We recommend the view which they take of the duties of nurses, to the Governors of Hospitals:—

“The duties of a nurse or of a keeper, if well and conscientiously discharged, are harassing and laborious, and require qualities of no ordinary kind, and yet their salaries have been hitherto, for the most part, below those usually given to common domestic servants. The consequences have been such as might be expected; keepers and nurses have been engaged, not from choice, but from necessity, who, if in course of time they became fitted for the office, as they had not a sufficient inducement to remain, have left the Asylum for situations less irksome, or where they have been better paid. The plan adopted by your committee is calculated to invite a superior description of persons, and to retain them in the service of the Asylum; persons of character and intelligence, and of well regulated minds, who are not likely to abuse the authority with which they are invested; an authority, which, if not controlled by right principles, they have, unfortunately, but too many opportunities and inducements to abuse.”

We have but one recommendation to add, and that is, that the Asylum be rendered accessible to medical students under liberal regulations. It is of the highest importance to the community that the nature of insanity should be well understood. The certificates of two medical practitioners will consign the father of a family to confinement in a lunatic asylum; yet insanity is excluded from the wards of clinical observation, the student is shut out of the lunatic asylum, and, during the period of his studies, has absolutely no opportunity of making himself acquainted with this most important and formidable disease. A certain number of the wards may be visited, without any inconvenience. The Middlesex Asylum should be useful to all classes of society, under regulations which would be advantageous, rather than injurious, to the afflicted inmates.

Dr. MARC, Physician to the King of the French, has died suddenly of apoplexy. He has been succeeded by M. Fouquier, of La Charité.

ON THE

“TABLE OF MORTALITY” FOR THE METROPOLIS.

PUBLISHED BY ORDER OF THE REGISTRAR-GENERAL.

An Article for THE LANCET, by W. FARR, Esq.

I find, upon an average, that 14,000 persons die annually in Paris. This is a fine battle. (C'est une belle bataille.)—NAPOLEON IN COUNCIL.

THE *Table of Mortality*, for the Metropolis, came into operation on the 5th of January, 1840; and presents an abstract of the deaths registered in the first week of the year 1840. As it differs essentially from the *Bills of Mortality*, and is to be continued weekly, I have drawn up a few observations on the facts which it embraces, that its nature and application may be more readily apprehended by medical readers.

The Table exhibits, by a very simple arrangement, the state of public health, in connection with atmospherical and other changes. Its principal indications will be as accurate as the results of meteorological observation; and it is calculated to lead to the discovery of the sources of disease, of the laws of epidemical visitations, and of the means of controlling their ravages. It will give a timely intimation of the approach of epidemics, guide the practice of medical men, and impress upon the public mind, by frequent reiteration, that diseases prevail to a great extent, and depend upon evident causes, which may, in many instances, be removed.

I shall give, in the present article, a rapid account of this instrument of statistical investigation; and, at another time, review the physical circumstances which appear to regulate the mortality and sickness, with the view of ascertaining whether the health of the inhabitants of the metropolis, and of all the cities of the kingdom, is not susceptible of great amelioration.

The Metropolitan Division extends from Hammersmith and Chelsea, in the West, to Woolwich, in the East; and from Stoke Newington in the North, to Camberwell and Dulwich, in the South. Its area is 70 square miles, nearly equal to a circle of $9\frac{1}{2}$ miles in diameter. The population enumerated in 1821 was 1,328,671, which, in 1831, had increased to 1,594,890. The Metropolis is divided into 32 Superintendent Registrars' Districts, and subdivided into 125 Registrars' Districts. (First Report of the Registrar-General, 1839.) Each Registrar fills up the subjoined Schedule, and forwards it by post to the General Register Office every Monday morning. The Table is an abstract of the Registrars' returns:—

Return of Age and Cause of Death in all Deaths registered during the Week ending Saturday, the 11th Day of February, 1840.

Superintendent Registrar's District of Kensington.

Registrar's District of Saint Mary's, Paddington.

FEMALES.*

No. of Entry in Reg.	Age.	Cause of Death.
271	29 hours.	Exhaustion.
272	5 years and 1 month.	Scarlatina.

