Correspondence.

"Audi alteram partem."

"CHOLERA MALIGNA."

To the Editor of THE LANCET.

SIR,—*"Taurus Major"* writes in your issue of July 11th, recommending the administration of sulphuric acid and opium in the early stages of cholera. Although I have successfully treated cases of English cholera with morphia, ammonia, and carbolic acid in mixture, I am now of opinion that opium should be avoided both in the early and late stages of the disease, inasmuch as it is a cardiac depressant in the highest degree, both in small and large doses. I hold it to be unreasonable to ascribe a stimulant action to the drug for about half an hour after its administration only, and to find that subsequent to that short period its action is to depress. I would rather try to account for the pseudo-stimulation of the vascular system by arguing that from the first it reduces the muscular power of the heart, and, by delaying the circulation of venous blood in the cranium, causes a cerebral excitement similar to that experienced by drowning persons, or by supposing it to have a special stimulant action upon the nervous system, which is checked in a very short time by the development of cardiac depression.

After considerable experience in the treatment of English cholera, I can say with confidence that chloral is a safer and better sedative than opium or morphia, and, when used with belladonna, an invaluable remedy for the diarrhoea and vomiting of that complaint. As soon as the mistaken notion (for such I affirm it to be) that opium possesses cardiac stimulant properties is recognised, so soon will the use of this dangerous remedy be discontinued in the treatment of diseases of the head, lungs, and heart, and not in those of the kidney only. In ordinary diarrhoea there is no better remedy than *"God's gift,"* prescribed with ammonia and carbolic acid; but in cholera, such is the tendency to cardiac depression, it is never safe to prescribe more than half a grain of it in the shape of morphia.

I was called to a case of English cholera about a fortnight ago. The patient, Mrs. M—, was forty-five years of age. She had been ill three hours, and was in the stage of collapse. There were all the symptoms of the severest form of the disease—viz., vomiting, purging of rice-water material, cramps in the abdomen and limbs (with the legs and feet rigid and bluish), and collapse. I ordered brandy and soda-water to drink, hot linseed meal and mustard poultices to the bowels, and the following mixture:—Recipe: Potassæ bicarbonatis, ʒij.; spiritus ammoniæ aromatisæ, ʒiij.; spiritus ætheris chlorici, ʒj.; acidi carbolic, ℥xv.; chloral hydrat., ʒj.; tincturæ belladonnæ, ʒj.; aquam ad ʒvj. Et recipe, acidi citrici, gr. xx., fiat pulv. mitte vj. tales. Of this mixture I gave the patient a sixth part, with one powder added every two hours whilst effervescing. The first dose stopped the vomiting and purging, and in six hours my patient was comparatively well. In twelve hours she came downstairs cured, with the exception of stiffness and slight muscular pains in the lower limbs. Here there was no reactionary fever, but complete restoration to health in twelve hours. This is an example of many cases treated in this way by me, a cure resulting in every one with from three to six or eight doses of medicine, in from six to twelve hours.

Now, I maintain that if English cholera can thus be so rapidly cured, the same remedy will answer for the Asiatic form, because the difference between the two lies only in degree.

Further to criticise *"Taurus Major,"* I would add that sulphuric acid may be useful in restraining an ordinary diarrhoea by means of its astringent action; but what, I would ask, will be its action on the blood, already so thick as to be almost devoid of flowing power? If tannic acid should be avoided, for the same reason should all acids; they bind the blood still more.

In your issue of July 4th Dr. Ward recommends ice. The objection to cold remedies is the fact of their depressant properties generally. As for the use of ice in thinning the viscid blood, it cannot compare with ammonia, the action of which, as a stimulant also, is of great service in restoring the circulation of the vital fluid.

The poison of cholera will, I am confident, yet be demonstrated to consist of some ammoniacal compound, the result

of abnormal fermentation in the intestines. This compound, being rapidly absorbed through a large tract of mucous membrane, rapidly induces an over-liquid condition of the blood. The absorption, being of so extensive a nature, tolerance of the local circulation is impossible of development, and the process of osmosis becomes reversed. It is probable that the circulation would very rapidly balance itself were it not for the irritation set up by the abnormal process in the intestinal tract, leading to purging and vomiting, which induces more or less of a vacuum, rapidly filled by further transudation of the watery elements of the blood.

The indications in the treatment of cholera are four in number. They are, first, to check abnormal digestive processes or fermentations. Carbolic acid is acknowledged to have great power in this direction. Secondly, to thin the viscid blood. Thirdly, to stimulate the heart and circulation generally. For these two purposes there is no remedy equal to ammonia. It is administered to the giver in cases of transfusion to prevent clotting in the cannula. Fourthly, to allay the irritability of the stomach and bowels. For this purpose chloral is superior to morphia or opium, in that it causes less depression, can be prescribed at all ages, and is not cumulative in its action.

