treat their opinions with such supercilious hauteur, that the more weak-minded begin at last to entertain serious doubts as to whether or no they have any right or title to form opinions for themselves at all.

Secondly, the Council virtually possesses the power of self-election. Every year the retiring Council prepares a list of its successors, and of the examiners for the ensuing year; and these nominations can only be overturned by a most troublesome and humiliating personal canvass, on the part of any aspirant to these important positions. Men who from pride or delicacy hesitate to encounter the numberless impertinences to which such a procedure exposes them are left hopelessly in the background.

A place in the Council, or on the Board of Examiners, thus becomes a distinction reserved only for the favoured few, who in the vast majority of instances are men whose qualification lies in the extent of their local influence. This abuse is perhaps most glaring in the case of the examinerships. Specially qualified persons are passed over; an examiner once appointed is virtually installed in his office for life. The character of the examinations falls behind the standard of the day; the same questions are set over and over again, so that some of the "grinders" know almost all of them by heart. Good-for-nothing students flock to the Edinburgh Colleges from all parts of the kingdom, and pass; and thus a great school is brought into disrepute in the teeth of its own disgusted lecturers, many of whom have no chance of an examinership for years to come. In the meantime general practitioners of no special acquirements examine in the subjects to which such non-examining lecturers are devoting a lifetime of unrewarded study. By one of these gentlemen a student was, not long ago, asked at the examination-table how much fibrine was contained in the blood circulating in the vessels during life? Surely such a system of examination is an anachronism.

Were the Edinburgh Fellowship to be granted after examination, the examiners, unless ludicrously incompetent, would of necessity require to be drafted largely from the junior Fellows, many of whom are graduates of the University of Edinburgh with the highest honours, and lecturers licensed by the College itself. Perhaps this consideration may have some bearing on the desperate reluctance evinced by the seniors to adopt a change which would otherwise appear little short of a self-evident necessity.

These things, Sir, call imperatively for reform. Were they as well known to the profession at large as they are within the confines of the northern metropolis, their lease of life would, it is to be hoped, be short. In widespread publicity alone lies the chance of their early abolition; and the thanks of all true friends of the Edinburgh College of Surgeons are due to you for the strictures you have already passed upon the action of a certain section of its governing body. These, however, are as nothing compared to the many more which might still be made,

I am, Sir, your obedient servant,

October, 1882.

ONE OF THE MINORITY.

To the Editor of THE LANCET.

SIR,—I am sure that the profession, as a whole, will support you in your exposure of the Edinburgh "Bogus" Fellowship. It is most unfair to those who have worked harder than their brother students in order to gain the Fellowship of the Royal College of Surgeons of England, to find that others hold the same title, "F.R.C.S.," without work, and by payment of a fee, coupled with the presentation of a minimum qualification in surgery. I notice that few fellows of the Edinburgh College add "Edin." to the title, which would give the public a better chance of distinguishing them from those of the London College. That it is a qualification is undoubted, as many appointments are advertised where the Fellowship of the College of Surgeons of England or Scotland is mentioned as *a sine quâ non*. I remember when I was an undergraduate of a certain university in Scotland, two men failing, after repeated efforts, to pass the first professional examination there. Like the friends of the Claimant, they had "more money than brains," so after repeated trials, in which their ignorance of the usual details of the subjects of examination was shown each time more distinctly, they were advised by their teachers to give up all thoughts of entering the profession. They were, however, not to be daunted, and being

"rare plucky ones," they reminded their friends that there was no one-portal system to medical diplomas. They went to Edinburgh, got the "double qualification," and after a time blossomed out into the higher (!) dignities of—the one, F.R.C.S.E., the other, M.R.C.P.E. (of course with the addition of the title "Dr." on his card). Whether these gentlemen are alive or not now I know not, and would rather not know. The circumstances were much commented on at the time by those who had known them, and many others, who were "wasters," intended to follow their examples. I do not mean to say that there are not excellent men who hold this title, and it is for their sakes that the honour of the College should not be prostituted for the sake of gold. Let the Fellowship be looked upon once more as a distinction; let there be a further examination for it, severe in its nature, and then men would willingly come forward and try to obtain it; but as long as it is to be bought it will be looked upon with some suspicion, and the minority of those holding it as a title of real honour will be few and far between. I see by the new regulations of the Royal College of Physicians of Edinburgh that the election to the membership is abolished, and that candidates now are required to be examined in medicine, pathology, and midwifery. This is a right move, and one which I hope the sister College of Surgeons will follow shortly, and do away with the idea that the fellowship is simply a question of £ s. d.—I am, Sir, yours faithfully,

Oct. 2nd, 1882.

