Medical Benevolent College is calculated to supply the most pressing want of the profession. There has been no time when hearty co-operation and assistance could effect more good than at present. The first stone was laid under the most promising auspices, in June last. In order to proceed vigorously with the building operations, large sums will of course be necessary. If these large sums be abstracted from the permanent funds of the Institution, it is obvious that formidable obstacles to the working of this noble scheme will arise just at the moment when it ought to be in full and beneficent operation. It is therefore a point of vital importance to obtain *at once* large additions to the building fund, as well as to the list of subscribers, so as not to trench upon the future income of the College. In the first place, the prosperity of this Institution must obviously be chiefly dependent upon the hearty sympathy and liberal contributions of the medical profession, for whose immediate benefit it is intended. But it is equally certain that it has, in the second place, irresistible claims upon the public at large. We have but recently called attention prominently to the position which the public occupy in regard to the medical profession in times of pestilence. But of all the independent, and professional, and mercantile classes, there are none who are brought into such immediate contact with the sick and the dying. There are none who are called upon to encounter such great personal risks, such incessant fatigue, such terrible responsibilities. There are none other who are summoned to undertake *public duties at their individual cost*. The medical man who devotes his time and his skill in the public service risks all he possesses. And he labours for the most part without fee or reward. If he fall in this ungrateful service, what is the lot of those whose existence is wrapped up in his own? At the aspect of desolation hanging over his family, would he not be well-nigh justified in withholding his gratuitous and perilous labour? But no! generous self-devotion will ever be the noble characteristic of medicine. Of all the professions in the world, experience shows it to be the one which it is the least possible to pursue in a selfish spirit. It is this fact which throws upon the public the sacred and inalienable duty of contributing largely to such an institution as the Medical Benevolent College.

The clergy have to a great extent recognised this claim, and many distinguished members of that body have followed the example of the Rev. Mr. MACKENZIE in urging those claims upon the public. It is with sincere gratification we learn that the Rev. Mr. HARRISON is to preach a sermon in aid of the Medical Benevolent College, at St. Michael's Church in Chester-square. It is important that the profession should evince the deep interest they take in the Institution by attending in large numbers upon this occasion. It would not be reasonable to expect that those who have already contributed according to their means should then repeat their donations, but their presence would lend weight to the cause, and be of essential service. We observe that a new List of Subscribers is to be advertised early in December; and we trust that it will embrace the name of every member of the profession who has not already contributed to the funds of this great undertaking.

QUEEN'S COLLEGE, BIRMINGHAM.—The council have selected for the Warneford prize the following subject: "The Anatomy and Physiology of the Organs of Hearing."

Correspondence.

"Audi alteram partem."

DR. GAVIN'S REPLY TO THE CHARGES MADE BY MR. GIBSON.

To the Editor of THE LANCET.

SIR,—I should not have condescended to notice the libellous communication of an individual, in a late number of your journal, in reference to the Board of Health and its officers, and in which it is attempted coarsely to drag forward my name, did I not think it desirable that the profession generally should know some facts in relation to the late epidemic in Newcastle, which have been ignorantly (I would in charity hope) perverted and improperly put before it by the individual in question.

1st.—Misapprehensions as to the powers and duties of the General Board of Health prevailed to a considerable extent even among the best informed members of the profession in Newcastle on my arrival, and it was some time before they became, and many may not even be now, aware of the mistake into which they had fallen.

The General Board of Health are only empowered, under the Diseases Prevention Act, to take steps in relation to the prevention, &c. of epidemic diseases upon an order of the Privy Council. This order was not issued till the evening of the 16th of September.

The expediency of leaving till an epidemic *threatens*, or is actually in, a country, the institution of preventive measures, was determined upon by Parliament in 1849, when you, Sir, were in the House. The measure, it is true, was prepared to meet the then threatened epidemic of cholera, and was forthwith applied; but at the end of eighteen months its operation was suspended in consequence of the Privy Council not issuing a new order for its continuance. Its re-application to meet the exigencies of the occasion did not take place, as just stated, till the 16th of September.

The Board of Health and all sanitary reformers have constantly represented (and none more frequently than myself, whether in the columns of the Journal of Public Health when I edited it, or at the many sanitary associations with which I have been connected) that in order to successfully contend against an epidemic disease, it is essential that preventive measures should be undertaken and applied antecedent to the irruption of the epidemic, and, consequently, that the powers temporarily conferred upon the Board of Health by the order of the Privy Council, should *always* be in operation as a progressive means of improvement and defence.

