many,* which shows that the relative number is much less than it is in this country.

The number (comparing those of 1887 with those of 1895) of apothecary shops in large, medium and small municipalities had experienced the following changes:

There was one drug-store to the following number of inhabitants:

	1895.	1887.
In large municipalities	11,149	11,322
In medium-sized municipalities	6,855	6,306
In small-sized municipalities	10,037	9,757

The report is accompanied with very full statistical tables, presenting the distributions of drug-shops, as well as of druggists and their assistants, together with two excellent maps showing the same distribution as estimated upon the census of July 1, 1895.

Reports of Societies.

MASSACHUSETTS MEDICO-LEGAL SOCIETY.

JULIAN A. MEAD, M.D., SECRETARY.

The Society met at No. 19 Boylston Place, February 3, 1897, the President, Dr. S. W. ABBOTT, in the chair.

HON. H. M. KNOWLTON, Attorney-General of Massachusetts, addressed the Society on

THE DUTIES OF A MEDICAL EXAMINER.¹

DR. E. P. HURD, of Newburyport: I would like to have had the speaker more explicit on the question of suicides. If I understood the gentleman, when a medical examiner is called to a case where he finds a body, if it is a case of suicide, he has nothing to do with the case at all. Perhaps I misunderstood him. In a discussion before another association, the gentleman who read the paper at that time took the ground that this class of cases did belong to the medical examiners to determine the fact of suicide. The other case is the case of drowning, where the case is palpable: as where a child goes in swimming, or rowing in a boat, and there are half-a-dozen persons who saw the drowning accident. The body is brought ashore, and the medical examiner sent for. I would like to know, because I live on the border of a river near the shore, where we have more cases of death by drowning than through so-called "violent" deaths; I would like to know specifically—supposing I am summoned to go three miles to a drowning case, and there are plenty of witnesses who saw the party go in bathing, and perhaps brought the body ashore—what my duty is. Is it to obey the summons and get a report on the case, or satisfy myself that there are no doubts that it is a case of accidental drowning? Is it my duty to report it or leave it unreported?

MR. KNOWLTON: Of course, the death by drowning illustrates the general proposition. A death by drowning is an "unnatural" death, and so far comes within the province of the medical examiner. Then I adhere to what I said, that if the fact of suicide is clearly established, there is no crime to punish and no

¹ See page 321 of the Journal.

* Die Verbreitung der pharmazeutischen Anstalten und des pharmazeutischen Personals im Deutschen Reich nach den amtlichen Erhebungen von Juli 1, 1895. Berichterstatler Sanitätsrath, Dr. Würzburg, Berlin.

occasion for further proceedings. I should say without doubt that whenever a case of drowning is reported to you, it is your duty to view the body, because nobody can tell so well as the medical examiner. He is the instrument of the Commonwealth to ascertain—the Commonwealth has appointed him to ascertain—whether it is death by drowning, or not. When he has ascertained by personal inquiry and by view, to his own satisfaction, he has no occasion to go further unless there are circumstances requiring him to go further.

In regard to the other question: I can only say as I said before that it is the medical examiner's business to go to the length of ascertaining whether "the unlawful act of another" contributed to the death. At any time when he becomes satisfied that the act of another did not contribute to the death, then his duty is discharged; because suicide is not punishable in this Commonwealth as a crime, the ingenious argument two years ago, to which I listened, to the contrary notwithstanding. The confusion in this rose out of the fact that the case of suicide presents a case where there is an obviously human force—human physical force—used, and the ascertainment of the fact becomes therefore more difficult whether it is the force of the man himself or some one else. After the view has settled it that it is the force of the man himself, and a suicide, then there is no crime. Of course, that addresses itself to the judgment of the medical examiner. He is to bear in mind that when he has traced out the end of the man—whether it is a man found dead in bed with a pistol-shot, and the pistol in his hand; or a case of asphyxiation, with the gas turned on; or any case of suicide—if the results of his view do not point clearly to suicide, of course, it is possible to go further.

DR. SAWYER: I should like to ask the attorney-general if his remarks are applicable to cases of burning. I did not understand him to answer directly another part of the question asked in the previous question, whether the medical examiner would in his opinion be justified in making a charge for such an examination?

MR. KNOWLTON: I did mean to say that every "view" should be charged; that the Commonwealth don't expect anybody to work for nothing, and the amount is earned by the investigation. The body has been killed by the hand of man or by the elements, and his charge is for ascertaining which one of these. "Burning" is an unnatural death; it may be death by violence or by accident, and he came to the "view" for the purpose of determining that question.

The Society was addressed by HON. SHERMAN HOAR, United States Attorney for the District of Massachusetts, on

THE MEDICAL EXAMINER AS A WITNESS.²

DR. BRONSON: This gentleman says that he don't think that the medical examiner should take issue against the State. What does he mean by that?

