was to assemble on the following day, and not a moment was to be lost.

Dr. LYNCH and the CHAIRMAN approved of adopting and carrying out the plan, and the meeting separated at a late hour.

MEDICAL MEETING IN LINCOLNSHIRE.

AT a meeting of members of the medical profession, practising in North Lincolnshire, held at Brigg, on the 31st of January,—R. H. PATERSON, Esq. in the chair; H. MARSTON, Esq. honorary secretary;—amongst the resolutions agreed to, was one in which the meeting expressed “great disappointment that the Bill introduced by one of her Majesty’s principal Secretaries of State, professing to regulate the practice of medicine and surgery, should have been so manifestly inadequate to secure either the safety of the public, or the respectability and scientific character of the medical profession.” In another resolution, the propriety of the law affording “the utmost possible protection to the public against unqualified practitioners, consistent with the institutions of a free country,” was advocated. In a third resolution, the meeting considered that “that provision of the Bill in which it was proposed to classify practitioners into physicians, surgeons, and licentiates of medicine and surgery, was both inexpedient and objectionable.” And, in a fourth, “that the constitution of the proposed Council of Health was objectionable, from its inadequate representation of the general practitioners of this country,” &c.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

Tuesday, Jan. 28, 1845.

MR. STANLEY, PRESIDENT.

BRIEF NOTICES OF THE VARIOLOUS EPIDEMIC OF 1844.—By GEORGE GREGORY, M.D., Physician to the Small-pox Hospital.

AFTER noticing the remarkable freedom from small-pox which the metropolis enjoyed during the years 1842—43, the author adverted to the rise of the present epidemic, which he dates from the 21st March, 1844, when the weekly deaths by small-pox suddenly rose from twenty to thirty, and have continued progressing (with some irregularities) from that period to the present.

The admissions into the Small-pox Hospital, in 1844, amounted to 647, and exceeded by one the admissions in the great epidemic of 1781, being, with the exception of 1838, (when the epidemic raged throughout the entire year,) the greatest number ever received into the Hospital since its foundation in 1746. The character of the disease was severe. The deaths amounted to 151, being at the rate of twenty-three and a half per cent. In 1781, when the same number of patients was admitted, the deaths were 257, being at the rate of forty per cent.

Of the total admitted, 312 were reported to have been vaccinated, and had cognizable cicatrices; twenty-two professed to have been vaccinated, but no scars were detected; two alleged, but on unsatisfactory grounds, that they had been inoculated for small-pox in early life.

Among the 312 vaccinated, 100 had the disease in the very mild form usually called the varioloid; in a certain number no mitigation was observed; of the whole number, twenty-four died, being at the rate of nearly eight per cent. On this section of the admissions, many of the cases received during the year displayed features of individual interest. A variety of them were stated in detail.

A remarkable feature in the history of the past year, was the increasing desire on the part of the public for re-vaccination.

Founding his views on the now indisputable fact that small-pox spreads as widely *without* as with accompanying inoculation, and on the now equally established fact, that small-pox after vaccination proves fatal at the rate of seven per cent., while inoculated small-pox is fatal only at the rate of one fifth, or one in 500, the author proceeded to argue that it is unwise to prevent variolous inoculation *in toto*. Persons verging on puberty might, he said, with great prospect of advantage, be inoculated *after vaccination in early life*. If, as happened in the case of his own son, the inoculation failed to produce constitutional symptoms, the permanent security of the party was fully established; on the other hand, if febrile symptoms followed, the disease would probably be mild; and at all events, would be undergone under the watchful eye and care of parents. As it is, the disease is often received at a period of life the most distressing—as by young women on the eve of marriage, by mothers in confinement, or by young men just embarking for India.

The author instanced a variety of other important objects which might be gained by a repeal of that part of the “Vaccination

Extension Act” of 1840, which prohibits qualified medical practitioners from inoculating in England and Ireland, and he concluded by recommending to the legislature such a measure; and to the medical profession, (where such permission may be granted,) the establishment of a system of infantile vaccination, strengthened and made doubly sure by adult inoculation.

