

cause of my downfall. The presiding Chairman, who is the President of the Poor-law Board, commenced with the question, "You are chairman of the Poor-law Medical Reform Association? I understand you complain of the present system under which medical relief is afforded to the poor. Will you state shortly, if you please, what your objection to it is?" My last reply was this: "I have come here prepared with a statement which I wish to submit to the Committee, and I think it will save time in the end if I am allowed to proceed in my own way. The subject is a very extensive one, and although what I have to say may occupy some time, I will make my statement as short as possible."

I then narrated the origin of the Poor-law Medical Reform Association; that 1780 Poor-law medical officers had sent me 4135 subscriptions, and that 129 medical men, unconnected with union practice, had sent me 158 subscriptions, the two together amounting to £1702 5s. 2d. in order to make known our grievances, and that the money was sent to me, as trusting to my honour properly to make use of it. The President then stated that many medical men had written to the Poor-law Board, objecting to the plans proposed by me. To which I replied I had no doubt such was the case, as some of the officers who were well off were afraid that in the adoption of a uniform system a reduction of their individual salaries might ensue. I then pointed out the desirableness of defining the class of persons to be entitled to medical relief, illustrating my views by cases which had occurred in the Weymouth, Cambridge, Birmingham, and Barnet Unions. The Bill introduced into Parliament by Mr. Pigott was commented on by the President, and I replied to his statement. The risibility of some of the Committee was excited by my remarks as to the necessity of pressure from without in order to carry my measure in Parliament, which was the course adopted sometimes by members themselves. I was then questioned as to whether I was not the Editor of the *Poor-law Medical Journal*; but as I never heard of such a work, of course I replied in the negative, which, however, did not seem to satisfy the honourable questioner, as he declared he had seen the work. I then handed to him a pretty little volume of pamphlets issued by the Association, which I said I thought he might have mistaken for the work he named, as I had sent copies to the members of Parliament. He then turned it over, and asked me if I thought members of Parliament had nothing else to do than to read books like that, and if I wished them to be read I should condense my remarks. I explained the volume before him contained a series of pamphlets issued during the last six years, but now bound up together for convenience of reference. The honourable gentleman then cast his eyes on my unfortunate heap of papers, and declared that he would never consent to the money of the nation being spent in printing them, and then moved that the room be cleared. On our re-admission I was informed the Committee had decided not to receive any more evidence from me, whether this session was stated or not I cannot recollect. I then mentioned the large mass of papers were in duplicate, and many portions were for reference only, and it was subsequently arranged I was to deliver in that portion relating to my evidence, which was to be reduced as much as possible. An officer connected with the Poor-law Board then took charge of them, and we jointly stripped them of all superfluous parts and other parts also; but I thought of the adage of the half loaf, and therefore yielded, and I must honestly own I have no just cause to complain, as I have already received 54 proof pages of my evidence, and I expect a large number of tables will be added as an appendix.

Dr. Rogers was then called, and after about ten minutes' examination his evidence closed.

Dr. Fowler followed, and at the end of twenty minutes the clock struck four, and he was informed if he had any papers he wished to deliver in he could do so; and thus ends, for the present at least, the Parliamentary inquiry into a subject involving the interest of four millions of the labouring classes, the whole of the ratepayers, and a million and a quarter of the sick poor of this kingdom.

I trust the Committee may be induced to read the evidence delivered in; should they do so, their report will, doubtless, be in favour of considerable changes, even though the Poor-law Board may be unwilling to adopt such a course. The President said, "We must expect a limit being put to our appointments." Now the only way for us successfully to oppose such a course is to act unitedly, and have ample funds at command, without which the Association is powerless. Dr. Fowler stated that he represented 170 metropolitan Poor-law medical officers, which proves we are a divided body—a most dangerous position to occupy. Dr. Fowler asked for 2s. 6d. per

patient; Dr. Rogers for 2s. per pauper. I asked for 5s. per patient for the first 300 cases, with mileage; and for all above that number, 2s. per patient, with mileage and extra medical fees, as agreed on and entered in our last draft Bill. This division amongst us ought not to exist, and if persisted in must be fatal to our cause.

Allow me to quote a part of Lord John Russell's speech to the electors of the City of London last week, as it is very applicable to our present position:—"Why should not men, though there may be degrees of difference between them, co-operate when there is a great cause before them, and a great battle to be won? We may all receive a lesson in this respect, I think, from the institution which has lately sprung up amongst us—our volunteers. You may find amongst them one man who would like to march a little faster, and another man who would like to march a little slower; but they are told that without order and without discipline, unless they all march in line and at the same pace, they will be useless to their country, and by no means formidable to the enemy. So it should be with regard to reformers. Some are in a hurry, and would wish to march at the quickest pace possible; others are more cautious, and would like to pick their way through the stones and other obstacles they may meet with. But all should act with union and discipline, and in that way, and that way alone, will they present a front which cannot be broken, and with which they may march from triumph to triumph."

