gazetted to volunteer infantry brigade bearer companies will wear the same uniform as Royal Army Medical Corps (Volunteers) except that the title of the company will appear on the helmet plate and shoulder strap (paragraph 851). Particulars of the uniform of yeomanry and volunteers do not appear in the Dress Regulations, but sealed patterns are kept in the department for "dress" in the War Office, where informa-tion on any point can be obtained.

THE ARMY RANK OF THE DIRECTOR-GENERAL OF THE ARMY MEDICAL SERVICE.

In connexion with the new system of army medical administration, by which, as we have previously announced, the Director-General is to occupy a more influential position in the councils of the War Office as the responsible representative of the Army Medical Department, it is satisfactory to learn that he will in future rank officially as a lieutenant-general and not as a major-general, as has hitherto been the case. It was no doubt deemed necessary to take this step in order to put the Director-General in his proper position in his official dealings with the headquarter staff and also to raise his military rank above that which is held by senior administrative officers serving under him. these and other grounds the change is to be regarded as a desirable and wise one.

DEATHS IN THE SERVICES.

Civil Surgeon Birch, at St. Helena, on May 28th, from enteric fever.

Sir T. J. Gallwey has arrived at Simla and taken up his appointment as Surgeon-General of His Majesty's Forces and Principal Medical Officer of India.

Correspondence.

"Audi alteram partem."

ETHER v. CHLOROFORM.

To the Editors of THE LANCET.

SIRS,—Anent the correspondence in your columns as to the relative safety of ether and chloroform, will you allow me to recall that some years ago I pointed out in your journal 1 that the only really reliable data bearing on this subject were comprised in the admirable records of the administration of anæsthetics as tabulated in the St. Bartholomew's Hospital annual reports, which go back as far as 1875. As the subject still continues to attract in an increasing degree the attention of the profession I should like to set forth the results up to date, so that, so far as the occurrence of fatalities is concerned, there should in future be no ambiguity.

With regard to *chloroform*, the hospital records for the 16 years 1875–1890 show 13 deaths in 19,526 administrations. Since then the course of events has been as follows:

	-	Year			Administrations.	Deaths.		
1891				•••			2,031	1
1892							1,887	1
1893							2,524	2
1894							2,350	2
1895							2,552	2
1896							2,436	3
1897		•••				•••	1,959	2
1898							2,648	3
1899				•••			2,504	3
1900			•••		•••		2,561	1
	Total						23,452	20

Thus during the 26 years 1875-1900 chloroform was adminis-

tered 42,978 times, with 33 fatalities or 1 in 1300.

During the 16 years 1875–1890 ether was administered 21,332 times with only four deaths. In 12,941 of these cases

¹ THE LANCET, Feb. 8th, 1890, p. 317.

ether was preceded by "gas," only one fatality belonging to this category; in the other 8391 cases ether alone was given and three deaths occurred. Since this period the ether record has been as follows :-

Year.			Ether alone.	Deaths.	Ether preceded by "gas."	Deaths.	Total.
1891			866	Nil.	130	Nil.	996
1892			824	,,	73	,,	897
1893	•••	•••	1420	ļ ,,	17	,,	1,437
1894			981	,,	701	,,	1,682
1895	•••	•••	242	,,	1,150	,,	1,392
1896	•••	•••	189	,,	1,427	٠,	1,616
1897	•••	•••	201	,,	1,261	,,	1,462
1898			43	,,	1,872	,,	1,915
1899	•••	•••	17	,,	2,382	,,	2,399
1900		•••	43	,,	2,106	,,	2,149
Tot	al		4826	Nil.	11,119	Nil.	15,945

Thus, during the 26 years 1875-1900 ether was administered 37,277 times, with only four fatalities, or 1 in 9319. In 24,060 of these cases ether was preceded by "gas," and only one fatality occurred. In 13,217 cases ether alone was given and three fatalities occurred, or 1 in 4405.

and three fatalities occurred, or 1 in 4405.

It follows from the foregoing that ether is a very much safer anæsthetic than chloroform (in the proportion of 1300 to 9319); but much safer than either of these agents alone is ether preceded by "gas."

I am, Sirs, yours faithfully,
Clifton, Bristol, May 31st, 1902.

W. ROGER WILLIAMS.

THE FEEBLE-MINDED AND CRIME.

To the Editors of THE LANCET.

