Dr. Vernon, by some method of estimate not stated, concludes that 90 of these were of "bad lives imported," thus making a large reduction in the death-rate, but one which is open to grave objection. When Dr. Vernon leaves out of account the workhouse deaths belonging to his population and deducts a large proportion of deaths on very doubtful authority, he appears needlessly to invite incredulity as to the value of his statistics. Dr. Vernon is not alone in his attempt to improve his death-rate by a liberal correction for deaths of visitors. This is a tempting but a dangerous practice, and should at any rate not be attempted unless the method of correction is most precisely described. The importance of health reputation to Southport is so great, and the impossibility of constructing sound vital statistics without a trustworthy estimate of population is so patent, that the Town Council, as the sanitary authority of the borough, should be induced to undertake a local census, which has in other places been carried out at a very moderate cost.

THE SERVICES.

THE Army medical officers recently inspected, at Woolwich Arsenal, one of the two Döcker tent hospitals supplied for use in Suakim. These tents or huts are constructed by Messrs. Christoph and Unmack of Copenhagen, and appeared to meet the approval of the medical staff by their sanitary arrangements and general suitability for a hot climate. Each tent or hut is 72 ft. long by 20 ft. wide, its height being 13 ft. Each tent has accommodation for fifty patients, forty-four in two large wards at each end, and six in a private ward.

The Assistant Professorship of Surgery at Netley having been vacated by Surgeon-Major R. Tobin, who has been ordered on foreign service, the duties will for the present be performed by Surgeon-Major O. Codrington, M.D. It is understood that the appointment will be conferred upon Surgeon-Major C. H. Y. Godwin, late medical officer of Woolwich Arsenal, where he was very successful in applying the antiseptic system to the numerous severe injuries with which he had to deal.

Surgeon-General J. Irvine, Principal Medical Officer to the Army of Occupation in Egypt, has been selected for a similar position to her Majesty's forces stationed in Madras.

ADMIRALTY.—The following appointments have been made:—Surgeon Francis G. Wright, to the *Bullfrog*; Charles G. MacLagan to be Surgeon and Agent at Berwick and Cheswick.

ARTILLERY VOLUNTEERS.—1st Norfolk: Acting Surgeon George Henry Cressey resigns his appointment.

RIFLE VOLUNTEERS.—1st Forfar (Dundee): Acting Surgeon William Gibb resigns his appointment.

Correspondence.

"Audi alteram partem."

CHLOROFORM *v.* ETHER.

To the Editor of THE LANCET.

SIR,—My attention has only just been called to a letter from Mr. George E. Walker of Liverpool in your issue of last week. In this letter Mr. Walker states, as his opinion, that in the production of complete anaesthesia there is little or no difference between chloroform and ether, whilst in the after-effects, especially as regards vomiting, nausea, and depression of spirits, chloroform is much superior to ether. Now, this is exactly contrary to what I have been endeavouring for years to demonstrate, and I cannot see on what grounds Mr. Walker bases his opinion, which I not only consider erroneous as to fact, but dangerous in the extreme. May I point out to him that the great difference between the two is that ether is a cardiac stimulant, whilst, on the other hand, chloroform is a depressor of the heart's action; that the former never kills by stopping the heart, whilst, on the contrary, the principal cause of death in fatal chloroform cases is the sudden cessation of the heart's action. I do not deny that dangerous symptoms occasionally arise during the administration of ether; but when these do occur the respiratory organs are affected and there is plenty

of time for the proper application of remedies, these symptoms being rarely followed by death. In the fatal cases of chloroform administration death begins at the heart, and is instantaneous. If Mr. Walker consults the statistics of fatal cases, he will find that the proportion of deaths in chloroform administration is about 1 in 4500, whilst that of ether is only 1 in 20,000. Granted that there is more vomiting, nausea, and depression of spirits, even then I reply that these trifling ailments do not counterbalance the great advantage of the safety of the one anaesthetic over the other; moreover, I affirm that, if ether be rapidly given so that a small quantity suffices to produce anaesthesia, then the insensibility is not followed by those after-effects of which he complains.

I am not fond of rushing into print, but I plead as my excuse my sincere desire that your columns should not be the means of propagating the suggestion that chloroform is as safe to administer as ether.

I am, Sir, yours obediently,
Maddox-st., March, 1885. WOODHOUSE BRAINE, F.R.C.S.

"WHAT WAS THE CAUSE OF DEATH?"

To the Editor of THE LANCET.

SIR,—My attention has just been directed to Mr. Knight's communication in your issue of the 7th inst. In consequence of the tone of his letter, and of its many inaccuracies, I desire the privilege of stating my version of the case, and of placing before the profession some additional facts which were not mentioned at the trial.