The practice of inoculation might usefully be restricted from the period of life extending from the age of ten to twenty.

Dr. WEBSTER thought the Society and the profession were much obliged to Dr. Gregory for the excellent paper just read, which contained so many important facts and statistical details upon a subject of great interest. He did not at present intend to enter upon the various points alluded to by the author; indeed, it would be difficult to controvert many of the conclusions come to by Dr. Gregory, who had such ample opportunities, and was so well qualified, to form correct opinions respecting vaccination. However, there was one important inference which he (Dr. W.) drew from the paper—namely, that the public, notwithstanding the doubts of some on the subject, now appeared to have greater confidence than previously in the protective influence of the cow-pox, as shewn by the larger number of applications for re-vaccination at the Small-pox Hospital, during the past than any previous year. This was very satisfactory, and induced him to ask the author, whether many cases of small-pox occurring after re-vaccination had come under his own notice, as that would prove the efficacy of re-vaccination, from rendering the individual less susceptible of small-pox than previously. He (Dr. W.) was most unwilling to disbelieve in the protective influence of vaccination, when properly performed; and, in proof of its efficacy, he would mention a strong instance which lately came under his immediate observation in a large establishment he frequently visits. In March last, one of the criminal lunatics confined in Bethlehem Hospital was attacked with symptoms of variola, but having been previously vaccinated, the disease assumed a mild form. One or two other inmates were then affected, and the complaint subsequently extended to the other wards. Of the patients attacked, unfortunately one had never been vaccinated. In this case, the disease assumed a most virulent form, and terminated fatally in a few days. This was the only death met with; and although five or six other instances occurred, affected, the strictest surveillance and seclusion of the patients despite the malady did not spread farther, which would have been a most serious matter in an institution like Bethlehem Hospital, having a population of about 700, including the lunatics and the residents of the house of occupations. How the small pox was first introduced into the criminal wing it is difficult to determine; for although every inquiry was made, it was impossible to trace its origin. The person first attacked had held no communication with any individual beyond the walls of his own division of the establishment, excepting by a letter he received from a distant part of the country; but this could not have produced the disease. It is, however, right to mention, that small pox then prevailed at a little distance from the hospital, in South Lambeth, and as westerly winds prevailed much at the time, perhaps the infection might have been wafted in this way to the prisoner. He would like to ask Dr. Gregory’s opinion on this subject. Respecting the important proposition of the author to resume the old and now illegal practice of inoculation, that was a very grave subject, and required most mature deliberation. He (Dr. W.) acknowledged, although disposed to pay every respect to an act of the legislature, that he did not consider parliament to be the best tribunal to settle disputed points in medical practice; and cases might arise, when inoculation might be advisable; of course, only qualified persons should be allowed to perform such an operation, whilst the greatest care and precautions were always taken to prevent the dissemination of so virulent a disease as small-pox sometimes appears, even when artificially produced.

Dr. GREGORY, in reference to one of the questions of Dr. Webster, remarked, that the paper contained the case of a girl named Eagle, which in itself was an answer to the query. This girl had been vaccinated in infancy, and subsequently re-vaccinated with great care; she nevertheless became a patient of the Small-pox Hospital. These cases were not uncommon. It might be urged against the validity of these cases, that neither vaccination nor re-vaccination had been properly performed. These objections were easily made and difficult to contradict. With respect to the mode of the introduction of the small-pox into Bethlehem Hospital, as mentioned by Dr. Webster, he thought it hardly probable, though it might be possible.