Their representations hitherto have not been sanctioned by the Government, or by the legislature. Possibly such self-evident propositions may have more force in the ensuing session of Parliament. So much for neglect of representations.

2nd.—The importance can scarcely be denied of furnishing a uniform formula for the dispensing of medicines at dépôts and dispensaries during the prevalence of epidemic cholera. Otherwise a person suffering from diarrhoea may, on successive applications, receive incompatible remedies. For example, at one dépôt he may receive chalk mixture and opium; at another, acetate of lead and opium; at a third, sulphuric acid and sulphate of iron.

Moreover, the medical attendant will, in such cases, know the nature and amount of the medicines taken by his patient.

To prevent such occurrences as those referred to, it was suggested to the ordinary medical officers of the Newcastle Union, that they should agree upon some common formula, applicable for ordinary cases of choleraic disease in its premonitory stages, for the medicines to be dispensed at the dépôts.

The medical officers of the Union, Messrs. Sang, M'Nay, Winship, and Newton, and Mr. Rayne, surgeon to the Trinity House, agreed, at special meetings, upon the propriety of this recommendation, and adopted it.

The formulæ employed by many of the house-to-house visitors in London, in 1849, employed by many of those then acting in Newcastle, and employed at the dépôts when cholera raged in the Bahamas this and last year, were mentioned and approved of by the gentlemen whose names have been just mentioned.

I may mention that the medical officers of Dundee and Arbroath have recognised the expediency of the proposition of common formulæ, and have adopted those in question.

The copy of the formulæ in the communication of your correspondent, taken from a newspaper, is evidently incorrect. I append copies for your own satisfaction, with the printed instructions which accompanied the distribution of the medicines.

3rd.—Having in vain attempted, on the evening of the 19th September, to organize a corps of house-to-house visitors from the gentlemen then acting in Newcastle as assistants, and doing the double work of assistants and medical visitors. Having failed because these gentlemen could not apprehend the distinction between medical visitors engaged specially in house-to-house visitation, and medical assistants engaged in attendance upon the sick; and because their services as attendants on the sick could not possibly be dispensed with; and, further, because they would not undertake the very arduous service proposed to be exacted of the visitors; it was essential for the public safety that that which could not possibly be obtained in Newcastle should be obtained elsewhere.

Application was accordingly made to London and other places for additional assistance. Among those who were sent to Newcastle on such application were two persons, one of whom I had never seen or heard of before. In a few days he was reported as practising homœopathically. Immediately on this information his services were dispensed with.

The second person I had seen *once* in Whitechapel, while he was attending a dépôt for medicines there.

As I had no control over the arrival of this person at Newcastle, which arrival I regretted much, I felt that all that could be done was to dispense with his services so soon as myself and colleague had sufficient cause for recommending his discharge. The opportunity was afforded, and we then promptly acted.

The statements of your correspondent, that I defended him, and that he is, or ever was, a personal friend, are unblushing and unmitigated untruths, on whatever authority they are made.

4th.—I take this opportunity of stating that no visitor ever received from me instructions to bring forward, or seek out, charges of neglect against any medical officer; on the contrary, the visitors were on this occasion,—as they invariably are on all occasions by the medical inspector who may direct their operations,—cautioned and instructed over and over again, that, while they were to be diligent in their business, they were never on any account to interfere with cases already under treatment. Any other conduct would, they were repeatedly informed, be highly detrimental to the public service, injurious to the cause they served, and be considered as disqualifying them for the service they were engaged in. They were, and are, always directed to be courteous, aiding and co-operating with, as far as possible, the local medical officers; and it forms no part of their duties, any more than it does that of any gentlemen, to act as spies on such occasions,—scandal-seeking in reference to their professional brethren.

The cases reported by the person in question were cases of supposed discovery, not cases of *neglected* disease. His testimony was not considered sufficiently valid, or capable of demonstrative proof, *which all such must be*. To avoid any source of error, therefore, his cases of reported cholera, &c., were considered as under medical treatment—were erased from the returns, and he himself was removed from the staff.

Even, however, supposing that the cases entered as “discovered”—*i. e.*, not under medical treatment—had received no medical treatment, it by no means follows that the medical officer had *neglected* the cases. He may never have known of such cases except in the death list.

It almost invariably follows that some persons are discovered to have died without receiving medical aid when the visitation first commences, but such cases should never occur except in the first week of the visitation. In Dundee, for example, one corpse was thus discovered on the first day of the visitation.

