

BIBLIOGRAPHIC NOTICES.

Report of the Commissioners appointed to take the Census of Ireland for the Year 1841.

ANY one ever so little acquainted with the obtaining of statistical returns, must be aware how very difficult it is to combine minuteness with accuracy. And also that the difficulty arises as much from the machinery as the subject. The late Rev. Cæsar Otway, in his travels through Erris, tells us that the mode adopted in a former census was to employ persons who were paid in proportion to the number of the population they made out! This will, probably, explain why the numbers given in the present census are so little above those obtained in the former, without the necessity of assuming extraordinary causes to account for a decreased population.

The present Commissioners—Mr. Tighe Hamilton, Mr. Brownrigg, and Captain Larcom—having the police at their disposal, arranged their plans with great care, and so as to avoid all ordinary sources of error, and the result is one of the most minute, ample, and satisfactory Reports we have ever met. In it we have very full details of the persons, houses, families, occupations, emigration (home and colonial), rural economy, such as division of lands, plantations and trees, farms and live stock, education and vital statistics, *i. e.* births, marriages, ages and deaths, as regards each county, and a general summary of the whole.

The Report upon the table of deaths has been intrusted to our distinguished *compatriote*, Surgeon Wilde, and we have no hesitation in saying that it does him infinite credit, both as to the mode adopted for obtaining accurate results, and the labour and extreme care bestowed. It is with this department that we shall occupy ourselves at present, as it has a more direct bearing upon the profession. But it may not be uninteresting to our readers—before we leave the general Report—if we lay before them the portion which describes the plan adopted on the present occasion :

“ Our first step was to procure from the Ordnance Survey Department a map of every barony in Ireland, showing the boundaries

and details of its several parishes and townlands, with classified lists of these subdivisions. As the survey had been completed, except in the counties of Cork, Kerry, and Limerick, we thus, for the first time, possessed the advantage of a set of maps which not only indicated correct boundaries, but exhibited every house upon the face of the country. For those three counties the maps were formed from less perfect documents, and exhibited, for the most part, no more than the boundaries.

“It having been resolved that the constabulary should be employed for the enumeration, we next distributed the maps and lists to the several officers and head constables of the force, selected by the inspector-general for each barony. They again divided these into districts of contiguous townlands, to each of which was assigned a superintending constable or sub-constable, or, in those districts where the constabulary were not sufficiently numerous, one of the coast-guard, or, where such assistance was not available, a civilian selected by the superintendent. We were thus enabled to mark on a general map the districts and stations of all the enumerators, and the whole force thus marshalled was in readiness before the arrival of the period fixed by the Act of Parliament for the enumeration.

“In the mean time, having maturely considered the best mode of ascertaining the various facts we had in view, we resolved to adopt the course of sending a form of return to each family, to be filled by its head, as less intrusive than requiring it to be filled by the enumerator from *viva voce* inquiry. But we, of course, took means to check the returns so obtained, and required from the enumerator a certificate that they were true to the best of his belief. Another form was supplied to the enumerator, in which he was himself required to record the various particulars sought, as to houses and matters of a similar nature. The general distinction we followed was, that the statement of all facts which were of a personal nature, and only ascertainable by personal *inquiry*, was, as far as possible, left to the head of the family, whilst that of all facts which could be ascertained by mere *observation* was demanded from the enumerator.

“The Act required us to ascertain the age, the sex, the occupation, and place of nativity of every person abiding in Ireland, on the night of Sunday, the 6th of June, with such other particulars as the Lord Lieutenant should direct. We accordingly made provision under the latter power for such inquiries as appeared likely to illustrate or verify the information specifically required. Thus, we asked the *name* of every individual, as a proof of identity; and the *relationship*, with a view to distinguish the members of the *natural* family from the servants and other members of the establishment, constituting what may be considered the *social* family. We also demanded a return of absent members, which, together with the measures adopted at the ports, to be described hereafter, we hoped would obviate the danger of error from the lateness of the season at which the census was to be taken. We also ascertained

the dates of marriages and of deaths since the last census, in order to institute a comparison of ages with the former returns, and, in the absence of registries, test in some degree the correctness of the enumeration.

"The Act also required a return of the houses, distinguishing those which were inhabited from those which were uninhabited, or building; and by a similar extension of the inquiries into subjects of a kindred nature, we sought to ensure a correct knowledge of their state in point of accommodation; whilst, from the combination of these several returns with those before mentioned, we hoped to throw some useful light upon the general condition of the community, as there can be no more obvious indication of the advances and condition of a people than improvement in the comfort of their residence. So, in an agricultural community, the quantity of land held or tilled by each occupant, not only throws light upon agriculture as a branch of national wealth and industry, but by its influence on the condition of the people, affords a test of the relative advantages of large and small farms. Again, the quantity of cattle and other stock of every description, is necessary to a just estimate of the productiveness of a country, and its influence upon the comfort of the inhabitants."

For further details we must refer the reader to the Report, and we can honestly assure him that he will be amply repaid for the trouble of perusal.

