Sheffield, East End Branch of the Children's Hospital.—Female H.S. £150.
Sheffield Royal Hospital.—Cas. O. Asst. Cas. O. Each £150.
Sheffield Royal Infirmary.—Asst. Cas. O. £150.
Stamford, Rutland, and General Infirmary.—H.S. £250.
Sunderland, Durham County and Sunderland Eye Infirmary.—H.S. £400.
Sunderland Royal Infirmary.—H.S. £200.
Taunton, Taunton and Somerset Hospital.—Female Res. Jun. H.S. £150.
Western Ophthalmic Hospital, Marylebone-road, N.W.—Non-res. H.S. £150.
West London Hospital, Hammersmith-road, W.—Two H.S.'s. H.P. Each £100. Surgeon.

THE Chief Inspector of Factories, Home Office, S.W., gives notice of vacancies for Certifying Surgeons under the Factory and Workshop Acts at Somercotes and at Dunkeld, in the county of Perth.

Births, Marriages, and Deaths.

BIRTHS.

CLARK.—On August 17th, at Bayfield, Kent-road, Southsea, the wife of Dr. A. Erskine Clark, of a daughter.
COVELL.—On August 20th, in Constantinople, the wife (Oona Macleod) of Captain Gordon Covell, M.B., B.S.Lond., I.M.S., of a son.
DUNN.—On August 20th, to Rosamond, wife of G. Hunter Dunn, B.Ch., M.R.C.S., L.R.C.P.Lond., Red House, South Farnborough—a daughter.
HOLT.—On August 16th, at Heightside, Burnley, the wife of Lieut.-Colonel T. Holt, R.A.M.C. (T.F.), of a son.
MANFIELD.—On August 21st, at Cairo, Egypt, the wife of A. H. Manfield, M.R.C.S., L.R.C.P.Lond., of a son.
QUIRKE.—On August 22nd, at Brook House, Ullenhall, Warwickshire, the wife of Major M. J. Quirke, M.B., Ch.B. Birm., I.M.S. (retired), of a son.
REIDY.—On August 22nd, at 314, Commercial-road, E., the wife of J. Reidy, J.P., M.D., of a son.
REVELL.—On August 18th, at 4, Matlock-road, Norwich, the wife of Rowan W. Revell, M.D.Lond., D.P.H., of a daughter.
SCOTT.—On August 24th, at Rose Villa, Jesmond, Newcastle-on-Tyne, to Elsie, wife of J. McAlpine Scott, M.D.Glasg., Pensions Hospital, Shotley Bridge—a daughter.
TERRY.—On August 20th, at Barton-street, Gloucester, the wife of H. Cairns Terry, M.B., Ch.B.Birm., of a son.

MARRIAGES.

WARRINGTON—SAMUELS.—On July 22nd, at St. Michael's Church, Colombo, Thomas Warrington, M.R.C.S., L.R.C.P. Lond., to Dorothy Samuels, daughter of G. Young, Esq., J.P., of Culdaff, and widow of Captain A. P. Samuels, Royal Irish Rifles.
YEOMAN—YEOMAN.—On August 24th, at the Presbyterian Church, Neston, Lieut.-Colonel J. B. Yeoman, M.D., F.R.C.S.Edin., D.P.H., Barrister-at-Law of the Middle Temple, to Ida Isabel, widow of Dr. C. W. Yeoman, and younger daughter of the late Mr. James Fergusson, of Liverpool and Heswall, Cheshire.

DEATHS.

BROWNE.—On August 23rd, at Homewood, Hartford, Cheshire, Robert J. Browne, L.R.C.S. & P.I., L.M., late of the Beach, Hartford, aged 67 years.
DUNN.—On August 22nd, Rosamond, dearly-loved and loving wife of Dr. G. Hunter Dunn, Red House, South Farnborough.
NICOLL.—On August 15th, at Woodside-place, Glasgow, James Henderson Nicoll, M.B., C.M., F.R.F.P.S. Glasg., aged 57 years.
SHACKLETON.—On August 8th, on the voyage from Jamaica, of cerebral hæmorrhage, Thomas Francis Shackleton, M.R.C.S., L.S.A.

N.B.—A fee of 7s. 6d. is charged for the insertion of Notices of Births, Marriages, and Deaths.

Notes, Short Comments, and Answers to Correspondents.

DEVELOPMENT OF MEDICAL SCIENCE IN VIENNA.

BY DR. MAX NEUBURGER,
PROFESSOR OF HISTORY OF MEDICINE AT THE UNIVERSITY OF VIENNA

THE reputation of Vienna as a focus of medical art and medical science reaches far back into the past. Such a reputation could be attained only by the harmonious combination of especially favourable factors—the innate national talent deeply rooted in the ethnological medley of Austria, and self-contained tradition, based on the experience of many generations, yet very susceptible to valuable ideas from abroad and to practical progress on foreign lines. Such cultural predisposition made sure of great development of young men transplanted from other countries. The history of the development of the Viennese school also shows that periods of eminence have always been coupled with liberal reforms in education, in conformity with the spirit of the times, in all branches of sanitary science. Lastly, the unhindered activity of highly gifted and energetic men assisted largely in maintaining the rank of Vienna in the scientific world.

