

ABUSES AT THE LONDON HOSPITALS.

[LETTER FROM DR. J. M. COLEY.]

To the Editor of THE LANCET.

SIR,—The abuses prevailing at the hospitals in London, in the appointment of the medical and surgical officers and the misapplication of the funds intended for charitable purposes, whereby injustice is inflicted upon the legitimate objects of charity, and injury on the medical practitioners in the metropolis, demand severe reprehension. The monopoly of hospital elections, and the intrigues exercised at these institutions, are so notorious, that all the appointments of physicians and surgeons are virtually decided upon before the vacancies are publicly made known, and the men thus selected to fill them are generally those who, by their inexperience or mediocrity of talent, are the least likely to discover the ignorance or endanger the popularity of their colleagues, or who have acquired the prejudices of a contracted education at the particular hospital or school to which they may expect, according to the present system of favouritism, to be attached. Thus honourable competition is stifled, and conventional errors, both in theory and practice, are adopted, and, like the laws of the Medes and Persians, unalterably perpetuated. The funds of these institutions, which should be confined exclusively to the relief of in-patients, are squandered upon all comers, who are admitted indiscriminately as *out-patients*, and placed under the treatment of young men having neither adequate experience nor practical knowledge. In consequence of this scandalous hospital poaching, the families of the labouring population and honest and often wealthy tradesmen are decoyed from the safer and more sedulous care of private practitioners of hard- and well-earned reputation, who are thus shamefully deprived of a portion of their practice and income, and expected at all times to be at the command of the deluded patients to rectify errors of treatment, and afford gratuitously attendance and medicines, for which, had they not been hospital patients, they would have been paid.

The speciality or empirical hospitals, too, which you have so forcibly exposed in your journal of Dec. 26th, and which have been forced into existence by interested parties, without any necessity, have, as may have been expected, neither added to the stock of science, nor produced any result to justify their establishment and support; and therefore all future attempts to delude the public, and degrade the high position which operative surgery has attained, should meet with universal disapprobation. On the subject of this ostentatious display of special excellence, by which *paying patients* are expected to be caught, like birds in a trap, the remark of Celsus, 2000 years ago, is not inapplicable:—"Ego eundem quidem hominem posse omnia ista præstare; atque, ubi se diviserunt, eum laudo qui quàm plurimum percipit."—A. C. Celsus de Re Medicâ. Lib. vii.

If the existing hospitals were thrown open to every qualified physician and surgeon, and the objects of charity were properly selected, they would be found sufficient for medical education and philanthropy; and the dispensaries, which are the most beneficent charities in London, might be so extended as to afford, under proper regulation, all the gratuitous attendance and advice required by *out-patients*, provided the medical officers were adequately remunerated and their number sufficiently extended by a judicious combination with the self-supporting system. Thus every well-educated practitioner (and everyone ought to be so) would have an opportunity of exercising his talents and receiving some recompence, of which the hospitals at present deprive him, and there would no longer exist any pretence for the governors of those institutions to weary the public, as they constantly do, by appeals for fresh funds to repair the waste of an expenditure needlessly incurred, to the injury of the medical profession. The multiplication of hospitals in London on the present system of private professional speculation and indiscriminate charity is becoming a serious evil, which ought to induce every philanthropist to pause, and reflect that in supporting an ostentatious charity, *freto all comers*, whether objects of charity or not, he is destroying that providence and honest self-support which should be encouraged, especially amongst the labouring classes, and robbing the members of a laborious and useful profession of that employment and reward to which an expensive education and their claims for professional occupation amongst three millions of metropolitan inhabitants naturally entitle them.

I have the honour to be, Sir, your obedient servant,

Euston-place, Euston-square,
Dec. 30th, 1857.

J. M. COLEY, M.D.

SPECIAL HOSPITALS.

[LETTER FROM DR. SAVAGE.]

To the Editor of THE LANCET.

SIR,—It is seldom worth while to take much heed of anonymous communications; they are generally violent and unjust. As, however, you vouch for the respectability of "A London Surgeon," some comment on his opinions on Special hospitals may not be without its advantages. Your correspondent is dead against such establishments. His convictions he gives unsparingly; his reasons for the most part he keeps to himself, perhaps not unwisely. But who is "A London Surgeon"? Is it permitted to premise with a little speculation as to the personal identity of our anonymous critic?

He is a Fossil possibly of the very old school. One or two of these can be seen every day at almost all the older hospitals. Fossil stereotyped his opinions years and years ago, and has ever since remained coldly obstructive to every kind of scientific development.

Perchance he is a type of the Mediæval by-gones. If so, less than twenty years ago he "enthusiastically devoted" himself to his "Christian work" in a neat advertisement, acknowledging the "honour put upon him," and having now at last realized the weak side of his position, he is spitefully sensitive about the sources of his disappointments.