At 10 P.M. on Jan. 5th I had an interview at the Southern Hospital with the senior house-surgeon and Mr. Knight, and I gave to Mr. Knight a letter which I had received from the solicitor for the defence, in which it was stated that I had the coroner's permission to examine the body of Johnson. Owing to the hesitation exhibited by Mr. Knight to permit the examination, I suggested that he should think the matter over, and I arranged to meet him at 11 A.M. on the following morning. I arrived at the hospital within five minutes of the time specified, and was informed by the porter that Mr. Knight had gone out. After some trouble I found Mr. Gordon, the senior house-surgeon, in one of the wards, and he kindly left his work and came to the post-mortem room, and remained with me during my examination of the body.

The following is a copy of Mr. Knight's depositions before the coroner:—"Externally, I find on the top of the head two wounds, one of them an inch in front of the centre, and an inch to the right of the middle; it was pretty clean cut, but with slight contusion. It was a small wound half an inch long and a quarter of an inch deep. An inch behind and two inches to the right of this wound I found another wound similar in every respect to the first. There was a third cut on the chin over the lower jaw. This wound was in the shape of the letter Y, about three-quarters of an inch long by one-third of an inch in depth. I found some bruises; one over—i.e., above the left eye, and another just below or under the right eye. He had also an abrasion on the middle of the nose. The right eyeball itself was bruised. He had a slight abrasion of the fore or first finger of the right hand, and some blood on the other fingers. He had a small abrasion two inches below the right elbow. He had a little blood on the left hand, but no injury. On the right leg there was a small abrasion four inches below the knee. I have now described all the injuries to the deceased outwardly visible. On opening the body I found all the organs pretty healthy. There was slight congestion of all the organs, but their state was consistent with perfect health. There was no injury at all to the bones of the head or body. The cause of death in my opinion, judging from what I have heard to-day from the witnesses and from my post-mortem examination, has been concussion of the brain, due to the blows on the head. There was no natural cause present sufficient to account for death. The condition of the organs gave no indication at all of alcohol."—By Mr. Maddin: "The deceased's lungs were slightly congested. The heart was quite healthy. It is quite possible that if the deceased had been on a heavy spree of drink, the congestion of his lungs might be in consequence of that."

The following are extracts from my depositions before the coroner:—"I substantially agree with Mr. Knight's evidence as to the external injuries upon the deceased. I differ from

him as to the internal condition of the body. The main bloodvessel of the heart, the aorta, has extensive and long-standing disease. The left lung is almost completely semi-solid. The right lung is also extensively semi-solidified. I do not think the solidified condition of the lungs is due to post-mortem changes from lapse of time. I found all the organs well preserved, and quite fresh. I could not be positive as to the cause of deceased's death. In the absence of any injury at all the condition of the deceased's lungs would quite account for death. I would attach more importance to the butting spoken of than to any of the other injuries. A man in deceased's condition to receive a severe butt in the stomach would be likely to suffer from a serious nervous shock, which would affect the heart's action and accelerate death. In the condition of the deceased's heart and lungs the effects of struggling would be sufficient to cause death."

Additional facts and remarks.—A calcareous plate about an inch long was transversely embedded in the aorta embracing the openings of both coronary arteries. Yet Mr. Knight, in the coroner's depositions, says that "the heart was quite healthy," and makes no reference whatever to this condition of the aorta. After my evidence he appears before the magistrate, and in these depositions he says, "There was extensive degeneration of the aorta."

No section of any kind whatever had been made of the left lung when I examined it. This condition, as well as the calcareous plate, I pointed out to Mr. Gordon, and yet Mr. Knight informs us that "the examination occupied three hours, and every organ and every cavity was carefully examined," and that the honorary surgeon and Mr. Knight's two colleagues were present during that time. I confess I cannot believe that Mr. Gordon would spend three hours examining a body and neglect to examine one lung and make only one section through the other, which was distinctly diseased. Nor shall I believe that Mr. Little and Mr. Gordon will state that the lungs of the deceased were only "slightly congested," and that the condition of all the organs was consistent with "perfect health." Why did Mr. Knight secure at the assizes the services of his junior, Mr. Dixon, instead of his senior, Mr. Gordon? I know that an urgent message was despatched for Mr. Little, but he was indisposed, and unable to appear.

The deceased was forty years of age and kept a brothel. All the witnesses to the assault are unfortunates and lodged in his house. One witness speaks of blows by a belt buckle, another of a ginger-beer bottle, and a third of butting. On finding such a marked divergence of opinion between Mr. Knight and myself I caused the defence to make application to the coroner for him to appoint a distinguished member of the profession to examine the body before burial. I submitted the following list—viz., Mr. Rushton Parker, Drs. Alexander, Glynn, and Cameron. The coroner would grant permission, but would not authorise any of those gentlemen to act.