The causes of death have been arranged in the same groups, as in the Annual Report of the Registrar General. The nature of the classification, and the principles upon which the nomenclature was fixed, are stated in the Appendix to the Report (p. 89—99); to which I refer those who consult the "Table of Mortality," for explanations, which it is unnecessary to repeat. In the Table several diseases are thrown together, and distinguished in notes. This abridges the list, without diminishing its completeness or value.

The deaths from each disease, and class of causes, have been given for three periods of life,—childhood, manhood, and old age. The distinction will furnish many striking results, and a more minute sub-division of age would be useless in a *weekly* Table of Mortality.

It will be observed, that the deaths (Jan. 5—11th) under 15 years of age, amounted to 404; at 15—60 years, to 332; at 60 and upwards, to 230; while the age of one person, who died a violent death, was not ascertained: 967 deaths were registered in the week. To determine, at a glance, whether the rate of mortality was high or low; whether the week was healthy or unhealthy; a standard was required with which the weekly deaths could be readily compared. The deaths in the year 1838, divided by 52, will furnish this standard, temporarily; and in the column headed weekly average, have been placed against the deaths in the week to which the bill applies. Thus it will be found, that the average weekly deaths (1838) were 1,013; and, consequently, that the mortality in the week ending January 11th, 1840, was below the average, nearly in the proportion of 967

to 1,013. This is the first important fact which the arrangement exhibits. A comparison of the "weekly average, 1838," with the adjacent column of the total deaths from each cause will show what diseases prevail with less or more than the ordinary intensity; and a comparison of the two lines of figures, at the bottom of the Table, will indicate at what ages the diminution of mortality was felt.

The Table furnishes answers to the three questions:—Is the season unhealthy? What diseases prevail? What ages do they principally affect? Another question remains:—What localities do they infest? And in tracing the origin and progress of epidemics, its importance will be apparent. To answer this question the metropolis has been divided into 5 divisions; comprising, (1) the West Districts, (2) the North Districts, (3) the Central Districts, (4) the East Districts, (5) the South Districts. In the second part of the Table, a column on the right hand presents the average weekly deaths in each of the five divisions, in juxtaposition with the deaths in the week under observation.

THE WEST DISTRICTS

are 5 in number: Kensington; St. George Hanover-square; Westminster; St. Martin-in-the-Fields; St. James. The division includes Hammersmith, Fulham, Chelsea, and Paddington in the West; and is bounded on the East, by the Edgware-road, Oxford-street, Wardour-street, Princes-street, Leicester-square, Castle-street, Drury-lane, the Strand, Cecil-street, and the Thames.

THE NORTH DISTRICTS

are 4: St. Marylebone, St. Pancras, Islington, Hackney. They extend North to Kilburn Priory, Primrose Hill, Kentish Town, Holloway, Hornsey, Stoke Newington; from the Edgware-road, in the West, to the River Lea in the East; and the Southern boundary is formed by Oxford-street, Tottenham-court-road, a line running a little South of Francis-street, across Gower-street to Compton-street, thence to Guildford-street, and the West side of the Clerkenwell House of Correction, the Lower Road Pentonville, Pentonville, Goswell-street, the Regent's Canal, Providence-row, and ending near the White Post-lane, Hackney Cut.

THE CENTRAL DISTRICTS

comprise, the Strand, St. Giles and St. George Holborn, Clerkenwell, St. Luke, West London, East London, City of London. The Western boundary has been described under the West Districts; but St. Paul, Covent Garden, which belongs to the Strand Union, is surrounded by the District of St. Martin-in-the-Fields. The North boundary is formed by the North Districts; the East passes by the Basin of the Regent's

* In the Table there is a corresponding table for males.

Canal, Edward-street, City-road, Old-street-road, Wilson-street, Long-alley, the Minories, Rosemary-lane, Great Tower-hill; the South by the Thames.

THE EAST DISTRICTS,

Whitechapel, Shoreditch, Bethnal-green, St. George in the East, Stepney, and Poplar, are bounded on the South by the Thames; the east by the Lea River; the north by the North Districts; the east by the East boundary of the Central Districts.