Now let us turn to Mr. Wilde's Report, which is divided into five sections:—1. The mortality from disease and accident. 2. Coroner's inquests. 3. Insanity and lunatics in jails. 4. Hospitals and sanatory institutions. 5. A special sanatory report on the city of Dublin. We shall notice a few points here and there, leaving the fifth section for a future notice, premising that this is the first attempt at a bill of mortality for Ireland. Dr. Wilde observes:

"None of the ancient Irish works attempt to enumerate the diseases of this country, to catalogue their names, or describe their symptoms or fatality. The same deficiency in medical nosology is apparent in those of more modern times; and in no instance has any effort been made to draw up a general bill of mortality for this kingdom until the present. The only conception of this kind arose with Sir William Petty, who, in 1683, published a small tract of '*Observations upon the Dublin Bills of Mortality, MDCLXXXI., and the State of that City.*' In the opening paragraph of this essay, he says, 'The observations upon the London bills of mortality have been a new light to the world; and the like observation upon those of Dublin, may serve as snuffers to make the same candle burn clearer.'

"The London observations flowed from bills regularly kept for nearly one hundred years; but these are squeezed out of six straggling London bills, out of fifteen Dublin bills, and from a note of

the families and hearths in each parish of Dublin, which are all digested into the one table or sheet annexed, consisting of three parts, marked A. B. C., being the A. B. C. of public economy, and even of that policy which tends to peace and plenty.' These tables having a more local interest, will be referred to in the Report upon the mortality of the city of Dublin in particular."

"The precise period at which 'burials and births' were first recorded in Dublin has not been ascertained. They must have been in existence long prior to the date of Petty's tract (although they did not specify the cause of death); for in his Table B. he commences with the 'burials and births' of 1666. May they not have been introduced when Graunt's '*Natural and Political Observations upon Bills of Mortality*,' in 1661, first drew particular attention to the value of statistical inquiries of this nature in England? I find in the Appendix to his 5th edition of '*Observations on the London Bills of Mortality*,' published in 1676, a small imperfect Dublin bill given without any observations, and headed thus—'Dublin—A bill of mortality from the 7-6 of July to the end of August, 1662.' The registries in this document are—'flux, 7; rickets, 0; ague, 4; fever, 0; consumption, 8; small-pox, 1; spotted fever, 0; plague, 0; baptised, 14; died, 20.' This was in all probability one of the first attempts at a registration of deaths in this city.

"These bills were obtained from the parish clerks, but must have been very defective, from the circumstance of so many persons being buried in the grave yards in the *vicinity* of the city, and also from the fact of the births of dissenters not being registered. The exact period over which these bills extended cannot now be accurately determined; Dr. Thomas Short, in his work "*Observations on the City, Town, and Country Bills of Mortality*,' 1750, thus alludes to this tract of Petty's:—'Major Graunt having taken no notice of the Dublin bills of mortality, though the second city in his Majesty's dominions, an ingenious author in 1681 has published a small schedule on them, with three short tables.' This small bill for 1662 must have escaped the notice of Short, or he consulted only the early editions of Graunt's work. In 1686, Sir William Petty reprinted his original tract under the title of '*Further Observations upon the Dublin Bills; or Accounts of the Houses, Hearths, Baptisms, and Burials of the City*.' London, 8vo., 1686.—The only additional matter inserted in this edition is one small table for 1682, from which it appears that the houses were 6,025; fire-places, 25,369; baptisms, 912; and deaths, 2,259. In a few remarks upon this table, he concludes that the deaths of the metropolis were at that time 1 in 30—more according to an established rule for forming proportions of mortality then in use, than as the result of any actual calculation or observations of his own; were this proportion correct it would increase the ratio of deaths to the population, to 2,253 for that year. In 1684, Petty introduced the subject of these bills before the Royal Society—(see *Philosophical Transactions*). 'After this' (1648), says Short, 'I meet

with no other public account or notice of the Dublin bills till 1747, that the worthy Dr. Rutty there procured me an annual abstract of them from 1715 to 1746, only the births and burials of 1739 are wanting; because, before that year they ended their year with March 24, but since then with December 25. These want also the christenings of 1732, 37, and 38. Nor is it specified in these three years, the particular numbers that died above and under sixteen years of age, as is done in all the other years. Neither the old nor *new* Bills distinguish the sexes of baptized and buried, like other bills, nor have either of them the marriages, which is a great want.' One or two of the Irish medical writers about the same date briefly allude to them; but the most authentic record is that given by the accurate and observant Dr. Rutty (already cited by Short), in his '*Chronological History of the Weather and Seasons in 1770*,' and also his '*Natural History of Dublin*,' in 1772."

The population of the country, as ascertained by the returns, is 8,175,124, and the total deaths for the ten years ending June 6, 1841, amounts to 1,187,374, in the proportion of 100 males to 924 females.

