head, in your issue of the 8th current, the writer mentions, as one of the subjects to be discussed in the section for Military Surgery and Medicine in the forthcoming meeting, "The Prevalence and Prevention of Typhoid Fever among Young Soldiers in India". I am glad to have seen this announcement, at a juncture when the subject is drawing considerable attention in this country. As a member of the British Medical Association, might I beg to solicit our brethren of the Army Medical Department to publish the details, clinical as well as hygienic, of cases of interest that come under their care? The climate and surroundings of India would appear to be adverse to literary labour, and our brethren for the major part are disinclined to take up the pen; but if only a part of their time devoted to sports and the like were spent on meditation over cases which have been under treatment, much good would likely to be the result. I also trust that those of our brethren who are in administrative appointments will kindly place at the disposal of medical journals, either for publication *in extenso*, or for texts for leading articles, such reports and returns as are likely to aid in throwing light upon the subject of abdominal typhus fever, *alias* enteric or typhoid fever.—I am, etc.,

JOHN C. LUCAS.

India, January, 1881.

We mentioned last week the name of Mr. R. H. S. Carpenter as Honorary Secretary of the Medical Defence Association, and referred to him a correspondent who complained of the danger to the public arising from the proceedings of unqualified persons in his neighbourhood. Mr. George Brown, of 3, Gibson Square, writes to us that he is Honorary Secretary of the Medical Defence Association, Mr. Carpenter being an active officer of the Medical Alliance Association.

#### ATTENDANCE ON SERVANTS.

SIR,—I am "unqualified", but have acted as assistant and locum tenens for a long time. Last summer, I acted as locum tenens, my remuneration being a certain sum and the fees. Being called to a case of explosion of dynamite, the patient being the daughter of a shepherd (a poor man), in the employ of a large landed proprietor, I was asked by the shepherd to see his daughter. I had to amputate fingers on two different occasions. In all, I paid six visits, for which I charged £10 10s. On my third visit, this landed proprietor told me that, instead of sending in my account to his shepherd, I was to send it in to him. I may mention that the accident happened through the laird's servants' negligence. The patient was distant from me about fifteen miles by land, and three by sea. Upon presenting my account to the laird, he said it was by land, and that he would not pay. Kindly inform me, through your JOURNAL: 1. Was the charge extravagant? 2. Is the laird legally bound to pay? 3. Can I sue him at law? or is it the principal, my employer, who must follow him up for me?—I am, yours, etc.,

LOCUM TENENS.

\* \* \* 1. Under the circumstances named, we consider that the claim is a fair one. 2. The laird's liability cannot be successfully disputed, notably if his promise be provable. Apart from that, he is bound to meet the pecuniary consequences if it can be shown that the accident was due to the default of his *employés*. 3. We doubt whether our correspondent, being "unqualified", could legally sue in person; we therefore advise that his principal should make application for the debt; if refused, he could then take action, and call our correspondent as a witness, he having been his *employé*.

#### A FEW QUESTIONS FOR OBSTETRICIANS.

SIR,—Two cases of septicaemia which have recently occurred in this neighbourhood, both proving fatal, were respectively the wife of a foreman brewer and the daughter of a yeast merchant (in whose house she continued to reside). The death of the former occurred a month, that of the latter seven days, after delivery. Is there any probable connection between the disease and the occupation in these cases? And has contact with vegetable fermentation, under the circumstances mentioned, any tendency to cause, or at least to aggravate, a similar process in animal tissues or fluids?

The former of the two cases was not my own patient; and I cannot give any further particulars regarding her; but the latter had suffered from diabetes for six years. Has this anything to do with the occupation? Or, again, is a diabetic patient peculiarly liable to septicaemia after delivery?

I ask these questions because, out of eight hundred midwifery cases that I have personally attended, this is the first that I have lost from any such cause. Prevention being invariably better than cure, I make it a rule to have Condy's fluid and water injected if there be the slightest unusual odour about the discharge. In the present case, I gave the order on the third day, but was kept in ignorance of its not being carried out until twenty-four hours had elapsed. The nurse and mother deemed it unnecessary, as no other symptom of mischief was then present. Of course, my indignation was considerable, and another nurse was at once called in; but all our after efforts were unavailing to prevent a fatal issue.

There is one other question which I should like to ask, and that is: Whether it is wrong, when hæmorrhage occurs during the early months of pregnancy, to try to prevent miscarriage? I have done so successfully on many occasions, and the patients have gone to their full time; but one such patient, who was delivered of a fully developed, but stillborn, child, showed symptoms of diabetes some months afterwards, and was told by a London physician that this was in some measure due to my stopping the miscarriage.—I am, sir, your obedient servant,

D. B.

P.S.—Since writing the above, I have casually learnt that another case of puerperal septicaemia recently occurred here, in the wife of a baker (who no doubt would use yeast); but, in that case, the patient recovered, although the temperature at one time reached 105°.

#### MEDICAL CERTIFICATES AND UNQUALIFIED ASSISTANTS.

A CORRESPONDENT asks, "What penalties a medical practitioner incurs who is in the habit of signing death-certificates of patients seen by his unqualified assistant, but never attended by himself personally?" If a medical practitioner gives a medical certificate of the cause of death of a person he has not seen during illness, and certifies that he "attended" such person, a penalty is incurred under the Births and Deaths Registration Act of 1874, for issuing a "false certificate for the purposes of this Act". Any person who commits this offence is "liable, on summary conviction, to a penalty not exceeding ten pounds; and, on conviction on indictment, to fine or imprisonment, with or without hard labour, for a term not exceeding two years, or to penal servitude for a term not exceeding seven years".

B.—We have no information on the subject.

#### OPIMUM AND ALCOHOL.

If we may believe the *Albany Evening Journal*, says an evening contemporary, modern civilised mankind, living as it does at chronic high pressure, cannot possibly dispense with some sort of stimulant to keep it up to the mark. Thus those exemplary persons who voluntarily pledge themselves to total abstinence from spirituous liquors are compelled to steady their nerves by indulgence in a substitute for alcohol even more baneful than that slow and agreeable poison. In the so-called Temperance States of the Union, this fact is made apparent by an extraordinary increase in the consumption of opium, morphia, and other narcotics within the last quarter of a century, utterly disproportionate to the augmentation of the population. Taking Albany itself, a temperance city, as an example of the rapidly growing indulgence in opiates provoked by strict observance of Father Mathew's prohibitions, it appears that twenty-five years ago, the population then numbering fifty-seven thousand, three hundred and fifty pounds of opium, and three hundred and seventy-five ounces of morphia were consumed within twelve months. The population, according to the recent census, is now about ninety thousand, and its last year's consumption of opium exceeded three thousand five hundred pounds, of morphia five thousand five hundred ounces. While the increment, therefore, of the population within that period may be roughly estimated at fifty-nine per cent., that of the consumption of opium and morphia amounts to respectively nine and eleven hundred per cent. The morphia is chiefly taken in the form of pills, but the opium, for the most part, is retailed as imported—a fact from which we may infer that it is consumed in great quantities by opium-eaters and smokers, over four-fifths of whom are stated to be females.

M. M.—The usual fees for a hospital surgeon under such circumstances, calculated on a reasonable scale, would be 100 guineas for the journey, 20 guineas a day during attendance in Scotland, and 3 guineas a day during the subsequent attendance in London.

R. T. C.—We could not promise publication for some time to come.

#### COMMUNICATIONS, LETTERS, etc., have been received from:—

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