THE SOUTH DISTRICTS

are Lambeth, Newington, Southwark, St. Saviour, St. Olave Bermondsey, Camberwell, Rotherhithe, Greenwich. The Greenwich District, in the East, includes Woolwich and Deptford; Camberwell extends to Dulwich; Lambeth to Norwood. The Thames sweeps round the Northern Districts of the division.

The old Bills of Mortality included Lambeth, Rotherhithe, Poplar (exclusive of Bow and Bromley), Islington, and Hackney (St. John); but did not include Kensington, Marylebone, St. Pancras, Camberwell, or Greenwich. The population of Greenwich has the greatest affinity to that of the East end of the metropolis. It is not so low down the river as Poplar; and if any contagious disease should be imported into the metropolis, it would probably appear first in the lower parts of the river. Greenwich is, therefore, properly included in the Table of Mortality for the metropolis.*

In the four decennial enumerations, the population of the metropolis was found to increase very uniformly, at the rate of 1.8 per cent. annually. It may be assumed, that the rate of increase has been the same since 1831; and that, with the addition of 4 per cent., as a correction for soldiers, sailors, and other persons not enumerated, the population in the metropolitan division will amount, by the middle of 1840, to about 1,955,000. The weekly deaths are nearly 1.52nd part of the annual deaths; divide 1,955,000, therefore, by 52, and the quotient, 37,596, will serve, as the divisor of the weekly deaths, to determine the *annual* rate of mortality prevailing in any given week. The average weekly deaths in 1838, were

* The metropolis, in the Registrar General's Report, includes, besides the parishes which Mr. Rickman classed under that name, Fulham, Hammersmith, Camberwell, St. Mary Stoke Newington, St. Leonard, Bromley, St. Mary-le-Bow, and the Greenwich Union (Greenwich, Deptford, Woolwich), containing, in 1831, a population of 121,031; and Mr. Rickman appears to have accidentally omitted Norton Folgate (population 1918,) in his summary of the population of the metropolis.—*Enum. Abstract*, vol. ii. p. 1060.

1013. If the population had been as numerous as in 1840, the weekly deaths in 1838 would have amounted to 1051; and 1051 divided by 37,596 = .028, or, a mortality of 2.8 per cent. per annum. The experience of a *week* in the metropolis is equivalent to the experience of a *year* in a town with a population of 37,596.

The mortality, in the year 1838, appears to have been a near approximation to the average mortality of the metropolis. It was 2.80 per cent.; while the mortality of the 18 years, 1813—30, as deduced from the parish registers, with a correction for omissions, was 2.84, according to Mr. Edmonds, and 2.93 in the 10 years, 1801—10, according to Mr. Milne, the two best authorities on the subject. The distribution of the deaths at the three periods of life was, also, it would seem, not very different from the average. The *epidemic diseases* vary considerably from year to year.

The ages of the population were unfortunately not enumerated in 1831. To obtain an approximation to the numbers living, at the ages 0—15, 15—60, —60, and upwards,—we can, therefore, only take the proportions existing in 1821, which were stated by Mr. Rickman to be, in 10,000 :—

AGE . . .	0-15	15-60	60-
Males . .	3428	6066	506
Females ..	3045	6371	584
Mean . . .	3237	6218	545

Hence it may be inferred, as the population has increased regularly for many years, that the numbers living in the metropolis, in the middle of the year 1840, will be nearly as follows, at the three ages :—

Age.	Living.	The number living divided by 52.
0—15 ..	632,833	12,170
15—60 ..	1,215,618	23,377
60— . . .	106,549	2,049
All ages	1,955,000	37,596

Divide the weekly *deaths* at the three ages by the corresponding numbers *living*—12,170—23,337,—and 2,049,—and the result will represent nearly the annual rate of mortality prevailing in any week of the year 1840.

Annual Rate of Mortality per Cent.

