

only way in which any of them differed from the rest in a hygienic sense was that in Damietta and Rosetta the people drank cistern water, stored while the Nile was still pure, because the river became brackish as its level fell. This being so, I naturally ascribed the comparative summer healthiness of the inhabitants of these two towns to the fact that they were unable to use Low Nile water, whereas in the other ten towns the only supply available came either from river or canal. No attempt, that I am aware of, has been made to disprove my facts, and I consequently still maintain that my case is thereby fully proved. As if, however, to make assurance doubly sure, I can adduce a proof of the evil quality of Low Nile water that is even yet stronger. In 1891 the Rosetta people had to drink the water from a new canal on a higher level than the river, and therefore not brackish, the cisterns having been left empty. Mark the consequences. As soon as the customary rise commenced in the other deltaic towns the deaths began to increase in Rosetta also, till they far surpassed the births, a thing never before known to have happened. At Damietta the cisterns had been filled as usual, and the death-rate maintained its normal level. I do not argue on theories or ratios, but simply on facts. These facts have never been disproved, and till that is accomplished I respectfully maintain that the construction of a river-bed reservoir for the retention of Low Nile water must be a sanitary crime.

I am, Sirs, yours truly,

Knaphill, April 21st, 1894.

H. R. GREENE.

P.S. I will be happy to send copies of my Tables A. and B. to anyone interested in the subject.

"THE INFECTIOUS DISEASES (NOTIFICATION) ACT."

To the Editors of THE LANCET.

SIRS,—You have paid me the compliment of noticing in your columns a letter of mine which appeared under the above heading in *The Times* of April 16th. I have no complaint to make of the spirit which animates your remarks; one never expects other than courteous treatment at the hands of those who wield THE LANCET. But there are a few sentences which need remodelling before I can accept them as just representing the position which I, in common with many others, have taken up. In the first place, you say that my statistics, published from time to time, have been put forward "in order to prove the disastrous effect of the notification of infectious disease." Unless "dual system" be inserted or understood, this is a complete misrepresentation of our case. At the International Congress of Hygiene and Demography in 1891 my friends and I voted with the majority in favour of notification *per se*. Our sole objection was to making the medical man responsible for a duty which properly belonged to the householder. And I may remind you that THE LANCET called it "putting the saddle on the wrong horse" and an interference with the relation of a private practitioner to his patients. But this was in 1888, and *tempora mutantur*. So far from pronouncing any opinion adverse to notification, taken broadly, I speak (even in the letter to which you refer) of Nottingham as showing what can be done by the single or householder system and go on to mention that this was the system originally advocated by the Local Government Board, "who might reasonably return to their former faith." But I do profess to show that towns under the dual system fare worse than those under no system at all, and, what is still more cogent, worse than they themselves did before they came under the system. I prove this by reference not so much to increased death-rates as to a marked change in the rate of decline, which is so invariable a consequence of the enforcement of the dual system as to amount almost to a law of nature. The decline in the death-rates—general, zymotic, and notifiable zymotic—instead of being accelerated, is checked on the advent of the system embodied in the Notification Act. I have been a close student of the subject for six years and have carried my investigations into the several death-rates as far back as 1871, so as to note the behaviour of the large towns under the different conditions. I have not depended upon towns taken singly, or upon years taken singly, but have taken averages extending over periods of four years each and to populations numbering millions. The investigation, of which I gave the result in the letter to which you

refer, comprised three such periods and 10,000,000 of the population. If this is not enough to show in what direction the wind blows, perhaps you will kindly let me know what will satisfy you; 1893 was a test year, just as 1887 was, capable of showing what dependence could be placed upon notification, and the dual system failed lamentably in both. But my argument is founded upon *averages*, so that your theory as to climatic and other occasional influences cannot be held against it. I do not quite see the force of your argument as to London having had abundant means of isolation and a consequent low death-rate before the Notification Act was introduced, unless it be to show that the means are no longer adequate owing to the greater number of cases; but ought not the cases to have diminished? If preventable, why not prevented?—if I may be allowed to re-echo the dictum of an illustrious personage (none more pertinent was uttered at the Congress of which it formed part of the opening address). In conclusion I beg to express regret at the loss your office has sustained in the death of Mr. Beckett, who took a most kindly interest in my work, and with whom I had several friendly chats when I called there in the early days of the contest. I like that favourite verse of his, and, with your permission, will quote it as a fitting commentary on the present question:

"Truth, crushed to earth, shall rise again,
The eternal years of God are hers;
Whilst error, wounded, writhes in pain,
And dies amidst her worshippers."

I am, Sirs, your obedient servant,

D. BIDDLE.

Kingston-on-Thames, April 20th, 1894.

"THE SURREY DISPENSARY AND ITS STAFF."

To the Editors of THE LANCET.

SIRS,—In reference to the annotation upon the above subject in THE LANCET of April 21st, will you kindly allow me, as a member of the sub-committee which drafted the revised rules commented upon, to make a few explanatory remarks? As to the apparent stringency of the new rules relating to the staff, you judiciously admit that peculiar circumstances may justify them, and in this case, Sirs, such peculiar circumstances do unhappily exist. Some of the members of the staff have been attached to the dispensary from twenty-five to forty years. As to the out-patients, many complaints as to irregularity of attendance have from time to time been received by the committee of management, and the attendance book of the staff fully sustained them. Patients have been kept waiting as much as from two to three hours, and when the medical officers have arrived the patients have been rapidly disposed of at the rate of from fifty to seventy an hour; sometimes five or six being in the consulting room at the same time, and in one case a female patient complained of being obliged to expose her chest for examination in the presence of others. As to the home patients, those unable to attend as out-patients, the subscribers are led by the rules to expect that these patients shall be visited by the physicians and surgeons, and in former years this was so, but of late this duty has been transferred to the resident medical officer. An official return before me shows that, for the years 1892 and 1893, the visits of the physicians and surgeons amounted to an average of only 2.63 per cent. of the whole number, the remaining 97.37 having been paid by the resident medical officer. Then, as to the lying-in department of the charity, the rules require that "all difficult labours" should be attended by the surgeon-accoucheurs; but during the years 1892 and 1893 they only attended about 10 per cent. of them, the remaining 90 per cent. having been left to the care of the resident medical officer. The truth is, that under the old rules the committee have no due authority over the staff, a state of things which cannot surely be defended. All that the committee demand of the governors under the proposed new rules is, that in the interests of the charity they should be endowed with proper authority over the medical staff. The new rules are intended as a rod, not necessarily for frequent use, but as a symbol always.

I am, Sirs, your obedient servant,

JOHN INCE, M.D.,

Retired Surgeon H.M.'s Indian Army; Resident Surgeon, Surrey Dispensary, 1854-1856.

Swanley, Kent, April 25th, 1894.