The Vienna University was founded in 1365; ever since the days of humanism there had been certain excellent individual teachers of medicine and anatomy, great lecturers on the science of materia medica or the observation of the sick, but the raising of the entire standard was hindered by narrowness of mental development, opposition to the greater freedom prevalent abroad, the conservatism of the medical caste, a university constitution bound to antiquated routine, and want of the necessary institutes and buildings. Only when the State began to recognise its educational duties was a new epoch opened up.

The Work of Gerard van Swieten.

Gerard van Swieten, physician to the Empress Marie Theresa, who was summoned to Vienna from Holland in 1745, effected a signal work of reform and laid the foundations for the institution of a brilliant school. Provided with almost unlimited authority and energetically combating all opposition, van Swieten improved medical science and liberated university teaching from caste prejudice. He had a botanical garden and a chemical laboratory laid out, arranged the purchase of anatomical preparations, increased the facilities for performing dissections, and took steps to develop the almost totally neglected branches of surgery, obstretrics, and ophthalmology. By increasing both the number and the salaries of professors, by appointing eminent foreign scholars to such positions, and by systematically training a number of capable disciples from among native doctors and students, van Swieten succeeded, in hardly more than two decades, in attaining his object. Leyden, the school at which he himself had graduated, served as his model. The most important achievement, however, whereby this great organiser became the true founder of the Vienna medical school, was the institution of a permanent clinic, after the Leyden pattern, which under the management of Sylvius and Boerhaave came to be held in very great esteem. This small clinic in the "Bürgerspital," containing only six beds for men and six for women, was the first established on German soil, and it became the cradle of the world-wide renown of Austrian medicine.

Anton de Haen.

The first professor of this clinic, Anton de Haen, a former fellow-student of van Swieten's, invited from The Hague in 1754, gained by his medical writings high esteem for his school in the learned circles of Europe, whilst his clinical lectures attracted disciples from far and near. Like van Swieten, he stood for Hippocratism, and opposed the rash adaptation of theories and speculations in pathology. During the 22 years of his professional activity he successfully installed that sober system in which confidence is placed only in observations actually made at the sick bed. He encouraged his students to make diagnoses for themselves, and used post-mortem dissection for purposes of instruction and research. Much of the progress made in the recognition and treatment of illnesses is owing to de Haen, who introduced into the clinic, among other things, the systematic taking of temperatures with the thermometer. Of the disciples of this master, Störck, subsequently imperial physician, was the first to investigate methodically the effect of medicaments in experiments on himself, on animals, and by observation of patients.

Leopold Auenbrugger and Maximilian Stoll.

In the earliest years of de Haen's activity, one of the most important methods of diagnosis—percussion—was discovered by the Viennese doctor, Leopold Auenbrugger, and published in 1761 in a small but most momentous treatise called "Inventum novum." This achievement was not appreciated as it deserved to be until some 50 years later; and then, at first, only abroad. Subsequently, however, Auenbrugger, who had merely been active as a simple practitioner, became a recognised master in Vienna.

Temporarily, though not in an adequate measure, percussion came to be employed at the Vienna clinic before the end of the eighteenth century—i.e., at the time when de Haen's immediate successor, Maximilian Stoll, presided there. This eminent teacher and scholar, who devoted special attention to epidemiology, was recognised in all contemporary reports as the most celebrated clinical teacher then living. His activity was principally associated with the movements towards reform during the reign of the Emperor Joseph II., of which important results still survive.

Medicine under Joseph II.

The most successful of these was the foundation of the "Allgemeines Krankenhaus" (General Hospital), which still exists in commemoration of charity, bearing above its chief portal the words: "Saluti et solatio aegrorum." This famous hospital was opened in 1784; although its prime object was a centralisation of humanitarian institutes, the "Allgemeines Krankenhaus" also served from the very first for purposes of research and instruction through the incorporation of the clinic which was transplanted thither.

A less successful creation was the medical and surgical academy and institute, the "Josephinum," of which the chief object was the training of efficient army doctors, the institute possessing the right of conferring the doctorship of surgery. The institute, founded at the instigation of the imperial surgeon Brambilla, was housed in a very imposing edifice and came into possession of the necessary educational auxiliaries, such as a valuable library and precious scientific collections, the latter including the anatomical preparations in wax fashioned under the supervision of Fontana at Florence. The "Josephinum," opened in 1785, never thrived properly, was forced to close its doors twice on account of reorganisation, and was completely given up in 1873. Although it did not quite fulfil the purpose for which it had been intended, especially in regard to scientific research, it considerably promoted the secondary objects of its founder—i.e., the development of surgery, and the gaining of a better social standing for those that practised it.