AGE.	Jan. 5—11, 1840.	(1838.)
0—15	3.3	4.0
15—60	1.4	1.6
60—	11.2	9.7
All ages	2.6	2.8

If the average mortality (1838), be taken as the standard of salubrity, and be represented by 1, the health in the week will be represented by 1.09,—of children 1.20, adults 1.14, old people .87.

The ages of the population of Sweden are enumerated every 5 years; the mean numbers living, deduced directly from the 3 enumerations of 1810, 1820, 1830, and the average annual deaths in the intervening 20 years, are subjoined for comparison with the similar facts in the metropolis:—

Age.	Mean Numbers. living 1811—30.	Annual Deaths 1811—30.	Annual Mortality per Cent.
0—15	867,804	27,213	3.14
15—60	1,526,745	19,537	1.28
60—	222,326	17,720	7.97
All ages	2,616,875	64,570	2.46

Relative Ages of the Population of Sweden, of the Metropolis, and of England.

AGE.	0—15	15—60	60—	ALL AGES.
Sweden..... (1820—30)	3,316 +	5,834 +	850 =	10,000
Metropolis.. (1821)	3,237 +	6,218 +	545 =	10,000
England.... (1821)	3,909 +	5,348 +	743 =	10,000

The relative number of persons above 60 is the highest in Sweden; while the proportion between 15—60 is the highest in the metropolis. The immigration of adults into the metropolis, and the greater mortality of cities, render this inevitable.

The following Table exhibits the population of the 5 divisions of the metropolis in 1821 and 1831; the area in square miles, the annual rate of increase, and the estimated population, July 1, 1840.*

	Population.		Area in Square Miles.	Annual Rate of Increase per Cent.	Estimated Population, 1840.
	1821.	1831.			
West Districts	211,564	252,761	17.2	1.8	308,921
North Districts	215,459	297,597	17.3	3.3	414,458
Central Districts...	339,590	355,502	2.7	0.46	369,722
East Districts	271,296	330,736	8.8	2.0	411,634
South Districts	290,762	358,294	23.9	2.1	450,265
	1,328,671	1,594,890	70.0	1.8	1,955,000

	Estimated Popula- tion 1840, divided by 52.	Weekly Deaths (1833,) Corrected.	Annual Rate of Mortality per Cent.	Density; or, Num- ber of Inhabitants to a Square Mile.
West Districts.....	5,941	162	2.73	17,982
North Districts.....	7,970	181	2.31	23,198
Central Districts.....	7,110	210	2.93	150,283
East Districts.....	7,916	249	3.15	41,791
South Districts.....	8,659	248	2.87	18,075
Metropolis	37,596	1,051	2.80	278,923

The increase of the Central Districts in 10 years was not 5 per cent., and it occurred chiefly in the Districts of Clerkenwell and St. Luke, which, by 1831, had scarcely any vacant space left for building. Houses have since been taken down in the City of London, and in other Districts. Hence, as has been assumed in the above estimate, it is probable that, since 1831, the population has remained nearly stationary in the Central Districts.

Soldiers, sailors, and a certain proportion of the floating population of the metropolis, were never enumerated. The proportion omitted has been estimated by Mr. Rickman at 4 per cent.; and this correction has been applied in the preceding calculations,

although it is probable that the unenumerated population was not equally distributed over the 5 divisions. The unenumerated were principally males; and the following were the numbers of males and females enumerated in the 5 divisions in 1831:—

1831.	Males.	Females.
West Districts ..	115,775	136,986
North Districts..	130,696	166,901
Central Districts.	170,896	184,606
East Districts ...	155,499	175,237
South Districts ..	166,853	191,441
	739,719	855,171

* The population and area of the several Districts are given in the Registrar General's Report, "Appendix, P;" pp. 114—15.

The deficiency of males was greatest in the North Districts, and least in the Central Districts; but it is not probable that the proportion of unenumerated males was greater in the North than in the South Districts. The proportion of females in excess appears to have some connection with the increase of population. The females enumerated were 28 per cent. more numerous than the males in the North Districts; 13 to 18 per cent. in the West, South, and East Districts; and 8 per cent. in the Central Districts, where the population increased (1821—31) only $\frac{1}{2}$ per cent. annually; while it increased about 2 per cent. in the West, South, and East Districts, and 3.3 per cent. in the North Districts.

