

more than the fees of coroners at which they cavil with so penny-wise a spirit. We say nothing of the possible sacrifice of human life that this new restriction may give rise to, as in the report of their proceedings there was no mention made of their having at all alluded to this part of the subject. This new attempt to hamper the judgment of a coroner in the discharge of his duties by a sordid restriction, is an act of the grossest injustice; for, as Chapman finely observes,

“There is no danger to a man that knows
What life and death is; there's not any law
Exceeds his knowledge; neither is it lawful
That he should stoop to any other law.”

ON the 7th of March, at the ripe age of ninety years, Dr. William Yates, of Otsego co., New York, was gathered to the “silent land,” where all are brethren;—not as the brethren of this world are, Cains and Abels, Jacobs and Esaus. He was one of the few men of note remaining to us from the last generation. A native of England, he studied at St. Bartholomew's; and there attended the first course of lectures delivered by the famous Abernethy. He left this country at the age of twenty-eight; but, before his departure, made the personal acquaintance of Jenner, and received from him a large supply of vaccine virus with directions for its use. On arriving at Philadelphia, he at once earnestly devoted himself to the introduction of the new doctrine, and was the first who conveyed the knowledge of it to America. He then vaccinated thousands, and gained a large fortune in the honourable exercise of his profession. To the honour of our trans-Atlantic brethren it may be mentioned, that the new doctrine was received with far less cavilling and adopted far more readily than in England.

FEES TO MEDICAL REFEREES.

MR. EBSWORTH has forwarded us the following report:—

EBSWORTH V. THE GRESHAM ASSURANCE COMPANY.

MR. EBSWORTH opened his own case by stating he claimed the sum of one guinea for work and professional services rendered to the Gresham Life Assurance Society, privately and at their own request conveyed in a *private* communication from the actuary and defendant, Edwin James Farren. He argued that this communication, accompanied by a penny stamp, was and ought to be considered in the light of service rendered to the company—a trading one, and ought to be paid for accordingly.

THE JUDGE.—I think, Mr. Ebsworth, you have no claim. I have been much in communication with actuaries, and this question has over and over again been brought under their notice. If a person asks your opinion as to the health of the Queen, surely you would not be entitled to a fee.

MR. EBSWORTH.—Sir, if such a question were put to me, I should say I am not cognizant, nor have I ever been consulted by her Majesty. I argue there is a contract between me and the company, because they enclose a postage stamp for return. If a person wishes to buy a house, and asks a surveyor to look at it, the surveyor charges a fee for the same. It is not usual—it never has been in our profession—to demand money before we give an opinion. What would the public think of us if we did so? We give an opinion first, either verbally or by writing, and expect to be remunerated. Lawyers receive a fee after advice has been given.

MR. DEVONSHIRE (defendant's solicitor) argued we had no case, and presented the only printed report extant of a trial to the Judge. He might (he said) call upon the plaintiff to produce his diploma; he might say his testimony was unsupported; but he relied upon the non-existence of a contract between his clients and the plaintiffs, and called upon the Judge for a verdict with costs.

THE JUDGE.—The plaintiff has urged several considerations upon me, and I shall reserve my decision to a future day.

And thus ended the trial *pro tem*. In a few days, the Judge, without requiring attendance, delivered a verdict for the defendants.

Remarks.—I am not sorry I brought this action, and will

again do so, because it entails a *quid pro quo* from the offices, the solicitors having to bestow about six hours in court to maintain their position against a guinea fee; it exposes a gross system of injustice towards the members of an ill-paid profession; and will show up those offices which do not pay for medical opinions. If I cannot obtain a fee from certain offices, I will recommend my patients to go to those which behave liberally to the profession.

RECURRENCE OF CANCER AFTER OPERATION.

To the Editor of THE LANCET.

SIR,—In an excellent paper by Mr. Weeden Cooke, which appeared in your impression of last week, there is, I would humbly submit, a value attached to ablation of cancerous deposits very far below the *real* value of such operations.

The statistics adduced by Mr. Cooke appear to me to prove only one point,—viz., that the average duration of immunity from cancer, in cases where cancer does eventually recur, is eighteen months. It cannot be argued from the data adduced that “operations do not usually cure the disease,” without a palpable violation of logic. In order to come to *any conclusion* at all, it must be shown what proportion the 128 cases of recurrence bear to the gross number of operation cases from which they were selected. This is perhaps not possible; but nevertheless, *without* such a datum, nothing can be arrived at. I would not do to say—128 cases of secondary syphilis presented themselves before me, which had been treated by mercury in the primary stage, *therefore* mercury does not *usually* eradicate syphilis from the constitution. Such a conclusion would be utterly unwarrantable, because the 128 cases might be 128 out of 129 so treated, or 128 out of 10,000; and until the wanting factor is supplied, I contend that the problem is not ready for solution.

Let it be supposed, however, that the 128 cases mentioned by Mr. Cooke represent a determinate proportion of cases of recurrence in a known number of persons operated upon; there is yet another fallacy in any conclusion which may be arrived at from a purely statistical view of the question. Suppose, for the sake of argument, that 256 cases of ablation had been collected out of a gross number of 1000 cases of cancer, and that one half of such cases, or 128, had been followed by recurrence of the morbid product. The value of ablation as compared with other methods of treatment would not be settled; because in the non-recurring cases, the dyscrasia may be supposed to have exhausted itself in the production of *one* tumour; and in the recurring cases, the constitutional diathesis may have been so intense that deposit in other organs may have existed at the time of the operation. Again, cases of non-recurrence might eventually have turned out to be cases in which the morbid growth if left untouched would have atrophied; and the 744 remaining cases might not all have been excluded from the operation upon valid grounds.

In short, even with all the necessary *numerical* factors in the problem before us for solution, it still remains that we are dealing with a question which involves *VITAL* phenomena; and such questions are not to be settled by the mere results of a rule-of-three sum. Unless we can be quite sure that we are comparing *like with like*, I contend that even as regards *large numbers of cases taken together*, there is abundant room for error; while as far as individual cases are concerned, the value of numerical results is reduced to the lowest possible ebb.

In making these suggestions, I would not be supposed to question at all the merit of Mr. Cooke's paper as regards the soundness of the pathology, or the judiciousness of the constitutional method of treatment proposed in it. In these days, when all the world is running mad upon the question of “cancer cures,” it is refreshing to see such an energetic and intelligent protest against the great quackery of the day as Mr. Cooke's paper constitutes. The exceptions I take to the conclusions as to *recurrence* are such as would occur to the logician as readily as to the surgeon; if they had not been so I would not have presumed to put my own *à priori* reflections in competition with Mr. Cooke's practical acquaintance with the subject of cancer.

I am, Sir, your obedient servant,

H. HANNOTTE VERNON, M.D.,

Physician to the Blenheim Dispensary.

Cambridge-terrace, Hyde-park, April, 1857.

MEDICAL SOCIETY OF LONDON.—This (Saturday) evening, a paper will be read by Dr. Septimus Gibbon, on the Identity of Typhus and Typhoid Fever.