

# THE AMŒBA COLI: ITS RELATION TO DYSENTERY AND TROPICAL SUPPURATIVE HEPATITIS.

In the *Indian Medical Gazette*, for November, 1892, SURGEON-CAPTAIN PATRICK HEHIR, of Hyderabad, gives the results of some of his studies on the organisms found in tropical dysentery and hepatic abscess. He is particularly fortunate in being located in a region in which these affections are very prevalent. As causes of the epidemic of dysentery which he observed he mentions 1. The amœba coli; 2. Malaria; 3. Exposure to sudden vicissitudes of temperature; 4. Putrefaction of animal matter, especially that of human ordure; 5. Infection from other cases of dysentery; 6. Mechanical and other engorgement; and 8, *Bacillus dysentericus*. In the evacuation of dysenteric patients the amœba coli was found frequently, but not invariably; and it was also found in other bowel affections, as the mucus enteritis of infants, simple diarrhœa, and in some cases of catarrhal inflammation of the rectum, due to engorgement. The *bacillus dysentericus* found by HEHIR, and considered pathogenic, was found associated with the amœba coli, and is described as a short, straight bacillus, usually of a length about equal to one-third the diameter of a red blood corpuscle, with rounded ends sometimes jointed, rarely curved. These bacilli were sometimes present in vast numbers. They were sometimes found in the substance of an amœba coli, and when lying in the vacuoles of the amœba they could be easily seen. They stained well with methyl blue. No culture experiments with this microbe are recorded. This bacilli was often found in the pus of liver abscesses; but in four cases in which he was able to demonstrate the amœba coli in aspirated peritoneal fluid, HEHIR failed to find his *bacillus dysentericus*.

Since he has succeeded in demonstrating the amœba coli in the peritoneal effusion of suppurative hepatitis following dysentery; HEHIR is strongly in favor of the views of COUNCILMAN, who maintains that one mode of liver infection from dysentery is brought about by the amœba passing through the walls of the diseased bowel, and across the peritoneal cavity to the liver. In fact, he believes that this direct infection is the chief importance in the production of liver abscess of amœbic dysentery, rather than the infection by means of emboli along the blood or lymph streams.

## THE PERSONNEL OF STATE MEDICAL EXAMINING BOARDS.

It is with pleasure that we notice the attempt at medical legislation in the different States and that the excellent Minnesota law is taken as the basis, as it has proven itself exceptionally effective.

Several legislatures have before them bills closely following the lines mapped out in Minnesota. We

read with regret however, that there is much opposition in certain quarters in reference to the composition of the board. After much thoughtful consideration, at the time of the passage of the Minnesota statute, it was deemed expedient to make the board entirely free from the influence of any medical school. It, therefore, made any member of a medical faculty ineligible to membership on the Board of Medical Examiners. Time has proven the wisdom of the framers of the law, in insisting on this provision. We would strongly urge that this provision be included in all the statutes, and trust that in further reflection the opposition to this proviso will cease.

It is undeniable that a board with no member of any medical faculty should be non-partisan. There can be no reason for a bias in favor of any school. Such a board will also have less occasion for friction. The profession at large will have more confidence in such a board and last but not least the general public will have less occasion for twitting us with attempting class legislation if they can be assured that it is wholly non-partisan.

The membership of these boards is of vital importance to the successful working of the law, secondary only to the provisions of the law itself. It should be a matter of profound regret, if, after success in the passage of a law, its provisions should be partially nullified by a non-harmonious board.

A wholly disinterested board except as to the personal qualifications of each candidate—a board which has no interest in the record made by the graduates of any particular school or medical college—such a board, we maintain is a desideratum. A board constituted in any other manner, we fear, will jeopardize success. The more one studies the question, the more confident one becomes, that the greatest factor in the successful execution of these medical laws is the entire divorcing of Examining Boards from any and all medical schools.

PAN-AMERICAN MEDICAL CONGRESS, SECTION OF MILITARY MEDICINE AND SURGERY.—The following gentlemen have been duly appointed members of the Advisory Council of this Section: Col. Louis Read, M.D., Surgeon-General N. G., Pa.; Newton L. Bates, M.D., Medical Director U. S. N.; J. H. Tryon, M.D., Medical Inspector U. S. N.; Lieut.-Col. Eustathius Chancellor, M.D., Medical Director N. G., Mo.; Brvt Lieut.-Col. A. A. Woodhull, M.D., Surgeon U. S. A.; Major Jos. H. Corson, M.D., Surgeon U. S. A.; Major Geo. Henderson, M.D., Medical Director N. G., D. C.; C. N. Hoagland, M.D. Ex-Surgeon Ohio Vols.; Bedford Brown, M.D., Ex-Surgeon C. S. A.; H. C. Goodman, M.D., Ex-Surgeon U. S. Vols.; Melancthon Storrs, M.D., Ex-Surgeon Conn. Vols.; O. D. Ball, M.D., Pension Ex-Surgeon, Albany, N. Y.; Capt. H. O. Perley, M.D., Asst. Surgeon U. S. A.

GEO. M. STERNBERG,  
Deputy Surgeon-General U. S. A., Pres. of Section.

A BOARD of officers will be convened at Washington, March 30, 1893, for the purpose of examining applicants for admission to the grade of Assistant Surgeon in the U. S. Marine-Hospital Service.

Candidates must be between twenty-one and thirty years of age, graduates of a respectable medical college, and must furnish testimonials from responsible persons as to character.

The following is the usual order of the examination: 1, physical; 2, written; 3, oral; 4, clinical.

In addition to the physical examination candidates are required to certify that they believe themselves free from any ailment which would disqualify them for service in any climate.

The examinations are chiefly in writing, and begin with a short autobiography by the candidate. The remainder of the written exercise consists in examination on the various branches of medicine, surgery and hygiene.

