

## ST. THOMAS'S HOSPITAL.

WE, the undersigned members of the medical and surgical staff of St. Thomas's Hospital, having read the letter addressed by Dr. Bristowe to the Treasurer on the subject of the admission of paying-patients to the hospital, decide that we adopt that letter as a complete exposition of our views on the subject, and beg to express our earnest hope that the representations contained in the letter may receive full consideration from the Grand Committee.

(Signed)

J. S. BRISTOWE.	SYDNEY JONES.
C. MURCHISON.	JOHN CROFT.
WILLIAM M. ORD.	W. MACCORMAC.
HENRY GERVIS.	FRANCIS MASON.
JOHN HARLEY.	EDWARD NETTLESHIP.
J. F. PAYNE.	ALEXR. O. MACKELLAR.
W. S. GREENFIELD.	H. H. CLUTTON.
ROBT. CORY.	

St. Thomas's Hospital, Nov. 29th, 1878.

*To the Treasurer of St. Thomas's Hospital.*

DEAR SIR,—When, last Monday week, in conjunction with a few of my colleagues, I met you at your request, I was quite ignorant, excepting in so far as I was informed by the terms of the notice of meeting (received on the previous Saturday), that the subject of the admission into the hospital of paying-patients had been under the consideration of the governors; and was, I need hardly say, altogether unprepared to learn that it had been so far discussed and settled in committee that there was no doubt (as you told us) that a resolution to that effect would be carried at the General Court of Governors to be held on the following Wednesday. I confess, too, that I was surprised that an arrangement, which presumably could scarcely be carried out without our co-operation, should practically have been determined upon without previous conference with us.

At the above meeting I, like others, was unprepared adequately to discuss the subject. But discussion at this stage would have been of little value. You will recollect, however, that I expressed serious doubts as to the expediency of the step about to be taken by the governors, and that I pointed out what at the moment seemed to me grave objections, both to the scheme as a whole, and to such of its details as were placed before us. Further consideration has satisfied me of the justice of the criticisms which I then ventured to make.

The scheme, however, has now been accepted in principle by the governors, and has been relegated to the committee to settle its details and carry it out. Under these circumstances it would probably be useless to discuss its general merits, but it becomes all the more important that I should point out clearly the chief difficulties which I foresee in the way of its accomplishment, and the chief objections which I recognise to some of the specific proposals which have been made.

1st. You suggested to us when we met (and I find this suggestion was repeated at the General Court, so that I may assume that this is a point upon which you have formed a tolerably definite opinion) that Block 8, hitherto and now devoted to infectious cases, should in future be allotted to paying patients, the grounds of your suggestion apparently being that this block is only thinly occupied, that it is expensive in proportion to the number of patients that it benefits directly, and that such infectious cases as are received into it might be treated elsewhere in the hospital, or be removed from St. Thomas's to other institutions. I am quite sure, Sir, that this opinion has not been derived from your medical staff, and I do not hesitate to assert that it is utterly at variance with their views on the matter. The only pretence for going to the enormous expense of building the hospital on the block system was that it should be able safely to accommodate patients of all kinds—infectious and non-infectious. This was fully recognised from the beginning; and not only so, but No. 8 Block was, in the course of its erection, on the unanimous recommendation of the medical staff, reconstructed at a cost of some thousands of pounds, with the special object of adapting it for the or-

dinary reception of infectious cases. It is no doubt true that the wards of this block are usually less thickly peopled than the other occupied wards. And there has at times, and notably during the recent epidemic of small-pox, been a tendency on the part of the treasurer and governors to check the entrance into it of infectious cases from without. But notwithstanding this, the block has been of extreme value both to the hospital and to the public; and, so far from being empty, it contained, at the very time the General Court was sitting, forty patients, distributed amongst its sixty beds. But even if at times it were to be absolutely deserted, this would be no sufficient reason for discontinuing its use as a place for the reception of infectious diseases. Erysipelas and pyæmia must be purged from the surgical wards; cases of whooping-cough, measles, scarlet fever, and diphtheria must, when they break out in it, be taken from the children's ward; and cases of these diseases, of small-pox, and of other like disorders, must, if they appear in them, be removed from the general wards. Nor can there be any excuse, in a hospital provided at great cost with special means of isolation, for neglecting the advantages which have been thus secured, and to allow, in spite of them, infectious cases to remain in dangerous contiguity with the general patients. As regards the suggestion to remove infectious patients to special institutions, it must be recollected that, apart from the danger to themselves and to the public of sending them through the streets, the Asylum Board Hospitals are for paupers, and no provision is proposed to be made in them excepting for persons in actual receipt of parochial relief.