M.B.

"FEEDING LUNATICS."

To the Editor of THE LANCET.

SIR,—Lest your annotation on this subject in to-day's LANCET should lead to the belief that the forcible feeding of lunatics is an unnecessary form of coercion, I venture to offer a few remarks in reply.

This operation, when necessary, devolves in almost all asylums upon the assistant medical officer. As I held that office for more than eight years in three of the largest lunatic asylums in this country (over 5000 patients having at one time or another during that period been under my care), I have had considerable experience in the matter. The operation of feeding through the oesophageal tube is certainly not without its difficulties, but these may, I believe, be always overcome—indeed, I never once failed to complete the operation satisfactorily. I have never seen the procedure do harm to any patient; but, on the other hand, I am perfectly certain that several patients who have since recovered and resumed their positions in the outer world would have died if they had not been forcibly fed with the tube.

It would, of course, be inexcusable to feed any patient through the stomach-tube until every other means of inducing him to take nourishment had failed. Such a patient should always be placed in a ward where the best nursing is available. The attendants should be impressed, both by precept and example, with the necessity of inducing their patient, either by coaxing or by judicious firmness, to take his food in a natural manner. Many attendants are very successful in this respect, but even the best occasionally fail. It is then the province of the doctor to intervene. The great influence and prestige which he ought always to possess and maintain with his patients will frequently enable him to prove successful in persuading a patient to take proffered food after all the efforts of the attendants have proved unavailing. When the patient's chief reason for refusal is mere obstinacy, it is often sufficient for the medical man to produce his feeding apparatus and explain kindly but firmly to the patient that unless he drinks the fluid food prepared, the tube will be passed down his throat into his stomach, with certain discomfort to himself.

There will always, however, be a certain number of patients who, owing to delusion, suicidal intent, or some other cause, can neither be charmed nor threatened by the above-mentioned, or any other methods, into taking the food offered to them, and who will not swallow what is placed in their mouths; these must consequently be fed by means of the tube. I am quite aware that it is the boast of some medical superintendents that they have never found it necessary to feed a patient in this manner, but I have reason to fear that in some instances the patient's life has been sacrificed rather than the doctor's opinion. I

can quite believe that in an asylum containing only 100 or 200 patients it might often happen that for many years at a time no case would require to be forcibly fed; but in our largest lunatic asylums, which contain from 1000 to 2200 patients in each, it rarely happens that many weeks pass without some patient requiring this treatment. Asylum medical officers can have no reason for performing this operation with unnecessary frequency, as it is by no means a pleasant duty, and brings neither pecuniary gain nor professional *κῆδος*. Instances are on record in which patients have been thus fed daily for many months, and even years; but it is my belief that when a patient has acquired an undesirable taste for being fed in this way, his troublesome habit may almost always be successfully combated by the exercise of a little tact on the part of the medical attendant. I have no experience of any case in which the necessity for forcible feeding has existed for longer than three or four weeks at a time.

It is no part of my object in this letter to describe the best methods of forcible feeding, but merely to affirm that the operation is sometimes an absolute necessity for the saving of life, and that the lives saved are in a considerable proportion of cases those of patients who ultimately recover and return to their homes. If there are abuses in asylums (and what human institutions are perfect?), by all means let us have them exposed and remedied; but at the present time, when the public mind is, causelessly, as I believe, somewhat uneasy upon the subject of the care and treatment of the insane, it is most undesirable that the idea should become general that insane persons are needlessly subjected to the discomfort of having tubes passed into their stomachs, even though the object be to supply them with the food necessary to their sustenance and recovery.

I am, Sir, your obedient servant,

CHAS. S. W. COBBOLD, M.D.,

Sept. 23rd, 1882. Medical Superintendent, Earlswood Asylum.

"A SIMPLE OPERATION FOR VARICOCELE."

To the Editor of THE LANCET.

SIR,—In to-day's number of THE LANCET Mr. A. Barker reports three cases of varicocele under the above heading. It may perhaps be of interest to him and others who intend to try this method to know that I have also had a case in which I performed the operation in the same way as Mr. Barker, and with an equally good result. The case was a man aged fifty years, a miner, who was admitted under my care into the York County Hospital in April last, suffering from a large varicocele on the left side. I performed the operation in almost identically the same way as Mr. Barker, encircling the veins with a piece of Chinese silk (which had previously been boiled for half an hour in a ten per cent. solution, and afterwards left to soak for some hours in a twenty per cent. solution of carbolic acid); after tying, the ends of the silk were cut short, and dropped into the wound, which was closed up over them. The wound healed in a few days with scarcely any suppuration. I kept the man in the hospital for a fortnight after everything seemed quite well, and when he went out there was no sign of inflammation at all about the wound, which was soundly healed, and all that could be detected was a small nodule on the seat of ligature.

