

medical profession can assist in solving this soldier's question of an adequate and efficient recruit supply beyond what is already well known. The causes which determine the physical and moral decay of humanity and the conditions which are illustrated in the recruiting offices are already apparent, and granting that the necessities are again set forth and right action taken thereon it cannot be supposed that the results can have any appreciable influence on recruit supply, it remaining in its present narrow limits, within the present generation. Meanwhile the army wants are present and urgent and what the recruiting statistics and the accumulated knowledge suggest is that the War Office, facing the facts, should place before the country the necessity of broadening and improving the recruiting area, so making the army a true representation of our race and drawing the recruits from those physical strata of our community fitted to bear the stress of military service; in other words, that the patriotic duty of defending our country should be generally borne and not relegated to sections of which the larger number of their components are from physical and other reasons unfitted to have such a national and Imperial responsibility placed upon them.

I am, Sirs, yours faithfully,

FRANCIS H. WELCH, F.R.C.S. Eng.,

Surgeon-Colonel (retired), M.S.

Lee, Feb. 2nd, 1903.

THE SURGICAL TREATMENT OF RHEUMATIC FEVER.

To the Editors of THE LANCET.

SIRS,—I have read with considerable astonishment the medical treatment mentioned in an article on the Surgical Treatment of Rheumatic Fever by Dr. J. O'Connor in THE LANCET of Jan. 24th, p. 228, and I am still more astonished to see that in THE LANCET of a week later there is no word of comment on his methods. His surgery is no doubt above reproach, but I must crave a few lines to point out that one of the most powerful drugs in the Pharmacopœia suffers quite unmerited disgrace at his hands. In my work, "Uric Acid," published in 1892, I showed that salicylates cured arthritis by eliminating uric acid, and that there are certain conditions—e.g., heat and perspiration—in which they are no longer solvents of uric acid but become precipitants of it. Hence in these conditions they not only fail to do good but may even do great harm, and in the fifth edition of the above-mentioned book I record a good many cases to illustrate these points. In a word, alkali with heat and sudorifics is a solvent of uric acid, salicylate with cold is a solvent of uric acid, but salicylate with heat, sudorifics, and alkalies is not a solvent at all. Dr. O'Connor says: "I have no hesitation in stating that this patient's heart has been practically ruined through my delay in operating." This sounds to me very like the old cry of "there is nothing like leather," but in my opinion the heart was ruined by the use of a powerful drug in a manner in which it could not possibly do anything but harm. I can only ascribe this truly terrible, and I have good reason to believe not infrequent, result to the fact that the professional mind has been so completely given over to the hunting of microbes that it has almost entirely lost sight of the solubility of uric acid and the chemistry and physiology that condition this. If salicylates properly given fail to relieve the arthritis and bring the temperature to normal in from 24 to 36 hours the disease is not acute rheumatism and the drugs should be given up and then surgery or any other treatment has the field to itself. In my book previously referred to I have mentioned that it has even been proposed to call the arthritis met with in India something other than rheumatism because salicylates fail to relieve it. A quite rudimentary knowledge of the chemistry of salicylates in their relation to uric acid would demonstrate that salicylates in India are never solvents of uric acid unless the patient is in a freezing chamber and covered only by one sheet. My book has now been 11 years before the profession and yet these important facts are to-day almost unknown, and I hear of similar mistakes in the use of the salicylates not in one direction but in all directions. I beg to agree with Dr. F. P. Atkinson¹ that "the greatest friend of truth is time," but meanwhile heaven help the poor patients whose hearts are exposed to the dire effects of these drugs, so

powerful for good if given rightly but so powerful also for evil if given wrongly, and whose joints are to be exposed to the surgeon's knife because salicylates which could cure them easily in 36 hours are given under conditions which render all cure by them impossible.

I am, Sirs, yours faithfully,

ALEXANDER HAIG, M.A., M.D. Oxon., F.R.C.P. Lond.

Brook-street, W., Feb. 2nd, 1903.

CLEAN MILK v. BOILED MILK.

To the Editors of THE LANCET.

SIRS,—Dr. Clement Dukes in THE LANCET of Jan. 31st, p. 331, draws attention to the impairment of the nutritive value of milk by boiling it and its effects on those children who are brought up on it. I wish to indorse his views. So frequently have I been convinced that boiled, sterilised, pasteurised milks do not satisfy or nourish all children that in my practice I have for some time now advised bottle-fed children who showed signs of malnutrition, loss of weight, constipation, and pale flabby tissues to be given unprepared milk, and I can recall no case in which the result was not entirely satisfactory. All the children were those of well-to-do parents and had the advantage of drinking milk obtained from the best dairies in London where every precaution is taken to prevent the contamination of the milk. Still there existed the risk of these children drinking some disease-producing milk and if this can be prevented by the rapid cooling process advocated in America it behoves every practitioner to use his efforts to bring this into general use. A certain proportion of children who are brought up on boiled milk do certainly thrive, but it is necessary to supplement the milk by the addition of broth or raw meat-juice, &c., at a much earlier period than is required for those children fed on unboiled milk.

