

eight weeks of the current quarter the death-rate in the city averaged 23.1 per 1000, the rate during the same period being equal to 22.7 in London and 16.7 in Edinburgh. The 204 deaths in Dublin last week exceeded by 41 the number in the previous week, and included 45 which were referred to the principal zymotic diseases, against numbers increasing from 16 to 33 in the four preceding weeks; of these, 25 resulted from diarrhoeal diseases, 13 from scarlet fever, 3 from whooping-cough, 3 from "fever," 1 from diphtheria, and not one from measles or small-pox. These 45 deaths were equal to an annual rate of 6.7 per 1000, the rate from the same diseases being 4.7 in London and 2.5 in Edinburgh. The 25 fatal cases of diarrhoea showed an increase of 3 upon the number in the previous week. The deaths from scarlet fever showed a considerable increase upon recent weekly numbers, and were higher than in any preceding week of the year. The fatal cases of "fever" showed a further decline from those returned in the two previous weeks. Five inquest cases and 3 deaths from violence were registered in the city during last week, and 51 deaths occurred in public institutions. The deaths both of infants and of elderly persons showed an increase upon recent weekly numbers. The causes of 30, or nearly 15 per cent., of the deaths registered during the week were not certified.

THE SERVICES.

INDIAN MEDICAL SERVICE.

WE learn from the *Indian Medical Gazette* that junior medical officers of the Indian Medical Service having been made available, under certain conditions, for duty with British troops, are to receive, when marching with British troops from one station to another, charge allowances on a scale equivalent to what is at present sanctioned for the temporary charge of native troops—viz., for an entire regiment 100 rupees a month, for a wing of a regiment or detachment of numerical strength equal to a wing 75 rupees, for a battery of Royal Artillery 50 rupees.

ARMY MEDICAL DEPARTMENT.—Surgeon-Major Hugh Mackay Macbeth to be Brigade-Surgeon, vice R. C. Loft-house, M.D., granted retired pay; Surgeon-Major William West Quinton, M.B., is granted retired pay, with the honorary rank of Brigade-Surgeon.

ADMIRALTY.—The following appointments have been made:—Staff Surgeon William H. Putsey, to the *Boscawen*, for service in sick quarters at Portland; Staff Surgeon William J. Rankin, M.D., to the *Boscawen*; Staff Surgeon Robert W. Biddulph, M.B., to the *Duncan*, additional; Surgeon Alfred H. Kelly, M.D., to the *Valiant*; Surgeon James A. Collot, to the Royal Marine Artillery Division at Portsmouth; and John Paulin to be Surgeon and Agent at Peel, Isle of Man; Surgeons William W. Jacobs, Alexander F. Harper, Herbert W. A. Burke, and Edward R. D. Fasken, to the *Royal Adelaide*; Surgeon Evan St. M. Nepean, to the *Pembroke*; Surgeon Arthur S. Nance, to the *Indus*; Surgeon Alexander G. Andrews, to the *Asia*; Surgeon James C. F. Whicher, to the *Impregnable*; Surgeons Edward W. von Tunzelmann, M.B., Edward B. Townsend, Alexander G. Wildey, Patrick B. Handyside, M.B., Harold R. Osborne, James M. Rogers, Charworth L. Nolan, M.B., Harold F. D. Stephens, Francis H. Julian, Edward C. Ward, M.B., William R. Minching Young, George L. Baker, Herbert W. G. Doyne, Alexander B. Murdoch, M.B., Thomas Dunlop, M.B., Samuel Johnson, M.B., George A. Dreaper, and William H. O'Meara, to the *Duke of Wellington*.

ARTILLERY VOLUNTEERS.—1st Lanarkshire: Surgeon Robert Watson, M.D., resigns his commission; also is permitted to retain his rank, and to continue to wear the uniform of the corps on his retirement.—1st East Riding of Yorkshire: Surgeon Archd. Megget resigns his commission.

ENGINEER VOLUNTEERS.—2nd Tower Hamlets (East London): The services of Acting Surgeon Reginald Archfield Fergusson, M.D., are dispensed with.

RIFLE VOLUNTEERS.—1st Cornwall (Duke of Cornwall's): Acting Surgeon James Blamey resigns his appointment.—20th Middlesex (Artists): Walter Pearce, Gent., to be Acting Surgeon.—3rd Monmouthshire: Acting Surgeon Octavius Edward Bulwer Marsh resigns his appointment.—5th Lanarkshire (Glasgow 2nd Northern): Ernest Kingscote, Gent., M.B., to be Acting Surgeon.

Correspondence.

"Audi alteram partem."

"REARING OF HAND-FED INFANTS."

To the Editor of THE LANCET.

SIR,—I fear, good as the substitute advised by Mr. Walker in your last issue may be for the artificial rearing of infants, he will find but few who would take the trouble, even if his, or rather Dr. Frankland's, method were commonly known of compounding the daily supply; it is too complicated for the purpose, and the knowledge how to make it can never be sufficiently promulgated among mothers and nurses to bring it into general use; and I must say here I think the advice of Dr. Owen is excellent, as his system is within the reach of the most indolent and the most ignorant.