The first object, of course, was to form a statistical nosology which would embrace all the diseases specified in the returns, and guard against errors arising from ignorance:

"In order to embrace as much variety as possible in the local terms for disease and death, I selected a town, and also a rural district, consisting of one or two remote parishes, in each of the four provinces, as well as a portion of the liberty, and some of the principal streets and squares of the city of Dublin, and recorded the names of all the diseases mentioned in these places. Many of these names being mere local definitions, were entered as synonyms to the term in most general use. By this means, I not only became acquainted with the most frequent causes of death among the different grades of the population, but also with the local and provincial terms used to express either the same or analogous diseases in different parts of the country. From this information I drew up a list of fifty-two diseases, consisting of the most frequent causes of death, and the names and symptoms of which are most generally known to the lower classes of this country, and arranged them, not according to their nosological grouping, but as far as possible with reference to the age at which they occurred, commencing with those of infancy and ending with those of senility, in order to facilitate their subsequent registration. Opposite the name of each disease, the various synonymes or popular and local terms, occasionally used to express the same or some very similar affection, were enumerated. Thus, for pemphigus gangrænosus, a disease common in many of the country parts of Ireland, the expressions 'black hives, —mortifying hives,—burned holes,—and black and white blisters,' were used. And again, dysentery and diarrhoea were constantly expressed by 'bowel complaints, lax, flux, purging, and bloody

flux, &c.,’ the synonymes varying according to the rank, or character, or education of the person who filled the return, or according to the part of the country from which the information was derived. A previous acquaintance with the state of disease, particularly among the working classes in the remote districts of this kingdom, materially assisted me in arranging and applying the general application of the terms used to express disease; and I also communicated, when any difficulty arose, with several medical practitioners located in different parts of the country on this subject.”

The nosological table thus constructed stands thus. First we have EPIDEMIC, ENDEMIC, and CONTAGIOUS DISEASES, including small-pox, measles, scarlatina, hooping cough, croup, thrush, pemphigus, diarrhoea, ague, cholera, influenza, fever, erysipelas, syphilis, hydrophobia, glanders. Then we have SPORADIC DISEASES, divided into *Diseases of the Nervous System*, including hydrocephalus, inflammation of the brain, apoplexy, injuries of the head, convulsions, paralysis, lockjaw, epilepsy, delirium tremens, insanity. *Diseases of the Respiratory and Circulating Systems*, including cynanche, inflammation of lungs, bronchitis, consumption, spitting of blood, asthma, vomiting of blood, diseases of the heart, water on the chest, aneurism, emphysema, empyema. *Diseases of the Digestive Systems*, including teething, jaundice, worms, colic, gastric fever, dropsy, diseases of the intestines, hernia, liver complaint, peritonitis, inflammation of the bowels, marasmus. *Diseases of the Urinary Organs*, including stone, stricture, extravasation of urine, urinary disease, diabetes, diseases of the bladder, diseases of the kidney. *Diseases of the Generative Organs*, including diseases of childbed, prolapsus uteri, ovarian dropsy, cancer uteri. *Diseases of the Locomotive Organs*, including rheumatism, diseases of the bones and joints, hip disease, spine disease. *Diseases of the Tegumentary System*, including ulceration, purpura, fistula, anthrax, lepra. *Diseases of uncertain seat*, including inflammation, phlebitis, mortification, wounds, hæmorrhage, malignant fungus, scrofula, gout, cancer, tumour, abscess, fracture, dislocation, debility, and old age. To these are added *Violent and Sudden Deaths*, including burns and scalds, drowning, intemperance, homicide, starvation, executed, poison accidental, suicide, accidental unspecified, and a column where the cause is not specified.

Under the circumstances, probably, no better classification could have been made out; it could not be expected that minute accuracy could be attained as to the special cause of death. Not the least interesting part of the table are the popular synonymes, especially the Irish ones. Can anything be more graphic than the terms “the eating disorder,” for pemphigus gangræno-

sus ; “ half dead,” for hemiplegia ; “ shrinking of one’s self,” for phthisis ; “ splitting of the bones” for necrosis : and many others as good might be adduced.

But to proceed :

“ The next questions that presented themselves were, as to the period over which our inquiries should extend, and the primary division to be made of the work. The length of time that had elapsed since June, 1831, must necessarily have rendered the accuracy of the census returns of deaths, in the absence of all other official and authentic records, very defective as a *whole* ; and this defect would, as might be anticipated, become more apparent as we receded towards the earlier years. Except in the first and last periods the deaths were therefore registered in *single years* for the ten years over which our inquiries extended ; the first of these is therefore understood to include the half year and twenty-four days from the 6th of June to the end of December, 1831, and also the entire year 1832 ;—and in the last is only included the five months and six days from the 1st January to the 6th June, 1841.

“ Regarding the local division of the registration, it was thought more desirable, more in accordance with the other branches of the census, affording not only greater accuracy, but being also a more limited and definite space on which to test the correctness of our work, and if necessary to refer to for any more detailed object or local information, to register the different counties in parishes. And, as the laws of mortality are so much influenced by a crowded or scanty state of the population—by the quantity and quality of their food—geographical position—the condition of their dwellings—the prevalence of epidemics—the existence of trade and manufactures of different kinds, as well as the greater or less proportion of medical aid and general sanatory relief, both in large towns and in the open country ; the division into civic and rural districts became also necessary.

