diagnosis and the more frequent autopsies, which have transferred a large number of deaths, for instance, from "fever" to tuberculosis. In view of these changes, it is futile to lay stress on the fact that under the head of typhus fever the percentage of deaths under five to deaths from all ages has declined from 6.4 in 1871-75 to 3.4 in 1886-90, or of typhoid fever from 17.4 to 8.4 per cent. (after correction for the varying classification in regard to remittent fever has been made). We quite agree with the remark (paragraph 198) in the main report, that "there has certainly been no change in the age-incidence of these diseases which can be said to correspond with the change in the age-incidence of small-pox to which we have called attention."

(To be continued.)

AN APPEAL.

IN the next column we have referred to the recent sad death of DR. FREDK. E. ADAMS, Medical Officer of Health for East Hertfordshire, on October 3rd, at Genoa, and to the distressing fact that his widow and two children are left entirely unprovided for. His health was so bad during the last ten years that he was unable to effect any insurance on his life, and his consequent inability to make provision for those dependent upon him was a source of much grief to him.

An effort is now being made to get his elder son, ARTHUR BLAKE ADAMS, aged 11, into the Royal Medical Benevolent College, at Epsom. The election next May is the only one for which this boy is eligible, owing to his age, and as the Council do not meet until January, he cannot be accepted formally as a candidate until then. The case being, however, extremely urgent, his mother and friends are trying to get promises of support at once, as many votes he would hope to get might, by January, be promised elsewhere.

Under the circumstances we venture to appeal to all members of the Society to do what lies in their power to promote the candidature of ARTHUR BLAKE ADAMS, both by their votes, if they possess any, and by their influence with residents in their districts who may be Governors of the Institution; for if our late confrère's son is to be successful, it is absolutely necessary that no stone be left unturned. *Promises of votes should be sent to the Editor of PUBLIC HEALTH as early as possible.*

OBITUARY.

FREDERICK E. ADAMS, M.D., M.Ch.Ireland,
D.P.H.Camb., F.C.S., etc.

WE deeply regret to have to record the lamented death, at the comparatively early age of forty-two, of Dr. Frederick Edward Adams, Medical Officer of Health for the East Hertfordshire Combined Sanitary District, who died on the 3rd ult. at Genoa, whilst on a voyage for his health.

Dr. Adams was a native of Cork, and received his medical education at the Queen's College and North Infirmary of that city. Though never physically strong, as a student his ability and industry made his career one of uninterrupted and exceptional success, and enabled him to secure several of the keenly-contested scholarships and exhibitions connected with his medical school. In 1882 he graduated with honours in the Royal University, Dublin, and was subsequently appointed house surgeon and house physician at the Cork County Hospital. These posts he filled for two years, the while earning the warm esteem and regard of the staff of that institution. Thereafter he married, and, settling in Cork, was, in 1885, appointed Lecturer on Anatomy and Medical Tutor at the Queen's College, and a member of the honorary staff of the City Fever Hospital. His duties in these capacities were discharged with much ability and acceptance, until, unfortunately, suddenly-failing health forced him to relinquish the good work he was doing, and, by prolonged sea voyages, to seek much-needed rest and recuperation. Returning apparently restored, he settled for a short time in Shropshire, but finding his strength over-taxed by the physical requirements of general practice, he qualified in public health at Cambridge in 1889, and in the following year was appointed medical officer of health and public analyst of Bolton. This office he held till the autumn of last year, and despite the heavy incubus of constant ill-health, his work, as his reports testify, was conscientiously and admirably done, his tact and natural amiability of temperament enabling him to attain his ends at a minimum of friction with those whose interests were affected. Personally, Dr. Adams, was held in the highest esteem by the members of his Corporation and his municipal colleagues, whilst his official and social relations with the Bolton profession were of the

most cordial nature. In the autumn of last year, he was the successful applicant for the vacancy in the East Hertfordshire district (created by the promotion of Dr. George Turner to his present post at the Cape), and his friends hoped that the change to pleasant country life and surroundings would prove of much physical benefit to him. Unfortunately, this was not to be, and continued ill-health again compelled him, as a *dernier ressort*, to undertake another sea voyage, during which he rapidly became worse, and, as already stated, died at Genoa on October 3rd, a stranger in a strange land, before any of his family could reach him. Dr. Adams leaves a widow and two sons (aged 11 and 7), for whom the deepest sympathy will be felt, especially as they are, we regret to learn, wholly unprovided for, the state of Dr. Adams' health for many years having been such as to preclude the possibility of effecting any insurance on his life.