In my letter in THE LANCET of Aug. 9th, I think I pointed out more likely reasons why artificial feeding is so disastrous to infant life, and I believe that if those who have the care of dry-nursed children could be induced to feed them for the first few months of existence on new cow's milk diluted with an equal, or rather more than an equal, part of water, and sweetened with sugar of milk instead of common sugar—which induces lactic fermentation, and therefore increases the tendency to infantile diarrhoea—we should not hear so much of the awful mortality of young infants. I have never found this turn curdy, or disagree where I have recommended it, because when any complaint has been made to me of the infant rejecting it, and before permanent mischief was done, I have advised the addition of a little lime-water, and a slight curtailment of the supply. We all know that cow's milk is acid in reaction and human milk is alkaline, and knowing this it is always advisable to tell the nurse or mother how to correct this state of affairs. Under any system of artificial feeding an infant takes in a much larger quantity of food than when it is suckled; but it is not digested, and herein lies the cause, combined with irregular feeding and dirty bottles, of the mischief. It must not be supposed for one moment that I advocate the cow as the proper mother of an infant. I think the present system of rearing dry-nursed children the curse of this generation, and posterity will have to pay a bitter price for the indolence—if nothing worse—of the mothers of the present day, who, obeying the dictates of fashion, delegate to the nurse the duty that nature assigned to themselves. "Can a woman forget her sucking babe?" asks the prophet. Alas, the answer is not far to seek, and the infant mortality of the present day supplies a melancholy answer. Fancy this advice of Chavasse, advice followed by thousands of mothers; here is pandering to laziness with a vengeance: "A good plan is for the nursemaid to have a half-pint bottle of new milk—which has been previously boiled—in the bed, so as to give a little of it instead of the breast. The warmth of the bed will keep the milk at the proper temperature, and supersede the use of lamps, candlesticks, and other troublesome conveniences." Of course it will, and also cause it to turn and decompose in a few hours. No; our duty as medical advisers is to teach mothers that dry nursing is only another name for either killing their offspring or being blessed, or rather cursed, with weakly, rickety, puling children, that develop as they grow older, if they live long enough, tubercular disease and the other ills that follow in the train of early malnutrition. Must we go to the ancients for lessons? Mahomed, in the Koran, commands mothers to suckle their children for *two* years. "Mothers," he says, "after they are divorced, shall give suck unto their children full two years to him who desireth the time of giving suck to be completed." (Koran, chap. ii.) Dion relates that the nurse of Caligula anointed her nipples with blood before she gave him suck, which accounted for his cruelty, as he did not inherit it from his father or mother. Giraldus was of opinion that men and beasts participate in the nature and conditions of the animal whose milk they were brought up on, and he cites the case of a pig that suckled a brach, and when she was grown "would miraculously hunt all manner of deer and that as well, or rather better, than any ordinary hound." Who was that Queen of France, I wonder, of whom it is said that so careful was she that her child

should be suckled by herself alone, that when in her absence a strange nurse had done so, she was never quiet till she had made the infant vomit it up? What an example to the present race of mothers. Cato, it is said, would make his servants' children suck upon his wife's breast because by that means they would love him and his the better. If there is anything in these opinions of the ancients, and the children imbibe with the mother's milk a greater love for the parent, it may be an inducement to many mothers, if it were known, to suckle their own offspring; and if feeding, as is done in the present day and has been done for the last twenty years to many of the rising generation, on cow's milk gives to the infant the attributes of its foster mother, we need not go very far to seek for the origin of the "masher," though we may deplore the fact that so many calves have been robbed of their due quantum of nourishment to aid in bringing him to his present state of perfection.

I am, Sir, yours truly,

NATHANIEL EDWARD DAVIES.

Sherborne, August 24th, 1884.

THE ANCOATS MURDER: CASE OF J. J. DONNELLY.

To the Editor of THE LANCET.

SIR,—I have read Dr. Hughes Bennett's letter in your issue of to-day with interest, yet also with surprise and regret. Dr. Bennett is to be admired for his warm sympathy with the unfortunate, but there is something else required: a true man is just as well as generous. As was so well said in your article of the 9th inst. on the above subject—"Science knows nothing of sentiment, and we cannot afford to strain points for the sake of humanity." How can we expect judges, juries, or the public to treat us with respect if we allow our feelings or prejudices to warp our judgment—if, instead of giving evidence or expressing opinions in strict accordance with facts, we act as partisans? Is there anything more humiliating than to see or to read of medical men in a court of justice ranging themselves on opposite sides? It is the duty of a medical witness to speak the truth, the whole truth, and nothing but the truth; he has nothing to do with the consequences—those must be left to the judge and jury.