“ In order that each of the ordinary divisions of the country might present this difference, and that at the same time those places only which afforded a collection of inhabitants within such spaces as might influence their mortality, should be distinctly specified, it was arranged that the civic district of each county should consist of all the towns of or above 2,000 people ; and with one exception (that of Leitrim) each county in Ireland offered one or more examples of this description. Cities and towns of considerable magnitude (as Belfast) were registered separately, and not included in the civic district of the counties to which they belong ; but in all instances the original parochial division was retained. Towns situated on the borders of counties, and portions of which extended beyond the county boundary, have had each part included in the civic districts of their respective counties, provided the entire population of such towns amounted to 2,000. In this way a parochial registration of the kingdom was effected, as complete as the returns permitted, which amounted in all to 1,187,374 deaths. When new,

or particular diseases, or those not set forth among the fifty-two already mentioned, were met with in the parish registration, they were specified in the form of notes upon the registering books: the *particular* cause of death in the case of accidents comes under this head.

"Thus a registration was compiled of the causes of every death given in the returns, the age at which it occurred, and the year in which it took place.

"The hospitals and sanatory institutions having been also furnished with forms requiring a return of their deaths of a more detailed and medical nature, and being aware of the greater importance and accuracy of those returns when properly attended to, I undertook, with your permission, to collect from these establishments such other additional information connected with their medical statistics as their records could supply. The causes of death afforded by the hospital returns having been furnished either by the medical attendants or from the case books and registries of these institutions, being in their definition much more accurate, and in their numbers more extensive, I arranged separate tables of deaths for the collected hospitals of each county in the kingdom. This, added to the notes of particular affections in the parochial registry, increased the list of diseases and causes of deaths to ninety-three.

"Owing to the length of time that had elapsed from the outbreak of cholera in 1832 and 1833—from the circumstance of so many poor and destitute persons, as well as whole families, having been swept off by that epidemic—from the universal panic that then prevailed, and the general medical and surgical hospitals having been closed against the admittance of persons labouring under Asiatic cholera, the return of deaths from this disease, either in the A. forms or in the hospital registries, was, as might have been anticipated, very defective. To remedy this omission, a return of the deaths from cholera, that occurred in 1832 and 1833, amounting to 25,378, was procured from the office of the Board of Health, and the numbers specified therein, distributed among the deaths of the different localities where they occurred.

"A record of the deaths, as well as the executions that took place in the different gaols in Ireland, was also received and registered.

"A return was received of the number and the date and cause of death of the different coroners' inquests in each county and city in the kingdom for the ten years included in the census inquiry. These documents having been statistically arranged, those violent or sudden deaths which they specified, and which *were not enumerated in the returns*, were added to the general mortality of their respective counties, for the years in which they occurred.

"Finally, the number of deaths that occurred in each of the public and private lunatic asylums, together with such other topics of information as the records of these establishments afforded, was registered, and the deaths added to their respective districts.

"Thus while the hospital returns afforded more accurate infor-

mation in a nosological point of view than the return of deaths in the A. forms, the inquests and gaol returns filled up those blanks in the general table of mortality, which it would have been impossible to have derived from either.

"By registering all the information derived from these sources upon properly arranged tables, we had acquired a knowledge of the age, sex, date, locality, and disease of one million, one hundred and eighty-seven thousand, three hundred and seventy-four deaths.

"The parish registries being too voluminous to print in detail, were next arranged in baronies; separating the towns of 2000 inhabitants;—and in these baronial returns the ages which had been originally registered in single years, were, with the exception of the first year, which was retained in months, and the following four in single years, compressed into quinquennial periods. Thus, the baronies of each county, including all the villages and minor towns whose population did not amount to 2000 inhabitants, were added together to form the *Rural District*; and the towns of or above that number of inhabitants, were added to form a *Civic District*; while the hospitals and asylums of each county were added, under the title of *Hospitals and Sanatory Institutions*, and a *General Summary* made of the whole."

After thus classifying the causes of death, and arranging these multifold tables, which reflect great credit upon Mr. Wilde's ingenuity and accuracy, he proceeds to notice the diseases in detail, furnishing us not only with the statistical proportion, but with much antiquarian information as to the prevalence, from early times, of peculiar diseases or epidemics. As a specimen we will quote the section on fever:

"FEVER.—The plague of Ireland, and from the earliest period to which history refers, the most prevalent and fatal affection to which this country has been subject. The *Maculated* or *Spotted Fever*, the true *Typhus Hibernicus*, is recorded in the early Irish MSS. under the term of *Fiabhrus Morgaighthe*, or the *Putrid Fever*; and also *Fiabhrus righin*, the *Lingering* or *low nervous Fever*. Although the former of these words is well known to all Irish scholars, yet it is seldom used by the people, who express "*the fever*" or "*the sickness*," as it is sometimes called, by the general term *Fiabhrus*. "It is probable," write Doctors Barker and Cheyne, that "continued Fever existed in this island long before the era of authentic medical records. Were we to hazard a conjecture respecting the plagues, as they were called, which accompanied the two great civil wars in Ireland—that in Queen Elizabeth's time, and that which commenced in 1641—it would be that those, strictly speaking, were not plagues, but epidemic Fevers, such as have lately prevailed."

