

action greatly restricted, and have still to compete with institutions whose abuses they started to remedy. Now the medical charities could not be carried on without honorary medical officers, and these latter can govern the proceedings of the hospitals. The inevitable conclusion is, therefore, that the medical men connected with the charities which have not joined in the scheme are not in earnest in their wish to reform the abuses of their institutions.

Here, then, is the first element of our partial failure, resulting not from any defect in the scheme of provident dispensaries, but from our having aimed at too much, considering the materials we have had to work with. We unfortunately admitted on our staff all qualified medical men who chose to apply, and as a result the income obtained by some was not sufficient to satisfy them; whilst others, after they had got a goodly number of patients, left us, and endeavoured to take the patients with them. In addition to this there was a great flock of sick people who came to us whilst there was no entrance-fee to pay, and who left as soon as they became convalescent; so that it is not difficult to understand why Manchester has not done better, nor will it be difficult for Birmingham to avoid our errors.

But what is the extent of our failure? We had six provident dispensaries, with 11,370 paying members, at the end of last year, and these are now on the increase. The £1000 a year provided by the guarantors has covered establishment charges, including fittings, surgical implements, and stocks of drugs. One of the dispensaries is now self-supporting, a second cost the council only about £50 last year, and will, I trust, cost less this year. Upon the whole, the requirements from the council are now not more than £500 per annum, and they are not likely to be increased unless we open more dispensaries; and even if the aid of the council should cease, it is very unlikely that the provident dispensaries would be given up.

The alternative I should like to lay before the medical profession is this—Will they join the provident dispensaries in this way, helping the working classes to form habits of self-reliance, and at the same time putting an end to the abuse of medical charities; or will they encourage the benevolent public still to offer a premium on mendicity, and thus prevent that growth of independence and forethought which the provident dispensaries render possible? The report of the committee which I am now discussing admits that for many years the recipients of medical charities in Birmingham have increased “in a far greater proportion than the population,” and they further admit that “to encourage such abuse, or permit it to continue, is to foster improvidence and fraud.” I presume this committee would also admit that a considerable proportion of the working classes, if they have sickly families, cannot possibly pay the ordinary medical fees, and that for them the provident dispensaries would be a great blessing, enabling them to avoid the dangers of debt.

Some combination is evidently necessary for the cure of these numerous evils, and it seems to me that those who oppose or seek to delay the establishment of provident dispensaries are bound in honour to produce a better scheme for the purpose. This the medical committee has not only failed to do, but, by misrepresenting what has been done in Manchester, it seems to be their desire to prevent others from remedying the evils by means known to have been successful elsewhere.

I am, &c.,

JOHN WATTS,

Chairman of Provident Dispensary.

Rawson-street, Manchester, August 5th, 1878.

\* \* The above letter continues a discussion of the greatest interest both in a social and professional respect, and one upon which we shall have something more to say ere long. A serious feature in this letter is the extent to which it blames medical men for the slow and partial success at Manchester. We shall only at present make one more remark on Mr. Watts's interesting communication. He mentions the successful instances of provident dispensaries at Northampton, Coventry, Leicester, and Derby. We are not aware that in these towns the medical charities or the medical men have acted differently from the way in which it is complained they have acted in Manchester, from which we should infer the necessity for some other explanation of the different results.—ED. L.

## POOR-LAW EXCUSES FOR NON-PAYMENT OF FEES.

To the Editor of THE LANCET.

SIR,—I should be glad if some one of your readers—and there must be many who know—would kindly inform me on the following question, as to whether the Board of Guardians are right or wrong; and if wrong, how shall I be able to ascertain the law on the subject, and obtain redress?

A man breaks his leg, and, under ordinary circumstances, as district medical officer, I should be summoned to attend him; an order would be given by the relieving officer, and in due time I should obtain my fee. However, in the present case, the patient is removed to the Cottage Hospital—also within my district,—and I, as district medical officer, am fetched to attend him. I do so attend, and set his fracture. The Board refuse to grant an order (which carries the fee), on the grounds that “the leg was set in the hospital.”

I am not a surgeon to the Cottage Hospital, either paid or honorary, but have, in common with all medical practitioners here, the privilege of attending my own patients if admitted as such; so also patients admitted without any regular medical attendant can, if they express the wish, be attended by any one they choose, or, in default of an expressed choice, by the hon. surgeon. Patients contribute a certain sum weekly towards their maintenance.

If I am to be deprived of my fees in this way, I shall be mulcted in a considerable sum every year that the guardians are otherwise bound to pay, or else I must refuse for the future to admit any parish cases, and so a great many sufferers will be deprived of skilled nursing and all the many advantages of a Cottage Hospital over a poor man's home.

I am, Sir, yours obediently.

Surbiton, August 14th, 1878.

OWEN COLEMAN, M.D.

## KOUMISS IN DIABETES.

To the Editor of THE LANCET.