Social problems press on incessantly to a natural solution—that is, things tend perpetually to right themselves. The diseases peculiar to women having as a rule been well snubbed at general hospitals, it comes about at last that they crowd upon special establishments. "Midwifery," said Professor Murphy scarcely a year ago, "is but the Cinderella of her sister sciences." It is far from improbable that "A London Surgeon" may be one of those whose prejudices, by helping to consign such a man as Professor Murphy and his patients to the outhouse, have done most to encourage the very institutions he comes forward to decry. Ask the College of Physicians how it treated professors of diseases of females twenty years ago. Even now, how many general hospitals provide decent and fitting opportunities for the scientific investigation of diseases peculiar to women? Can we find the name of a single general hospital surgeon on the list of those who within the last ten years have done anything of note for this class of maladies?

I believe there is no exact parallel in any metropolitan hospital to Boynton ward at St. Mary's, which singularly enough, however, although a part of a general hospital, furnishes not a few of the best possible arguments in favour of special ones. The medical world is aware that for some years past Mr. Baker Brown has dated his numerous records of female surgical diseases from Boynton ward. It is not for me to say whether Mr. Brown's average success has been greater than other surgeons', but it is not pretended at St. Mary's that it has been less; yet for some time past Mr. Brown has had to stand alone, his colleagues pointedly abstaining from sharing in his operations. I only wish to dwell on the æsthetics of these events so far as they may explain any of the circumstances leading naturally, and as a matter of course, to the establishment of a Special hospital.

And why attempt to revive the recollection of the process of recruiting the medical staff of a general hospital? In Fossil's time, it was quietly recruited from some remove of the old gentleman's connexions. In the mediæval period the young gentlemen were numerous enough for a family contest; and up to the present hour hospital elections are rarely anything else than some form of corruption. What a spectacle for the saints, if it could only be shown that the strife which too often turns brotherly love into the bitterest hatred is all for the sake of the afflicted, or, in the terms of the aforesaid mediæval form of thanksgiving, for the self-denying opportunity of devoting oneself entirely to the "sacred trust"! Will "A London Surgeon" go the length of assuring us he had no "ulterior views when he fought his way to his post"? Until he does, it would be simply idle to contrast his objects with the objects of those who may seek to become the medical officers of special institutions.

What has been said about special hospitals for women applies equally to other special institutions. In the list of gentlemen who interest themselves in the special afflictions of their fellow-creatures, "A London Surgeon" will find such names as Lo-cock, Robert Lee, and Bowman. "If you must have special hospitals," says he, "beware how you provide them with medical officers." An hospital career must have a beginning, and every special institution commences with a consulting staff of note and well-tried capacity; for the rest, it is soon much better off than

any general institution "A London Surgeon could name." Why, the vagrant medical talent going astray in consequence of the ordinary exclusive policy of general hospitals is ample for ten times the number, and obviously far more promising than that developed in any of the minor family preserves.

A word on what has been done, and who have done it, in regard to diseases of women, and I take leave of the subject. Here, fortunately, an indisputable authority is at hand, so as to render any further rejoinder on this head superfluous. Dr. Copland's article, "Uterus," in the last part of his "Dictionary of Medicine," is chiefly founded on the writings of Bennet, Whitehead, and Kiwisch. I have sought in it long and most carefully, but in vain, for the least allusion to any works on female surgical disease by any of the genus, "London Surgeon."

I am, Sir, your obedient servant,

HENRY SAVAGE, M.D.

Senior Physician to the Samaritan Hospital for Women.

Gloucester-place, Portman-square, Jan. 1858.

MULTIPLICATION OF MEDICAL CHARITIES.

"Upwards of £1,000,000 of money is spent in the metropolis in the gratuitous bestowal of medical aid, and nearly 700,000 persons—one-tenth of the whole population—receive medical service for which they do not pay."—THE LANCET, Dec. 5th, p. 535.

To the Editor of THE LANCET.

SIR,—The present position of the medical charities of London, on which I have already addressed you (THE LANCET, Dec. 19th, 1857, p. 637), is ill-defined and unsound. Many of the large hospitals are in pecuniary difficulties, the contributions which ought to come to them being diverted aside by a host of minor institutions of recent origin, not always aimed at the most pressing necessities of the people. The advertisements of these so-called charities jostle each other in the public prints; their notices soliciting the attendance of patients court the eye like the announcements of a trade; their circulars pour in like those of tradesmen touting for custom; and their claims are put forward with a pertinacity which is more suggestive of the personal competition for a livelihood of some private parties than of the management of the affairs of a charity. Gratuitous medical relief being thus largely offered and thrust upon society, a vast increase of recipients has taken place; and many persons, not proper objects of charity, constantly avail themselves of the opportunities thus sedulously afforded. The increasing number of recipients is appealed to as an argument for the establishment of new hospitals and dispensaries, the very multiplication of which continues to attract fresh applicants for gratis advice. Thus we have competition between rival charities, a fictitious demand for new institutions, a hawking about of gratuitous medical service amongst classes who do not require it, and a total number of medical charities larger than the public can be induced to support. It is this condition of things which I designate as unsound.