The oral examination includes subjects of preliminary education, history, literature, and natural sciences.

The clinical examination is conducted at a hospital, and where practicable candidates are required to perform surgical operations on the cadaver.

Successful candidates will be numbered according to their attainments on examination, and will be commissioned in the same order, as vacancies occur.

Upon appointment the young officers are as a rule first assigned to duty at one of the large marine-hospitals, as at Boston, New York, New Orleans, Chicago or San Francisco.

After four years' service, Assistant Surgeons are entitled to examination for promotion to the grade of Passed Assistant Surgeon.

Promotion to the grade of Surgeon is made according to seniority, and after due examination as vacancies occur in that grade. Assistant Surgeons receive sixteen hundred dollars, Passed Assistant Surgeons eighteen hundred dollars, and Surgeons twenty-five hundred dollars a year. When quarters are not provided, commutation at the rate of thirty, forty, or fifty dollars a month, according to grade, is allowed.

All grades above that of Assistant Surgeon receive longevity pay, 10 per centum in addition to the regular salary for every five years' service up to 40 per centum after twenty years' service.

The tenure of office is permanent. Officers traveling under orders are allowed actual expenses. For further information, or for invitation to appear before the board of examiners, address:

WALTER WYMAN,

Supervising Surgeon-General,

U. S. Marine-Hospital Service, Washington, D. C.

## GERMANY AND THE PAN-AMERICAN MEDICAL CONGRESS.

AN OPEN LETTER FROM PROFESSOR CZERNY, OF HEIDELBERG, AND REPLY BY SECRETARY-GENERAL REED.

(Translated from *Deutsche Medicinische Wochenschrift*, Jan. 12, 1893, p. 47.)

### AN OPEN LETTER

TO CLAUDIUS H. MASTIN, M.D., LL.D., Mobile, Ala., President of the American Surgical Association, in reference to the Pan-American Medical Congress:

*Honored Sir and Colleague*.—You were kind enough to extend to me, December 3, 1892, a personal invitation to attend the Pan-American Medical Congress, to be held at Washington, September 5 to 8, 1893. According to the preliminary announcement, and to your communications, the Congress, in connection with the Columbian exposition at Chicago, will offer so many attractions that I exceedingly regret not to be able to accept so amiable an invitation extended to me by one of the most prominent members of the body of American physicians.

As the reasons which prevent me from attending might be of interest to the German physicians, you will certainly pardon my desire to make these reasons more generally known in this manner.

At the first glance, one might have been impressed with the idea that the Pan-American Congress was intended to be a rival to the long-prepared International Medical Congress, which is to be held at Rome, from September 24 to October 1, 1893. However, as at the former international expositions, almost always contemporary medical and scientific congresses took place, it appears but just that the American physicians should also avail themselves of the opportunity of meeting on their own continent. But since the physicians of all civilized countries are united in the humane endeavor to rather mitigate than to increase difficulties between nations and continents, where such exist, I, therefore, think any intention to injure the International Congress by the Pan-American, must be entirely excluded.

Perhaps the meeting of the International Congress might be postponed eight days, which, for several reasons, would be more desirable. With earnest intentions and favorable weather, it ought to be possible to make the trip, with the modern fast steamers, from Washington to Rome, from September 9 to September 23. *It would not be a bad idea if those members who desire to make the journey would do so jointly, directly from Washington to Rome, on a steamer chartered expressly for that purpose*, in order to bring the greetings of the rising capital of the promising West to the old Metropolis of European civilization.

A more serious consideration to visit the Pan-American Congress is entertained by me regarding the question of languages. In section 9 of your programme it says: "The language of the Congress shall be Spanish, French, Portuguese and English." The German language is probably excluded because it is nowhere official language in America. If this consideration should have prevailed, then the Dutch and Danish languages ought to have been permitted, since these languages are in official use in America. Be this as it may, *I do not think that the physicians of Germany can take part in the proceedings of the Pan-American Medical Congress, if they are not permitted to read their papers in German*, while any other language but the English is admitted at the Congress. It must be remembered that also at the International Congress "Remarks are permitted in any other language, if any of the members are willing to translate them into one of the four official languages."

I shall not mention the work done continually for the science of medicine in the German language, but I desire to refer to the great number of prominent American physicians who have received the best part of their education in German schools; and to the numerous German physicians who practice with success in America, and who have added so much to the great reputation in which American medical literature is at present held in the whole world. Indeed, I am inclined to believe that North and South American physicians will frequently be able to communicate with each other in the German language, learned by them in our universities. If I am not mistaken in this, I certainly think that the Executive Committee of the Pan-American Medical Congress should pass a resolution which would enable German physicians to visit the Congress, provided a participation on our part is at all desired.

I shall be exceedingly gratified if my suggestions should find favor on the other side of the ocean; and if I should be thus enabled, dear Sir and colleague, to personally enter into friendly relations with you in Washington.

With best wishes and compliments of the season, I am,

Yours respectfully,

DR. CZERNY,

Honorary Member of the American Surgical Association.  
HEIDELBERG, December 28, 1892.

(REPLY.)

THE PAN-AMERICAN MEDICAL CONGRESS,  
Office of the Secretary-General,  
311 Elm Street.

CINCINNATI, February 14, 1893.

PROFESSOR V. CZERNY, Heidelberg:

*My Dear Doctor*.—My distinguished colleague, Dr. C. H. Mastin, has referred to me for official reply your open letter addressed to him and published in the *Deutsche Medicinische Wochenschrift*, for January 12, of this year.

A careful reading of your valued communication leads me to the conclusion that you in common with other distinguished German *savants*, hesitate in accepting an invitation to attend the Pan-American Congress 1, because the