2nd. I am not aware that any of the medical officers have been consulted as to whether, and on what terms, they would be willing to take professional charge of paying-patients in the hospital. It is quite clear that patients who are able to pay, and undertake to pay, for hospital treatment, would have an altogether different relation to the physicians and surgeons from those whose treatment is gratuitous. They would not be objects of charity at all; and it would, on principle, be unreasonable to require a staff that was elected for quite other purposes to give their gratuitous services to them. I presume that the two guineas a week, which each patient will be called upon to pay, represents the charge to be made by the hospital in respect of board, lodging, nursing, and medicines, with a margin for profit; and the charge is by no means a heavy one for these advantages. It is altogether inadequate, however, if it be intended to include remuneration for medical and surgical attendance.

Yet, although I maintain that in a hospital established for the reception of paying-patients the medical attendants ought not only to be paid, but to be paid adequately, I am free to confess that the objections to the medical staff of our hospital receiving payment for such patients admitted within its walls are insuperable. If we consented to receive a salary, or a payment at so much a head, or chose to ask half-a-crown or five shillings per visit to each patient, we should be justly laying ourselves open to the charge of competing unfairly with the general practitioners; if we were allowed to claim consulting-fees, I need scarcely say that it would appear, and with good reason, that the department was established for our especial benefit; and in either case we should be abdicating the independent and high position in the hospital which the medical staff ought to hold, and has hitherto held.

The proper principle to adopt is clearly that which has already been suggested, if not finally adopted, in regard to the institutions for paying-patients, which are now in progress of realisation—namely, that the patients should employ and pay their own private medical attendants, or else that they should be placed under the charge of a resident medical officer, paid by salary, and with no other source of professional income.

There is another and very important view in which the attendance of the hospital medical staff on paying-patients would be objectionable. The governors have probably not considered the heavy, and in a scientific aspect doubtless unremunerative, extra labour which they incline to impose upon us. It is not merely that half-a-dozen or a dozen patients would be added to each medical officer's charge—that not one of us would object to; but they will occupy different wards, so that instead of, as now, having to visit four or five wards, we should have to visit six or seven, scattered in different parts of the hospital—a matter of no small importance in an institution built on such

a plan as St. Thomas's. Moreover, the patients, besides probably being particularly uninteresting in the sense above indicated, would certainly, from the fact of their paying for their accommodation, be unduly exacting of time and attention.

3rd. The remarks just made in reference to the physicians and surgeons apply also in great measure to the resident staff. Are the house-physicians and house-surgeons, clinical clerks, and dressers, to be required to attend on the paying-patients without fee or reward? It might be remarked, perhaps, that then, as now, they would be gaining experience from the performance of their duties, and that, provided the hospital were full, it would matter little to them whether the patients they had to attend to were admitted by payment or not. I am satisfied, however, that in practice the result would be different; that the paying-patients would regard themselves as a class apart; that they would exact more attention than the other patients, and give less in return; and that ere long, if not at first, junior officers would decline, and I think rightly decline, to give them their gratuitous services.

4th. Has any serious consideration been given to the kinds of patients to be admitted, and to the terms (not pecuniary) on which they should be admitted and treated? I believe it is contemplated that the paying patients will be furnished by the lower middle class, and that some care will be taken to exclude persons of a higher and wealthier grade. And I assume it is intended that they shall, as far as possible, be such as are likely to be specially benefited by skilled medical or surgical treatment. But I venture to say that it will be very difficult to secure the admission of suitable patients, unless they offer themselves for selection in the usual way, and consent to be accepted or rejected on their merits. If they be admitted by governors' letters, they will necessarily be unselected, and, in large proportion, unsuitable for hospital treatment; if they be received on the recommendation of private practitioners, they will certainly comprise an excessive number of old cases of dyspepsia, and other chronic or incurable cases: if the physicians and surgeons have much to do with their selection, there is some reason to fear that sooner or later the department will be worked more or less in connexion with their private practice.

Although I am one of those who approve in principle of the establishment of hospitals or institutions for the medical and surgical treatment of certain patients who are able to pay, I have always felt that there were great difficulties in the way of putting it into practice, and have consequently been curious to see how, under Mr. Burdett's auspices, the experiment would answer. And I must confess that I had infinitely rather see the experiment made elsewhere than in connexion with St. Thomas's Hospital.

