

GENERAL PRACTITIONERS AND PREVENTIVE MEDICINE.

SIR,—Those who are desirous of seeing medical practice freed, as far as possible, from its present anomalies and defects, and its dignity and usefulness correspondingly enhanced, will perhaps be prompted to give their wishes a practical shape by the perusal of the following card, which I have had printed for the admission of the public to the scheme. It is the result of long and careful deliberation, in which, I believe, all the *pros* and *cons* have been considered; but if the readers of the JOURNAL have any suggestions to make on this practical aspect of the question, I shall be glad to receive them.

"Medical Providence, for the Prevention and more Effective Treatment of Disease.—A system of Medical Practice whereby attendance and advice are always available, in health or in sickness, for a definite annual sum. Annual fees: from 10s. to 40s. for each individual, according to circumstances. Extras excepted. Medicine included or not included, according to agreement. The extras are:—Midwifery, fractures, dislocations, serious injuries resulting from accident, and surgical operation involving much trouble or requiring special skill. Every person residing at a greater distance than one mile from the house of the medical attendant will be expected to pay 1s. per annum for every mile, or fraction of a mile, of total distance. Fees to be paid quarterly or half-yearly in advance. Extras to be paid for according to agreement, either as per account, in the usual way, or by voluntary contribution, as the patient values the services rendered, or conscientiously feels he can afford to pay. Clients will be visited as often as may be necessary to afford the full advantages of the scheme, and they will be at liberty to come to the medical attendant for information and advice on all matters pertaining to the health, whenever occasion may require. No person can be admitted to the scheme who is ill at the time of application, except on payment of a whole or half year's fee, according to the case, in addition to the ordinary subscription. Some cases of established chronic ailment, especially in advanced life, will be liable to a higher fee. A reduction is made in the rates for more than four members of one family residing together. The fees agreed on are subject to annual revision."

These provisions are, I trust, sufficiently elastic to suit a variety of circumstances. To those who have read my previous description of the system, their advantages will, I think, be obvious, while the pecuniary results will be found to be fully equal to those of the still surviving professional custom of a less enlightened age.

It is so pertinent to my subject, that I cannot conclude without asking you to let me protest against the growing tendency of members of our profession to give preventive advice in season and out of season, asked or unasked, without fee or reward. I do not wish them to keep silence as to prevention. To teach the people how to avoid disease is, I maintain, not only a function, but the highest and most useful function of our profession. Is it not, therefore, the most worthy of reward? The principle by which a man is paid in an inverse ratio to his usefulness is one which it would be hard to vindicate either on public or professional grounds. It would surely be well to remember that we have a duty to ourselves and to our medical brethren as well as to the public; and I submit that the free lectures now being given by medical men in various places, the professional letters to the newspapers, and the frequent paragraphs in a medical contemporary, all intended to convey instruction to the public on the preservation of health, are a distinct infringement of that duty. The prevention of disease is a natural development of medical science, and the spread of knowledge on the subject is one of the necessities of the times. We must not, therefore, try to limit our exertions in this direction. Let us rather increase them; but let us see that we are paid for them. All this is provided for in a comprehensive manner by the system I am advocating, and by no other means with which I am acquainted.—I am, etc.,

W. F. PHILLIPS.

St. Mary Bourne, Andover, Hants, October 3rd, 1881.

SWEATY HANDS.—I shall be obliged to anyone who will tell what to do for a man whose hands (palms) sweat so much that he is unfitted for household service.

WILLIAM OGLE, Derby.

MEDICAL OFFICERS TO EMIGRATION STEAMSHIPS.

SIR,—The Board of Trade, in its wisdom, has very properly thought fit to appropriate the medical officers attached to the various emigration steamships sailing from ports in the United Kingdom, and no one can hold such a position without a formal appointment, signed by an official of the Board. Is it too much to ask the Board to look a little after its own, and to instruct its medical inspectors to report confidentially upon the accommodation, or lack of accommodation, afforded by the steamship companies generally to their medical officers? It may surprise the Board, as it did myself, to discover that the cabin assigned to the surgeon is, in most cases, inferior to the one given to the chief steward, and is almost always as inadequate to his professional requirements as it is unfit for an official weighted with the gravest responsibilities. I inclose my name and address.—Your obedient servant,

A PASSENGER.

Turnham Green, November 12th, 1881.

SEA-SICKNESS.

SIR,—As attention has recently been called to sea-sickness and its remedies in your correspondence columns, allow me space for a few observations on the theory of it.

1. Anæmia of the brain is unquestionably a cause of vertigo, nausea, and vomiting. Witness the occurrence of all three in hæmorrhage, and, in weakly habits, when the erect position is suddenly assumed in the morning.

2. Where the anæmia of the brain is not the result of a physical cause such as hæmorrhage or position, irritation of the vagus is the great means of producing it, partly by inhibiting the heart, partly by the depressor branch causing dilatation of the splanchnic arteries, and so withdrawing blood from the brain to the abdominal viscera.

3. The phenomena of sea-sickness are produced by all motions which imitate the sensations we have, when sick and giddy, from some cause having its seat within the body. The sensation of the floor sinking beneath the feet, and the rising and falling of the walls of the room, or their spinning round, are especially connected with giddiness and nausea; and these are the motions which are most liable to produce sea-sickness. It is not necessary that there should be any descent of the body to produce nausea. I once got inside a water-wheel, and set it in motion by walking up the buckets. Of course, I did not change my position, but my standing was continually going away from under my feet, and the wheel was whirling round me as the room appears to do in giddiness. I found that, in a very short time, intense nausea was produced.

4. I conclude that sea-sickness is a case of the "association of sensations". We associate the sensation that the walls of the room or other ordinarily fixed objects are moving, with the sensation of sickness; and, when the walls actually do move, the sensation of sickness is produced. I believe that it is the vagus which is thus sympathetically irritated; and that it is the nerve of sea-sickness, just as it is the

nerve of epilepsy. In the latter case, the inhibition of the heart's action is complete, and a convulsion fit is produced.

5. The rational treatment, then, of sea-sickness will be to lower the inhibitory action of the vagus by the bromides and atropia, and, at the same time, to get the association between the motion of surrounding bodies and the sensation of sickness broken partly by an effort of the will, but still more by having the mind directed to other objects.—Yours, etc.,

A. W. W.

SIR,—Can any of your members kindly recommend me a good Protestant school in France, tolerably easy of access, for a boy about sixteen, where he could learn the language thoroughly? If they could state terms I should feel greatly obliged.—I am, yours truly,

A MEMBER.

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BOOKS, ETC., RECEIVED.

The Student's Hand-Book of Chemistry. By H. L. Greville, F.I.C., F.C.S. Edinburgh; E. and S. Livingstone. 1881.

Perfect Way of Diet. By A. Kingsford. London: Kegan Paul and Co. 1881.

Zoological Atlas. By D. McAlpine. N. and A. K. Johnstone. 1881.

Lectures on Diseases of the Chest. By E. F. Ingal, A.M., M.D. London: Sampson Low and Co. 1881.

A Manual of Histology. By T. E. Satterthwaite, M.D. London: Sampson Low and Co. 1881.

Lectures on the Physical Examination of the Mouth and Throat, with an Appendix of Cases. By G. V. Poore, M.D., F.R.C.P. London: J. E. Adlard. 1881.

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