

REPORT ON UNWHOLESOME MEAT.

THE Metropolitan Association of Medical Officers of Health, at their monthly meeting in June, appointed a committee, consisting of Dr. Letheby, Dr. R. D. Thomson, Dr. Barnes, Mr. Liddle, Dr. Gibbon, and Dr. Druitt, with Dr. Challice as Chairman, to inquire into the facts relating to the alleged sale of diseased and unwholesome meat in the metropolis, as well as the ill effects arising therefrom, and the best mode of prevention. The report was read at the general meeting of the Association, held at the Board of Health, on the 6th of August, and ordered to be printed for the use of the members of the Association, and for the guidance of the inspectors of nuisances in carrying out that section of the Nuisances Removal Act which relates to diseased or unwholesome food. The following extract relates to the means of detecting unwholesome meat:—

"In order to give a useful and practical turn to their labours, your committee, on one occasion, invited the inspectors of nuisances out of their several districts to meet Mr. Fisher and Mr. Pocklington at Dr. Dundas Thomson's rooms in St. Thomas's Hospital, in order that the appearances and characters of diseased meat might be explained to them from actual specimens, and that thus they might be prepared for the more efficient discharge of their duties. Your committee then endeavoured to draw up a short summary of the marks by which unwholesome meat may be known, in plain, unprofessional language, for the use of inspectors of nuisances, as follows:—The chief marks which show that meat is unwholesome are, in the first place, its colour, which is generally either dingy or too bright. Secondly, there is the smell, which is peculiarly sour and sickening even when such meat is fresh, and very different from the smell of good meat when tainted through overkeeping. In the next place, there is a sign which is considered of more value than any other. It is a peculiar and decided wetness of the meat, which is also soft, flabby, and not set. Moreover, it should be noticed that there is often a large quantity of blood in the veins, which has curdled there, and not run out as it does when sound beasts are killed. Or, if there are no clots of blood, there will be very likely shreds and flakes of white matter in the larger veins, particularly in the liver. Then, there is a whole set of signs which show that an animal, before being killed, was greatly out of condition; such as a pale bloodless eye, a paleness of the "bark" of sheep, and unnatural whiteness of the flesh, which are often seen in sheep which have the rot. Want of fat, and especially of the suet about the kidneys, in place of which a watery flabby stuff is sometimes found, wasting of the fleshy part of the meat, and a watery jelly-like state of the tissue which lies between the muscles, insomuch that drops of water may run out when it is cut across, are other decided signs. It is to be remarked, that drovers are said sometimes to strike heavy blows on the eye to hide the pale look which arises from wasting disease. Again, there are some signs of special disease. Thus, when cattle died of pleuropneumonia, or lung disease, the insides of the ribs will usually be found to be furred up with a quantity of white curdy matter (pleuritic adhesions); and the same is found inside the flanks when beasts have died of inflammation of the bowels. In these cases, the natural smooth glistening surface of the membrane which lines the ribs and flanks is lost. One thing to be especially looked for is the little bladders among the flesh of pigs, which constitute the disease known as measles; and similar things in the liver of sheep which have the rot. Experienced butchers are said to know by the smell of meat whether the beast had certain medicines given to it before being killed. The above are the chief signs of unwholesome meat; of course they will vary with circumstances—for one animal may be killed at the very beginning of an acute disease, another after it has undergone considerable wasting, and a third may have been merely killed for appearance's sake, just before it would have died of itself."

GREAT NORTHERN INFIRMARY. An institution of the above name has been opened lately at King's Cross—a neighbourhood where especially it was needed. The number of new patients since the day of opening, June 30th, to the present date, are—out-patients, 1,427; in-patients, 9; the daily attendance averages 100. Attendance is given every day in the week at stated hours, besides which, urgent cases are seen at any hour, day or night. A maternity charity is attached to the institution, for the delivery of poor married women at their own homes.

THE CHOLERA IN MADEIRA. The following is an extract from a letter dated Saturday, Aug. 2, 1856; "The cholera prevails greatly, and seems likely to spread to all parts. We hear of it at Puerta do Pargo, and it is very bad at Machico. The Portuguese are great alarmists, and many of them, no doubt, have frightened themselves to death; but, on the other hand, it makes them more energetic in adopting sanitary measures. The Governor has shown the greatest good sense in everything he has done, and goes at all hours of the day and night to the hospital, and has increased the staff of nurses and thought of everything needful; but he cannot command a supply of drugs, and I am sorry to say these are beginning to fail. One chemist has shut up shop, and the crowd is so great about Mauricio's that people have to wait from three to five hours for their turn. Most of the *villões* (country people), however, provided themselves with *pingoes* (drops), on the first alarm, so they are able to take or give a dose when seized. The disease has not yet penetrated to the Corral, and, when I saw Vitturio, he told me that all his family smelt the 'pingoes' every morning, and so kept off the *doença* (disease). It is only strong camphorated spirit that has been given by the *Administradores dos Conselhos*; but we depend principally on the Glasgow practice of laudanum, essence of peppermint, and brandy. I am sorry to say that when the attack is subdued the danger is not over, as many die in the stage of secondary fever. There is no scarcity of food in the island, except meat, as the *villões* don't like to bring their cattle to town. But the supply has never failed, only been less abundant, and the soup kitchens in Funchal (S. Francisco) and Camacha are always provided. 5 P. M. The new cases are much fewer to-day, but the deaths are many. Yesterday there were 116 buried in Funchal Cemetery—more in proportion to the population than 1,900 a day in Naples, which was thought a great many. . . Sunday, Aug. 3. . . The worst seems past. . . another mercy is that children seem much less liable to it than grown persons. . . No English person has been attacked by cholera. . . It is curious that the troops, who are said to have brought the disease, are the only portion of the population who are perfectly free from it. About seven cases occurred within two days of their landing, and since that there have been none."

TO CORRESPONDENTS.

LETTERS and other COMMUNICATIONS for the JOURNAL should be directed to the private address of the Editor, 39, Curzon Street, May Fair.

Members should remember that corrections for the current week's JOURNAL should not arrive later than Wednesday.

TO CONTRIBUTORS. The Editor would feel glad if Members of the Association and others, would cooperate with him in establishing as a rule, that in future no paper for publication shall exceed two pages of the Journal in length. If the writers of long communications knew as well as the Editor does, that lengthy papers always deter the reader from commencing them, this great evil would never arise. Brevity is the soul of medical writing—still more than of wit.

Communications have been received from:—DR. T. MOFFAT; MR. J. JONES (Derby); MR. M. L. HUSSEY; DR. KIDD; MR. PYE CHAYASSE; MR. SANDS COX; DR. D. MACKINDER; DR. G. S. JENKS; MR. J. MARTIN; MR. G. M. HUMPHRY; MR. W. B. KESTEVEN; MR. E. BARNES WILSON; DR. DAVY; DR. C. H. JONES; DR. ROUTE; MR. J. Z. LAURENCE; MR. T. HOLMES; MR. G. POUND; DR. JOHN R. NICHOLSON; MR. T. SYMPSON; MR. JOSEPH HINTON; and MR. J. SEATON SMYTH.

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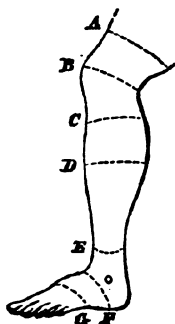
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