It seems to me, for an institution of this kind to succeed, that the patients should be admitted, not on account of the urgency or gravity of their cases, but simply because they require medical or surgical care and nursing; that they should not be treated by a staff who carry on exterior practice as well, and who are likely, therefore, to make these institutions subservient to their private practice, but either by their private medical attendants, or by a fully qualified and competent medical officer paid by salary, and by salary alone; that if they require to be seen by a consulting physician or surgeon, he should be called in in the usual way, and on the usual terms; and that such institutions should not be tacked on to the ordinary general hospitals, which are carried on with different objects, and on different principles, and with the due working of which they are then only too likely to interfere.

I cannot pretend, therefore, to approve of the contemplated establishment for paying-patients within the walls of St. Thomas's, or to believe that the result will be satisfactory. Yet, while not approving of it, and while pointing out the many objections to it which present themselves to my mind, I shall willingly, in the belief that the arrangement is temporary, and intended to bring money into the hospital coffers, do all that I reasonably can to assist the governors in their endeavours to make it a success.

But, as far as I can at present see, I am disposed to advocate the appointment of a special resident officer or of special resident officers to take the sole medical and surgical charge of the new establishment, and, under any circumstances, must record my respectful but decided protest against the suggested misappropriation of No. 8 Block. I believe the most satisfactory solution would be to let one of the blocks,

at a sufficient rental, to those who are now specially engaged in the movement for institutions for paying-patients, and to let them carry out their arrangements independently of the rest of the hospital.

I remain, dear Sir, yours very faithfully,

J. S. BRISTOWE.

11, Old Burlington-street, Nov. 28th, 1878.

## PARIS.

(From a Correspondent.)

SOME of your readers may remember the sensation that was caused in scientific circles in Paris by the publication of a posthumous "mémoire" by Claude Bernard, upon the theory of fermentation. It was a question at the time whether these notes were to be considered as the definite expression of the ideas of the illustrious physiologist upon the subject. As they were in direct opposition to the views entertained by M. Pasteur, was it reasonable to suppose that these were erroneous? It is probable that Claude Bernard would have shown some hesitation in publishing his ideas upon the matter before having submitted the results which he hoped to have attained to some fresh trials. The publication has given rise to a new series of experiments on the part of M. Pasteur, which have been undertaken with that rigorous precision which gives such capital importance to any affirmations of this observer. M. Pasteur, at the last meeting of the Academy of Medicine, was enabled by these experiments to refute the objections which were advanced against his earlier researches.

M. Marey, the celebrated physiologist of the Collège de France, has just been elected a member of the Académie des Sciences.

A recent letter from Tangiers announces that several cases of cholera have been recorded. At Mogador the mortality has already risen to sixty deaths a day from the disease.

At a recent meeting of the Chambers a lively discussion was brought on by Dr. Clémenceau between him and M. Bardoux, the Minister of Public Instruction, concerning the entering into function of the Professor of Mental Pathology. The necessary funds for the creation of this chair were voted by the Assembly two years ago, but Professor Ball, the *titulaire* of the chair, has not, up to the present moment, been provided with a service. The discussion did not show to whom the delay was to be attributed, but it is probable that the Minister of Public Instruction has had to encounter difficulties coming both from an administrative and a medical source.

M. Brown-Séguard began his course on December 2nd, upon the "Doctrines relatives aux principales actions des Centres Nerveux."

Paris, Dec. 3rd, 1878.

## Medical News.

UNIVERSITY OF LONDON. — The following is a list of the candidates who have passed the recent Second M.B. Examinations for Honours:—

### MEDICINE.

#### FIRST CLASS.

Nicholson, J. Francis (Scholarship and Gold Medal), St. Thomas's Hospital.

Carrington, Robt. Edmund (Gold Medal), Guy's Hospital.

† Henderson, Geo. Courtenay, University College.

Wiglesworth, Joseph, Liverpool Royal Infirmary.

Uhthoff, John Caldwell, Guy's Hospital.

#### SECOND CLASS.

Eq. { Davy, Henry, Guy's Hospital.  
Gadsby, John Topham, University College.  
Hadden, Walter Baugh, Liverpool School of Medicine and St. Thomas's Hospital.  
Joule, John Samuel, Univ. College and St. Barthol. Hospital.  
Miller, Richard Shalders, University College.

#### THIRD CLASS.

Eq. { Wilkinson, Arthur Thomas, B.A., B.Sc., Owens College.  
Willcocks, Frederick, King's College.  
Prowse, Arthur Bancks, St. Mary's Hospital.