MR. HOAR: I mean exactly this, that I think the medical examiner is a part of the machinery of the State; and while he should keep his mind entirely open and tell the exact truth, while he should give his opinion exactly, he should never be found as an "expert" on the other side where the State is involved. I think it damages his professional standing as a witness whenever he comes forward later as a

² See page 330 of the Journal.

witness for the Commonwealth. I think the willingness often shown in cases to testify against the Commonwealth as an "expert" against those chosen by the Commonwealth to be medical examiners, and in opposition to the view taken by them, has a tendency to degrade in the public mind the position of the medical examiner.

DR. BRONSON: I agree with my friend, the district attorney, on this subject; but there is one question involved here on which I desire to ask his advice as an ex-medical examiner. He, of course, has recently conducted a cause in the interest of the United States against a man who was alleged to have committed murder upon the high seas. Two experts were brought into that case (medical experts). One, examined by the defence, was present during that trial and was examined as to the mental status, so far as he could give it, of a certain witness in the case; and upon being brought upon the stand, he alleged that in his opinion that man was insane. The antecedent history emphasized that opinion, as I understand it. And he went into the record as a believer in the unsoundness of that man's mind. When the question was submitted to analysis, men who believed in the standing and character of that expert believed, I think, as a rule, that that witness was unsound mentally. Later, the district attorney called an expert who has charge of one of our insane asylums, and he took an adverse position. He declared his belief that that man was not insane, not unsound mentally, and that he had not been unsound at Rotterdam years before.

Now, in the case of that kind of questioning, I desire to ask the district attorney as to how he is going to harmonize views — those two statements — by any process other than that of reason? If Dr. X had been sent there by the United States, would he, in the opinion of the district attorney, have entertained views adverse to those he expressed when examined there by the defence? If so, this, of course, is a warping of that man's judgment based upon the method by which he was brought there as a medical expert.

MR. HOAR: I must decline to criticise any of the witnesses that have been in the case I have personally conducted. But I will say to my friend that I should like nothing better than to have it in the power of any court to appoint medical experts to give a definite decision, unbiased by the fact that they were called as witnesses on either side. I believe that that is essential, for the reason that the doctor states here. Men unconsciously take sides. They can't help it; I do it myself. Men do it honestly. If it were best for the court (it could not be done, in my judgment, without giving either side the entire right to call medical witnesses) in a case where opinion is given on either side, to examine men of character and unbiased, selected by the court and not by the counsel, to get their judgment, it would materially help twelve men, laymen, to decide the question at issue. And I should like to see that done.

I cannot discuss the particular matter stated here. And there is nothing, as long as our jury system exists — and I am a thorough believer in it, because I believe in my experience with judges and lawyers and doctors that the ordinary Yankee gumption of twelve men is apt to be right as much as that of

twelve educated men — but to rely upon the natural sagacity to detect flaws in even medical testimony, and to "size up" men even if they are doctors.

DR. SAWYER: There is quite a tendency, I believe, to call upon medical examiners as experts in the courts in cases where medical expert evidence or opinion is necessary. I would like to ask the attorney-general if he would consider it at all detrimental for the medical examiner to appear in such a case as that, where he does not appear contrary to the interests of the Commonwealth?

MR. KNOWLTON: In civil cases I see no objection at all.

DR. SAWYER: Pardon me. But there was one matter about which the attorney-general made the statement that a medical examiner should hesitate some little time before coming into the district of another medical examiner, but that where cases demanded immediate action he should respond at once. Now I have been a little embarrassed. I have been summoned two or three times into surrounding districts when the medical examiner was not at home at that time — summoned by the legal officers or selectmen; in one instance, by the chief of police of the city of Fitchburg. Just how far ought a medical examiner to intrude upon the jurisdiction of another medical examiner?

MR. KNOWLTON: The law distinctly provides that, although medical examiners are appointed by districts, that provision should not be construed as preventing them from acting in any other part of the county. I think it does not extend to another county. So there is nothing in the law that will prevent a man who has one district in a county going into another district of the county. Two things are to be considered in answering such a question. The first is, that it often happens that the whole consequences may depend upon immediate action. For example (I meant to have spoken of this in my address), it happens in my experience to an unusual degree that the question of how long the body had been dead is liable to be of vital importance; and that, of course, can only be determined with any accuracy by an immediate "view." I think the experience in several recent cases has impressed upon the several medical examiners the great importance of getting the temperature of the body more accurately than can be ascertained by the somewhat fallacious nerves of the hands — some accurate measurement of the temperature. Secondly, his own immediate success will lead him to see where for any reason his services are more in demand than those of the medical examiner of the district; and if the alleged temporary absence of any other examiner is a pretence to get the more favorite examiner he will find himself judge. There is no law but the unwritten law of courtesy; the unwritten right of each man to have whatever belongs to his district is only to be overridden when for any reason whatever there is reason for special haste. This is not a good answer, but it is all I can give.