In cholera infantum, a mixture of bismuth (ʒss.), glycerine (ʒiij.), chloral (ʒss.), belladonna (℥xv.—ʒss.), acid carbolic (℥x.) (aq. ʒij.), in teaspoonful doses every two or three hours, cures in a few hours.

I am, Sir, yours faithfully,

C. R. ILLINGWORTH, M.D. Ed.

Clayton-le-Moors, July 22nd, 1885.

PAUPER-MAKING LEGISLATION.

To the Editor of THE LANCET.

SIR,—I cannot say I altogether agree with your article on the above subject in every particular. You appear to forget that the agricultural labourers have not the same opportunities of gaining free medical relief as those that dwell in towns, and that the former, as a rule, are not so well paid as the latter. Many a man in the country can just manage to support himself and his family so long as they are in good health, but is obliged to fall back upon the parish during time of sickness, especially if it be long continued. The question is whether those who pay their dependants so badly should not be made to suffer in some way instead of those they employ. There always has been, and always will be, such a thing as oppressing the hireling in his wages.

I am, Sir, your obedient servant,

Surbiton, Aug. 4th, 1885.

F. P. ATKINSON.

* * Our objection to the new legislation is that it tends to perpetuate the "oppression of the hireling," by perpetuating his pauperism.—ED. L.

THE FINAL M.B. EDIN. EXAMINATION

To the Editor of THE LANCET.

SIR,—In view of the remarks which your Edinburgh correspondent has made on my letter in the *Scotsman* of July 28th, I must ask your permission to offer a few words of explanation.

What I said with regard to the examination paper referred to in the letter was that three out of the four questions "were to all appearances tests of a candidate's acquaintance with the systematic and clinical lectures and recently published work" of the university examiner; and that of these three the second and third were "to all appearances only in a remote manner tests of a good general knowledge of the subject," while the answer to the remaining one had been given by the examiner to his own students in a clinique four days before the examination. With regard to the last statement, I am told that the house-physician had selected the case which was the subject for the clinique; but, of course, it was not necessary for the examiner to adhere to his house-physician's choice of a case. Your correspondent affirms that "candidates who had none of the supposed advantages" referred to in my letter, "passed with as much credit as those who enjoyed them." I have at present no means of ascertaining who the successful candidates are to whom your correspondent refers, but I am very sure that the number of those who passed the

examination without having studied the lectures &c. of the university examiner in practice of physic is exceedingly small. I cannot call to mind one candidate of this description. As the letter was on the subject of Edinburgh University Reform, and referred to a matter which was keenly debated at the last meeting of the University Council, I consider that the *Scotsman* was a fit medium for publication. I had, however, previously written to the *Edinburgh Medical Journal*. The letter was refused insertion "as being of too personal a character." The University Council has twice passed representations in favour of an extension of open or extramural teaching in connexion with the various faculties; and the object of my letter was not to prove that the examiners had acted unfairly, but to show that if there is to be an extension of open teaching, it is necessary to eliminate the undue influence of individual Edinburgh teachers.

I am, Sir, yours faithfully,
J. S. HALDANE, M.A. and M.B. Edin.,
Late House-Physician, Edinburgh Royal Infirmary.
Cloanden, Auchterarder, N.B., Aug. 3rd, 1885.

MANCHESTER.

(From our own Correspondent.)

A NEW MEDICAL SOCIETY.

It was noted in these columns a few months ago that a proposal had been set on foot for the formation of a second Medical Society in Manchester. This proposal has now become an accomplished fact. A committee has been formed, and a president elected in the person of F. A. Walmsley, Esq., and altogether the movement has been received well, and is likely to attain a certain amount of success. Its special *raison d'être* does not at first sight appear very clear. The chief reason put forward is the want of accessibility to Owens College, and the new Society has secured accommodation in the centre of the city. The general aim and objects appear to be identical with those of the older Society, and it will certainly require much help and support to compete with this. Amongst the names of office-bearers of the new Society the members of the staff of the Royal Infirmary and some of the teachers in the College are conspicuous by their absence; and, as a matter of fact, the origin of the movement is to be found in a certain amount of jealousy which has arisen amongst many members of the profession not connected with these two institutions, and who think that the lion's share of the management and of the meetings is monopolised by the staff of these two places. In addition to the advantage of its central position, the new Society asks only one guinea for its annual subscription, and promises to make good the absence of a library by an arrangement with a London firm, who have undertaken to supply all works of interest for the use of the members upon the circulating library principle.