You, Sir, will consider how extremely difficult it must have been in the course of one or two days to procure a corps of persons who should be all qualified, all gentlemen, and all well disposed to perform their duty with diligence, trustworthiness, and a consciousness of the responsibility imposed upon them. I, at least, in this instance, experienced how difficult it was to procure such aid,—how trying was the task, and how vexatious.

The task of organizing a corps of house-to-house visitors, instructing them in their duties, and carefully watching their operations, is of no easy character. The difficulty is increased when the organization takes place for the first time during a period of great emergency, and when aid of any kind is by necessity grasped at. Moreover, the appointment of such officers rests entirely with the local authorities, and it is only to provide that aid which they cannot obtain that the medical inspectors occasionally endeavour to procure the services of visitors.

Happily, with the two exceptions named, there is not, so far as I know, any valid reason to be dissatisfied with the services of the gentlemen who acted as house-to-house visitors. On the contrary, testimony can be borne to the efficient performance of their delicate and arduous duties. Many of them have distinguished themselves, have gained the affections of the people, and merited the grateful thanks of the community they served.

I have dwelt thus on the reference made to the visitors, because it is in my mind of great public moment that a right apprehension should prevail as to the nature of house visitation, and that the faults of two individuals, who improperly obtained appointments, should not be mixed up with the system itself.

6th.—If the coroner, as alleged, suspended his office, with that, even if true, the Board of Health and its officers are certainly not immediately concerned.

7th.—As for matters personal to myself, the profession are not interested in them, and I decline to notice the language of the individual.

8th.—It is unnecessary for any officer of the board to notice the slander of “cooked accounts” supported by reference to newspaper paragraphs. My own reputation for careful inquiry and elimination of facts I believe to be sufficiently well established to place me beyond the reach of the individual who has so singularly exhibited himself in your columns; and I do not suppose that the reputation of Mr. Grainger, Dr. Lewis, or Mr. Lee, gentlemen of high honour and qualifications, and accustomed to careful and abstract inquiry, requires to be defended at my hands under such circumstances.

A confusion between Gateshead Union and Gateshead, and an error in reading or conveying a telegraphic return of deaths, is the source of the sweeping charge, which is moreover affixed to the wrong quarter.

9th.—Might there not, Mr. Editor, be something said as to what might be fairly due to gentlemen endeavouring to carry out, as government officers, the intentions of the Legislature and the law of the land in times of great emergency—when the greatest possible freedom from local jealousies, prejudices, and contending interests is, as in Newcastle, essential to the well-being of thousands; and might it not possibly be inquired whether *one* or *two* isolated parties, instead of being justified in complaining, ought on the contrary not to be arraigned at the bar of professional opinion.

10th.—For myself, I have to thank the great body of the professional gentlemen in Newcastle, with whom my official duties have brought me into communication, for their ready co-operation, as far as the overwhelming duties they were engaged in during the epidemic permitted them to co-operate with me. With their good opinion, and the numerous expressions of their regard, good feeling, and approbation which I have received, I leave in silence the conduct of your correspondent to receive at the hands of gentlemen the judgment which they shall think fit to pass upon it.

I have the honour to be, Sir,

Your obedient servant,

HECTOR GAVIN, M.D., F.R.C.S. Edin.,

Medical Inspector, West India Colonies,

And Medical Superintending Inspector, General Board of Health.

Dundee, Nov. 1853.

THE LONDON HOSPITAL.

ASSISTANT-SURGEONCY IN THE H.B.I.CO.'S SERVICE.

To the Editor of THE LANCET.

SIR,—Having this day seen letters in your two last journals relative to the surgical appointments in the East India Company's Service, awarded to Messrs. Harris and Dale, in one of which the decision of my late teachers was impugned, I consider that it would be a dereliction of duty on my part were I not to state through the medium of your columns that it was not only perfectly satisfactory to myself, but, I believe I may add, to a large majority of my late fellow-students.

I am, Sir, yours respectfully,

Eastern Dispensary, Bath, Nov. 1853. ALFRED ADAMS MANTELL.

A NEW MODE OF OBTAINING THE APOTHECARIES' LICENCE.

To the Editor of THE LANCET.

SIR,—Having observed in your number for the 29th ult. the description of a “novel method of obtaining a diploma,” and having recently seen in a Scotch newspaper the account of a prosecution of a party for practising in Ayrshire with a diploma,