I am, Sir, yours &c.,

12, Royal-terrace, Weymouth,
July 28th, 1861.

RICHARD GRIFFIN.

WINTERING ABROAD.

To the Editor of THE LANCET.

SIR,—A large number of our countrymen yearly quit these shores at the end of summer, and proceed south in search of a milder winter climate than our own. Their object is to obtain bright sun and warmth, in the place of fog, cold, and damp; and in this they succeed to a great extent. But there are heavy drawbacks to be taken into account; and I am glad to find one who can speak with so much weight as Dr. Henry Bennet, alluding, in his paper published in THE LANCET of May 11th and 18th, to the great disadvantages that the invalid has to submit to in his southern winter home, more especially with regard to hygiene. So serious are these that it is often questionable whether as much benefit is gained by change of climate as injury is done by change of food, want of English comforts, and deficiency of sanitary hygienic conditions.

Dr. Henry Bennet has pointed out with truth, that Mentone has great advantages over all the other towns of both eastern and western Riviera—advantages due to its admirable position with respect to the surrounding mountains, and through which drainage is rendered exceedingly easy. My acquaintance with this lovely spot, derived from several visits to it, enables me entirely to confirm the high opinion Dr. Bennet entertains of it; and it is to be hoped that, as it increases in size and importance, as it is sure to do, its local authorities will be sufficiently awake to their own interests to give it every improvement that art can devise, seeing that Nature has already done so much for it.

Nice has hitherto been the place of most resort, as a winter residence, throughout the whole coast of the gulf of Genoa. Its size, its picturesque situation, and its agreeable society, have attracted visitors from all parts of the world; but, notwithstanding, it is open to some of the objections that Dr. Henry Bennet urges against Rome, Florence, Naples, and other southern cities.

Nice is situated at the mouth of a small river, or torrent—the Pagliano—which bisects the town; the old quarter occupying the right bank, the new quarter the left. It is backed by a range of hills, offsets of the Maritime Alps, a spur of which comes down to the sea and shelters the town completely from the east. The distance of the first line of hills from the shore varies, but in the course of the Pagliano they recede so far as to form a delta, through which the torrent makes its way to the sea. It is on this delta that most part of the strangers' quarter has been erected. The ground is flat, swampy, and hardly raised above the sea-level: yet here we find the Promenade des Anglais, with its villas and gardens; the Quartier du Croix de Marbre, and Quartier du Carabacel, where the best houses in the town are. This part of the town too is increasing every day; new and elegant mansions are fast rising on all sides; nevertheless, the locality is but a marsh, with no drainage possible below the surface, and is infected with miasmata. In the winter of 1857–58 an epidemic fever, which,

though of mild type, proved fatal in more than one instance, made its appearance in this part of the town and continued for some weeks; many families were compelled to leave their apartments, and seek others, as the only means of avoiding it. I always warn people from inhabiting this neighbourhood, and recommend either the high ground towards Cimies at the back of the town, or the eastern side of the Port at the foot of the mountain spur that runs down to the sea at that spot.

The climate of Nice differs essentially from that of Mentone. From its aspect it enjoys the utmost amount of sun possible, and is sheltered from cold winds to the east and north by the lines of hills alluded to. Its weak points are the north-west and west, and it is from these quarters that the "mistral" blows with such violence in the months of February and March. The protection of the range to the north is deficient likewise in one or two places where the chain is broken by the passage of torrents; at these points cold blasts rush down from the snow-covered Maritime Alps that back the amphitheatre in which the town is placed. On passing one of these spots you go at once from summer to winter, and it is these sudden changes of temperature that render Nice so dangerous to chest affections. More especially is this the case at sunset, and for half an hour or an hour after, when the thermometer falls in an astonishing manner. It is necessary to be provided with an extra wrap if you are likely to be out during this time of the day; indeed, it is the custom of the Nizzards themselves to carry a second garment for this purpose. I have known a difference of 50° Fahr. between the southern and northern aspects of the same house in the month of January.

The character of the air is dry, somewhat irritating and exciting. Many nervous and excitable people cannot sleep in Nice. At the same time it braces the system and cheers the mind, whilst the power of undergoing physical exertion is augmented. It is decidedly injurious to phthisical patients; all the cases I saw there during two winters did badly, and unfortunately there are still a good many sent there. Perhaps the very early stages, before tubercle is deposited in the lungs, might be benefited, but even this I think would be hazardous. I have known some cases of chronic bronchitis and irritability of the throat do well, and others the reverse. Rheumatism and neuralgia are alleviated. It is best adapted for cases of general debility, where tonic regimen is demanded, and where it is an object to avoid the damp and cold of our own climate; but I would earnestly impress on the minds of your readers that tuberculous disease of the lungs Nice is fatal.