OWENS COLLEGE.

Dr. Henry Young has been selected to succeed the late Dr. Watson as Professor of Anatomy in Owens College. This appointment has met with general approval; from his known ability as a teacher, it is certain also to give satisfaction to the students. Dr. Young was for some years senior Demonstrator of Anatomy at the College, prior to his appointment as surgical registrar to the infirmary, and surgeon to the Salford Hospital. This latter post it is understood he will still retain, but the registrarship at the infirmary will become vacant, as also will the lectureship on Surgical Pathology at the College which he holds. In addition to these vacancies, the lectureship on Forensic Medicine is vacant by the promotion of Dr. Cullingworth to be lecturer on Obstetrics, and a still more important post to be filled is that of Professor of Physiology owing to the resignation of Dr. Arthur Gamgee. The loss to the students and to the College generally caused by Dr. Gamgee's resignation will be very great. No man has done more during the past ten years than he has to bring the medical department to its present satisfactory condition. The loss to science will also be no small one, Dr. Gamgee having attained a high position as a physiologist. This he is about to relinquish, and to enter upon the far more anxious work of a practising physician in the South of England. For some time he has partly devoted his time to practice. Before the winter

session commences two new appointments are to be made at Owens College in the shape of a medical and surgical tutor.

THE VICTORIA UNIVERSITY.

It would appear from the recent pass-lists of the Victoria University that its medical degrees are not yet very much sought, or else that a large percentage is rejected; but as the number of the latter is not given, an opinion can only be formed from the number of those candidates who were successful. In the final examination for the degree of M.B., Part 1, two names appear, and in Part 2 two names also only are published. At the intermediate examination for the same degree three candidates were successful, and at the preliminary scientific (faculty of medicine) nineteen passed. It has been rumoured that the standard of examination is so high that men find that they may as well go in for the London degree, with its higher prestige; but probably in the coming year the pass lists will show a considerable increase in numbers, as many of the present students began their studies before the Charter was obtained, and commenced work with a view to taking the London degree, and these will naturally become less each year.

THE ROYAL INFIRMARY.

The annual meeting of the Royal Infirmary was held on the 30th ult., and an important modification in the rules was made without any opposition—namely, the partial abolition of the recommendation system. It is now unnecessary for either the out-patients or the home-patients to obtain these, the sole condition being the suitability of the case to receive relief from the charity. It is a pity that the same rule was not applied to the admission of in-patients, as these, being usually the more serious cases, are those which least need recommendation.

NORTHERN COUNTIES NOTES.

(From our own Correspondent.)

SOUTH SHIELDS.

THE popular idea of South Shields is that it is a smoky, ship-building, and colliery town. It is true that a view from the river-side will present some evidence, in the way of "carbon," of the manufacturing activity of the place; but a visitor who has not seen the town, say, for a few years, will witness little short of a transformation. It has now a spacious and beautiful Marine Park, an unrivalled pier stretching out into the sea, and bathing facilities not to be surpassed. On one side of the pier, and quite easy of access from the town, there is a good stretch of sands, safe for all, but for children especially good as a field of operation for spades and shovels. The people of South Shields have lately taken to develop the natural advantages of the place with much spirit and success, spending nearly £20,000 on improvements. Very lately their new salt-water baths were thrown open under the auspices of the mayor, Alderman T. G. Mabane. The buildings are most elaborate, providing for every variety of salt-water bathing, as well as an excellent Turkish bath. The baths, being just at the mouth of the harbour, have the great advantage of a constant supply of sea-water, which may be changed at every tide. On the opening day a remarkable sight was witnessed, for no sooner had the cheering died away which followed Alderman Mabane's speech than from twenty to thirty bathers plunged in from the cabins surrounding the baths, soon joined by others "disporting themselves like porpoises." According to the local papers, the mayor, who is a well-known swimmer, very aptly alluded to other advantages connected with bathing and swimming—namely, the saving of life,—and remarked "that there was no work more grand than that of endeavouring to save the lives of others in jeopardy; but unless persons could always maintain their confidence, they could not enter on that work with safety, for they might not only drown those whom they attempted to rescue, but themselves into the bargain." Altogether South Shields is to be congratulated upon the possession and development of its health resources.

ANOTHER TRIPLE BIRTH IN GATESHEAD.

This year I have already noted two cases of triplets in Newcastle and one in Gateshead. I have now to place another to the credit of Gateshead, where the wife of a