is irrelevant to the subject of accommodation for assistant-surgeons. These vessels were formerly commanded by lieutenants, when there was abundance of space for the officers; but even now, with an increase in the number of officers, and in the number of officers' messes, there is accommodation for the present complement."

The preceding communication was dated August 5th, 1850—namely, nineteen days after the date of the Admiralty order, respecting rank and position of assistant-surgeons.

The profession is now made acquainted with the capabilities of steamers and brigs on the west coast of Africa. We shall again hear from Africa, when, if the assistant-surgeons be reported as still unprovided with cabins, let the profession call upon the members of Parliament to bring the matter again before the House. Last session, a great principle was enunciated—viz., "That the accommodation provided for the assistant-surgeons on board her Majesty's ships of war is inadequate, and insufficient for securing the full benefit of their professional service." But the Lords of the Admiralty do not understand *principles*; they must be told in detail what they have to do. I trust that the legislature will meet the necessity with suitable measures. The history of the case of the naval assistant-surgeons is unexampled for the disregard paid by the Admiralty to the commands of the Sovereign, and the declared sentiments of Parliament.

I take this opportunity of renewing my grateful acknowledgments to Mr. Wakley for the continuation of his literary services, as Editor of *THE LANCET*, in behalf of the assistant-surgeons of the Royal Navy.

I remain, Sir, your obedient servant,
FREDERICK JAMES BROWN, M.D.,
Late Assistant-surgeon, R.N.

Strood, Rochester, Nov. 1, 1850.

CLAIMS OF MILITARY MEDICAL OFFICERS TO MILITARY HONOURS.

To the Editor of *THE LANCET*.

SIR,—Having perused with much gratification a well-written article on the "late award to merit granted to medical officers," in your number of Saturday, the 24th inst., I am induced to offer a few observations on the subject, and to bring before the public the names of individuals whose gallant bearing, I see, finds well-merited mention in Hart's Army List. The limited number, culled from a long list of deserving officers, has urged your indignant but humble servant to inquire as to the services of my professional brethren attached to the army. To those at present on full pay, the gallant Major Hart, 49th Regt., in his valuable publication, does ample justice. The services of hundreds, now on half-pay, cannot, of course, reach the eye, yet very many of them are indeed replete with noble and chivalrous deeds and daring.

The proportion of honours which, in the British army, is open to all ranks, is not fairly meted out to the medical officers. Where was the general action, from Minden to Goojerat, that the regimental medical, as well as staff officers, were not as forward as their spirit dare consistently urge them? Where was the storming party that had not a medical officer attached to it? One glance, however, at a general hospital, when either epidemics or endemics prevail, will show the same individual who faced death in many a hard-contested action, coolly and philosophically performing onerous and honourable duty, through the foetid and fatal atmosphere of a densely-diseased or strongly-fevered ward. Let but, indeed, any or all of the gallant generals of the present day be asked an opinion as to the merits of the medical officers who served under their immediate command, and, as by magic, the names of those whose modesty will otherwise doom them, seemingly, to the silence of neglect, shall at once be brought into notice. In the name of justice—not generosity—then, let a full and fair award be made.

Every legitimate effort should and ought to be urged to obtain that which no right-minded man, enjoying the emblazoned insignia of hardy service, could deny to those of the medical department who were side by side with them in the "Battle and the Breach."

When I mention the name of Guthrie, I almost blush for those who could, apparently with so much apathy, have the want of common moral courage, rectitude, and spirit, to offer to such a man only a third-class order. Enumerate his services! Who can? In the name of common sense, then, at any rate, if government take such especial pains to be neither necessarily just, nor commonly generous, *palmarum qui meruit ferat*. Such an omission must have been accidental, or, to say the least of it, hastily, and perhaps unre-

flectingly, arranged,—such governmental oversights, however, too frequently occur. Surely, Mr. Editor, the chivalrous rival (if he may be so called), the cotemporary, of the ennobled Larrey, will not be so slighted, or led to suppose he has, as God knows many of us in private practice have, "bled" in vain (vein). This ought not to be; Justice forbids it! Be it hoped that a second list will correct the omissions of the first, by placing him, and others fully deserving, in that high position to which their admirable services so indisputably entitle them. Why should not the gallant Alexander Ogilvie, of the Ordnance Medical Department, after thirty-nine years' active service, and wounded (a bayonet wound, too,) at the storming of Fort Niagara, receive some decoration? I would venture to propose that the claims of those whose extensive, as brilliant service, can be carefully sought out, be, through the medium of your valuable journal, laid before the public. Why should not medical officers reach the honoured rank, though perhaps not quite so easily as Sir Charles Trevelyan, an Under Secretary of State, &c., and others. At first, the "civil order of the Bath" was offered, but most spiritedly declined. On the 16th inst., a short military gazette acknowledged the error, correcting the slight. That on more mature consideration, however, a more generous arrangement will be made, there is little doubt! Under this impression, for the present, I say no more; but I purpose, if my ideas on the subject meet your views, to trespass again, and perhaps again to do so. I would now, in addition, particularly beg to recommend all medical officers, on full and half pay, to send in, as soon as possible, a list of general service, naming the different actions they have been in, the dates of their respective rank, &c., to Major Hart, 49th Regiment, care of Mr. Murray, Albemarle-street, for publication in his forthcoming Military Biographical Dictionary, which work will, in all probability, find a place in the library of numbers connected with the British army.