The Emperor Joseph, untiring in work for the welfare of the people, knew the shortcomings of the science of medicine, and tried hard to remedy them. He encouraged young men of industry and talent to specialise, and furnished them with means for journeys abroad to this end. The most thorough of the young doctors thus favoured was Johann Boer, who took control of the obstetrical infirmary in 1789, and opened up a new epoch in this branch. Ophthalmology, too, began to develop conspicuously in Vienna, principally represented by Barth, who distinguished himself as a daring operator for cataract and as a master of the technique of injections. Among his scholars Ehrenritter shone as an anatomist, Georg Prochaska as a histologist and physiologist (reflex action, &c.), and Josef Beer as an oculist.

Johann Frank.

The chief representative of the Viennese school, however, at the end of the eighteenth century and the beginning of the nineteenth, was Johann Peter Frank, the founder of public hygiene as an independent science, a brilliant organiser of medical matters, and a gifted clinical professor. The early activity of Frank, whose "Manual of Internal Medicine" was a standard work for decades, had gained him a reputation which reached far beyond the confines of Germany. He united with abundant learning and medical capacity an unusual gift of administration; director of the Allgemeine Krankenhaus and head of the medical clinic from 1795 onwards, he left evidences of creative enterprise which are not yet obliterated. To him the clinic, now enlarged to 24 beds, was indebted for an organisation which has become a pattern. Many contrivances still maintained —e.g., the formal record of the patients' history according to a definite plan; the daily noting of their condition; their alimentation according to four dietary schemes, &c.—had their origin in his time. From the great stock of invalids in the hospital, Frank selected cases suitable for instruction; access to the clinic, and service therein, was exactly regulated; the visitors were divided into spectators and practitioners, the latter having patients who were allotted to them for treatment under supervision and upon whom they had to report to the professor. He also made chemistry and morbid anatomy clinically useful, and founded a pathological anatomical museum, to the control of which Vetter, an eminent assistant professor of anatomy, was appointed. This untiring scholar succeeded in a short time in forming by his own effort a valuable collection of 400 preparations.

The period of Frank's activity comprises many interesting medical events, chief among them being the introduction and official institution of vaccination, for which Ferro and de Carro had spread a lively propaganda from 1799 onwards. Vienna was the first town on the Continent to which Jenner's process found access. Besides the arguments for and against vaccination, the sensational debut of Gall with his theories of the skull agitated medical and non-medical circles at the close of the eighteenth and the beginning of the nineteenth century. It is well known that Gall—like Mesmer, the apostle of animal magnetism some decades earlier—was obliged to quit Vienna to find a more favourable soil for his doctrines abroad.

The First Half of the Nineteenth Century.

With the departure of Frank from his infirmary in 1804, the splendour of the older (first) Vienna school began to fade. After Frank's immediate successor Valentin von Hildenbrand, the author of the best book on typhus in those days (1810), internal medicine had no important official representative in Vienna until almost the middle of the nineteenth century. The political reaction, especially pronounced after the Vienna Congress, was reflected in the fate of the medical faculty, so long, that is to say, as the latter stood under the control of Andreas von Stifft, the omnipotent physician to the Emperor Francis. It was the golden age of bureaucratic decrees in sanitary and educational matters rather than of scientific progress, but again single brilliant representatives of special branches were not lacking. This may be said in the first place of obstetrics, which found a reformer in Boer; and of ophthalmology, two of the teachers of which, Josef Beer and Friedrich Jäger, attracted students from the whole world. Appreciative mention should also be made of the surgeon Kern, who greatly simplified the process of healing wounds; of Bernt, representing forensic medical science, and subsequently of the anatomist Berres, an early representative of microscopical research. A professorship for forensic medicine was founded in 1805, a surgical operating institute in 1807, a clinical ward for ophthalmology in 1812, an ordinary professorship for ophthalmology in 1818—institutions which gave the medical faculty of Vienna a considerable advantage over others.

The autobiographies or memoirs of several celebrated German and foreign doctors tell of youthful impressions gleaned from the scientific and anatomical collections, the infirmaries and hospital wards, in Vienna. The most interesting document of this kind is certainly Wunderlich's little book called "Vienna and Paris," published in 1841. In this work, by the Leipsic professor who was later to become so famous, the Paris school, with all its merits, is described as predominating during the first four decades of the nineteenth century, and then attention is drawn to the almost unnoticed rise of a new school in Vienna, and prophetic allusions are made to the future. After a long stagnation the time had come—so Wunderlich wrote—when "something was again to be learnt in Vienna, and things to be seen there that elsewhere would be sought in vain."

The "Second School" of Vienna.

A characteristic of the new, the so-called "second" school of Vienna was the reconstruction of all medical knowledge on exact foundations. Starting from the achievements of the French, the school of Vienna effected a complete breach with the half-speculative, half-empirical past of medical science, and a rejuvenation of German medicine. The necessary mass of material was found in the Vienna General Hospital, and suitable men appeared to undertake the work entailed.

Rokitansky and Skoda.