Mr. DAVIES (Hampstead) had, in 1798, received orders to inoculate every man in his regiment, in whom there was not some unequivocal marks of the small-pox. Two of the soldiers informed him that they had had the cow-pox, having been employed in Yorkshire as cow boys, and that therefore it was

Useless to inoculate them. Neither of these men took small-pox, although he inoculated them a great number of times. He attributed the failure of vaccination either to the useless mode in which it was performed, or to the carelessness of parents in failing to give the surgeon an opportunity of verifying the success of the operation. He related a case in which he had vaccinated an infant suckling at the breast of its mother, who was suffering from small pox; the infant did not contract the disease, though it continued at the breast; the mother died from the attack. He related an instance to shew the importance of vaccinating from a proper vesicle. He had vaccinated several members of a family, and re-vaccinated them a few days after. He was subsequently requested to vaccinate other children from an arm, the appearance of which he did not approve of, and declined to operate. The children were subsequently vaccinated from this arm by another practitioner, and every one of these suffered afterwards from small-pox, whilst those he (Mr. D.) vaccinated all escaped.

Dr. MACLAUGHAN inquired of Dr. Gregory whether any facts had come to his knowledge to prove that any difficulty had been experienced in arresting small-pox on the Continent, and elsewhere, where prohibition against inoculation did not exist.

Dr. GREGORY, in reply, said, that he was aware that difficulties had occurred on the point mentioned by the last speaker, both in India and on the Continent of Europe. In Naples, especially, these difficulties had prevailed, and the government were taking means to meet them. As Jenner had obtained his lymph from cows in Gloucestershire, and as for the first thirteen or fourteen years this had been found efficient, they had determined to get some fresh Gloucestershire lymph, and had now agents in this country collecting the matter from cows in the above county. Difficulties of a similar kind had been experienced in India. He had received a volume containing an account of the epidemic of 1844, and the means recommended to arrest the disease. As this volume was at present a scarce book in London, he would read from it some extracts which had struck him in a cursory perusal of its contents.

"Reviewing the whole history of vaccination in Bengal, I fear it must be said, that its progress has been slow, that its operations have been but partially successful, and that its present state and prospects are unsatisfactory and discouraging. Neither can it be denied that public opinion has been unsettled regarding its advantages, and public confidence shaken in its efficacy and permanence as an antidote to small-pox—a feeling which is not confined to the common people, but prevails more perceptibly among the better-informed and reflecting classes of the community, and is not without participation among the profession itself. Under these circumstances it appears most desirable that a commissioned body of medical men, with a few associates from the general community, should undertake to investigate anew the nature and causes of this state of things in Bengal, and to devise for the consideration of government some new plan, or modification of the present system, which, being founded on definite and established principles, may afford some reasonable hope of greater success. The necessity for such renewed inquiry will be deemed the more urgent, when it is observed, that, far from diminishing in number, the invasions of small-pox have of late become frequent and destructive in many towns and provinces of Bengal."

In reference to this subject, Mr. Surgeon Dalrymple thus writes in 1839:—"He was sorry to say that there had been too much cause for the doubts respecting the benefits held out by vaccination, as the number of cases of small-pox among the European officers at Nusserabad, during the past two years, had been probably as great in proportion of their numbers as among the natives."

The following were the remarks of Mr. Atkinson:—

"So many instances of failure occurring, say two or three, their confidence is shaken or destroyed, for they cannot comprehend or appreciate the value of the chance which even that proportion affords of escape from the small-pox, but disregard the whole because the result is not absolutely certain. Such appears to be the general feeling on the subject of vaccination among the natives in this quarter."

Mr. Tweedie, the superintending surgeon of the presidency, says, "The natives of India are quite satisfied with the variolous inoculation which has been in use from time immemorial, and they do not see that a preference should be placed on a new European mode that they have found most uncertain."

Such were a few instances of the experience of surgeons in India. The commission appointed to inquire into this subject would doubtless be of service, and might with advantage be had recourse to in this country. He had proposed this step to Sir James Graham in October last.

Dr. C. J. WILLIAMS inquired if some part of the failure in India might not be attributable to the deterioration of the lymph by climate. He should look for greater success in our own districts.

