shameful act of injustice? The only reason assigned is that the medical officers of the Guards accepted the Warrant of 1858, and therefore come under the same regulations as the rest of the army medical department; but, as before stated, this is not the fact, since these gentlemen were neither mentioned in the Warrant, nor was it offered for their acceptance. The real reason appears to be a desire on the part of the Commander-in-Chief to benefit a man, at the expense of the others, who has the good—or the bad—fortune to be the son of a surgeon who was in the Duke's late regiment; and I am right in stating that neither he nor any other medical officer in the Foot Guards had the slightest intimation, when he entered the brigade, that the promotion was to be other than regimental; so that the contemplated change is altogether uncalled for, and is a deliberate breach of faith with the whole of them.

It is to be hoped that the matter will not be allowed to rest here; and if you, Sir, who so often and so successfully have fought the battle of the army medical officers, with other independent journals, will give your powerful aid to this meritorious body of men, even the Duke of Cambridge must hesitate to enforce a decision so arbitrary and manifestly unjust, and which, when known, public opinion will unmistakably declare to be so.

I am, Sir, your obedient servant,

April, 1866.

AN HOSPITAL SURGEON.

ON THE PREVENTION AND TREATMENT OF CHOLERA.

To the Editor of THE LANCET.

SIR,—Dr. Parkes in your issue of the 10th ult. objects to my remarks in the "Notes on the Prevention and Treatment of Cholera" published in THE LANCET of the 20th January, chiefly with reference to (1) predisposition; (2) Sir Hugh Rose's general order and the treatment of the sick from cholera in tents; (3) cholera discharges and impure water as a cause.

1. The question is not whether robust health is a safeguard against cholera, for no one pretends that it is; but whether feebleness of health increases the susceptibility to attacks. My own experience* is opposed to Dr. Parkes' results, and for further evidence I would refer him to the report of the 93rd Highlanders.† But may it not be that the difference between us is rather verbal than real?—for Dr. Parkes, after stating that general feebleness of health gives no predisposition, adds, almost in the following line, "Great fatigue, and especially if continued from day to day, predisposes; of this there seems no doubt." Now, what is the effect on the human body of great fatigue continued from day to day, but to enfeeble it, or, in other words, to produce general feebleness of health.

2. In respect to Sir Hugh Rose's order, my opinion was surely sufficiently distinct, that the movement of troops attacked with cholera was often a very necessary and judicious measure; but that there are circumstances under which it will be injurious. Principles, in as far as they are at present attainable, should be laid down; but their application in each instance should be left to the discretion of the authorities on the spot. It would be quite as rational to treat every case of dysentery or of fever by a general order as every outbreak of cholera.

Exception is taken to my reference to the 93rd Highlanders in illustration of the injurious effects of tent life at an unsuitable season. I have no hesitation in saying, and, if your space permitted, could easily show, that a dispassionate consideration and analysis of the report can lead to no other conclusion.

In regard to the dogma that every cholera patient in India should be treated in a tent, Dr. Parkes forgets that the question is not whether a tent or a well-constructed building admits of the greatest amount of ventilation, but whether it does so in combination with the protection from heat, wet, and cold, which the right treatment of cholera demands. Dr. Parkes on this point seems to me to commit the error which runs through and vitiates the entire report of the Royal Indian Sanitary Commission—the treating India as if it were the camp at Aldershot or Curragh.

Since the issue of Sir Hugh Rose's order, which includes the treatment of cholera sick under canvas at all seasons, I have

in conversation and correspondence predicted that the strict observance of the order must lead to an increase in the rate of mortality to attacks from cholera in the troops in India. Accordingly, we find that in 1862 in the 93rd Highlanders the rate was 80 per cent. in officers, and 64 in men; and that in 1863 it was 75—in Bengal (*The Times*, 12th February).

Further, it would seem that the Sanitary Commission of Bengal draws from these statistics the extraordinary conclusion that the intensity of cholera is gradually increasing, and that "the main object ought always to be the prevention of fresh cases rather than the medical treatment of those attacked." Whereas the true conclusion is that there has been mismanagement, and that though prevention is of paramount importance the method of management of the attacked is also very important and materially influences the result.

The Bengal Commission reasons very much as the Humane Society would do if they were to neglect the approved methods of recovering the apparently drowned, and, on discovering that the deaths from drowning had increased, were to conclude that the apparently drowned might be left on the river's bank, and their efforts for good be in future restricted to preventing persons from falling into the water.