The men in question were two young Vienna doctors, Rokitansky and Skoda, both from Bohemia, associated in spirit as they were united in friendship, with common aims and of almost equal age. Rokitansky, who became assistant professor of anatomy at the General Hospital, and curator of the institute of pathological anatomy in 1832 and extraordinary professor two years later, sought to ascertain the causal connexion between certain types of anatomical changes and certain clinical symptoms, and by a whole series of post-mortem examinations to gain an insight into the causes and gradual development of the phenomena of disease. His famous manual, published in the years 1842–46, and almost unparalleled in the literature of the profession in the richness of its contents, completely established the anatomical idea in medicine and made pathological anatomy the basis of the science of healing.

Parallel with Rokitansky's research was the work of Skoda, who served as assistant doctor at the General Hospital from 1833 to 1839, after which he was appointed to the independent control of a section for consumptive patients

in 1840. Skoda was the first to ascertain the physical causes of the origin of the qualities of sound by acoustic experiments and by the study of anatomical conditions; he taught how anatomical alterations, and even the various stages of their development, could be recognised by percussion and auscultation. His "Treatise on Percussion and Auscultation," which appeared in 1839, is a milestone in the history of medicine. Rokitansky's demonstrations and lectures and Skoda's classes for physical diagnosis soon surrounded the two masters with a throng of disciples and adherents who published valuable works in the spirit of their instructors. The second Vienna school was now already an imposing power in the world of science. Amongst the foreigners who came to it for knowledge to last them a whole life-time were men who later themselves became pioneers of science, such as Traube, Kussmaul, or Wilde. The "Gesellschaft der Aerzte" in Vienna, founded in 1838, facilitated the profitable exchange of ideas; in the words of Schönlein, its history was intimately associated with that of medicine in general.

A reform of medical teaching, an up-to-date development of the hospitals and institutes, a reorganisation of university conditions in the way of autonomy for academical authorities, and free choice in teaching and learning were realised during the period from 1848 to 1850. The Conference of German Naturalists and Physicians in Vienna (1856) and the celebration of the 500th anniversary of the university (1865) showed the Vienna medical school at its zenith, containing at one time such names as those of Rokitansky, Skoda, Hyrtl, Brücke, Oppolzer, Hebra, and Arlt.

New specialties of medical science were rapidly developed —laryngology and rhinoscopy by Ludwig Türck, and Johann Czermak; otology by Adam Politzer, whose system of the introduction of air was soon known everywhere under his name; neurology and psychiatry by Türck, and later by Meynert; syphilology by Zeissl and Sigmund; obstetrics and gynæcology by C. Braun, and hydro- and electro-therapeutics by Winternitz and Benedikt respectively. It says much for the sagacity of Rokitansky that he should soon have recognised how much morbid anatomy requires to be supplemented by other branches of science, especially by medical chemistry and experimental pathology. Besides other theoretical professorships (for histology, embryology, and medical chemistry), a chair of "general and experimental pathology" was founded in the 'seventies. The first man to be appointed to it was Stricker, a pioneer not only in research but also in the organisation of instruction with the help of the electric lantern, the microscope, episcope, &c.

It is also worthy of mention that the "Josephinum" in the last stage of its existence numbered some very great teachers among its staff; of these we need only name the pathological anatomist Engel and the two physiologists Carl Ludwig and E. Hering. Several of the professors entered the staff of the medical faculty upon the dissolution of the Josephinum.

The Allgemeine Poliklinik: Theodor Billroth, Bamberger, and Nothnagel.

The circle of academical teachers had considerably increased in the course of decades. Since they could not always find an opportunity to teach in the General Hospital, or the other hospitals, a number of them united in the year 1871 to found a consulting institute called the "Allgemeine Poliklinik," which was also destined to serve purposes of instruction, particularly in certain special branches. The Poliklinik, subsequently enlarged by a small hospital and housed in a building of its own, very soon attracted students and graduates from far and near, and always included in its list of teachers names of the best repute.

When death, old age, or sickness had removed the founders of the second Vienna school and their most intimate co-workers from the stage of scientific life, it was not always possible to find the qualified men for the necessary renovation of the staff of teachers, nor yet to gain new laurels for the school. This was, however, achieved by the appointment of Billroth in 1867. This genius, sufficient in himself alone to gain a university world-wide renown, initiated an illustrious era in surgery. A master of operative technique and a surgical thinker of the highest rank, he was particularly successful in developing the department of intestinal surgery, and founded in Vienna a school of surgery of a very special character and extraordinary importance. His scholars became the ornaments of several universities, and in some of them his doctrines are still active at the present day.

In Oppolzer's successor, Bamberger, internal medicine acquired in 1872 a master of the first order by whom the old Vienna traditions, intensified by means of microscopy and chemistry, were carried on. We are indebted to his endeavours for the appointment, in 1882, of Nothnagel, who proved especially capable of forming a connexion between the German school (of Berlin) and that of Vienna, and who left lasting traces of his long activity. The fact that he was not only an excellent pathological anatomist and experimental investigator, but also devoted much attention to the effect of medicines, gave a clinical therapeutical character to his works, while his intense interest in neurology gave his teaching a general value by which the whole school subsequently profited.