Dr. GREGORY had previously been in possession of information on the points of inquiry made by Dr. Williams. The volume in his hand threw further light on this subject. Vaccination could be performed only during eight months of the year in India, and during this period there were difficulties, owing to the advantages which were apparently held out by inoculation, for the natives shrewdly observed the comparative mortality of small-pox when occurring naturally, and when it was acquired by inoculation, and the probability of variola occurring in after-life, subsequent to vaccination.

When women, in the commencement of life, were, after vaccination, liable to an attack of a disease by which their beauty or eyesight might be destroyed, it was necessary to consider the most efficient mode of preventing such a calamity. He recommended that inoculation should be combined with vaccination. He did not consider that in all cases inoculation was the best measure, but he felt satisfied that in India nothing better could be devised, and he recommended that it should be adopted by the East India Company; placing inoculation under the superintendence of the Government, and directing it to be performed by medical men, would be the wisest step they could pursue. A plan of this kind, somewhat modified, might be introduced with advantage into this country.

Dr. C. J. WILLIAMS was not able to draw any inference from the paper, that what applied to the natives of India, in respect to vaccination, was equally applicable in this country; on the contrary, the natives of that empire were not subject to the influence of vaccination during a third part of the year, and their prejudices against it prevented its employment on an extended scale. Making every allowance for the fact that Dr. Gregory's paper was a statistical one, and required to be studied to understand it properly, still it was chiefly of a statistical character: but he (Dr. Williams) might observe that nothing he had heard had sufficient weight with him to shake his confidence in vaccination as a safeguard for small-pox, and as yet we had no sufficient statistical data to shew us that re-vaccination was valueless. Cases were on record of persons, after inoculation, becoming affected with natural small-pox, and cases even of two or three attacks of the natural disease. He had heard of a case in which a man had the disease four times, but he did not vouch for its accuracy.

The question to decide was, whether vaccination was really a sufficient protection against the occurrence of small-pox. The proper view of this subject, according to his opinion, was, that vaccinia natural and inoculated small-pox were one and the same disease, differing in their degree of intensity. The effects produced would vary with the amount of their morbid power. The least intense might, in some instances, not succeed in so sufficiently pervading the frame as to prevent the occurrence of a future attack. It must, however, be borne in mind, that the milder the agent, the milder the disease produced: vaccination produced a mild disease, which was not propagated, whilst, however useful inoculation might be in some cases, it formed a focus for the spread of natural small-pox.

Mr. STREETER inquired the experience of Dr. Gregory in reference to the occurrence of small-pox during pregnancy. He had seen two cases of the kind—one in 1838, and one since; the patients were six months advanced in pregnancy, and recovered.

Dr. GREGORY had met with cases of small-pox occurring during pregnancy on more than one occasion. The violence of the disease, since the prevalence of vaccination, had fallen on the parents and adults generally, rather than on the children. He did not agree with Dr. Williams as to the identity between small-pox and vaccinia, and thought that that gentleman had committed two main errors in his pathology. Natural and inoculated variola were in no degree different in their power, as had been frequently proved in cases of consecutive small-pox after the natural or inoculated disease. He believed that there was only an approach to identity between small-pox and vaccinia, but not more than between measles and scarlet fever. He related a case in which an aged couple were vaccinated to preserve them from small-pox, although in early life they had been inoculated. Perfect vaccine vesicles were produced on their arms. If vaccination were thus successful at an advanced age, and subsequent to inoculation, he thought it a strong proof of the non-identity of small-pox and vaccinia. Many facts, indeed, might be adduced in support of this non-identity.

Dr. WILLIAMS alluded to the experiments of Mr. Ceely, as conclusive evidence in favour of the identity of the two diseases. The cases related by Dr. Gregory did not militate against this identity, any more than did the occurrence of small-pox after vaccination.