The collapsed in cholera require assiduous judicious management akin to that which science, experience, and humanity have secured for the apparently drowned, and when given it proves saving of life in the one case as in the other. Of course, a sanitary commission will not discover the proof of this in columns of figures, but the experienced physician will in the wards of an hospital.

3. Dr. Parkes seems to think that practical physicians in India neglect the A B C of sanitary requirements. On the removal of cholera discharges I would remind him that my "Notes" dealt with principles, not details, and would refer him to pp. 205–6 of my *Clinical Researches*; and would further inform him that cesspits were abolished, and that dry scavenging, with the twice daily removal of excreta, were enforced by me in Jamsetjee Hospital in Bombay long before, I believe, the method was thought of in the Punjab. On the question of purity of water I would also assure him that several years before attention was generally much given to the subject, a large and carefully constructed filtering apparatus formed part of the sanitary system of the hospital under my charge.

I am, Sir, your obedient servant,

Edinburgh, Feb. 19th, 1866.

C. MOREHEAD, M.D.

ELECTION OF MEDICAL OFFICER TO THE CHARTERHOUSE.

To the Editor of THE LANCET.

SIR,—Permit me to offer one or two remarks relative to the appointment of Surgeon-major Nicoll to the office of Resident Medical Officer at the Charterhouse. Some little misconception—judging from your remarks in THE LANCET of last week—would appear to be prevalent as to the eligibility of that officer for the appointment. In the first place, let me premise that Mr. Nicoll, instead of having nearly completed twenty-five years' service, finished that period some nine months ago. He could, consequently, have retired then or at any time subsequently.

You ask, "Would many years spent in the army medical service prove a good training for such an appointment?" I answer, decidedly, "Yes, provided the medical officer makes a right use of the means of acquiring professional experience afforded him by his position."

I have every reason for believing that such opportunities were fully availed of by Surgeon Nicoll. They include diseases of children, of youths, and of men in mature years. What more can be required? unless, indeed, that knowledge of sanitary science to which the army medical officer is, in an especial manner, led to devote his attention. As regards your second query, "Is it strictly legal for an army surgeon on full pay to be appointed to such an office?" I venture to give an affirmative reply, inasmuch as Mr. Nicoll's full service was completed, and his resignation as battalion-surgeon sent in immediately on his nomination to the Charterhouse.

The third point, as to "whether a Fellow of the College of Surgeons can dispense medicines?" This, I presume, is easily solved by the employment of a dispenser. At least in the army and navy, and other branches of the public service, where "Fellows" are met, the practice is not unusual. Any

* *Clinical Researches*, 2nd edition, p. 205.

† Army Medical Report for 1862, p. 421, 422.

breach of law would, I apprehend, rather depend on charge for medicine being made by a Fellow.

I am sorry to find exception taken to the canvass for civil appointments by surgeons in the public service. There is no post of good emolument open to them, as half-pay officers, unless they seek for civil berths. Half-pay surgeons are, relatively, few in number; have, it may be, seen hard service in the field and unhealthy colonies, and I trust sincerely that the profession as a body will not grudge them the reward of an occasional success in after-life.

I am, Sir, your obedient servant,

FREDK. ROBINSON, M.D.,
Surgeon, Scots Fusilier Guards.

March, 1866.

THE VACCINATION BILL.

To the Editor of THE LANCET.

SIR,—In the explanation of the provisions of the new Vaccination Bill published in THE LANCET of the 31st ult., p. 354, it is stated that “the fees fixed are 1s. 6d. and 1s. for vaccination and revaccination respectively.” Allow me to observe that this is not a correct representation of the provision. The Bill provides that the fees to be paid shall not be less than 1s. 6d. in case of vaccination within a distance of two miles, and *not less* than 2s. 6d. where the distance is greater; while the fee payable upon successful revaccination is to be two-thirds of the fee payable upon each case of successful primary vaccination.

It will be quite competent for the proposed vaccinator to require higher fees than those mentioned if he deems it advisable, and for the guardians to pay them if they think the exigencies of the district render it expedient for them to do so. It is of course a debateable question how far the Legislature is justified in fixing the terms of any contracts; but, in this instance, the medical profession have no cause to debate it.

I am, Sir, your obedient servant,

Regent's-park, April 2nd, 1866.

W. G. LUMLEY.

To the Editor of THE LANCET.

SIR,—I beg to call your attention to Clauses 20 and 22 in the Vaccination Bill, which, if passed in their present form, will cause the registration of cases of successful vaccination to be nearly as inefficient as ever. These clauses allow the registrar to enter cases of successful vaccination when the operation is performed in their sub-districts, instead of forwarding such certificates of vaccination to the registrar of the district in which the birth took place.