Invalids should arrive there about the end of October, and may remain till the end of April, and if possible it is as well to avoid part of February and March, when the mistral is so prevalent; and this period may be well spent at Mentone, or a little way out of the town northwards.

For the information of your readers I append some observations on the temperature made in the winter of 1858-9:—

Mean Height of Thermometer exposed to the North.

1858-9.	9 A.M.	3 P.M.	
December	49·5	59·6	
January	45·8	54·8	{ Rain fell on 6 days.
February	49·5	58·25	{ Frost on 4 nights.
March	58·6	68·3	Rain fell on 4 days.
April	62·8	70·	" " 2 "
May	64·3	71·3	" " 3 "

I am, Sir, your obedient servant,

HENRY W. KIALLMARK, M.R.C.S.

Princes-square, Bayswater, June, 1861.

THE INDIAN MEDICAL SERVICE.

To the Editor of THE LANCET.

SIR,—Every officer of the Indian Medical Service is deeply indebted to you for the able exposition of the present state of the Service which appeared in the numbers of THE LANCET of the 5th and 12th of January and the 9th of February (the last number received in course of circulation), showing the disadvantages of the Indian Medical Service compared with that of her Majesty's British Army.

The Indian medical officers remain yet deprived of the privileges of rank, pay, and pensions secured to their more favoured brethren of the Royal Service by the Warrant of October 1st,

1848—certainly in so far that their lately granted rank does not carry with it the corresponding pay and pension.

Since the above articles appeared, the amalgamation of the British and Indian Armies has been published; yet no mention is made of the Medical Service.

Little can be added to the clear and able statement in the numbers of THE LANCET above referred to. As, however, it is understood that a committee is now sitting in London to reconsider the subject of the Indian Medical Service, there is one point to which I should be glad to see you direct attention, if it be not already too late to effect a remedy at the hands of the committee. I allude to the glaring anomaly of not permitting medical officers to count, for promotion to surgeon-major, the time from their first landing in India, but making it imperative that the whole of the period (with the exception of the two years allowed) should have been passed *in India*: a very unfair distinction—one that will press very heavily upon the service, and give rise moreover to supercession. It is clearly not fair to the Indian medical officer who in the discharge of his duty loses his health, and is, in the opinion of a medical committee, under a necessity to return to Europe, that such time should not count towards his promotion; whereas his more fortunate brother of H.M. British Army may have passed half of his time at home, or between home and the more favoured colonies, the Mediterranean, or the Cape, and, whether sick or well, his time towards promotion counts. To punish thus a man for having lost his health, is, perhaps, to punish him for having been only too zealous in exposing himself, or overtaxing his energies, in the discharge of his duties in an unfavourable climate. In fact, an officer so circumstanced, though entitled to a furlough in twenty years, may yet never have taken any, having been compelled to return to Europe, not for pleasure, but as an invalid, with broken health—to enable him to return again, then to resume his post of active duty. Besides, it raises further the question of supercession. Thus, a medical officer compelled by sickness to return home for four, or even only three years, during his period of twenty years' service, will find some of his juniors who have had better health—or, in other words, whose health has been less tried, by having been less exposed, having probably held a lucrative and quiet appointment at the Presidency, and never seen either active or foreign service—supersede him, in consequence of his having been home only eighteen months or two years: a position of things contrary to all our preconceived notions of what is correct, especially in a seniority service.

I believe these facts only require to be prominently noticed to attract attention and obtain redress, as the Medical Service has every reason to feel most grateful to Lord Canning for the deep interest he has taken in its welfare—evinced upon all occasions, and in none more clearly than in his having declined to publish the Warrant for the Indian Service as first sent out. And nobody can doubt the desire of Sir Charles Wood equally to do justice to the Medical Service; but the difficulty lies in making known the sense of the Service upon the very points under discussion.

The scheme for the retirement of officers (1000) proposed by the Financial Commission, and now before the Secretary of State for India, does not embrace within its truly comprehensive and liberal views the medical officers. How many would gladly avail themselves of its advantages to retire! But their services are, indeed, too valuable, and too much required, to permit of this boon. They accept of this necessity, and are content to remain longer to serve the Government. All they ask for, now that they belong to the Queen's service, is—what cannot be equitably denied them,—to be placed upon the same footing as to rank, pay, and pensions, with their brethren of H.M. British Army. And certainly the annoying and glaring anomaly as to time of counting for promotion, above referred to, should without delay be settled.

I am, Sir, yours obediently,

Madras, May 20th, 1861.

A. MADRAS SURGEON.

PROOF OF LIVE-BIRTH.

To the Editor of THE LANCET.

SIR,—A case occurred in my practice in China, some years ago, which would tend to support the correctness of the decision lately given as to the existence of "vitality without respiration." It made a great impression on my mind at the time, and, if you think it worthy of record, I should feel obliged by its publication.

A native of India, a Hindoo, was placed under my care, requiring amputation of one of the toes. He was put under