Dr. Bennett intimates that if he had been called as a witness in Donnelly's case, "he could have strongly advocated his irresponsibility." We are further told that "no one acquainted with the mental condition of the prisoner, and reading the public reports of his trial, could have the slightest doubts of his irresponsibility in the crime he committed." Dr. Bennett is dominated by the notion that Donnelly, on the night when he committed the crime for which he was sentenced to be hung, was suffering from epileptic furor. But there is no evidence to support such a view—at least, I cannot find any in the published reports. The deputy coroner, who is a barrister, went very carefully into this matter; he elicited from the prisoner's father that he had not had a fit that night; neither had he the premonitions or accompaniments or consequents of a fit. The father, after more than twenty years' experience, would know well the symptoms indicating a seizure. Both father and brother described these, but, with the exception of turbulence, Donnelly showed no signs of an attack; the family knew too well the true cause of his misbehaviour. Donnelly, unfortunately, was addicted to drink.

A consideration of the whole of the facts will, I think, show that Donnelly, from the time he came home at half-past nine on Sunday night up to that of his capture, knew not only what he was doing, but the probable consequences of his acts. After the father took up the poker and threatened to strike the young man with it, the latter checked his turbulence; and when finding himself locked out, it burst forth again. Instead of venting his anger on his father, who he knew had shut him out, he rushed to his own room out of his father's way. When subsequently his father somewhat cruelly refused him water, he again repressed any manifestation of rage. After having committed the murderous assault on two defenceless women, he precipitately made his escape and tried to conceal himself. Now, an epileptic suffering from maniacal excitement is as devoid of craft as he is blind to danger. Opposition renders him furious and reckless; neither poker nor pistol has any terrors. It is true that Donnelly attacked his sister in a paroxysm of anger, but it is certain that if his father had been in the room

armed with the poker he would again have restrained his rage. Had Donnelly's father had any reason to believe that his son was threatened with a fit, instead of thwarting him he would have tried to calm and soothe the young man; but the family knew well that what Donnelly was suffering from was the effect of drink.

In summing up, the deputy coroner told the jury that "there was no evidence that the man was out of his mind at the time he committed the act, and if he was the worse for drink, that was no excuse, but rather an aggravation." The jury which tried Donnelly at the Assizes, having all the facts before them, came to the conclusion that Donnelly was sane when he committed the murder, and therefore found him guilty. The law blunderingly fails to discriminate between a deliberate cold-blooded murder and one committed in a sudden outburst of anger; it barbarously decrees death in both cases. The jury which tried Donnelly marked their sense of the difference, and therefore recommended him to mercy; but, so far from having deserved censure, the jury deserve the utmost credit for having discharged an onerous and very painful duty in a thoroughly conscientious and intelligent manner.

I am, Sir, yours truly,

Manchester, Aug. 16th, 1884.

R. MARTIN.

"OUR MONSTER COUNTY LUNATIC ASYLUMS."

To the Editor of THE LANCET.

SIR,—Your article on the above, in the issue of August 23rd, is well-timed, and cannot fail to draw attention to the subject. It is now pretty generally recognised that asylums containing more than 800 patients are difficult of management, if not unwieldy and less economical than smaller institutions. You, however, allude to cases in which "from 1500 to 2000 insane individuals, supposed to be patients, are under the care and control of one medical man." Surely you should have added "aided by one, two, or more assistant medical officers." Otherwise the statement is misleading. In these days of scientific advancement, and the development of the healing art, the word "asylum" ought to be almost an anachronism. Patients struck down with mental disease should without delay be placed under the most skilled treatment possible in "hospitals for the insane," institutions in which the main object is to combat the disease in its earliest stage, and to restore the individual to the community with *mens sana in corpore sano*. Such hospitals would require a highly qualified medical staff with clinical assistants and all the necessary means of treatment, and should not contain more than from 100 to 150 beds. Cases after a fixed time deemed incurable should be transferred to the "asylums," the "homes for incurables requiring no special medical treatment." The "hospital for the insane" would be costly at the outset, but in the end would prove the more economical, the more humane, and the more creditable to civilisation. Heretofore the lunacy laws have been framed on the score of humanity solely. Surely the day is not far distant when the advancement of psychological science and the increased facilities for cure will demand consideration at the hands of our legislators. At the present time the medical staff of the county asylums do their utmost for the treatment with view to cure of the patients under their charge, but, from the ever-increasing numbers of the insane, "an enormous mass of material annually passes under their eyes which is almost wholly unutilised." Moreover, the four shillings per week Government capitation grant for the insane poor has of late years flooded the pauper asylum with idiots, imbeciles, and aged demented, because their transfer rids the unions of troublesome cases which, with this pecuniary aid, can be maintained as cheaply, if not more economically, in the county asylums.

I am, Sir, your obedient servant,

ERNEST W. WHITE, M.B. Lond., &c.

Kent Lunatic Asylum, Chartham, August 23rd, 1884.

* * Our statement relative to the number of patients under one medical man is in no way invalidated by the presence of assistant medical officers. The treatment of every patient in an asylum devolves virtually upon the Superintendent, and upon him alone the responsibility in the matter rests.—ED. L.