I am, Sirs, yours faithfully,

Brechin-place, S.W., Feb. 2nd, 1903.

F. ASHTON WARNER.

THE ABUSE OF MEDICAL CHARITY.

To the Editors of THE LANCET.

SIRS,—My attention has been drawn to an article under the above heading in THE LANCET of Jan. 31st, p. 314, mainly based upon some statements in a lecture delivered by Mr. F. H. Bentham at the Bradford Liberal Club a few weeks since referring to the alleged neglect of inquiry as to the circumstances of the parents of children admitted into our hospital; and whilst I entirely exonerate Mr. Bentham from any intention to misrepresent the case it will be seen from the following extract from the annual report of the hospital submitted to the meeting of the governors held on Jan. 30th that in his remarks as quoted by you he has unintentionally done so:—

Very many of the cases treated at the hospital are received on the recommendation of the medical gentlemen in the town, who naturally satisfy themselves that the position of the families is such as to justify an appeal to the charity, but the bulk of the in-patients are drafted into the hospital by the honorary medical staff from the out-patients' department, after careful examination and inquiry as to the circumstances of each family, and when such circumstances are found not to justify admission patients are invariably refused. A further inquiry is subsequently made by the house committee and, if deemed necessary, other investigations are instituted in the case of all in-patients, and by these means the risk of abuse of the charity is greatly diminished and the board is satisfied that little abuse, if any, prevails.

I am, Sirs, yours faithfully,

HERBERT J. JEFFERY,

Hon. Sec. Bradford Children's Hospital.

Bradford, Feb. 3rd, 1903.

THE TRAINING OF GYNÆOLOGICAL AND MONTHLY NURSES.

To the Editors of THE LANCET.

SIRS,—We are directed by the council of the British Gynæcological Society to request the favour of your insertion of the following:—

It is generally conceded that the present condition of the nursing world is in many respects unsatisfactory. There is apparently neither any accepted standard nor system of education, nor any reliable method of distinguishing well-trained from untrained nurses. Women are now able to term themselves "nurses," and thus may obtain most responsible work in that capacity, when their education and training have been quite insufficient to qualify them to

¹ THE LANCET, Jan. 31st, 1903, p. 343.

undertake it. There is no means by which trained nurses can be controlled or of freeing their ranks from those who prove themselves dangerous to the public and discreditable to their calling.

The special attention of the Gynæcological Society has been lately drawn to the nursing question. Its Fellows employ nurses chiefly for maternity or gynæcological cases, and constant complaints are made of the unsatisfactory character of the present education of such nurses. A most careful investigation of the whole subject on behalf of our society has proved, *inter alia*, that a great number of nurses pass through the larger general hospitals, and in still greater proportion through the smaller, without having had any training in the nursing of gynæcological patients, while that of monthly nurses varies from six weeks to three months in duration and is quite inadequate for the responsible duties they are called upon to discharge. For these reasons, the Gynæcological Society has resolved to move in the direction of establishing such examination tests as will have the effect of bringing about those improvements which are obviously necessary in the education and supervision of gynæcological and monthly nurses. The society is strengthened in this determination by the excellent results achieved by the Obstetrical Society of London in the elevation of the education of midwives and by the Medico-Psychological Association in the improvement of the training and work of asylum nurses and attendants, in consequence of the systems of examinations and certificates instituted and carried on by those two societies respectively.

The British Gynæcological Society has therefore decided at once to institute examinations and to grant certificates in monthly and gynæcological nursing. The three cardinal principles which will be enforced are:—1. That every nurse certificated by the society must work only and entirely under the directions of qualified medical practitioners. 2. That no woman will be eligible for the society's examination unless she has had sufficient training both in general and special nursing. 3. That the society's certificate will be withdrawn from any nurse who at any future time proves to be unworthy of professional trust.

Medical practitioners employing such certificated nurses will thus not only have a guarantee that they are of good character and competent to perform the duties required of them, but also that they are under professional control and subject to rules of professional ethics which, it would seem, nurses generally are at present free to disregard. A representative board of examiners has been appointed and the examinations of the society will be held in future once in every quarter.—We are, Sirs, your obedient servants,

HEYWOOD SMITH, President.
J. H. SWANTON, } Honorary
S. JERVOIS AARONS, } Secretaries.

