instead of showing. *Nolens volens*, he becomes a "coach,"¹ an *employé* paid to get men through their examinations; one soon considered to be in the pay of the men; one whose humble duty it is to obey the constant cry, "Give us a grind on this part and on that"; one who is to be a walking book to save the men the trouble of reading, who is to follow in the fads of the day, who is to be led, not one who is to lead. The rest follows. The high example is lost; the standards are lowered; the floodgates of demoralisation are opened. "Cram" reigns supreme everywhere and from beginning to end, none deploring the course of events more than the most earnest teachers themselves.

I am, Sirs, yours truly,

Oct. 31st, 1893.

THOMAS COOKE, F.R.C.S.

P.S.—Would physicians, and those engaged in the onerous duties of general practice, kindly give expression to the degree of importance, or otherwise, to them of a practical knowledge of anatomy? The view is put forward nowadays, loudly and authoritatively, that very little anatomy is wanted except for the pure surgeon, and that to those in other lines of practice physiology is by far the more important science. Is this so, or not? I can only speak, as a surgeon, of the value of anatomy. It is felt that, in the present crisis, the other side of the question should be heard.

WEEKLY DEATH RETURNS.

To the Editors of THE LANCET.

SIRS,—There is no table of the Registrar-General's statistics more often quoted by the lay press than is that which deals with the mortality returns of the thirty-three largest English towns as calculated each week to an annual death-rate per 1000 persons living. In my opinion all mortal statistics are in the present state of science somewhat speculative, but of all the published tables none seem so well fitted to mislead the lay public as the one I have mentioned. In the metropolis, with its teeming millions of inhabitants, a weekly death-rate so calculated may be useful, but in the smaller districts it has no adequate value, and it may be actually injurious. Take this town, for instance, with (say) 120,000 inhabitants; one hundred and twenty deaths in a year will make the difference of one whole number in the annual death-rate per 1000 inhabitants; in other words, between two and three deaths per week will make the corresponding difference in a weekly return which is calculated to a yearly rate as above mentioned; since, however, the Registrar-General inserts in the tables death-rates calculated to one or more decimal places anyone can estimate for himself the scientific or other value to be attached to these figures. Our town has, I believe, within the past eighteen months or so ranged in these tables from 12.0 to 60.0. We have, consequently, had a large experience in this regard; on several occasions we have headed the list of thirty-three towns with the lowest death-rate, and—tell it not in Gath—during an influenza epidemic last year we have touched bottom more than once. The lay press scatter these returns broadcast over England, and nervous people may be debarred from visiting a town whose weekly death-rate has been suddenly raised by the demise, it may be, of a few of the oldest inhabitants. If it is necessary to have a weekly report of the deaths in the thirty-three largest towns, it might be advisable to publish the actual number of deaths that have occurred in each district since the last report; if more information than this list contained was requisite, a second table in parallel columns might show the corresponding average numbers of deaths per week during the past twelve months. Personally, however, I am in favour of not publishing weekly reports.

I am, Sirs, yours obediently,

Brighton, Oct. 28th, 1893.

W. AINSLIE HOLLIS.

"SEA VOYAGES FOR THE SURGICAL CONVALESCENT."

To the Editors of THE LANCET.

SIRS,—I read Mr. Hudson's article on the above subject, which appeared in THE LANCET of Oct. 21st, with great interest. I think, however, that Mr. Hudson, when he states that those who write on the subject of the ocean cure do not mention anything about surgical cases, must have overlooked

the word "debility," for which most of them recommend a sea voyage. In my work on "Voyaging for Health" I strongly advise sea voyages for all cases of debility, and I certainly mean to include debility caused through suppuration which may have been cured by surgical aid. I entirely agree with Mr. Hudson that no treatment is so beneficial as sea voyages after many surgical operations. I wish I could endorse his opinion that disagreeable smells and disturbances from vibration are things of the past. There has certainly been great improvement in these inconveniences in all modern-built ships, but in most of the old ones, which form the majority, these nuisances still exist. I cannot agree that late house surgeons or physicians, without any practical insight into general practice or any marine training, make experienced ship surgeons, for there is no post where practical experience of general treatment is more required than on board a large passenger ship. I regret to say that the temperatures given in the chart do not at all tally with the temperatures I took during a voyage at the same time of year. The "tropics" must have become cooler and the voyage from the Cape to New Zealand and New Zealand to Cape Horn warmer since I made voyages by that route. I am afraid that you could not afford space for daily temperature, so I only give the temperature at salient points:—

- Jan. 12th.—Left Plymouth; beautiful day; temperature 45° F.
- „ 17th.—Arrived at Teneriffe; very fine day; temperature 74°.
- „ 21st.—Fine day; sea calm; very hot; temperature 84°.
- „ 23rd.—Crossed the line; could not sleep for heat; temperature 85°; temperature of sea 82°.
- „ 24th.—Still very hot; temperature 85°; temperature of sea 82°.
- „ 28th.—Fine day; sea calm; temperature 76°.
- Feb. 1st.—Arrived at Cape Town; sea very rough; weather hot; temperature 82°.
- „ 6th.—A very cold, foggy day; some snow; temperature 41°.
- „ 12th.—Very cold day, but fine.
- „ 20th.—Arrived at Hobart Town; very hot in the town; temperature 80°; on board 72°.
- „ 24th.—Arrived at Wellington; temperature 74°.
- „ 26th.—A most lovely day; very hot; temperature 78°.
- March 1st.—Arrived at Auckland; beautiful day; temperature 82°.
- „ 9th.—Arrived at Napier; intensely hot; a very high, warm wind; temperature 88°.
- „ 21st.—Left Wellington; lovely day; temperature 72°.
- „ 22nd.—A rough, cold day; temperature 50°.
- „ 25th.—Awful day—wind, rain, and snow; vessel rolling fearfully; temperature 42°.
- April 1st.—Very cold wind; some snow; temperature 37°.
- „ 3rd.—Passed through the Straits of Magellan; very cold and dull.
- „ 7th.—Much warmer; temperature 70°.
- „ 9th.—Temperature in my cabin 80°.
- „ 10th.—Could not sleep on account of heat; temperature 85°; temperature of sea 80°.
- „ 11th.—Arrived at Rio de Janeiro. Heat intense; yellow fever rampant (200 deaths a day); temperature 86°.
- „ 14th.—A regular boiling day; no breeze; temperature 86°.
- „ 15th.—Still hotter; temperature 87°; temperature of sea 83°; temperature in cabin 94°.
- „ 16th.—Temperature in cabin at midnight 90°.
- „ 18th.—Heat very great; temperature about the same; crossed the line.
- „ 20th.—Much cooler; temperature 80°.
- „ 27th.—Arrived at Teneriffe; temperature 74°.
- May 3rd.—Arrived at Plymouth; fine day; temperature 61°.

Although I consider the round voyage to New Zealand an excellent one for many cases, great care must be taken that no disease in an inflammatory condition should be sent this voyage, and physicians should not lose sight of the fact that the changes of temperature are very great in the different latitudes which vessels on this route pass through. I do not consider that an opinion can be formed regarding the merits of a voyage without carefully going into the history of the cases. A well-travelled medical man can at once judge the temperature of any place by the latitude and season of the year, particularly if he is acquainted with the trade winds.

¹ The metaphor is a good one: "Men are to be picked up on the road and carried on *passively* to the goal."