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

JOHN BOND, M.D., M.R.C.S. L. & E., &c.
Grafton-street, Fitzroy-square, Oct. 1850.

P.S.—The following is a hasty sketch of some gallant officers' services; a more lengthened list can be forwarded hereafter:—

28th Regiment.—Surgeon William Henry Young, M.D.: thirty-eight years' service; Peninsula and Waterloo; medal and two clasps, for Badajos and Salamanca.

Third Dragoon Guards.—Surgeon G. Alexander Stephenson: forty-three years' service, in Peninsula, from 1809 to 1814; medal and eight clasps, for Fuentes D'Onor, Ciudad Rodrigo, Badajos, Salamanca, Vittoria, Pyrenees, Nivelle, and Nive.

Fifth Dragoon Guards.—Surgeon James Barton, M.D.: forty-one years, full pay; Copenhagen in 1807, capture of Martinique in 1809, campaign 1815, in the Netherlands and France; medal and one clasp, for Martinique.

Sixth Dragoon Guards.—Surgeon John Heriott: forty years, full pay; in the Peninsula, from 1809 to the end of the war, 1814; medal, with six clasps, for Talavera, Salamanca, Siege of Burgos, Vittoria, the Pyrenees, Nivelles, and Orthes.

First Royal Dragoons.—Surgeon John M. Martley, M.D.: thirty-nine years' service; medal, for Salamanca.

Third Light Dragoons.—Surgeon James Henderson, M.D.: forty-one years' service; capture of Guadaloupe, 1810; two years in the American War; during the whole of the Burmese war, as also in the campaign of 1842, in Afghanistan.

The medical department affords a very strong list of services, but a reference to Hart's Army List shows a lengthy detail of long and valuable services. The Ordnance Medical Department, too, has its full share.

FURTHER NOTE ON MR. DUNN'S CASE OF HEMIPLEGIA.

BY MARSHALL HALL, M.D.
To the Editor of *THE LANCET*.

SIR,—I unfeignedly regard Mr. Dunn as one of the most meritorious members of our profession. He has especially bestowed much attention on the subject of the nervous system. I regret, therefore, the more, that he should not have adopted another line of proceeding in regard to his contributions on this subject.

Five minutes' conversation with me, or with my friend, Mr. Smith, would have preserved him from writing some parts of his late communication to your own pages, and physiology from the continued reproach of uncertainty and disputation.

Mr. Dunn concludes his paper thus:—"The condition of the irritability of the muscles of paralyzed limbs being still, I believe, an unsettled question—" If this question be still un-

settled, it most certainly never will be settled by such experiments as those detailed in Mr. Dunn's paper. The case and the instrument were equally unsuitable to its solution.

But, Sir, I do not think the question is unsettled. For many years I have continued to subject my paralytic patients to the mild influence of the galvanic current in such a manner as to make it a test of the irritability of the muscular or nervi-muscular fibre—that is, the galvanism was used of low intensity, its force or quantity being gradually augmented, until its influence in inducing muscular contraction is first perceptible; whilst cases were chosen of an unequivocal kind, and uncomplicated by shock, by spasm, or by alteration of tissue.

The effects are then uniform. The sole exception to the rule—of augmented irritability in cerebral paralysis and of diminished irritability in spinal paralysis—has arisen from defect in the previous diagnosis, or selection, of the cases, as in this of Mr. Dunn.

If all this be true, how important is the fact!—how important in physiology and in diagnosis, and, therefore, in practice!

But Mr. Dunn has not confined himself to his case. He has proceeded to adduce experiments—the experiments of the late Professor J. Reid. Now, Sir, with every respect for another, and a departed and most worthy member of our profession, I am compelled to say that Professor J. Reid's experiments were erroneous. This is pointed out at length in a recent paper in the *London Medical Journal*.

Professor J. Reid mistook an electrogenic state—the 'alternatif' of writers on this subject—for diminished irritability, and by this mistake is led to a wrong conclusion, as I have shown in the paper just alluded to.

One word more in reply to M. Duchenne. What will your readers think of the following case as a case of Spinal Paralysis?

In 1847, a man, aged thirty-eight, a vine-dresser, was in the St. Felix ward, affected, during seven years, with a general chorea, (!) with muscular debility." (!) "The emaciation was not very considerable, the muscle presenting everywhere considerable prominence; in the vertical position, his head and body were so agitated (!) that standing was impossible; in the horizontal position, the least muscular effort, whether of the superior or inferior extremities, induced general trembling. When he wished to take hold of anything, his arms described arcs, and moved to the opposite side. The muscular weakness was considerable, the patient being scarcely able to walk with the assistance of an arm, and incapable of squeezing the hand. The voice was attended by convulsive spasms of the diaphragm. No cutaneous anæsthesia; general health good," &c.

