

French author on the working of the Contagious Diseases Acts in England is one of the most satisfactory evidences yet offered of the benefit of our recent legislation on prostitution. Let us hope that the French Government will in future be guided by our experience. I am not without hope that Prussia as well as other Continental Governments, seeing the beneficial influence of our social regulations, will introduce such sanitary reforms as may tend ultimately to stamp out one of the greatest evils that can affect the health of the military and naval as well as that of the civil population in all large cities.

I am, Sir, yours truly,

Queen Anne-street, Jan. 1874.

W. ACTON.

THE VALUE OF EUROPEAN LIFE IN INDIA.

To the Editor of THE LANCET.

SIR,—While acknowledging, with thanks, the courtesy and general fairness of your remarks on what I have written regarding the value of European life in India, I trust you will pardon me for failing to perceive that I have been defeated by those who are opposed to my views, or that any of the positions which I took up have yet been turned either by my Indian critics or by yourself.

I quite concur with you that so important a question cannot be settled by controversial contentions, inspired or otherwise. At the same time I am not prepared to concede that the mere figures collected by actuaries for purely commercial purposes can be accepted as a true and just estimate of the real risk to life which those who serve or sojourn in the East must accept as the condition of such service or dwelling.

There is probably no department of the service to which the application of the numerical method needs greater care and discrimination than that which treats of life and death, for in none are unexplained and undigested numerical results more likely to lead to erroneous conclusions, for reasons on which it is unnecessary to dwell, as they are well known to all medical writers who have paid attention to the subject.

A mere glance at the works of Gavarnet, Radické, and other authorities of our own time will show the danger of a misuse or misunderstanding of figures as exponents of facts in medicine and therapeutics. Morgagni's maxim, "*Perferendæ sunt observationes*," is nowhere more strictly applicable than to the question which is now the subject of a controversy, to which an acerbity of tone and temper has been imparted which is difficult to understand, except it be in a sordid sense.

If my views were really as dangerous and erroneous as they are represented to be, why do not those who are opposed to them let those who believe in them work them out to their logical results with the disastrous failure predicted?

The plan of treating with violence and vituperation new views which interfere with a more ancient order of things, particularly where the pocket is concerned, is an old old story.

I hope you will not deem me irreverent, for it is in no spirit of irreverence that I invite the attention of my critics to the example of Demetrius the silversmith, "who made silver shrines for Diana," that "brought no small gain to the craftsmen, whom he called together, with the workmen of like occupation, and said, 'Sirs, ye know that by this craft we have our wealth.'"

Equally great seems to be the Diana of our modern Ephesians, and equally full of wrath of the same unselfish sort are, manifestly, her present worshippers.

My object in addressing you is not, however, to carry into your columns, even were you disposed to permit it, a controversy which, as you rightly remark, cannot determine a scientific question. To ascertain the real value of European life in India has higher ends and bearings, far above and beyond its commercial relations, important as they are.

My immediate purpose is to explain that the number of European and East Indian *employés* engaged on the Indian railways in 1866, noted by me as 8001, is taken from the Parliamentary Return for 1866-67, page 12, paragraph 41. It refers, however, I find on re-examination, to the half-year ending on the 30th June, 1866. I have not been able to find the figures for the whole of that year.

The figures for Sindh, 2400, the East India Railway, 1943, and the Punjab and Delhi Railway, 221, in all 4572, make no distinction between Europeans *pur sang*, and Eurasians, or those of mixed birth. The deaths during the half-year were, in Sindh 1; on the East Indian line 29, of whom 1 was killed by an accident; and on the Punjab and Delhi line 1. From a note contained in the statement, it appears probable that the Punjab and Delhi servants were included in the Sindh statement, in which case they must have been counted twice over. The above-mentioned are only a portion of the Indian railways.

The figures throughout the Parliamentary Returns are evidently not quite exact, and there are some lacunæ which are nowhere supplied. I therefore attach no further value to them in the way of argument than as showing how much the climatic evils of residence and service in India must have diminished, when those who lead the most exposed of all lives in times of peace die in such diminished numbers, as compared with the figures given in the returns of the most eminent actuaries of either military or civil lives.

Some of the remarks in your last article satisfy me that you somewhat misapprehended my contention; and several of my statements, to which you object as not germane to the question, are in reality replies to specific assertions of some of my critics, and were not imported into the discussion by me.