SIR,—On the 6th January, B. D—, aged twenty-nine years, presented himself at my consulting-room with all the symptoms of diabetes. His pulse was 100; weight 8 st. 7 lb.; bowels constipated; passed eighteen pints of urine in twenty-four hours, and sugar was present in it in considerable quantities. Had a very jaundiced appearance. Could not lie long without having to get up to pass urine. For some considerable time before the above date he was under my care for this disease, and, after other attempts to alleviate his symptoms unsuccessfully, was put upon skim-milk treatment. Upon this he improved for a time, so much so, indeed, as to be able to resume work, which he had been obliged to give up. This did not continue, however, and he gave it up and was soon obliged to present himself again. He was rapidly losing flesh and strength. Having not long before this read an account of some cases in THE LANCET that were benefited by koumiss, I determined to give it a trial, and ordered an ounce five or six times a day.

Jan. 11th.—Says he feels better. Pulse 98. Is not so jaundiced in appearance. Bowels open every day; passed in twelve hours, from 6 o'clock last evening to 6 o'clock this morning, eight pints of urine, carefully measured, of sp. gr. 1036.

I will not trouble you with particulars of every examination, but say that from this date to the 31st of March he continued this treatment, and that the improvement was remarkable. On the 31st of March the urine passed in twenty-four hours was five pints (a great diminution compared with eighteen pints on the 6th of January), its sp. gr. being 1024, and of the usual amber colour it presents in health. The pulse was slower and stronger; the tongue clean; appetite good. The jaundiced appearance had almost quite passed off, and he had increased somewhat in weight. The inordinate thirst which was at first a marked feature had disappeared, and he had been at work for some weeks, and said he has not felt so well and strong for more than twelve months.

During treatment he twice neglected to take his koumiss for some days, and the effect was most noticeable. During these intervals no diminution of urine took place, but within forty-eight hours after resuming it the quantity began to diminish, and the diminution was continuous

and gradual. So confident am I that the improvement was due to the action of the koumiss that I shall employ it with confidence should a case of this kind come under my care again. The koumiss was not employed to the exclusion of every other article of diet. He was allowed a non-sugar-forming diet.

I saw the man last in May, and he was then at work, feeling fairly well, and the urine had not increased in quantity. I put the case on record without comment at present.

I am, Sir, your obedient servant,

Luton, Aug. 5th, 1878.

D. THOMSON, M.D.

## Obituary.

### WILLIAM BENJAMIN WINKFIELD, L.R.C.P. &c.

BY the sudden death of this able and much-respected practitioner, from the results of a heat-stroke, Shirley has sustained a loss which cannot easily be repaired. All that professional skill and the most solicitous care could do in attempting to ward off the fatal result was essayed by his friends: Mr. Sampson; Surgeon-General Maclean, of Netley, Mr. A. Winkfield, of Oxford, his brother; and Mr. Knapton, his assistant.

William Benjamin Winkfield was born in London in August, 1834, and received his education at the Grammar School at Bedford. He entered the profession as a pupil at the Bedford General Infirmary, where, in 1854, he gained a prize for proficiency in Anatomy and Physiology. Subsequently he proceeded to London, and entered as a student at St. Bartholomew's Hospital, where, by his zeal and ability, he soon won the confidence and esteem both of his teachers and of his fellow-students. He was one of the most successful competitors for prizes at the hospital in the years 1856-7, and gained there one of the senior scholarships, the highest distinctions awarded to the pupils of the hospital. In 1858 he obtained his diplomas, and soon afterwards settled in practice at Kettering, Northamptonshire; but, owing to severe attacks of asthma, was not able to remain there permanently, and in 1865 he removed to the more genial climate of Shirley, where, in addition to the work of an extensive private practice, he performed in a most efficient manner the duties of medical officer of health to the Shirley Local Board.

His funeral, on the 6th July, bore witness to the high esteem in which he was held at Shirley, nearly every shop and private house being half closed, and many of his former patients and friends, amongst them the president and members of the Southampton Medical Society, the chairman and other members of the Shirley Local Board, taking part in the sad ceremony.

His genial character, kindness of heart, and amiable disposition endeared him to all his patients and friends, and his gentlemanly bearing and high sense of honour bore high testimony to his social character and worth. Beloved by the poor, at all times a welcome guest with the rich, it may truly be said of him that he passed away regretted, beloved, and sincerely lamented. He leaves a widow and four young children to bewail their untimely loss.

## Medical News.

UNIVERSITY OF LONDON. — The following candidates have passed the recent First M.B. Examination:—

### ENTIRE EXAMINATION.

#### FIRST DIVISION.

Bassett, Henry Thurstan, Queen's Coll. Birm. and Guy's Hosp.  
Bowe, Francis, St. Bartholomew's Hospital.  
Bredin, Richard, Liverpool Roy. Infirm. Sch. of Medicine.  
Cantin, Louis Alfred, St. Bartholomew's Hospital.  
Chisholm, William, B.A. Sydney, University College.  
Colborne, William Wriothsley, University College.  
Cox, Frederick Augustus, St. Mary's Hospital.  
Cuffe, Edward Meade, St. Bartholomew's Hospital.  
Day, Donald Douglas, St. Bartholomew's Hospital.  
Dickinson, Thomas Vincent, St. George's Hospital.  
Graham, Albert William, St. Bartholomew's Hospital.  
Honeyburne, Richard, Liverpool Roy. Infirm. Sch. of Med.  
Hoole, Henry, Charing-cross Hospital.