	Females to 1 Male enumerated 1831.	Annual Rate of Increase per Cent.
North Districts...	1.28	3.3
West Districts...	1.18	1.8
South Districts...	1.15	2.1
East Districts...	1.13	2.0
Central Districts...	1.08	.5
Metropolis.	1.16	1.8

In Great Britain, including the army, the navy, and registered seamen, the proportion of males to females, in 1831, was 1 : 1.026; exclusive of the army, navy, and registered seamen, 1 : 1.062, with which the preceding proportions for the Metropolitan Districts may be compared.

The hospitals are distributed over the 5 Districts, and can exercise little disturbing influence upon the relative rates of mortality.

January 23, 1840.

HEALTH OF THE METROPOLIS.

The Week ending January 11th, 1840.—The mortality was below the average; in other words, the *health* of the week was 9 per cent. above the standard. The temperature fell below the freezing point, and remained low during the week. Persons above 60 suffered from the cold, as the excess of deaths at that age demonstrated; while in childhood and manhood the mortality was below the average. Females suffered to a greater extent than males; the deaths of 502 females, and 465 males, having been registered. This ratio is usually the reverse, or 520 males to 493 females. Neither small-pox, measles, hooping cough, typhus, nor any other epidemic disease, except scarlet fever, is prevailing; and the epidemic of scarlet fever is subsiding. Pneumonia is less fatal than it was a month ago; but asthma, and dropsy, commonly connected with disease of the heart, and difficult respiration, proved fatal to 97, while the weekly average (1838) was 68. Two women died in childbed; the weekly average (1838) was 8. Mortification proved fatal to 8, or double the weekly average (4); and the number of violent deaths, from drowning and other accidents, was increased by obvious causes.

The practical deductions, from these facts, need not be pointed out to medical readers.

PROGRESS OF MEDICINE IN AMERICA.

THE first number of the New York Quarterly Journal contains an interesting summary of the progress of medicine in America, by Dr. John Watson, from which we condense the following particulars:—

The only schools established for medical instruction in that country, before the Revolution, were those of Philadelphia and New York. As early as 1762, Dr. Wm. Shippen, of Philadelphia, after having completed his education in Europe, commenced a private course of lectures on anatomy and midwifery, to a class of ten pupils, one of whom was the celebrated Rush. In 1765, Dr. Morgan commenced a similar course on the theory of medicine, including materia medica and pharmacy. This last gentleman soon afterwards addressed a letter to the trustees of the Philadelphia college, recommending the establishment of a medical school under their auspices: whereupon he was appointed professor of the institutes of medicine, and Dr. Shippen, of anatomy and surgery. In 1768, Dr. Adam Kuhn, a pupil of Linnæus, returning home, was chosen professor of materia medica; and in the following year, Dr. Benjamin Rush, having completed his studies in Europe, was called to the chair of chemistry. The establishment of the first medical school in New York, was principally effected by the exertions of Drs. Peter Middleton and Samuel Bard. These two institutions gave promise of great benefit to the community; but the Revolution commencing soon after their establishment, many of their professors were called to more urgent duties; and the agitated state of public affairs for several years, afterwards, in a great measure deprived the public of the benefits they might otherwise have experienced from them.

The labours of the medical professors, interrupted during the war, were renewed with increased zeal and activity on the restoration of peace. Four well regulated medical colleges were soon in operation, and spread the seeds of medical improvement.

In the autumn of 1796, Dr. Elihu H. Smith conceived the project of a medical periodical, and in August, 1797, the first number of the "New-York Medical Repository" made its appearance. This work, the first of its kind, was warmly received and ably supported. In its pages are to be found valuable records of epidemics, and the other diseases of the country. Beginning with the yellow fever of 1793, it contains the complete history of that disease, up almost to its last appearance. It contains the most ample records of the spotted fever, a very fatal disorder, that prevailed in the northern and eastern parts of