"Gerald Boate, the first English writer who described these Fevers under "*The Diseases reigning in Ireland*, and whereunto that country is particularly subject," states that, "As Ireland is sub-

ject to most diseases in common with other countries, so there are some whereunto it is peculiarly obnoxious, being at all times so rife there that they may justly be reputed for Ireland's *endemi morbi*, or reigning diseases, as indeed they are generally reputed for such. Of this number is a certain sort of malignant feavers, vulgarly in Ireland called *Irish agues*, because at all times they are so common in Ireland, as well among the inhabitants and the natives, as among those who are newly come thither from other countries." He likewise notices its epidemic nature, prevailing "in some years with so great violence, that notwithstanding all good helps, some are thereby carried to their graves; and others who come off with their lives through robustness of nature or hidden causes, are forced to keep their beds a long time from extreme weakness, being a great while before they can recover their perfect health and strength." All authorities at present agree in regarding the "Irish Agues" of Boate as the true Synochial and Typhus Fevers of this country, and not of an intermittent character. Doctor Short states, that "In 1682 there raged a Spotted Fever in Dublin; in that year died 2,262, a very high bill." "In the year 1688, in the middle of May, a Fever began at London which spread over all England; and likewise over all Ireland, in July. Not one of fifteen escaped, yet not one of a thousand died; and it was observed, both in England and Ireland, some time before the Fever began, that a slight but universal disease seized the horses—viz., a great deflection of rheum from their noses."—(*Rutty*). This was a modification of the sweating sickness (*Sudor Anglicus*). And from the early part of the 18th century till towards its close, we have the fullest and most satisfactory records of the epidemic Fevers of this country transmitted to us in the works of O'Connell, Rogers, and Rutty, the medical historians of Ireland, to which I have already referred, and which, say the eminent authorities from whom I have just quoted (Doctors Barker and Cheyne), "possess a permanent interest, and excite a feeling of regret, that the physicians who succeeded those eminent men, by failing to imitate so laudable an example, should have left a blank in the medical history of their country which it is no longer possible to supply."

"It is probable that it has always been endemic; but the first defined period of epidemic Fever in Ireland is that chronicled by Rogers in Cork and its vicinity in 1708, and again in 1718-21, and 1728 to 31; and by O'Connell from 1740 to 1743. But as the annals of disease left us by these authors are more or less local, it may be well to mention, that "when Typhus begins to increase notably in the Dublin hospitals, we may rest assured that a nearly simultaneous increase of Fever will be observed in Cork, Galway, Limerick, and Belfast." (*Graves*.) "After the year 1721 there was again an interval of good health in Ireland, so complete that scarcely a case of Fever was to be met with." The most fearful epidemic of the last century, that in 1740 and 1741, is recorded by Rutty and O'Connell. We have certain accounts of this Fever being general throughout the provinces; and "in Galway," says Webster, "in 1840 it fell little short of the plague." Rutty says, that "in those

years it was computed, though probably with exaggeration, that one-fifth of the inhabitants died of Fever." O'Connell stated the number to be about 80,000; and again, in more modern times, it has been asserted in the Select Committee of the House of Commons (in 1830), that 65,000 died of Fever in 1817. How much reliance can be placed on rough guesses of this description may be gleaned from the statistics of mortality now recorded, which, whatever may be their intrinsic value, have certainly been obtained from sources such as were not, and could not have been had recourse to by the persons who offered these conjectures—the whole amount of Fever in Ireland for ten years, both in and out of hospital, not being much above 112,000; and cholera in its three years' progress, carried off little more than 45,000.

"Rutty notices an epidemic Fever in Dublin in 1745, from whence, to 1763 and 1764, the country appears to have been tolerably free from this malady. Sims mentions a violent epidemic Typhus in 1771, and Cheyne another from 1797 to 1803, founded upon "the monthly returns and reports made to Government by the Army Medical Board of Ireland, the proceedings of the Governors of the House of Industry, and the records of the Fever Hospital at Waterford." During the latter part of the last century, the health of the army was considered a good test of the health of the community generally; the soldiery being then principally located in billets or temporary barracks, were consequently liable to all the infectious diseases of the lower orders. A slight increase in Fever took place in 1810, and again in 1815, but it did not proceed to any great extent till the memorable years 1817, 1818, and 1819, when, say Doctors Barker and Cheyne, "assuming the population of Ireland to amount to six millions, it will be no exaggeration to state, that a million and a half of persons suffered from an attack of Fever in the time included between the commencement of the years 1818 and 1819. In the course of two years commencing with September, 1817, more than 42,000 patients were admitted into the hospitals." This scourge spared neither rank, circumstance, nor locality—town or country. The total number of patients admitted into the hospitals of Ireland (both temporary and permanent), during the prevalence of that epidemic, was 100,737, of whom 4,349 died. These authorities likewise mention the greater prevalence and fatality of Fever among males than females; this supposition, formed upon the returns of the Dublin hospitals, in the epidemic of 1817–19, is confirmed by the Census returns of 1841—the sexes being 60,206 males, and 51,866 females; and this proportion holds equally good, in both the districts, and in the hospitals and sanatory institutions. We have no account of any pestilential Fever or other formidable epidemic occurring in Ireland, until the arrival of cholera in 1832–3.