Horsley, Victor Alex. Haden, University College.  
Jones, Robert, St. Bartholomew's Hospital.  
King, David Alex., St. Bartholomew's Hospital.  
Kirsopp, Thomas, St. Bartholomew's Hospital.  
McDonnell, Denis, King's Collège.  
Maguire, Robert, Owens College.  
Maudsley, Henry, University College.  
Mott, Frederick Walker, University College.  
Murray, Hubert Montague, University College.  
Newsholme, Arthur, St. Thomas's Hospital.  
Parker, William Rushton, University College.  
Parkes, Louis Coltman, University College.  
Pasteur, William, University College.  
Permewan, Arthur Edward, University College.  
Pratt, Reginald, University College.  
Rake, Beaven Neave, Guy's Hospital.  
Shaw, John, St. Thomas's Hospital.  
Shearman, Percy Edward, University College.  
Weber, Charles Alfred, B.A., B.Sc., St. George's Hospital.

#### SECOND DIVISION.

Atmaram, Anundrao, B.Sc., University College.  
Ballance, Charles Alfred, St. Thomas's Hospital.  
Brooke, Henry Ambrose Grundy, B.A., Owens College.  
Collingwood, David, Liverpool Roy. Infirm. Sch. of Med.  
Collins, William Job, St. Bartholomew's Hospital.  
Dallmeyer, Andrew William, University College.  
Davidson, John, King's College.  
Donovan, Denis William, University College.  
Groom, Henry Thomas, St. Bartholomew's Hospital.  
Hoskyn, Donald Templeton, University College.  
Hurst, George, B.A. Sydney, University of Edinburgh.  
Marsh, George Ryding, Guy's Hospital.  
Oram, Richard Rundell William, Guy's Hospital.  
Rice, Edward, St. Bartholomew's Hospital.  
Routh, Amand Jules McConnel, University College.  
Silk, John Frederick William, King's College.  
Smith, Henry, St. Bartholomew's Hospital.  
Squire, John Edward, University College.  
Swale, Harold, St. Thomas's Hospital.  
Sykes, William Ainley, St. Bartholomew's Hospital.  
Tait, Edward Sabine, St. Bartholomew's Hospital.  
Thomas, Walter Duncan, St. Bartholomew's Hospital.  
Walters, Fredk. Rufenacht, St. Thomas's Hospital.  
Watkins, Christopher James, University College.  
White, Charles Haydon, St. Thomas's Hospital.

#### EXCLUDING PHYSIOLOGY.

##### FIRST DIVISION.

Barnes, Geo. Frederic, St. Bartholomew's Hospital.  
Sellers, William, University of Edinburgh.

##### SECOND DIVISION.

Smith, John, Guy's Hospital.  
Whiting, John, St. Bartholomew's Hospital.

##### PHYSIOLOGY ONLY.

##### SECOND DIVISION.

Crisp, Thomas, St. Thomas's Hospital.  
Fooks, George Ernest, St. Bartholomew's Hospital.  
Hughes, Richard, St. Bartholomew's Hospital.  
Roeckel, Waldemar Joseph, St. Bartholomew's Hospital.  
Suckling, Cornelius Wm., Birmingham Sch. of Medicine.

APOTHECARIES' HALL. — The following gentlemen passed their examination in the Science and Practice of Medicine, and received certificates to practise, on Aug. 8th:—

Cary, Joseph, Paul, Cornwall.  
Dunn, Walter, Gordon-square.  
Lavis, Hy. James Johnston, Stalbridge, Dorset.  
Powell, John James, Weybridge.

ROYAL COLLEGE OF SURGEONS IN IRELAND. — At recent examinations the undermentioned gentlemen obtained the Fellowship of the College:—

Kendal Franks. | Francis Peirce.

ROYAL COLLEGE OF SURGEONS.—From the annual report of the receipts and expenditure of this institution, which was laid on the table at the last meeting of the Council, it appears that the former amounted to £15,486 9s. 5d., derived principally from fees paid on admission to the fellowship, membership and dental diplomas amounting to £12,028 5s.; dividends and rents from chambers, £2550 15s. 10d.; trust funds, £249 2s. 6d.; elections into the Council, £42. The chief items in the expenditure consisted in fees paid to the Council, courts, and boards of examiners, amounting to £5814 10s.; salaries and wages required, £3858 9s. 6d.; pensions, £278 12s. (the death of Mrs. Belfour will reduce this amount by £200); taxes, rates, and diploma stamps, £1,380 6s.; expenses in connexion with examinations, £319 0s. 10d.—Summary: Balance at banker's Midsummer-day, 1877, £585 9s. 7d.; receipts, £14,900 19s. 10d.; total, £15,486 9s. 5d. Expenditure, £14,528 16s. 2d.

The Library and Museum of the Royal College of Surgeons will be closed as usual during the month of September.

The preliminary examinations in arts, &c., for the diplomas of Fellow and Member of the College, will take place early in the ensuing month, and already a very large number of candidates have entered their names.