SIRS,—Miss Dendy's paper on the above subject in The Lancet of May 24th, 1902, p. 1460, is a valuable contribution towards the discussion of a social problem of great importance and magnitude. The views there expressed coincide very nearly with the conclusions which I have drawn from four years' work in connexion with the schools for the mentally defective under the London School Board. Important as the education of the feeble-minded is, it forms but a small, and by far the least difficult, part of the problem what to do with the feeble-minded. The work that is being done in this direction by public bodies and private individuals is, in my opinion, often largely thrown away because there exists no subsequent provision for the needs of a great number of those whom we attempt to educate.

In 1892 the London School Board first established special centres for the instruction of the mentally deficient and there are now nearly 2500 children on the rolls of these classes. Sufficient time has therefore elapsed to make it possible to form some opinion on what the future of children thus educated is likely to be. A certain number of the children passed as mentally deficient are passed out after a period of special training into the ordinary schools. These comprise largely in my experience cases of two types, the first neurotic excitable children below par mentally but without marked mental abnormality, the second stolid and apathetic children with sluggish brains but usually well nourished physically. Children of both these types do badly in the large classes of ordinary schools; they stagnate, or in the one case tend to nervous breakdown and in the other develop into hopeless dullards or truants. Under the individual training of the special classes they improve greatly and are usually able to return in time to the ordinary schools and rank henceforth as normal individuals. To these may be added another type common enough in the poorer districts—children stunted in body and mind from underfeeding and apparently incapable of learning anything. To the fact that in the defective centres, thanks to private charity, food is generally obtainable for really necessitous cases is due, I think, the striking improvement which often takes place in these cases. But the number of children returned to ordinary schools is small; I have not at present the exact statistics but they would hardly exceed 10 or 15 per cent. A few cases at the other

end of the scale are excluded as imbeciles and considered

only fit for an asylum.

The large majority of the children admitted remain, however, in the special classes until they are passed out into the I think it may be said that all are improved and most are capable of doing work of some kind to a greater or less degree, but in very few cases can they compete with, or rank as, normal individuals. Past arrested development cannot be wholly compensated for; the adult remains in many respects a child, often with definite mental defects or at least with queer mental twists which produce exasperation in employers and despair in philanthropic friends. A certain proportion are incapable of work under ordinary conditions; if they obtain places they lose them at once. The majority, however, do obtain work. The boys seem to get employment readily and in certain kinds of mechanical work do well. But as they get older the difficulties of getting work increase; they can command boys' wages but do not become good enough to obtain those of men, and many sad histories come to the knowledge of the teachers in the schools they have left. The girls obtain factory work of an ill-paid kind or small places as domestic servants which they rarely retain long. If they do not marry, and often if they do, they usually become inmates from time to time of a workhouse maternity Judging by what we often observe in the parents of the children with whom we have to deal, feeble mindedness in either man or woman is no bar to matrimony, and indeed many of these defectives marry soon after they leave school with the probability, almost amounting to certainty, of transmitting a heritage of morbid mental or nervous conditions to their descendants.

As regards the question specially dealt with by Miss Dendy, the connexion of feeble-mindedness with crime, there is undoubtedly in every centre a group of cases approaching the type of the moral imbecile and characterised by instinctive tendencies to theft and other forms of immorality, but I do not think this is the case with the majority of the feeble-minded. When these drift into crime it is rather because they naturally sink into the lowest strata of society and are unduly amenable to the influence of others. The few homes which now exist for the care of the feeble-minded show that by the exercise of much patience and under careful supervision the inmates can do satisfactory work, lead happy lives, and make the homes at least partly self-supporting. A larger number of permanent homes with powers of forcible detention in suitable cases seems the only satisfactory method of dealing with the subject-of rescuing these unfortunates from the wretchedness to which so many are condemned and arresting the transmission of their defects to unborn generations. It is a subject which will have to be dealt with by the State before much progress can be made.

I am, Sirs, yours faithfully, F. MAY DICKINSON BERRY, M.D., B.S. Lond., Assistant Medical Officer to the School Board for London. Wimpole-street, W., May 27th, 1902.

WHAT IS A "CURE"?

To the Editors of THE LANCET.