Meynert and Others.

Soon after Bamberger, the number of ordinary professors of the Vienna medical faculty was augmented by the ingenious craniologist, Meynert, the excellent representative of forensic medicine Eduard Hofmann, who left at his death an incomparably fine and extensive museum of medico-forensic preparations, and Hebra's most eminent disciple, the great dermatologist, Kaposi. In the 'eighties we have the appointments of the surgeon G. Albert, of the oculists Eduard Jäger and Ernst Fuchs, of the anatomist E. Zuckerkandl, and of the psychiatrist Krafft-Ebing, who was especially active in promoting forensic psycho-pathology and the doctrines of hypnotism. From 1887 onwards, Max Gruber opened up a new era of hygiene. In 1890 von Schrötter, a master of laryngology, was allotted the newly erected third clinic for internal medicine, handing over the control of the laryngological clinic to his colleague Störk.

Predominance of Virchow and the Berlin School.

There is no denying that at the close of the 'sixties the sceptre of German medicine passed from Vienna to the Berlin school, which, under the guidance of Virchow, was progressing from one triumph to another; the disciples of Rokitansky and Skoda paid too little attention to what had meanwhile been achieved abroad, and continued too long in the old groove, showing great interest solely in morbid anatomy and physical diagnosis. Great innovations like antiseptics and bacteriology were taken up too late by the Viennese sceptics, the introduction was retarded of all those equipments which modern research work and modern sanitary measures require. Nevertheless, medicine in Austria succeeded in the course of the 'nineties in catching up that of Germany, and thenceforth contrived to keep pace with it.

Modern Progress and Conditions.

In this connexion, moreover, one should not forget, when comparing the past with the future, that the age of a universal medical centre, in the sense in which Vienna was formerly a centre, is probably past and gone for ever. Methods of scientific medicine have now become uniform everywhere, and new achievements are rapidly made known from place to place; but Vienna retains one of the leading schools of medicine, of which the achievements during the last 30 years will in the future be recognised as forming a large part of the total medical progress of that period. Great progress has been made at Vienna in the more delicate anatomy, especially that of the central nervous system, in the physiology of the organs of sense, in experimental pharmacology, in physico-chemical biology, in the science of serums, and the doctrines of internal secretions. There is hardly a chapter of internal medicine or pediatrics, of dermatology or syphilology, of neurology or psychology, that has not been enriched from the point of view of diagnosis or therapeutics at one of the Vienna clinics or infirmaries. A number of methods of investigation such as, for example, hæmodynamics, endoscopy, cystoscopy, œsophagoscopy, and rectoscopy, were founded or first practised here. The cutaneous reactions of tuberculin were discovered in Vienna, and electro-cardiodiagnosis is best represented here. A mass of diagnostic and operative technical progress in surgery, gynæcology, ophthalmology (which profited so much by cocaine, first employed in Vienna), and laryngology is connected with the Viennese school, which was also one of the first to raise urology, orthopædic gymnastics, and dentistry to a high scientific level. Rontgen's diagnostics found their chief centre in Vienna. The different forms of physical therapeutics, especially light therapeutics and radium treatment, as well as dietetics, enjoy particular attention here.

Conclusion.

The necessary extension and alteration of the old premises for research and instruction by new institutes, laboratories, and infirmaries, has been widely undertaken, and much has been done within the last two or three decades on the part of the authorities and in the way of private charity by the foundation of nursing homes, charitable establishments, and ambulance refuges. All services auxiliary to medical science have been placed at the service of the public, and war has been energetically waged against tuberculosis, syphilis, alcoholism, occupational diseases, infant mortality, and the decreasing birth-rate. The recent war and the events that followed upon it, the financial calamities of the State, have seriously impeded any great development for the time being, but the soil of medical Vienna is ancient and fertile and cannot be condemned to lie fallow so long as the spirits of humanity and scientific research endure.

UNIVERSITY GRADUATES.

THE preliminary report, just issued, of the Registrar-General gives in convenient form the number of graduates, men and women, of English Universities who were on the Parliamentary electoral register in the spring of the present year :—

University.	Number of electors.		
	Total.	Men.	Women.
Oxford	9,132	8,602	530
Cambridge	10,799	9,061	1,738
London	10,723	8,412	2,311
Combined Constituency ..	3,394	2,574	820
Durham	571	477	94
Manchester	1,388	1,050	338
Liverpool	536	351	185
Leeds	289	220	69
Sheffield	120	105	15
Birmingham	333	233	100
Bristol	157	138	19
Total	34,048	28,649	5,399

AN INSURANCE BROKER.