I am, Sir, yours faithfully,

York, Sept. 30th, 1882.

W. H. JALLAND, F.R.C.S.

THE QUEEN'S UNIVERSITY DEGREES.

To the Editor of THE LANCET.

SIR,—Your correspondent "J. W. M." takes exception in last week's LANCET, to a statement made by me before the Royal Commission on the Medical Acts to the effect that "A student attending a Queen's College may obtain all the lectures necessary for a Queen's University Degree (or Scotch double diploma), in two years," which, he says, "is not a fact." That the statement is accurately true may be proved by anyone who pleases to examine the regulations of the Queen's University, published in your Student's number for 1881 and previous years. Two courses of lectures, at most, were required by the University in any subject, and these were readily obtained in two years. Indeed, I have

known many students who—having put in, in a Queen's College, the essential two courses of medical, and two courses of non-medical lectures, *all in one Winter Session*—have taken all the remainder of their curriculum in Dublin, and have possessed their M.D. Q.U.I., and L.R.C.S. and C.P. Edin., long before the lapse of the statutory four years. It is true that the Q.U.I. required twenty-four months' hospital, so that a student commencing in November of any year could not theoretically complete his hospital curriculum until two years and three months had elapsed, but that difficulty was always easily adjusted with the hospital authorities. Therefore, it is quite true, as I stated, that a student could (and many did) complete his entire curriculum for the M.D. Q.U.I. and Scotch Double Diploma in a couple of months over two years, and that a great number of Irish students, therefore, took these qualifications in preference to the M.B. Dublin University, or L.R.C.S.I. or L.K.Q.C.P.I., which would have cost them an additional year's work and fees.

I am, Sir, yours, &c.,

ARCHIBALD H. JACOB, M.D. Dub., F.R.C.S.I.

Dublin, Oct. 4th, 1882.

DISTRIBUTION OF THE REPORTS OF THE LOCAL GOVERNMENT BOARD.

To the Editor of THE LANCET.

SIR,—I have this day forwarded to the President of the Local Government Board a memorial from the North-Western and Yorkshire Associations of Medical Officers of Health, of which the enclosed is a copy.

I am, Sir, yours truly,

Manchester, Oct. 4th, 1882.

FRANCIS VACHER.

To the Right Hon. J. G. Dodson, M.P., President of the Local Government Board.

The memorial of the North-Western and Yorkshire Associations of Medical Officers of Health.

Respectfully sheweth,—That your memorialists are a body of Medical Officers of Health practising in the counties of Lancaster, Chester, Derby, and York. That your memorialists having been from time to time instructed and informed by the annual reports of the medical officer of your Honourable Board, and forming a high estimate of the importance of the topics discussed in the said reports, and having experienced difficulty in obtaining copies of the same owing to the small number printed, humbly pray that your Honourable Board will order that a copy of the said report, with appendices, may henceforth annually, as issued, be presented to every medical officer of health whose appointment shall have the sanction of your Honourable Board. And your memorialists will ever pray, &c.

(Signed on behalf of the North-Western Association of Medical Officers of Health.)

WM. HUGH HUGHES, *President*.

FRANCIS VACHER, *Hon. Sec.*

(Signed on behalf of the Yorkshire Association of Medical Officers of Health.)

S. W. NORTH, *President*.

J. MITCHELL WILSON, M.B., *Hon. Sec.*

100, King-street, Manchester, Oct. 4th, 1882.

NEWCASTLE-ON-TYNE.

(From our own Correspondent.)

At the sanitary meetings on Thursday, the 28th ult., the following were read and discussed:—Address by Professor Robinson. C.E., Vice-president of the Section, in which he strongly pointed out the necessity of proper training for inspectors. W. Eassie, C. E.: "The Desirability or otherwise of providing Town and Country Houses with Grease Intercepting Chambers in Scullery Sinks." J. Lemon, M.I.C.E.: "The Separate System of Drainage." E. C. Robins, M.I.C.E.: "On the Original Experiments of Dr. Renk of Munich, with Sewer Gas, and the Mode of its Exclusion from Dwelling Houses." W. G. Laws: "Sewer Ventilation." John Price: "Industrial Dwellings." W. Eassie, C.E.: "On the Sanitary Needs of Town and Country