M. Duchenne, whilst glorying in this supposed exception to the law which I have laid down, for spinal paralysis, admits that it is the *only* one. Your readers will perceive that it is no case of paralysis whatever, and therefore no exception whatever to that law.

No progress can be made in this or any other important question, until our proceedings are conducted with a little more precision.

I will extract one brief paragraph from my second paper read before the Royal Medical and Chirurgical Society:—

"Having made these preliminary and precautionary remarks, I proceed to the detail of a series of new experiments and observations. My task will then be terminated, and I trust the Society will be convinced that it was not without due caution and care that I gathered together the facts which I ventured formerly to lay before it, and that I drew my inferences from them. This is the reward of my labour—that I have nothing to retract, nothing even to modify."

Now, Sir, this result is not accident; it is the effect of thoughtful care in devising and performing my experiments; and if Dr. Todd, M. Duchenne, &c., will do as I have done, our results will doubtless be the same.

I should not have re-entered upon this discussion, but for the importance of its results—viz.,

1. That in cerebral paralysis, by which I mean any disease which severs the influence of the cerebrum, and consequently the acts of volition, from the paralyzed limbs, the irritability is augmented, whilst

2. In spinal paralysis, by which I mean any disease which severs the influence of the spinal marrow from those limbs, the irritability is diminished;—the case being tested by galvanism in its simple current, and of low intensity.

3. That Galvanism, so employed, becomes a source of Diagnosis.

4. That the cerebrum, or volition, is the exhauster, whilst the spinal marrow is the source and restorer of this property.

I am, Sir, your obedient servant,

Grosvenor-street, Oct. 26, 1850.

MARSHALL HALL.

P.S.—Even whilst I am writing this note, I receive a report in accordance with all my experience in this matter. The mode of proceeding is so simple, that the little patient's father has become at once the operator and observer.

"Brighton, Nov. 4, 1850.

DEAR SIR,—We have been watching the result of the galvanism since we had the pleasure of hearing from you, and we find that the affected or paralytic side is moved more than the other, the hand in particular."

I have wondered that the profession has not been favoured with Dr. Pereira's more recent experiments. I am aware that that gentleman provided himself with the proper galvanic apparatus. I will speedily send you a full account of M. Duchenne's paper, who has repeated in Paris pretty nearly what Dr. Todd had done in London.

THE MEDICAL PROTECTION OFFICE.

To the Editor of THE LANCET.

SIR,—In the advertisement issued by the committee of this Office, on the 8th ult., it is stated that Mr. Beckett had "handsomely given to them the possession of all books and documents."

I have lately transferred my accounts to the Medical and Surgical Practitioners' Society, and have given an order to the Medical Protection Office to hand over to them my list of debtors' accounts, and other documents connected with my business. On inquiry to-day, as to how this order had been complied with, I was surprised to learn that the clerk of the Society of which I am now a member had applied for what I had ordered to be delivered to his principals, but had been met by the committee of the Medical Protection Office, who were sitting at the time, with the objection, that Mr. Beckett had possession of all books, documents, &c., and would not allow them to give any papers or information inquired for.

I have thought it my duty to acquaint you, Sir, with this fact, for the information of other members, and as a proof of how little reliance can be placed on the statements and promises of the Medical Protection Office.

I am, Sir, your obedient servant,

G. Z. HILLAS, M.D.

Sydney-place, Brompton, Nov. 6, 1850.

AN ALLEGED BREACH OF MEDICAL ETIQUETTE.

[LETTER FROM DR. HELSHAM.]

To the Editor of THE LANCET.

SIR,—In reply to the charge made against me by Mr. Mackin, I have to observe, that the profession cannot judge "as to which of us may be right," unless they are rightly informed; and as I can have no objection to furnish my version of the story, I beg to say, that late in the evening of the 23rd of September last, I was requested, by the son of Mr. — to visit his father, residing at Pimlico, a distance of five miles from my house, and who, he stated, had been suddenly taken ill on the previous day, with symptoms of paralysis; that in the hurry of the moment they had sent for the nearest medical man, Mr. Mackin; that he was a stranger to them; that they had no confidence in his treatment; and as he had proposed to bleed, they had become much alarmed, and wished me to attend immediately to this request, as I had previously attended a part of the family, and was on visiting terms with them. I at once acceded.

On my arrival, and after an examination of the patient, I found the symptoms to be such as not to require bleeding or any other depleting measures, and I assured his friends that quietude and a well-regulated diet would soon restore him to health.

Before I took my leave, Mr. Mackin called, and I briefly stated to him my view of the case, in which he apparently acquiesced, and I left with an understanding that the patient was not to be bled, that if any unfavourable change should take place, I was to be sent for, and that I would see him again, but made no appointment, as my visits were honorary, nor did I suggest any alteration in the medicine he was taking at the time which Mr. Mackin informed me was saline draughts. Indeed, I considered them to be as good as anything else, under the circumstances, and I felt no desire to interfere with his interests.

Continuing to receive a favourable account of his progress almost daily from his son, I did not call again for several days. On finding, however, he was still taking the saline medicine, I gave a prescription for a tonic mixture, and a