SIRS,—I read the leading article "What is a Cure?" in THE LANCET of May 24th (p. 1478) with some interest, especially the passage relating to the scepticism that now obtains amongst a large and growing number of medical men as to whether our therapeutic measures do even help to bring about a cure. When I read on and came to the illustrations you gave of the fruits of the scientific study of medicine my interest deepened because you gave expression to the state of mind that is common not only among medical men but also among laymen. I do not, of course, deny that antitoxin in diphtheria and thyroid gland for myxædema are brilliant triumphs of scientific discovery, but if these specific treatments are the only things that medicine can boast and the only future she awaits is for every other disease to have its like specific remedy, then where will be the need of the physician? The patient would in these enlightened days merely have to get his complaint diagnosed before repairing to a penny-inthe-slot machine to obtain his specific remedy and c'est tout. Indeed, in these days of tabloids and shallowness, we are a step or two in that direction already.

Now, Sirs, I contend that although without doubt our fore-fathers in medicine put too much faith in drugs, we are, as usual, going to the other extreme and are putting too little faith in them. Our want of faith is born frequently of as

great ignorance as their belief and certainly of greater shallowness of thought.

The true physician in these days when surgery is being lauded to the skies—its successes how apparent, its failures how numerous and awful and frequently tragical, in private practice especially—is becoming either a rara avis or at any rate a timid one, for his voice is seldom "heard in the land" in vindication of his art. I contend that the skill of the physician in regard to treatment is seen not in giving such preparations as that of thyroid extract for myxcedema but in the skill which he displays in treating each case of departure from the normal rightly termed disease as a separate study and problem to be solved, by his drugs (perhaps using them as a sort of "liberating energy" calling into play the latent powers of nature or checking her too boisterous manifestations, it may be by displaying a "masterly inactivity" at certain stages and at the right time giving a suitable drug or drugs in the right combination in the right dose to assist, to coax, or to stimulate the vis medicatrix naturæ to lead on to health. There is no doubt that the commercial spirit, the rush of private practice together with low fees, club work with the resulting bodily exercise taking the place of mental, is driving many a practitioner into becoming anything but a thoughtful physician. In conclusion, if we had no other drugs than those handed down to us by our forefathers I do not think I shall be alone in saying that by them we could obtain (even as we are obtaining) glorious triumphs over disease. But if any man, either as a result of training or of mental gift, have not what has been called the "Mens Medica" then drugs and medical therapeutic remedies generally will be in his hands like the most beautiful colours in the hands of him who knows not how to paint.

I am, Sirs, yours faithfully, A. W. Fuller, M.B. Edin., &c. May 30th, 1902.

THE CASE OF DR. W. T. LAW.

To the Editors of THE LANCET.

SIRS,—In this busy life so many things are constantly occurring, absorbing our attention, that we sometimes fail to appreciate the gravity of a charge which, according to a righteous judge and jury, ought not to have been brought against one of ourselves. Such is the case of Dr. W. T. Law who had to undergo a painful trial, being sued for £5000 by a former patient. Dr. Theodore Williams in his excellent speech at the King's Hall on May 9th said he never knew a patient who was suffering from spasmodic asthma who had

so much done for her as was done by Dr. Law.

THE LANCET says in its issue of May 3rd: "Owing to the poverty of the plaintiff Dr. Law is saddled with the payment of heavy costs. At any moment anyone of us may find himself in a like position and we therefore hope that not only will the leaders of the medical profession subscribe their guineas but that the rank and file thereof will send their shillings. Sympathy is a great thing but, as the Apostle James remarked, 'If a brother or sister be naked, and destitute of daily food, and one of you say unto them, Depart in peace, be ye warmed and filled; notwithstanding ye give them not those things which are needful to the body; what doth it profit?' So let us show our sympathy in a practical way. And in particular we hope that the subscriptions will flow into the fund from the profession at large, for the matter is one of vital importance to them and they

should recognise it."

Many of Dr. Law's professional brethren have shown their sympathy for him in a practical manner, for which he is extremely grateful. Some who have given to the fund already have promised to give more if others will not lend a helping hand. Some have been good enough to leave to me the amount that they should give. Several who have already given would have gladly given more if they were asked to do so. Others have written expressing the hope that more than the actual amount required will be forthcoming as a compensation for the indignity, worry, and loss of health which such a trial necessarily entails. In a case like this, affecting the honour, the prestige, and the liberty of the profession, it is desirable that many should show their interest in this unusual and excep-Fortunately, Dr. Law is rich in the possession tional case. of sincere friendship, which many really wealthy men do not possess. At the painful trial his friends came to the rescue to give evidence in his favour. The grand service of Dr. Theodore Williams is well known and the testimony of