Dr. WEBSTER could not avoid remarking that the case just related by the author, wherein he had vaccinated a lady upwards of fifty years of age, although inoculated in early life, was, to say the

least, a very strong proof of the author's own faith in the efficacy of cow-pox; for why was it employed in this case? unless to protect the individual still more against a disease which she had previously received by inoculation. He (Dr. W.) thought that sufficient care was not always taken in respect of the purity and condition of the vaccine lymph, and he felt convinced, if re-vaccination was more frequently and carefully performed, especially in every doubtful case, we should hear less of its failure, or of the spread and virulence of secondary small-pox.

Dr. A. P. STEWART made reference to a number of cases which had occurred in his practice, all tending to prove that vaccination was a sufficient preventive to small-pox, when it was properly and efficiently performed. When it failed, it had not been properly applied. In confirmation of this view, he referred to the lately published report of the Royal Jennerian Institution. His experience at the Glasgow Infirmary enabled him to confirm a statement of Dr. Cowan, that small-pox in that city was perpetuated chiefly by the unvaccinated Highland population. M. Chomel had well said, that we "could not expect more from vaccination than from small-pox itself," for in many cases small-pox, and that of the worst kind, had attacked the same person twice or thrice, and terminated fatally.

Dr. GREGORY remarked, that, even if his plan were fully carried out, still nearly one half of mankind would be under the protection of Jenner's discovery, for one half of the children born in Liverpool died before puberty, and three hundred out of every thousand born in London did not reach adult age. The remaining portion only would be subjected to inoculation.

MEDICAL SOCIETY OF LONDON.

Monday, January 20, 1845.

DR. THEOPHILUS THOMPSON, PRESIDENT.

EFFECTS OF COUNTER-IRRITATION.

Mr. DENDY, in reference to the discussion at the last meeting, remarked, that when properly and judiciously applied, blisters to children were by no means attended with danger. He himself, however, preferred the use of the acetum lyttæ, which merely required to be painted on the skin with a camel's hair brush, once or twice, to produce vesication. He was in favour of small vesications, such as the size of a shilling, being formed successively at intervals of twelve or twenty-four hours. The acetum lyttæ had the advantage of not producing strangury.

Some remarks on the effects of blisters to children were made by several members. Applied with due caution, and allowed to remain only a short period, they might be and were serviceable in many cases. Their abuse, however, was calculated to do much evil, and never more so than when applied by ignorant persons, who allowed them to remain on for a long period.

In order to shew that blisters, or any other kind of counter-irritation, might occasionally be of serious consequence to the patient, it was observed by Mr. PILCHER that he recollected six cases of inflammation of the chest succeeding to measles, in which blisters had been applied, and they were all fatal. He mentioned also the instance of a youth fifteen or sixteen years of age, in whom the irritation produced by a compound frankincense plaster applied to the chest, was so great that the parts sloughed, and the patient sunk. In these cases, doubtless, the constitutional powers of the patients were very low.

Mr. STEDMAN had found the acetic acid as efficacious as the acetum lyttæ, and considered the efficiency of the latter preparation to be dependent on the vinegar.

Mr. DENDY recollected Sir A. Cooper mentioning a case in which a young lady, recently arrived from Jamaica, fell a victim to the application of common blister to her knees. She sank in three days, from sloughing of the parts. In respect to the effects of the various paper preparations of lyttæ, he had found them so uncertain that he never employed them.

Mr. BISHOP remarked that when a large surface was exposed, either as the result of a blister or a burn, nervous irritation of such a character might be produced as to terminate fatally, and this even when the sore itself might have a healthy aspect. The nervous irritation killed Miss Clara Webster. In cases in which this irritation was set up, opium often exerted a most benign influence. He related cases in which the application of a mustard poultice for several hours to the throat was succeeded by destruction of the thyroid gland, and such a state of constitutional irritation as to place the life of the patient, a gentleman, in danger. Buboes occasionally sloughed after the application of blisters to them.