Hanover-square, W., Jan. 31st, 1903.

MEDICAL CORONERS AND THE APPOINTMENT OF THEIR DEPUTIES.

To the Editors of THE LANCET.

SIRS,—For many years you have advocated the appointment of medical coroners. You have done so for the reason that whilst the law in connexion with coroners' inquests can be, and is, learnt readily by an educated man, the medical details in such inquiries cannot so easily be acquired without a previous medical training. Medical candidates for vacant appointments as coroners have been successful owing to the large measure of support which you and the editors of other medical journals have given them. One would naturally imagine, therefore, that medical coroners in making their appointments of deputies would continue to support the principle that a knowledge of medicine is an essential to the office of coroner. What do we find, however, in London? To quote instances, Dr. G. Danford Thomas appoints Mr. Schröder and Mr. Danford Thomas. Neither of these has any medical training. Dr. F. J. Waldo also appoints as his deputy Mr. Danford Thomas. Strange to say, Mr. Troutbeck, a lawyer, appoints a medical practitioner and it is greatly to his credit that he does so. I do not question the right of these medical coroners to appoint whom they like and do not question the capacity of the "legal" deputies to carry out their duties faithfully and honestly. I merely call attention to the anomaly that medical coroners do not carry out in the appointment of

their deputies the principle upon which they received the support of the medical press and their professional colleagues when they themselves were candidates for the office of coroner. Is this being true to their profession? Is it not likely to influence the county councils in the future to appoint other than members of the medical profession and to cause them to consider that medical knowledge is not an essential in making such appointments?

I am, Sirs, yours faithfully,

A MEDICAL DEPUTY TO A MEDICAL CORONER.

Feb. 4th, 1903.

THE MEDICAL EXAMINATION OF LUNATICS IN WORKHOUSES.

To the Editors of THE LANCET.

SIRS,—*Apropos* of your leading article in THE LANCET of Jan. 24th, p. 249, on the Medical Examination of Lunatics in Workhouses a recent experience of mine may be of interest. A working man patient of mine became maniacal and on my advice the relatives informed the relieving officer. After some delay I received from him a scrap of paper on which he had written a form of certificate to the effect that ——— was a person who should be placed under care and control. The relatives informed me that if I signed this the relieving officer would come with two assistants and remove him to the workhouse, presumably by force if necessary. I naturally declined to sign any such document and sent a message to the effect that if he wished me to certify the man a lunatic I would do so, but only on the proper form. This eventually he sent and the man was taken before a magistrate and certified in the usual manner. On the relieving officer coming to pay the fee he expressed surprise at my objection to sign his form and told me that had he not been pressed for time he would have informed the poor-law medical officer who always signed a form in this manner and sent the patient to the workhouse where the proper certificate was filled up by the infirmary medical officer who also pocketed the fee. I found his statement to be correct on inquiry of the poor-law medical officer who seemed to think that he was unfairly used but had obeyed the instructions of the guardians. My contention is that the scrap of paper in question is either for the time being a legal certificate of insanity—in which case surely the man who takes the responsibility of signing it should receive what fee there is—or that it is a valueless expression of opinion and the relieving officer who forcibly removes a man from home on the strength of such a document is acting in an illegal manner.

I am, Sirs, yours faithfully,

Feb. 3rd, 1903.

M D. LOND.

THE SUPERVISION OF NURSING HOMES.

To the Editors of THE LANCET.

SIRS,—In view of the scandals that have recently been made public about nursing homes I should be very glad to know whether the medical profession as a body indorses your views as to the desirability of registration and inspection and if there is any chance of active measures being taken to secure legislation on the subject. My own idea is that all nursing homes should be placed under the supervision of the county or borough medical officers of health, though I fear that hardworked body of gentlemen will not support my suggestion. Inspection could be limited to the food and sanitary condition of the house so long as the patients were under constant professional care. For chronic cases some such arrangement as obtains for the medical supervision of certified mental cases could be legally enacted.

I am, Sirs, yours faithfully,

MATRON OF SUBURBAN NURSING HOME.

Jan. 24th, 1903.

THE UNIVERSITY OF LONDON AND THE ENGLISH ROYAL COLLEGES OF PHYSICIANS AND SURGEONS.

To the Editors of THE LANCET.

SIRS,—Mr. F. C. Langford in his letter in THE LANCET of Nov. 22nd, 1902, p. 1424, wanders off the subject matter to indulge in an unnecessary demonstration of