Mr. Knight summons both the judge and the jury to his aid in deciding the pathological differences between us. I have no objection to this rough appeal in the absence of a better one. The prisoners were arraigned on a charge of murder, and were found guilty of manslaughter and sentenced to eighteen months' imprisonment. From these facts Mr. Knight infers that the pathological points have been decided in his favour. I have no doubt the inference is quite as scientific as his evidence.

The scraps from the daily papers which he has interlarded his letter with and the learned discovery which he has so kindly communicated to me—viz., "That the heart and the aorta were not quite the same"—I must gratefully acknowledge as tokens of good taste.

I am, Sir, yours truly,

WILLIAM WHITFORD, M.D.,

Honorary Assistant Surgeon to Stanley Hospital, and Senior Assistant Surgeon to the Liverpool Cancer and Skin Hospital.

Shaw-street, Liverpool, March 16th, 1885.]

HICKS v. BEDFORD AND OTHERS.

To the Editor of THE LANCET.

SIR,—I have no doubt that your attention has been drawn to this case, a full report of which appeared in last week's issue of *The Times*, and from which we find that in summing up the case the judge laid down a view of the law bearing on the admission to and detention of lunatics in the insane wards of workhouses which must come in the nature of

a very disagreeable surprise to many masters, relieving officers and others, who have for many years past been in the habit of admitting and sending lunatics into workhouses for detention and treatment—especially in these days, when there are so many to be found ready and anxious to bring actions against all who have more or less unwittingly sinned against the provisions of the various statutes in that behalf.

Mr. Justice Wills is reported to have stated in his charge to the jury that "there is no statutory power whereby any-one, lunatic or otherwise, can be detained in a workhouse against his will," and the lunatic wards thereof can only be utilised for the temporary reception of persons in the receipt of in-door relief who become insane pending steps being taken to remove them to an asylum. Acting on this view of the law, the jury gave a verdict of £50 damages against Mr. Douglas, the master of the Marylebone Workhouse, and of £200 collectively against four others who had been made parties to the suit brought at the instance of the plaintiff Hicks, who it was shown had been suffering from delusions at the time of her removal to the Marylebone Workhouse.

Now, this view of the provision of the statute may be, and probably is, correct; but, if so, it has neither been so understood nor acted on, for it is only a very fractional number of the inmates of workhouse insane wards who find their way there from the body of the house; by far the greater proportion come from outside, and for convenience may be arranged under the following three heads:—

1. Undoubted paupers of whose insanity the relieving officer has obtained some idea of, and who are sent into the insane wards so that a medical examination might be made of their mental condition, and, if found to be deranged, with the view to their removal to an asylum.

2. Persons not paupers who are similarly sent in on the order of the relieving officer, or, it may be, taken there by their friends, with the view to their being sent to the county asylum, the friends paying for their maintenance, or for their being transferred to Bethlem or kindred establishments, or, it may be, to some private asylum, when their relatives are sufficiently well off to pay for their maintenance.

3. Cases brought by the police. These form by far the largest proportion, and they include every grade of society, as anyone conversant with workhouse management can testify to.

Now, this condition of things has gone on unchallenged for as long as I have had to do with medical relief to the poor, and that is upwards of forty years; and that such has been the practice cannot be denied either by the late Poor Law Commissioners, the Poor Law Board, by the present Local Government Board, or by the Lunacy Commissioners. But now we are suddenly pulled up by a judicial decision, that this procedure, which has acted beneficially in the past, is altogether illegal, and as a result thereof this verdict is come to.

It has been stated that the Lord Chancellor is about to bring in a Lunacy Act Amendment Bill. If he does, I trust that the influence of your journal may be brought to bear so that the framers of the Bill may make provision to deal with the admission to and detention of lunatics in workhouses a little more in accordance with common sense and the fitness of things than now holds good.

In conclusion, I am very pleased to state that the guardians of the Marylebone Workhouse have decided to pay Mr. Douglas's costs, &c. It is true that they could not well do otherwise, seeing that he has only carried out the practice which, to my personal knowledge, has been adopted in that workhouse for the last forty-seven years.

I am, Sir, yours obediently,

JOSEPH ROGERS.

Montague-place, Russell-square, March 11th, 1885.

THE CASE OF DR. BRADLEY.

To the Editor of THE LANCET.

SIR,—My attention has been called to the comments in the medical journals upon this case, and especially to a letter from Mr. Palmer, surgeon, of Whittington, which appears in THE LANCET of Jan. 31st last. As counsel for Dr. Bradley, my opinion that he was entirely innocent will probably carry little weight, but such nevertheless is my view; and the case is an illustration of the desirability of establishing without delay a Court of Criminal Appeal. However, I do not wish to enter upon that question now, nor into the facts