"The total deaths from Fever in Ireland, during the ten years included between June, 1831, and June, 1841, afforded by the Census returns, amount to 112,072—in the proportion of 100 males to 86.14 females, being 1 death in 10.59 of the mortality from all causes, and 1 in 3.4 of the deaths of the total epidemic class of diseases.

“ Compared with the general mortality, Fever has prevailed most in the counties of Cavan, Mayo, Galway, and Clare, and the towns of Belfast, Kilkenny, Dublin, Limerick, and Carrickfergus. During the ten years comprised in this Report, an epidemic Fever of a very malignant nature again visited this kingdom and the metropolis in particular, as an accompaniment to the influenza of 1836-7. During the latter year the deaths afforded by the Census returns amount to 17,280 : in the two following years the mortality fell considerably, but rose again in the year 1840, when 17,965 died. This increase, however, independent of any epidemic outbreak at that period, may be accounted for by the increased number of Fever hospitals established of late years in Ireland ;—thus in 1840, we find the deaths in hospitals to amount to 2,663, being double what they were in the early part of the period over which our present inquiry extends—(See Fever Hospital Statistics, pages 198 and 199). Cases of Typhoid Pneumonia have no doubt been included in these returns ; thus, says Dr. Wm. Stokes : “ This disease, so frequent in Dublin, at times indeed almost epidemic, has been long noticed under the names of the putrid, bilious, typhoid, or erysipelatous pneumonia.” Fever has spared no age, from 1 month to 90 years and upwards, but its most fatal period has been from 15 to 50.

“ The causes of epidemic Fever, and other epidemic or contagious diseases, do not come within the province of this memoir ; but it must strike the medical historian and statistician as remarkable, that when the Irish records of this class of affections are accurately examined, it will be found, that notwithstanding all that has been written and asserted upon the subject of atmospheric influence, want and distress, &c., conducing to the propagation and spread of disease, Fever in particular has raged nearly decennially for the last one hundred and fifty years. I do not mean to say, that it has become epidemic or fatal exactly upon the tenth year ; but from the eighth to the twelfth, with an interval of from six to eight years ; thus it appeared in 1708 ; 1718-21 ; 1728-31 ; 1740-43 ; 1763-64 ; 1771-73 ; and 1817-21. In the years 1832-33 Cholera took its place, but in 1837 it again appeared ; and the year 1842 has been marked by a most fatal epizotic. Why those lapses of twenty years, or whether our records are deficient for those periods, cannot now be determined : this periodic invasion is nevertheless curious though unaccountable : “ The wind bloweth where it listeth, and thou hearest the sound thereof, but canst not tell whence it cometh and whither it goeth.”

As every one would expect, the proportion of deaths to the population is much greater in the large towns than in the open country or small towns, being as 1 to 36.33 in the former, and as 1 to 59.89 in the latter.

The Report on coroner's inquests has been so largely noticed by the newspapers and periodicals, that we shall merely point out as curious, the periods of the year at which suicide, murder, and infanticide prevail, and refer the reader to the novel and interesting tables, p. 184.

The section on insanity is very valuable, and highly creditable to the industry and care of Mr. Wilde. He has given us, in a tabular form, the professions and occupations, the ages, sexes, marriage, education, &c. of these (p. 200), which must have cost an enormous amount of labour. To the credit of the proprietors of private lunatic asylums, we must notice that, with the exception of names, all the queries were promptly and fully answered.

On the other hand, to the disgrace of the country, it must be stated that a number of pauper lunatics and idiots are confined in the jails, the lunatic asylums being full. Of the 1800 thus committed during ten years, 96 died, 66 males and 30 females.

One would have anticipated more accuracy and satisfaction from the records of hospitals than from any other section—here at least, we ought to have accurate data, with entries of dates, ages, occupations, deaths, cures, &c., on which a minute and valuable Report might be founded. We really quote, with a feeling of shame, the following paragraphs:

“It is much to be regretted that in 6,049 instances, 3,216 males and 2,833 females, the records of the two classes of institutions under consideration, were unable to afford a return of the cause of death, or that nearly one in every three cases occurring in these public hospitals should be marked ‘Not Known,’ or ‘Cannot Tell;’ yet, manifest as is this deficiency in the public medical records of disease, it is one which, in many instances, was no doubt unavoidable, particularly in the country parts, where *post mortem* examinations (often the only means of acquiring a knowledge of the true cause of death) are so objectionable to the people. But when the records of the hospitals at large are unable to specify the *age* at which death took place in 8,764 instances, 5,191 males and 3,573 females, or about 1 in every 5, the benefit of some general system of hospital registration forces itself upon our attention. The total deaths in infirmaries and general hospitals during the ten years was 19,039, as 100 males to 69.67 females.