For example, I adduced the testimony afforded by the Indian members of the Athenæum in no statistical sense, but to rebut the assertion that long-continued service in India very rarely caused decay of body and mind—*et sic de cæteris*.

I am now engaged in collecting new figures with a view of throwing light upon the question in its purely scientific aspect, apart from all commercial considerations. These I shall submit, when the opportunity is afforded to me, to the Statistical Society, and they will, I have every reason to believe, afford proof that my views on the subject are in the main correct and well founded.

I have nowhere said, and I do not believe, that the risks to life in tropical are not greater than they are in temperate climates; but I do contend that life, to the strong, healthy, and temperate, is in ordinary circumstances as safe in the one as in the other.

I am, Sir, your obedient servant,

Jan. 13th, 1874.

F. J. MOVAT, M.D.

THE TEACHING AND PRACTICE OF PSYCHOLOGICAL MEDICINE.

To the Editor of THE LANCET.

SIR,—I have read with astonishment and regret Prof. Laycock's article on "The Teaching and Practice of Psychological Medicine as Influenced by Classifications of Insanity," published in THE LANCET of the 10th inst. I would never have lifted pen in answer to the remarks Prof. Laycock makes about me, my work, and acquirements; but when I find my expressions of respect as a student for the work and teaching of my master used as a medium for an attack upon his memory, it behoves me to speak. Anyone who has read the article must have noticed the antithetical silence which follows Professor Laycock's remarks on the qualities of Cullen. After quoting my opinion that Skae must be regarded as the Cullen of psychiatric medicine, he dissents, and proceeds to compare the systems of classification of mental diseases of the two authors in this wise:—"Cullen was a man with a rare combination of mental powers. A learned man, a keen observer, an acute thinker"; evidently implying that Skae was deficient in these qualities. It is not for me to speak of Skae's genius; all who knew him acknowledged it, and there is not one of his many friends who will not resent the implied insult on his memory. Let me remind Professor Laycock and the medical public that the classification of insanity on which I based the opinion was published in 1863, and that David Skae died in 1873. Why did not the professor attack the theory in the lifetime of its author? Why did he barely wait till the grass had grown over his grave ere he ventured to undervalue and depreciate the work? It must be admitted,

however, that in this Dr. Laycock exercised a very wise and judicious caution.

It is the concluding paragraph of the article to which I desire to direct your attention more particularly. After expressing a hope that high and scientific culture may yet influence the work of asylum physicians, Professor Laycock says—"It is matter of congratulation that the work has been begun at least by my friend, Dr. Crichton Browne, of the West Riding Asylum; and I trust, now that the Royal Edinburgh Asylum is connected with the University here, and Dr. Clouston, the successor of Dr. Skae,* is ready to co-operate cordially with me in teaching, we shall be able to follow and benefit by the excellent example set us at Wakefield." From this ingeniously constructed sentence it can be gathered that an additional slur is sought to be cast on Skae and his school, that Wakefield is the pharos from which all light has come, and is to come, that through the influence of Prof. Laycock's connexion with Morningside a new era of things is to be inaugurated, that the teachings of its lately deceased master are to be forgotten there, and that its new superintendent, Dr. Clouston, is about to cast in his lot with the teachings of the Laycock school. No one will seek to gainsay the great value of the work which Dr. Crichton Browne has done at Wakefield (than whom, I am sure, there is no one who would less depreciate the work of Skae); but if we inquire into the nature of his work, it will be found how little it has been influenced by the teachings of his master, Prof. Laycock. The papers which compose the mass of the West Riding Reports are devoted to anatomy, physiology, pathology, general and morbid, and therapeutics, which sciences are applied in a manner diametrically opposed to the theoretical method of Laycock, and in a manner closely approximating to the practical method of Skae. Careful study of the three volumes of the West Riding Reports serves to show how much work has been done at Wakefield to substantiate Skae's position, how much, perhaps unconsciously to the workers, his teaching has influenced their tone of thought, as it has that of a wide section of the specialty. I am fully assured that my friend Dr. Clouston will not depart from the faith in which he was educated, but that, on the contrary, he will do his utmost to disseminate the general principles of our beloved master by every means at his command, well knowing that in so doing he will be inculcating principles which guide to the knowledge of the real somatic nature of insanity.

