Correspondence.

"Audi alteram partem."

"CHILD MORTALITY IN ENGLAND."

To the Editors of THE LANCET.

SIRS,—You have honoured me with a second leading article in THE LANCET of Dec. 22nd, and there is much in it with which I agree; yet I cannot but regard your dealing with my argument as incomplete and likely to mislead, which, I am sure, is far from your intention. You refer to the labours of that giant statistician, the late Dr. Wm. Farr, as if he were adverse to my view. I was the first to read a certain presentation copy of Mr. Noel Humphreys' excellent compendium of his works, and my impression is that Dr. Wm. Farr would have encouraged the use of coefficients like mine as the best means of setting forth the relative mortality of the several age groups. I did not arrive at these coefficients in the way you suppose. Had I done so the errors would have been prodigious though concealed. From 1881 to 1891 the estimated population of the age group 0 to 5 went more and more widely wrong in the annual reports and summaries of the Registrar-General owing to circumstances over which he had no control, so that in 1890 there was an error in excess of about 78,000 as regards the population of the said group in London alone. No wonder the death-rate of the group seemed to decline rapidly. Coefficients of incidence are for the purpose of comparing the death-rates of the several age groups with the average for the time being. The exact relation of each group death-rate to the average being given year by year any variation can be noted. Having the average and the coefficient we easily obtain the group death-rate as their product. But I contend that it is advantageous to be able on occasion to study the relative proportion of the group death-rate to the average without having that group death-rate or even the average itself as a disturbing element always before our eyes. We may place ourselves in a fools' paradise if we look at a declining group death-rate only. What I have found is that from 1876 onwards there has been in regard to the age group 0 to 5 a continual increase in the coefficient of incidence of mortality, showing that this group has had an ever-increasing share of the deaths that occur. You yourself admit that "the rate of decrease of child mortality has not been equal to the rate of decrease of mortality at the later age periods." This way of putting it disturbs the conscience of the nation less; but there must be a cause for the difference you concede, and I ask, What can that cause be? You suggest that if some means of eradicating cancer and phthisis were discovered I could not be grieved, and yet as these are destructive to the later age groups the improvement would make the incidence of mortality upon the younger group all the greater in comparison. So far from denying this, I accept it as strengthening my position. If A and B are running level in a race it makes no difference to the result whether A run slower or B run faster—B wins. But in the case before us the younger age group lags far behind, and that is why special attention should be paid to this group first. It is the turn of the children this time. Let us try and discover some means of removing Death's icy hand from them.

I was not, as you suppose, ignorant of the fact that, if the present excessive rate of mortality among children under the age of five years could be reduced to a third of its present figure, the coefficient for this age period would decline much less. It would become about five-elevenths of what it now is, supposing all else to remain the same. In order to reduce the coefficient to unity the death-rate of children under five years of age would have to decline to three-fourteenths of its present proportions, for the death-rate of this unfortunate group is at present nearly five times as great as the average death-rate of the other groups. Truly you are well within the mark in speaking of the "terribly excessive waste of child life in this country." But in combating my contention that the comparative power of resistance to disease and death grows less year by year in the group under consideration you confine yourself to the coefficients of incidence of mortality "from all causes." Therefore I beg to remind you that I not only brought forward as additional evidence the fact that the group was

diminishing in numbers at the wrong end (those least fit multiplying pretty much as heretofore), and that the actual death-rate of infants under one year of age was increasing, but showed that five of the seven principal zymotic diseases were increasingly fatal to the group 0 to 5 as a whole when compared with the later groups. Thus, in London during the eighteen years 1876-93 the coefficients of incidence of mortality upon this group ran up as follows: scarlet fever from 5.044 to 5.660, diphtheria from 4.618 to 5.723, measles from 7.186 to 7.952, whooping-cough from 7.401 to 8.148, and diarrhoea from 6.849 to 7.505, and the ascent was in each case by fairly regular gradation. Now you cannot account for this fivefold increase by any supposed relief to the other groups as regards cancer, phthisis, &c.; and yet there must be some cause, or combination of causes, to account for it. The increase has occurred in the coefficient irrespectively of the direction in which the average death-rate from the disease has moved; in some this has declined, in others (notably diphtheria) it has risen. You must admit, taking each of these five diseases by itself, that the age group 0 to 5 is not only less able to resist the onslaught than are the other groups (that is patent from the magnitude of the coefficients given above), but that it has become in comparison less and less able since each coefficient has increased. Year by year it has had a greater share of the deaths that occur from each of these five zymotic diseases. Can you account for this on any other hypothesis than that which presented itself to me? Perhaps you will copy your astute contemporary and declare that the result would have been different if the years had been transposed.¹ Such statements win my admiration.

I am, Sirs, your obedient servant,

Kingston-on-Thames, Dec. 27th, 1894.

D. BIDDLE.

CANCELLING OF DEGREES.

To the Editors of THE LANCET.

SIRS,—Referring to the report in THE LANCET of Dec. 1st, 1894, of the proceedings of the General Medical Council, it seems a pity that so much of the time of the Council should have been taken up in discussing the question of the degradation of university graduates, when a little inquiry would have elicited the fact that universities were not so neglectful of their duty in the matter as has been supposed. As regards the University of Aberdeen the subject has recently been brought before the Scottish Universities Commissioners in a memorial addressed to them by the Senators, the initiative having been taken by that body, and not by the University Court, as might perhaps be inferred from your report. If the Commissioners regard the subject as within the scope of their commission, it is to be hoped that they will issue an ordinance prescribing the circumstances and mode in which an offending graduate may be deprived of his degree. If not, it will be necessary to have the sanction of Parliament by legislative enactment. In addition to the difficulties which were spoken of at the discussion in the Council there has also been suggested this one—that as the medical degree confers a Parliamentary franchise, the cancelling of it would result in disfranchisement. But this should be no real difficulty. If some of our politicians have their way all universities will shortly be deprived of their Parliamentary privileges; and, even were it otherwise, the penalty of disfranchisement is not too heavy to pay for such "infamous conduct" as would lead to the removal of a graduate's name from the roll of his university. I am, Sirs, yours faithfully,

Aberdeen, Dec. 17th, 1894.

DAVID W. FINLAY.

"ASSOCIATION OF QUALIFIED ASSISTANTS, JUNIOR MEDICAL OFFICERS, AND LOCUM TENENS."

To the Editors of THE LANCET.

SIRS,—I shall be pleased to receive the names of gentlemen who are favourable to the formation of such a society, stating their views on the subject, also giving their qualifications and addresses, so that I may be enabled to ascertain whether such an association as the above would meet with the approval and coöperation of a sufficient number to warrant my calling a meeting in London to consider and thoroughly discuss this new departure in all its important

¹ Brit. Med. Jour., Dec. 15th, p. 1383.