IT has come to our notice that an enterprising person, calling himself an "Insurance Broker," is calling upon medical men, and inviting their attention to the merits of life policies issued by various insurance companies, adding as an inducement to a medical man to take out the policy that he would be in a position to place a certain number of examinations for life insurance in the doctor's hands. This person then, we are informed, proposes to accept the doctor's first premium on some form of policy agreed between himself and his new client. In a certain number of cases medical men appear to have been so foolish as to have believed that a policy for life, accident, motor-car casualties, and so on, could be taken out in that manner, and to have paid premiums which, never having reached the insurance office, resulted in no policies. In one case a doctor does not seem to have been worried even by this; his worry commenced when he tried to draw compensation for a motor accident. Some medical men had enough knowledge of the world to refuse to part with money in that informal manner, and it was through such a medical man that one of the insurance companies in question found out what was happening, for the inquiry that reached them gave away the deception that was being practised. In some cases the policies have been duly put through, in which cases the medical men found themselves insured, though the companies may not have received the first premiums.

We tell the story to warn our readers against an ingenious and insidious deception which may be offered for their acceptance.

TWO NEEDLESS DEATHS.

Two inquests were held in London recently on the same day upon the bodies of persons who themselves must be held to have been responsible for accidents which proved fatal. In the one, a young man travelling with his friends in a train moving at 50 miles an hour, by way of a joke sat upon the ledge of the open window and fell out backwards. His friends managed to hold him by the feet until the train was stopped, and appeared at the inquest to ascribe blame to the railway officials because the train was not pulled up sooner in response to the communication cord. The deceased, however, was found to have sustained injuries to his head which might have occurred immediately after his fall, and the officials pointed out that at whatever moment the bell may have been rung a train moving fast cannot be pulled up suddenly without danger to all its passengers. The jury expressly found that no blame attached to the servants of the company.

In the other case referred to, a woman living in a flat in Marylebone was being taken up in a lift worked by a girl 15 years of age. When she reached the second floor, where she lived, and before the lift stopped, she herself opened the door on the landing, there being apparently no door to the lift, and began to step out. The lift was then about a foot below the landing, and the girl attendant said that the woman slipped and fell, and that she, the girl, pulled the rope to bring the lift level. Precisely what then happened is obscure, but the lift began to descend instead of rising, possibly because a hurried and more or less lateral pull at the cord had as its result the exerting of vertical pressure in the wrong direction. In any case the unfortunate woman, who was struggling to regain her feet, was caught with her head outside the descending lift and killed. In this case a verdict of accidental death was returned, and though the jury did not blame the girl attendant they added a rider to the effect that they considered her too young to have charge of a lift. It is to be pointed out as to this that young boys and girls are in charge of lifts in very many buildings, that where lifts are not in constant use it is hardly a "man's job," and that even a grown person is not always cooler in an emergency than one 15 years of age. Of course, an older person might have interfered to stop the passenger when she opened the door and tried to get out before she reached the landing, but even this is doubtful. The fault must be looked upon as primarily that of the passenger and she paid a terrible price for it.

No precautions can altogether prevent foolish actions by persons who choose to behave rashly. Some railway companies place bars across their carriage windows. This may cause loss of life for which they would be blamed if in the event of an accident persons trapped in an overturned carriage found themselves unable to escape. There are always dangers to be encountered in otherwise safe conveyances, and not only in trains and lifts, if those using them refuse to be guided by prudence and good sense.

THE REVENUE FROM PATENT MEDICINES.

ACCORDING to a return prepared by the Excise authorities the number of licences issued (at 5*s.* each) to makers or vendors of patent medicines in the year 1920 was, in England, 38,332, and in Scotland, 3339—total for Great Britain 41,671—on which the amount of duty collected was £10,421. These figures show an increase as compared with the years 1917–18–19, but are still below those of pre-war years. The licence duty does not extend to Ireland.

The stamp duty on patent medicines before the war varied from 1½*d.* upwards, according to the price charged for the medicine, but from Oct. 20th, 1915, the rates of duty were doubled, the minimum being fixed at 3*d.* The net receipts from this duty by the revenue authorities for the last ten years have been as under :—

Year.	England. £	Scotland. £	Total. £
1911	322,696	2,950	325,646
1912	324,861	2,996	327,857
1913	325,420	2,899	328,319
1914	357,750	2,807	360,377
1915	331,033	2,744	333,777
1916	617,879	9,575	627,454
1917	726,894	6,049	733,943
1918	797,366	6,449	803,815
1919	1,056,435	9,259	1,065,694
1920	1,322,654	10,007	1,332,661

ST. THOMAS'S HOSPITAL SAMARITAN FUND.

THE annual report for 1920 of the Samaritan Fund and the activities of the lady almoner's department of St. Thomas's Hospital has now been issued, showing that the work done has covered much old ground, gradually expanding as needs increased. The Samaritan Fund (founded in the year 1852) provides all necessary adjuncts to hospital treatment, such as convalescence, surgical appliances, temporary allowances, fares, extra nourishment, &c. That its assistance has always been of a varied nature is shown by the fact that in the first year's report one of the items of expenditure was the the redemption of tools. The Fund is, unfortunately, small in comparison to the size of the hospital and the needs of its patients, and this year subscriptions, except in special cases, have been unusually small. By means of careful administration and an immense amount of work the Fund has kept clear of debt, and the needs of no patient have been disregarded, but the outlook is not very encouraging.