Mr. PILCHER detailed some particulars of a case of an old woman who had suffered for some time with ovarian tumour. The particulars of the case, Mr. Pilcher remarked, were imperfect.

He had not been present at the post-mortem examination, but no communication whatever was found to exist between the tumour and the intestines, although the size of the tumour was remarkably influenced by the purging, and vomiting of many pints of a peculiar kind of fluid, said to be similar to that found in the tumour after death. The other ovary was healthy.

The conversation which followed the narration of this case had reference to the probability of a communication existing between the tumour and intestines.

It was then announced that Mr. Pilcher would read a paper on cases of mechanical irritation of the nerves.

Monday, January 27, 1845.

DR. THEOPHILUS THOMPSON, PRESIDENT.

SUDDEN DEATH.

Mr. PILCHER related a case of sudden death occurring in a young lady previously in good health, except that she had suffered for a day or two previously with some slight symptoms resembling scarlet fever, such as redness of the fauces and tongue. Previous to this she had suffered from slight uneasiness of the epigastrium, and œdema of the extremities. The night before she died she had taken an emetic, which produced free vomiting. The next morning, whilst reading a letter, without any evident cause, either mental or bodily, being, in fact, better than on the previous night, she suddenly dropped dead. The only appearances of importance after death was a smallness and thinness of the heart, the right side being full of fluid blood, a "venous tree" on the anterior cardiac surface of the stomach, a slight congestion of the veins of the pia mater, and the presence of a corpus luteum, believed by Mr. Pilcher to be a true specimen, in one of the ovaries.

The cause of death was a mystery, but was possibly owing, Mr. Pilcher thought, to an effort, which was unsuccessful, on the part of the system to throw out congestive fever; the heart was mainly implicated in the struggle, and death resulted. Mr. Pilcher, from this and other cases, considered that a true corpus luteum might exist independent of impregnation.

A discussion of some length followed, chiefly in reference to the appearance of corpora lutea.

CHEMICAL SOCIETY.

Monday, Jan. 20, 1845.

MR. AIKEN IN THE CHAIR.

A PAPER was read by R. WARRINGTON, Esq., on the distilled waters of the Pharmacopœia, and on the practice of preparing substitutes for such waters, by triturating the essential oils with magnesia. Mr. Warrington has made many experiments on the distilled waters of the Pharmacopœia, which prove that the use of spirits of wine, added to preserve these waters, has a contrary effect; that after a time it is converted into acetic acid, and that in no respect is it desirable. He traced the origin of the practice to the Pharmacopœia of 1690, and pointed out the evil resulting from it in cases where these waters are prescribed as solvents for many chemical articles. The substitution of waters prepared by triturating essential oils with magnesia or chalk, he conceives to be equally, if not more objectionable, as these substances are taken up by water in such quantities as to render the waters unfit for the preparation of prescriptions. The magnesia or chalk does not act by forming a soluble compound with the essential oil, but simply by mechanically dividing the oil, and thus exposing a very large surface to the solvent action of the water. Hence Mr. Warrington proposes to substitute perfectly insoluble materials, such as fine porcelain clay, powdered glass, pumice-stone, or calcined flints, for the magnesia or chalk; and he finds, by experiment, that these substances effect the purpose perfectly, charging the water with the essential oil, and not themselves dissolving in it. Prepared in this way, the waters are quite equal to those distilled, and keep extremely well.

A long conversation ensued, from which nothing could be deduced except the great deficiency of pharmacutists in chemical knowledge.

Monday, February 3.

R. PORRETT, ESQ. IN THE CHAIR.

An elaborate and highly scientific paper "On the Metamorphoses of Indigo, and the production of Organic Bases containing Chlorine and Bromine," was presented by Dr. AUGUSTUS W. HOFMANN, assistant in the Giessen laboratory, and read. It was the history of a research undertaken to decide the correctness of Laurent's views respecting the theory of substitutions. That