DR. MEAD: Is there any regulation as to when a medical examiner should make an autopsy?

MR. KNOWLTON: Fortunately, the law is pretty plain about that. It imposes it on the discretion of the medical examiner, "if after having viewed the body and made the special inquiry, he deems a further examination necessary." If he shall proceed to make an autopsy upon the authority of the district attorney,

it then comes to the final discretion of the judgment of the man who is commissioned by the governor to use his discretion. I say, answering the proposed question by examples more than by principles, Where he becomes reasonably satisfied, without an autopsy, that there is no violence, he should not have an autopsy. Where he is left in doubt, and he thinks an autopsy will help him, he should have it. Where the cause of death is apparently "the unlawful act of another," then he should have an autopsy, not for the purpose of satisfying himself as to whether there was crime or not, but for the importance of the evidence that may be developed by the autopsy.

DR. MEAD: There is a subsequent law which says that the fee shall be paid only when the district attorney shall certify that the autopsy was necessary. It takes it out of the hands of the medical examiner.

MR. KNOWLTON: I remember that law; and it was passed undoubtedly in consequence of the fact that one or two medical examiners (one that I knew something about — not living) I am sorry to say were in the habit of looking at pecuniary results rather than the cause of justice.

I do not know how far the experience of medical examiners can correct the statement; but in my experience, with perhaps one single exception, I have considered the judgment of the medical examiners to be better than my own. And I have never refused the certificate when the examiner has thought he ought to make the examination. The most that can be said is, that if the district attorney does not agree, the examiner has no fees. But there again I would suggest that when the question comes up as to whether a view is necessary, or an autopsy, he should proceed regardless of whether he is making the county an expense or not, and regardless of the fact whether he is going to get anything out of it.

DR. DRAPER: I move the cordial thanks of the Society be given to Mr. Knowlton and Mr. Hoar for their lucid, useful and helpful interpretation of various doubtful points which have troubled us.

The motion was adopted with applause.

The next subject brought before the Society was a paper by DR. W. F. WHITNEY, entitled

THE IDENTIFICATION OF SEMINAL STAINS.¹

In reference to the subject of

MEDICAL EXPERT TESTIMONY

it was voted that the Executive Committee of the Society be instructed to co-operate with committees appointed by other bodies, legal and medical, in attempts to secure legislation to reform the present methods of employing medical experts in the courts of this Commonwealth.

A COSMETIC LAPAROTOMY. — Küstner, of Breslau,¹ has proposed a transverse skin incision in the fold of skin which often occurs at about the upper limit of the pubic hair in women. This superficial incision being well retracted, the ordinary median incision is made in the *luna alba*. The linear skin cicatrix is rendered almost invisible by the pubic hair and the natural crease in the skin.

¹ *Monatsschrift für Geburtshilfe und Gynäkologie*; Centralblatt für Gynäkologie, March 13th.

² See page 329 of the Journal.

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CEREBRO-SPINAL MENINGITIS A DISEASE DANGEROUS TO THE PUBLIC HEALTH.

ALONG with the growth and increasing density of population the tendency of progress in preventive medicine is in the direction of giving greater and more definite powers to boards of health, for the investigation and the prevention of the spread of infectious diseases. Many years ago (1827) laws were enacted in Massachusetts making it the duty of householders, and of physicians to report to the selectmen or boards of health of towns, the existence of small-pox, or of *any other disease dangerous to the public health*; and in 1883, the boards of health were required to transmit the same information to the State Board of Health, so far as small-pox was concerned. In 1893 the law was made more explicit, and local boards were required to transmit immediate information to the State Board as to the existence of *all diseases dangerous to the public health*. This term, "*other diseases dangerous*," etc., was not defined by statute, but left in an indefinite manner.

A somewhat similar act was recently passed in England. A dozen or more diseases were specified in the English act as notifiable, but power was given to sanitary authorities to order that the act shall apply to *any other diseases* besides those which are specified.

The following statutes are now in force in Massachusetts:

[PUBLIC STATUTES, CHAP. 80, SECT. 78, ACTS OF 1884, CHAP. 98, AND ACTS OF 1891, CHAP. 188.]

(1) When a householder knows that a person within his family is sick of small-pox, diphtheria, scarlet fever or any other disease dangerous to the public health, he shall immediately give notice thereof to the selectmen or board of health of the town in which he dwells, and upon the death, recovery or removal of such person, the rooms occupied and the articles used by him shall be disinfected by such householder in a manner approved by the board of health. Any person neglecting or refusing to comply with either of the above provisions shall forfeit a sum not exceeding one hundred dollars.

(2) When a physician knows that a person whom he is called to visit is infected with small-pox, diphtheria, scarlet fever or any other disease dangerous to public health, he shall imme-