Dr. Adams was at the time of his death vice-President of the North-Western Branch, of which he had been a member for five or six years. On the somewhat rare occasions in which he joined in debates, his observations were shrewd, succinct, and lucid, and the same remark applies to his official and other writings. Two of his reports—one dealing with the Bolton water supply, and the other an excellent description of mechanical stokers for smoke prevention—appeared in full in this journal. He was also the author of a paper "On the Surgical Treatment of Pulmonary Cavities."

His death will be felt as a keen personal loss, not only by the members of the North-Western Branch, who presumably knew him best, but also by those other members of the Society who had the advantage of his acquaintance. Courteous always in bearing and address, his quiet gentleness of manner and unassuming modesty were cordially appreciated and esteemed, and these amiable characteristics will long remain affectionately associated with his memory.

SUPERANNUATION ALLOWANCES.

TAKEN as a whole, the salaries of officers of local (as distinguished from imperial) authorities have always been, and are now, inelastic, that is not given to increase *pari passu* with the domestic expenses, and insufficient to allow of an adequate provision against old age. Hence it was that formerly every officer looked forward to receiving a pension when incapacitated from further service, both as a reward for meritorious service and as a slight supplement to the limited wage paid during his term of service. There has, however, of late been a growing indisposition on the part of authorities to grant pensions, and in several cases, in the last few years, appointments have been made subject to the proviso that there shall be no

claim for pension. In any case the granting of the pension has been taken as a matter of favour, and only too often has been lost through caprice of the authority, or through temporary unpopularity of the officer from various causes.

Certain municipal and other authorities have adopted superannuation schemes, under which the obtaining of a pension is a matter of length of satisfactory service, the funds for such pension being formed from contributions paid by the officers themselves, supplemented, in certain cases, by grants from the authorities. Excellent as such schemes are, they are naturally limited in their operation, and the majority of officers have to depend on the good-will of their employers for that provision against the incapacity of old age which they cannot lay up for themselves.

It is upwards of twenty years since the Poor-law Officers, as a body, began to work out a scheme whereby all in that service should be secured the rights of pension. Their efforts were crowned with success during the last Session of Parliament, when the "Poor-law Officers' Superannuation Act, 1896," became law. In December of last year a conference was convened by the Municipal Officers' Association, to consider how the same privilege could be secured for all officers engaged in every branch of local public service. The conference did no more than affirm the principle that all officers should be in a position to secure old age provision, action being postponed pending the decision of the fate of the Poor-law Officers' Bill then before Parliament. In October of this year the Conference re-assembled, and decided to initiate an agitation for the simple extension of the Act of 1896 to all officers engaged in local public service. Circular letters have been addressed to all societies, associations, etc., representing such officers, inviting their co-operation. It will therefore be well to briefly set out the chief provisions of the Poor-law Officers' Superannuation Act, as they will, in all probability, be the basis of any future measure for other officers. They are as follows:—

Every officer who shall become incapable of discharging his duties by permanent mental or bodily infirmity, or old age, or reaches the age of sixty years, after forty years of service, or reaches sixty-five years, shall be entitled to a pension for the remainder of his life, according to the scale fixed by the Act. "Old age" shall not entitle to pension unless sixty years be completed. At sixty-five, retirement with pension may be compulsorily enforced.

Ten years' service is to be the minimum to entitle to pension, and the scale of pension will be one-sixtieth "of the average amount of the salary and emoluments during the five years ending on the quarter-day immediately preceding the day on