By Clause 29, the registrar may require the vaccination of children under the age of thirteen whom he may have reason to believe are unprotected. How can he know the state of vaccination in his sub-district if the certificates be not sent to him? The doing so would involve no more trouble to the surgeons. They might by chance send the certificate to the wrong registrar; but as every registrar is supplied with an official list of all the registrars, he could forward it to the proper person without additional trouble to the surgeon, in the same manner that coroners' informations are sent if wrongly addressed in the first instance.

If these clauses are not amended in committee or in the House of Lords, the registration of cases of successful vaccination will be a delusion.

I am, Sir, your obedient servant,

April, 1866.

A REGISTRAR.

LOCAL ANÆSTHESIA.

To the Editor of THE LANCET.

SIR,—Having read in your journal of the 17th ult. (p. 299) Mr. J. B. Walker's letter respecting Dr. Richardson's valuable application of cold in the production of local anæsthesia, as also your comments thereon in the “Medical Annotations” (p. 298), I observed that the method of its application to the extraction of teeth was not so successful as in the other operations alluded to. On this account I am induced to call the attention of the profession to the application of electricity or electro-magnetism, with a view to the painless extraction of teeth, as adapted and employed by Mr. A. E. Harris, dentist, of Mile-end-road.

From the testimony of many of my own patients upon whom

Mr. Harris has operated, together with my having personally witnessed the operation, I can with confidence assert that, in my opinion, Mr. Harris has, by the method in which he has adapted this agent, most ingeniously and skilfully succeeded in overcoming any difficulties which hitherto may have existed to the successful application of electricity as a means for rendering tooth extraction, as far as possible, if not quite, “painless,” thus divesting the “popular” operation of the principal portion of its proverbial horrors.

I am, Sir, your obedient servant,

Mile-end-road, April, 1866.

M. CORNER, M.D.

THE LATE MR. JOHN GIBSON.

To the Editor of THE LANCET.

SIR,—In an article in THE LANCET for March 24th, a letter is quoted from Dr. Topham, in which he states that, “So deeply-rooted was the conviction of the necessity for venesection impressed upon the minds of some of Mr. Gibson's friends, that a telegram was sent to London without my knowledge, inquiring whether the opposite plan of treatment pursued by me was correct.”

Permit me to assure Dr. Topham and your readers, that Mr. Gibson's friends never questioned the wisdom of his treatment, or sent any telegram of inquiry. A letter from one of them, however, merely detailing Mr. Gibson's illness and its progress, induced me, for my own satisfaction, to consult Mr. Solly, of Savile-row, and to obtain from him the advice contained in the following telegram. It will be seen that Mr. Solly's judgment entirely corroborates Dr. Topham's, as to the proper course of treatment.

“Mr. Solly thinks no bloodletting required, unless the head be hot and painful. Quiet and nourishment are indicated.”

I am, Sir, yours &c.,

Hereford-square, March, 1866.

FRANCES POWER COBBE.

EDINBURGH.

(FROM OUR OWN CORRESPONDENT.)

THE Royal Medical Society held its annual dinner on the 22nd of last month. The chair was occupied by Dr. Willie, whilst that of croupier was filled by Dr. Chiene. The dinner was excellent, and the attendance of the members good. Amongst the gentlemen present were several of the professors in the University, and there were numerous representatives of the qualified practitioners. It will no doubt be gratifying to old Edinburgh students to learn that this Society, now in its one hundred and twenty-ninth year, is still vigorous and flourishing. Dr. Willie, in proposing the toast of “Prosperity to the Royal Medical Society,” which he did in eloquent terms, remarked, amongst other things, that during this session the meetings had been largely attended, the papers more than usually original, and the discussions lively and interesting; altogether the Society was in a very prosperous condition. Everyone interested in the medical student's career will heartily join with the chairman in his conclusion: “I am sure you all wish that this prosperity may long continue, and that the best and most venerable of all students' societies may long maintain its lofty standard of excellence.”

The medical winter session, both at the University and the extra-mural School, was brought to a conclusion last week. In a former letter, I referred to the proposal to bring the session to a conclusion some weeks earlier than in previous years, and your readers may remember that this intention was the cause of the refusal to give holidays at Christmas, a resolution which gave much annoyance to the students. It is probable that in future the concession of the holidays will not be granted. The object of the early closing is to give sufficient time for the professional examinations, which are conducted at this season both at the University and the Colleges, being concluded before the commencement of the summer session in May. At the extra-mural School, Dr. Smith, the president of the College of Surgeons, delivered a short but useful address before the various lecturers, and presented the prizes to the students who had distinguished themselves.