It has not been brought about by the benevolent donors to these charities. The fault does not rest with them. They simply desire that their money should be applied in the best manner to relieve the sick who are in distress. In many instances they can only give; they cannot frame codes of management, or specify how or to what class of persons their charity shall go; in leaving bequests, they cannot foresee the changing phases of society; all they wish is to do good, and good that shall be really and unquestionably such; they desire that their money shall supply an existing, urgent want, not that a want shall be got up and created to meet their charity; in short, *they desire to afford relief to those sick persons who cannot in any other manner obtain it.* Very seldom are precise and discriminating conditions attached to such gifts. The donors are people of all shades of character and education—persons who may or may not be intimately acquainted with the working of medical charities, and with the situation and wants of the lower ranks of society, being only alike in this one noble feature—the desire to do good. How and to whom this good shall be done, rests with the managers of the charity, who are trustees with a very wide discretion, to decide. And their responsibility is not small. It is their business to find out what specific mode of proceeding, in accordance with the wants and circumstances of the day, and with a due regard to the ground occupied by other institutions, whether legislative or voluntary, and to the effects of such proceeding on the community, will best carry out the spirit and intention of the donors; and then to make it known, and put it in practice. To do this effectually is at present no easy task. The simple method of

administering such trusts employed in former times, will no longer answer now. And although the management of them has been in a high degree conscientious, and considerate, and pains-taking, constituting another valuable donation—that of time and labour—to the institutions in question; yet much remains undone and overlooked, the want of which has helped to bring about the present unsound position of medical charities. So far as this is fault, there is fault to find with the governors of hospitals and dispensaries.

But a great and positive fault, not of omission, but of commission, rests with the medical profession; who, often for private ends, are much too forward in promoting the establishment of new medical charities; a proceeding the most short-sighted and suicidal to their own interests as a body corporate, and highly injurious to the community. Good results to all from the establishment of such charities as are really necessary, but harm and loss to all parties from the opening of institutions which are not required.

With your permission, Sir, I propose to return to this important subject, which I only wish was in abler hands than those of

Your obedient servant,

Eltham, Jan., 1858.

A GOVERNOR OF A LONDON HOSPITAL.

WHAT ARE THE MEDICINAL AND NUTRITIVE PROPERTIES OF ALCOHOL IN CASES OF MENTAL DISORDER?

To the Editor of THE LANCET.

SIR,—I shall feel obliged if you will favour me with space for the accompanying reply to Mr. Higginbottom's letter, which appeared in your publication of the 26th ultimo. I would not trouble you with an article of such length were it not a matter of vital importance to prevent such fantasies being disseminated amongst our younger brethren.

The exhibition of properties of both kinds is not confined to alcohol in its administration under mental disorder; but this last is, from its peculiar nature, especially fitted to derive benefit from this remedy. The medicinal properties of alcohol are exerted first upon the circulation, which they quicken and urge, and through that, upon the brain and nervous system, which they arouse. Alcohol, in any shape, properly regulated as to dose, is, therefore, a powerful remedy in exhaustion proceeding from any cause. It, therefore, takes its place amongst the other stimulants called diffusible, contained in the Pharmacopœia, having a general applicability like them, in all cases of exhaustion, particularly those occurring under insanity amongst the rest.

I feel it necessary to apologize to the profession for these elementary remarks, which are called for in answer to Mr. Higginbottom's first question.

Why, then, is alcohol a remedy in the treatment of insanity? Because that disorder in all its acuter forms being, as a general rule, independent of any organic disease, either of the brain or other organs, is found to present a mixed state of anæmia and of hyperæmia in the vessels of the brain and its membranes, and of the body generally—a state of partial and passive congestion, wholly non-inflammatory, due to a wasted condition of the nervous energy, in which the heart shares. The animal machine must soon stop altogether if this condition of things be not changed by the proper means; in other words, the patient must die of true exhaustion. But let a stimulant treatment of appropriate energy be commenced, and anyone witnessing such a common asylum case, will soon arrive at a conviction whether alcohol is or is not a true remedy. But Mr. Higginbottom may ask—if a stimulant at all, why alcohol? In these cases alcohol is not relied upon to the exclusion of other articles of materia medica, such as ammonia, ether, cordials, &c.; but all are used together. There is a limit to the quantity of either ether or ammonia, which can be administered in a given time—a limit often found too narrow for the emergency of a case; and there arises thus a great need for what are called adjuvants. Drugs can only with propriety be given as such, and at proper intervals; but alcohol, in one form or another, can be given between and in combination with articles of common nourishment. It is quite needless for me to insist on the therapeutical value of a combination of remedies, or efforts, all working for the same result; and, especially, to urge the importance of multiplied resources when insane persons are to be treated—persons who refuse, reject, resist in a general and wholly unreasonable way. Enough on this point, for it is not my business here to try to enlarge Mr. Higginbottom's experience, my desire being merely to oppose the diffusion of error, hoary though it be.