I now only repeat the expression of regret that Professor Laycock did not make his attack on Skae during his lifetime, and that he has based his depreciatory criticism on an opinion of mine. His trenchant-pen would soon have swept away the misty and impalpable arguments with which Prof. Laycock has sought to obscure his fame. It may, however, safely be left to history to determine which man has made the deepest impress on the teaching of insanity, and the opinion of the future will not be uninfluenced by the fact that the survivor attempted to cast the dirt of obloquy on a recent grave.

I am, Sir, yours &c.,

J. BATTY TUKE.

Charlotte-square, Edinburgh, January 12th, 1874.

MR. GAMGEE'S REPORT ON ANTISEPTIC SURGERY.

To the Editor of THE LANCET.

SIR,—Mr. Gamgee, in his report published in THE LANCET of last Saturday, gives your readers to understand that I act under "the fatal bias of a fixed theoretical preoccupation," and that I have adopted on insufficient grounds a "theory" which "is made to fit all difficulties, and is itself maintained immutable in the presence of a succession of very varying facts."

Whether or not I deserve the grave charge thus publicly alleged against my professional character it would be unbecoming for me to discuss in your columns, but I trust that some at least among your readers will draw a broad line of distinction between the facts which Mr. Gamgee has recorded, and his comments upon them.

I am, Sir, yours, &c.,

Edinburgh, 12th January, 1874.

JOSEPH LISTER.

* The italics are mine.

BIRMINGHAM.

(From our own Correspondent.)

THE state of the Birmingham Workhouse Infirmary has been getting gradually worse and worse. In the week ending December 20th, the total number of cases in the infirmary was 881, or 71 in excess of the number in the corresponding week of the previous year; and in that ending December 27th the numbers had risen to 958, being 158 over the corresponding week of last year. This week's returns include 6 cases of scarlatina, 50 of variola, 70 of rubeola, and 2 of puerperal fever. To attend to all these patients there is but one resident medical officer; the wards are so crowded, that it is almost impossible to admit more fresh cases, and yet the guardians may have in the next week to provide for as many fresh patients as they had during the last week, when they numbered no less than 112. A medical guardian (Mr. Clay) urged on the board the necessity of at once building a fresh infirmary more adequate to the requirements of the parish. Not only should this be done without delay, but greater care should be taken in the classification and arrangement of the patients, and the resident medical staff should be increased by the addition of at least two assistant resident medical officers. At present the medical supervision of the infirmary, with its 958 patients, must be merely nominal.

The death-rate of Birmingham for the past week was unusually high—33 per 1000—the deaths exceeding the weekly average number by 60. Measles is very prevalent, and has contributed to this high proportion, but there has also been an unusual number of deaths from accidents or violence.

One of the new sewage tanks, of which three will be required, is now finished and in operation. The effluent water which passes into the River Tame is said to be clean and inoffensive. The sediment thrown down by the addition of lime in the tanks is removed by self-acting buckets, and, being without delay ploughed into the land of the sewage farm, is prevented from becoming a nuisance to the neighbourhood.

The Local Government Board, in reporting on the case of a young man who was sent to the Warwick Union Workhouse suffering from small-pox, and who died there in a few days, direct that the nursing of patients shall be done by professional women, and not by paupers; and that, in the event of the regular staff being at any time unequal to the duties, paid assistance shall be called in.

Mr. Garman, the medical officer of health for Wednesbury, in commenting on the serious extent to which scarlatina is present in that borough, expresses his belief, in which he is generally supported by the profession there, as well as throughout the country, that contagion is being widely spread by children from infected houses being allowed to attend the various schools. School boards will have to adopt stringent means for preventing this mode of diffusion of fever poison among their pupils.

Dr. Russell has expressed his intention of resigning the chair of medicine, which he has held for many years both at Sydenham and Queen's Colleges with great ability.

Birmingham, January 12th, 1874.

PARIS.

(From our own Correspondent.)

At the meeting of the Academy of Medicine on Tuesday last, Dr. Depaul, the well-known Professor of Obstetrics at the Faculty, who, during the last year, had fulfilled with meritorious zeal and impartiality the duties of president, descended from the chair after a few cordial words of thanks, and installed in his place the president for the new year, Dr. Devergie. Dr. Devergie is one of the oldest and most eminent members of the Academy. He is physician to the Paris hospitals, and has gained great reputation through his publications on subjects of forensic medicine, public medicine, and skin disease. He has always been one