Subscriptions are urgently needed, together with convalescent letters and free hospitality for patients who are not actually ill but need rest and fresh air. Considerable care is required lest the help afforded by such a fund should tend to lessen the independence of the patient and, in the end, render the family group weaker and less able to stand alone. Therefore, when help is required, be it convalescence, surgical appliances, or nourishment, the first source considered by the almoner is the patient, his family, and relatives, the Samaritan Fund subsidising their contributions. Naturally, such efforts depend on the state of the labour market and other social and economic considerations. During the earlier part of the year 1920 there was comparatively little unemployment, and patients' contributions towards convalescence and instruments amounted to £2984 3*s.* 2*d.*, partly paid in direct sums, partly by means of loans, faithfully repaid. At the end of the year the outstanding loans only amounted to £38 11*s.*, the whole of which will be gradually repaid, and the bad debts came to the negligible sum of £7 6*s.* 2*d.*, the total cost being £5079 7*s.* 8*d.* Of necessity, the patients often cannot repay other forms of assistance. A temporary allowance is given while the breadwinner is laid up in order to free his mind from anxiety and to keep up the standard of living of the family. The amounts granted are based on the family income,

but loans for apprenticeship, tools, and so forth are greatly appreciated, and patients are most honourable in discharging their debts to the hospital. Numerous patients who are assisted in this way do not come under any category for which State aid is forthcoming, a fact which is perhaps not sufficiently realised by potential contributors.

The Samaritan Fund rented beds at various institutions as usual; during the year 1082 patients were sent away, 174 went to "free beds," the remaining 908 costing £2551 2*s*. 1*d*. There is still a great need for more homes for boys from 12 to 18 years, and it is still very difficult to find satisfactory boarding-out centres for the children. Surgical instruments were supplied to 307 in-patients and to 1794 out-patients at a total cost of £2528 5*s*. 8*d*., of which sum patients' payments totalled £1545 16*s*. 11*d*., to which the Samaritan Fund contributed £202 0*s*. 7*d*. There was an increased demand for ambulances and cars; the L.C.C. Ambulance Service is now free for the use of St. Thomas's patients. Much work is done in linking up patients in difficulties with the right sources of help and proper agencies. The report contains detailed accounts of the work of the speech clinic and of the tuberculosis, ophthalmic, maternity, venereal diseases, and physical exercise departments.

THE ÆTIOLOGY OF TYPHUS.

ON the headstone of a grave in Harrow-on-the-Hill Churchyard, at the east end of the tomb on which Byron was accustomed to recline, is the following inscription: "William Felkin Lambert. 4th son of Charles Lambert Eqr. of Fitzroy Sqr. London, who died on the 21st of November, 1825, from typhus fever brought on from sitting in School in damp clothes after [pla]ying at football."

SOCIETY FOR CONSTRUCTIVE BIRTH CONTROL.

THE objects of this Society, the full name of which is the Society for Birth Control and Racial Progress, as stated in the preliminary announcement, are (*a*) to bring home to all the fundamental nature of the reforms involved in conscious and constructive control of conception and the illumination of sex life as a basis of racial progress; (*b*) to consider the individual, national, international, racial, political, economic, scientific, spiritual and other aspects of the theme, for which purpose meetings will be held, publications issued, research committees, commissions of inquiry, and other activities will be organised from time to time as circumstances require and facilities offer; (*c*) to offer to all who still need it the full knowledge of the methods of control. We gave last week the names of medical men and women associated with the work of the Society.

WAR DISABLEMENT PENSIONS.

THE Ministry of Pensions calls the attention of officers, nurses, and men, and widows and dependents of deceased officers and men, who served in the war, to the provisions of Sections 5 and 6 of the War Pensions Act, 1921. In accordance with Section 5, any new claim to pension, grant, gratuity, or allowance in respect to disablement must be made within seven years after the date on which the claimant was discharged, or within seven years after the official date of the termination of the war (August 31st, 1921), whichever date is the earlier. No new claims will be considered after the expiry of the prescribed period. A person is deemed to have been discharged from the service at the time when his active service terminated. Under Section 6 any claimant who desires to appeal against the rejection of a claim to pension must do so within a period of 12 months after the date of the notification by the Ministry, to the claimant, of the rejection of the claim, or after the date of the commencement of the Act (August 19th, 1921), whichever is the later date.

SANITATION IN FLANDERS.