“The great majority of these hospitals have afforded a return of their receptions and deaths for the entire period, the ten years ending the 6th June, 1841, but several could not afford it for half the time; some kept no record of the distinction of sexes, and some were opened only lately.”

Surely men who enjoy the advantages of hospitals, ought at least to afford to the profession an accurate statistical record of their experience:

“The total amount of deaths in 86 fever hospitals, from which returns were received for the entire, or portions of the ten years, ending 6th June, 1841, is 15,988, as 100 males to 94.5 females;

but from the defective state of hospital registries in Ireland, this falls far short of the actual number of deaths for the period over which our inquiries extend. The entire number of deaths from the epidemic class of diseases was 15,339, *i. e.*, 7,849 males and 7,490 females, of which number 14,501 were deaths from typhus, or other forms of epidemic fever, 7,465 males and 7,036 females. The other deaths from epidemic diseases were, by small-pox, 49; scarlatina, 23; croup, 1; diarrhœa, 34; cholera, 716; influenza, 1; erysipelas, 13; and glanders, 1. 68 died of sporadic diseases of the nervous system, 42 males and 26 females; 145 from diseases of the respiratory and circulating organs, 77 males, and 68 females; 63 from diseases of the digestive organs, 40 males and 23 females. 4 males died of diseases of the urinary organs, and 6 females from those of the generative organs, 5 of which were the result of child-bed. 6 persons died from affections of the locomotive organs; 7 from diseases of the tegumentary system, and 30 died by the diseases of uncertain seat, 19 males and 11 females. 12 violent or sudden deaths have been returned by the fever hospitals; and in 308 instances, 172 males and 136 females, the cause of death was not specified. It is, however, but just to remark, that 287 of these deaths, where the cause of death was not returned, occurred in one hospital, that of New Ross, in the county of Wexford. It may, however, be fairly presumed, from the nature of the hospital, that these were also cases of fever."

As to the hospitals of jails, much the same unsatisfactory result obtains; however we find a certain amount of information given:

"The epidemic diseases, the most numerous of the entire, proved fatal to 213 persons, 162 males and 51 females; of these fever carried off 113 males and 29 females. Diseases of the nervous system destroyed 82; *i. e.*, 58 males and 24 females; of this class of affections, deaths from apoplexy were the most numerous, as might be anticipated from the great change of life, habits, and pursuits of persons on becoming confined in prison; it proved fatal in 22 instances, 14 males and 8 females. 26 persons, 19 males and 7 females, died of insanity, and 14 of epilepsy, 10 males and 4 females. Diseases of the respiratory and circulating organs, the second most fatal class of affections in jails, destroyed 147 persons, 110 males and 37 females; of these, consumption caused death in 98 cases, 70 males and 28 females. Diseases of the digestive organs carried off 44 persons, 32 males and 12 females; of the urinary organs, 6 males; of the generative organs, 5 females; of the locomotive organs, 4 males and 1 female; and of ulceration, the only specified cause of death among the diseases of the tegumentary system, 2 males and 2 females. Diseases of uncertain seat proved fatal to 71, *i. e.*, 58 males and 13 females, of which number 43 males and 9 females are reputed to have died of debility or old age. The violent or sudden deaths amount to only 14, *i. e.*, 10 males and 4 females;

and the deaths where the causes were not specified to 72, *i. e.*, 46 males and 26 females."

We have thus given a slight sketch of this very valuable Report; to have done justice to its merits and to have fully laid before our readers the enormous mass of information it contains would require a volume. It is creditable to the government to have furnished the means, and to the commissioners who have superintended its execution; and our readers, we are sure, will echo our opinion, when we pronounce the Report we have brought under their notice most creditable to the ingenuity, patient industry, and talent of Surgeon Wilde. In conclusion we shall quote the last paragraph, and beg of our readers to consult the work for themselves:

"In conclusion, gentlemen, I have but to remark, that in arranging the following tables of deaths, and in drawing up the foregoing Report, I have endeavoured to place in the clearest light, and to display in the most concise and succinct manner, the amount of information contained in the documents which you submitted to my inspection. And although I have ventured an opinion on the importance and the character of each class of our materials, I have cautiously abstained from drawing conclusions from premises which may, perchance, be false;—nor ventured on calculations unless for the purpose of *local comparisons*, as in the tables of mortality, which, though they do not express the actual amount of mortality, or the actual average duration of life in Ireland, yet serve by comparisons to exhibit the relative healthiness or unhealthiness of particular places, or among particular classes, or of deaths caused by particular kinds of disease; and having in every instance stated the premises, and in many cases given the actual numbers on which such calculations were formed, I have, I trust, stripped them of an assumption of authenticity which they in no wise deserve as a whole. There is, however, independent of all calculations and deductions, a vast collection of statistical facts put together in this portion of the census, of which, no doubt, the statistician and political economist will take advantage. The records and tabularly arranged statistics of the public medical hospitals and sanatory institutions—coroners' inquests—lunatic asylums—jails, &c., are in themselves of sufficient importance to lend character to this portion of our labours; and until some better and more accurate registration of the deaths of Ireland is effected, that which I now beg leave to submit to you may be referred to."

Descriptive Catalogue of the Anatomical and Pathological Museum of the School of Medicine, Park-street. By JOHN HOUSTON, M. D., &c.

THOUGH a catalogue does not, strictly speaking, come within the range of our Journal, we are, in the present instance, induced

by the intrinsic merit of this publication, to depart from our usual course. The museum of the Park-street School is well known as one of the most valuable in this city. In the department of pathology it is particularly rich, as it contains the most valuable specimens of morbid anatomy which have for some years been met with in Stevens', the Meath, Sir P. Dun's, and the Fever Hospitals, in the practice of Mr. Cusack, Mr. Wilmot, Mr. Porter, Sir H. Marsh, Dr. Graves, Dr. Stokes, and many other distinguished members of the profession. In the preface we are told that "for the student it was written, and to him it is addressed;" but the practitioner will also find in it much valuable information and food for deep and profitable reflection.

We cannot conclude without expressing our admiration of the manner in which this little work has been laid before the public by Dr. Houston, assisted by the talented and zealous Curator of the museum, Dr. J. Hill.

On the principal Diseases of Females. By FLEETWOOD CHURCHILL, M. D. Second Edition, with Engravings.

As the first edition of Dr. Churchill's useful work has been already reviewed in this Journal, we have only to inform our readers that the present edition is published in a very convenient form, duodecimo size, that it is illustrated by some excellent wood-cuts by Bagg, from drawings by a talented artist of this city, Mr. Nielan, and that the introductory remarks on the pathology, diagnosis, and treatment of the diseases of the uterus have been remodelled and contain much valuable new matter, particularly on the subject of the different modes of examination of the uterus, and the various forms of speculum in use. Like Dr. Churchill's other works it is remarkable for a clear, terse style, and vast erudition; the notes, and references, and enumeration of the authors who have written on the particular subject treated of, are of great value, and give a complete resumé of the medical literature of all the diseases of females. Dr. Churchill's merits have not been appreciated in this country alone, a second edition has been published in America, nor will it stop here, we are sure, as for a clear, compact, and satisfactory description of the diseases of females we know no work to compare to Dr. Churchill's.

Natural History, Pathology, and Treatment of the Epidemic Fever at present prevailing in Edinburgh and other Towns. By JOHN ROSE CORMACK, M. D., &c. &c.

WE regret extremely that our limits will not permit us to lay an analysis of this valuable work before our readers in this Number, but we hope to be able to do so in our next. The fever at present prevailing in some towns of Scotland differs materially from the usual type, and presents many points of resemblance to that observed in the epidemic which appeared in Dublin in 1827, described by Drs. Graves and Stokes. These eminent Physicians have given the details of several cases presenting features exactly like the yellow fever of tropical climates, and it is strange that in the epidemic now described by Dr. Cormack, several cases of yellow fever have occurred, presenting not only the symptoms, but the same pathological appearances as were noticed in the Dublin fever. In our next Number we shall enter more fully into these particulars. Dr. Cormack has performed his task in a manner highly creditable to him; the cases are recorded most accurately and minutely, and the deductions drawn from them are rigid and conclusive. We could not pronounce a higher encomium on this record of a very remarkable epidemic, than to say, that it deserves a place beside CHEYNE and BARKER'S "*Report of the Epidemic Fever in Ireland*," a distinction to which it is well entitled.

Elements of Natural Philosophy. By GOLDING BIRD, M. D.

THE fact that a work of this kind was required for the student of medicine seems evident from the circumstance that a second edition has been called for within a short time from its first appearance. It is unnecessary to point out the utility of such an undertaking, for there is hardly a department of medicine or surgery which does not require a previous knowledge of the general laws of physics before it can be properly studied. Hitherto this knowledge has been acquired from different sources, as most works are so encumbered with technicalities, and are so elaborate, as to repel rather than invite the student, and consequently, few of those readers, for whose benefit the present work has been undertaken, have had an opportunity of acquiring anything like a useful knowledge of physics. This deficiency has hitherto been supplied, to a certain degree, by the lecturers on the different branches of medicine, as for instance, acoustics is usually spoken of preliminary to a course of lectures on diseases of the chest; optics is touched on by the lecturer either on the

pathology or the physiology of the organ of vision ; hydrostatics by him who teaches the laws which regulate the circulation; electricity, magnetism, polarization of light, and thermomies, by the teacher of chemistry; and some of the principles of mechanics must be explained by the lecturer on surgery. Seeing then, that an acquaintance with the science is absolutely indispensable, we feel pleasure in giving a favourable opinion of the above Treatise to our readers. We do so the more cordially, as we know Dr. Bird to be both a scientific and an excellent practical physician, and we therefore recommend his treatise as being not only one of the best on the subject, but as the only one adapted for the student and practitioner of medicine. The paper, type, wood-cuts, and "getting up" of the work, are entitled to the highest praise, and the style and arrangement are both lucid and concise.