SOME of the more observant visitors to the Belgian battlefield and the pleasant resorts adjacent thereto have been distressed at the absence of sanitary conveniences and the apparently low standard of public hygiene in the disposal of excreta. The question naturally arises whether there is any greater prevalence of excreta-borne disease in West Flanders than in adjacent countries where the hygienic conscience is keener. Trustworthy statistics relating to West Flanders which, it should be remembered, suffered more severely than any other Belgian province during the war, are, however, not available, as the rates based on the estimated population are probably too low. The recorded death-rate from all causes in 1919 was 14 per 1000 of the population. The statistics of notified infectious diseases show an average of about five cases of typhoid or paratyphoid in West Flanders during each ten-day period of the present year. Between August 1st and 10th the notifications were 10 typhoid, 14 diphtheria, 10 scarlet fever. Between June 21st and 30th they were 12 typhoid, 14 diphtheria; and scarlet fever was epidemic. Two cases of epidemic dysentery were notified in the first week of July.

DANGEROUS DRUGS ACT, 1920.

THE regulations made under this Act came into force on Sept. 1st. No person may now have in his possession any morphine, cocaine, or heroin, or any preparations containing at least 0·2 per cent. (one part in 500) of morphine or 0·1 per cent (one part in 1000) of heroin or cocaine, or any medicinal opium, unless he is licensed by the Home Office, or is otherwise authorised by the regulations or by the Home Office, or unless it is supplied on a prescription given in accordance with the conditions specified in the regulations. A few preparations (including Dover's powder and gall and opium ointment) are exempted from the operation of the regulations, copies of which can be obtained from His Majesty's Stationery Office. The existing restrictions in regard to raw opium which have been in force under the Defence of the Realm Act remain, with modifications.

The *Chemist and Druggist* has brought out at the price of 1*s*. a useful wall-card summarising the regulations of the Act. The front contains in addition notes on the various special authorisations and tables showing the limits of safety dilution for salts of alkaloids. On the back are tables giving the proportion of dangerous drugs in various official and unofficial preparations. Finally, simple prescription calculations are added. The card is intended for the use of chemists, but would be equally useful to any dispensing doctor.

WINTER RESORT FOR CHRONIC RHEUMATISM.

To the Editor of THE LANCET.

SIR,—May I ask any of your readers who have experience of Mediterranean or other winter health resorts to advise me as to which places are likely to answer to the following requirements:—(1) Dry, sunny, bracing climate; (2) up-to-date facilities for treatment of chronic rheumatic affections; (3) en pension terms not exceeding £1 per day at quieter hotels; (4) lowest possible duties on imported cigars; (5) a reasonable amount of life and amusement.

Owing to residence in the East, I am unfamiliar with the essential points of difference between the winter resorts of Europe. I am, Sir, yours faithfully,

August 25th, 1921. I.M.S.

FOREIGN POSTAGE RATE.

THE Postmaster-General complains of the number of insufficiently stamped letters sent to places abroad. These letters are duly forwarded, but are charged on delivery with double the amount of the deficiency, the surcharge being retained by the foreign post office. The prepaid rate of postage on letters from the United Kingdom to British possessions generally, the United States, Tangier, and H.M. ships and troops on foreign stations is 2*d*. for the first ounce and 1½*d*. for each succeeding ounce or fraction thereof. For all other places abroad the rate is 3*d*. for the first ounce and 1½*d*. for each succeeding ounce.

ORTHOGRAPHY IN UGANDA.

THE names in the clinical note on Human Anthrax in Buganda Kingdom, by Dr. W. L. Peacock and Dr. H. Lyndhurst Duke (THE LANCET, August 13th, p. 332) are not misprinted, as some correspondents have hastily assumed. The formation of the words Buganda, Muganda, Luganda, &c., is according to the Bantu language there spoken. The prefixes *Bu*, *Mu*, and *Ba* signify respectively the country, one of its inhabitants, and more than one inhabitant—i.e., the plural form. *Luganda* signifies the language. *Uganda* is the Swahili form, and *Buganda* the Luganda form, of the name of the country. In Luganda the use of prefixes modifies the meaning of substantives in the manner shown as follows: *embuzi*, goat; *gubuzi*, a huge goat; *kibuzi*, a fair-sized goat; *kabuzi*, a little goat; *wambuzi*, Mr. Goat, and so on.

THE AIRMAN'S PHYSIQUE.

THE aeronaut is exposed to various perils. In a recent issue of the *Military Surgeon* Major W. F. Bonner ascribes 2 per cent. of losses of American airmen in the war to enemy action, 8 per cent. to mechanical defects of plane or engine, 90 per cent. to the failure of the pilot himself, which should prove the great responsibility of the flight surgeon, who decides whether a pilot is fit to fly, and a series of tests to help in determining this question is given. In the same journal Lieutenant J. F. Neuberger, senior medical officer at the naval air station on Rockaway Beach, is of opinion that to pilot an aeroplane is a strenuous physical exertion, and that no airman should be accepted for it if under 5 ft. 7½ in., or with less weight than 10 st. 10 lb. His index of measurement is P + p − T, where P is the weight in kilogrammes, p is the chest measure in centimetres, and T is the height, also in centimetres. For the good average flier the figure is −20, but the less the result the better. Light weight is of no advantage to an airman. He is the brain of this delicate, valuable mechanism, and the brain should be, must be, sound. Also he must have great staying power.