

expedition and to the extreme care taken to provide for all its sanitary requirements.

WATER FAMINE IN TRINIDAD.

The water famine under which the population—amounting to some 40,000 persons—of Trinidad, the principal town at the port of Spain, were suffering in 1891 is alleged to be still present, nothing in the way of remedy having been yet attempted. The matter has been already discussed in the House of Commons, and the late Under-Secretary for the Colonies promised to look into it. It is said that a state of things exists which is simply incredible; that the majority of the householders are without sufficient water for drinking and cooking purposes, to say nothing of ablution and drainage requirements. At the same time it is declared that an almost inexhaustible supply could be obtained from the hills at the back of the town by the expenditure of a few thousand pounds; if so, we cannot exactly understand why the townspeople do not set about organising some practical engineering scheme for utilising this water-supply. With a population of 40,000 it would seem to be possible to carry out locally a public work of such an absolutely essential kind. Are the aid and sanction of the home Government necessary for the purpose? Time was when troops were stationed at Trinidad, but we believe that there are none quartered there at present.

SANITATION IN BENGAL.

An amended Bengal Municipal Bill has been drafted which is likely to prove a very useful measure in the powers it confers upon the Lieutenant-Governor and the municipalities and district boards to enforce sanitation and drainage and establish wholesome water-supplies. The *Pioneer* of the 20th ult. shortly describes the various clauses of the new Bill, and very prudently urges that as measures for sanitation and public works mean the outlay of money they require to be gradually introduced and carried out, otherwise the municipal and district authorities will be rescued from the Scylla of insanitation only to be landed in the Charybdis of bankruptcy. We are very glad, however, to notice that the people and local native authorities of the different districts in Bengal seem to be alive to the necessity of doing what they can towards carrying out sanitary improvements.

THE DEATH OF LIEUT. HUDDLESTON, R.E.

The inquest on this officer, whose death at Chatham was attributed to his having been poisoned by eating tinned sardines or caviare, has been adjourned. The Home Office has directed Dr. Stevenson of Guy's Hospital to analyse the contents of the stomach and the suspected sardines and caviare.

ASSISTANCE FOR CIVIL SURGEONS.

The heads of the Madras Medical Department have made strong representations to the government respecting the lack of surgeons available for civil duty, obliging them to place assistant-surgeons in charge of districts with the inspection of large institutions; and the superintendence of a considerable staff, while there is absolutely no reserve. The authorities recognise the gravity of the position and they ask for a report as to whether the services of local doctors might not be retained.

PERMANENT REST CAMP.

The *Madras Mail* is glad to learn that a permanent Rest Camp for British troops is likely to be formed before long at Madras. Great hardships were experienced by European details last year owing to there being no such camp. An excellent site for the camp, facing the sea and close to the Fort, has been selected.

We have to announce with regret the death of Staff-Surgeon William Dickson Smyth, M.D. R.N., (retired) who died in his 57th year at his residence at St. Leonards and of Surg.-Major T. M. Lownds, M.D. (retired, Bombay Army) who died at Watlington, Kent, aged 64.

PRESENTATION. — On Thursday, Oct. 13th, Mr. H. Lewis-Hughes, L.R.C.P. and S. Edin., lecturer to the St. John ambulance class, Dowlais, was presented, in recognition of his services as ambulance instructor during the summer months, with a Morton's ophthalmoscope, bearing the inscription: "Presented to Dr. H. Lewis-Hughes by the Railway and Police Ambulance Class, Dowlais, Oct. 13th, 1892."

Correspondence.

"Audi alteram partem."

"MEDICAL CERTIFICATES AND DEATH REGISTRATION."

To the Editors of THE LANCET.

SIRS,—With reference to your leading article in THE LANCET of Nov. 5th I would suggest that efforts should be made to obtain such an amendment of the Births and Deaths Registration Act of 1874 as shall bring it into harmony with the Coroners Act of 1887 and relieve medical practitioners from much worry, anxiety and responsibility. The profession must take some blame to itself for allowing Clause 20 of the first-named Act to pass as it did in its present form. It begins as follows: "Certificates of Cause of Death.—With respect to certificates of the cause of death the following provisions shall have effect." Then follows Section 1, which deals with the furnishing of printed forms of medical certificates to registered medical practitioners, and needs no alteration. Sections 2 and 3 require amendment; hence I give them *verbatim*: "2. In case of the death of any person who has been attended during his last illness by a registered medical practitioner that practitioner shall sign and give to some person required by this Act to give information concerning the death a certificate stating to the best of his knowledge and belief the cause of death, and such person shall, upon giving information concerning the death or giving notice of the death, deliver that certificate to the registrar, and the cause of death as stated in that certificate shall be entered in the register, together with the name of the certifying medical practitioner. 3. Where an inquest is held on the body of any deceased person a medical certificate of the cause of death need not be given to the registrar, but the certificate of the finding of the jury furnished by the coroner shall be sufficient."

The clause concludes with a requisition for the delivery of the medical certificate to the registrar under a penalty of 40s. Now, these two sections presumably provide for all those cases in which there is no doubt as to the death being a perfectly natural one in all respects, and also for those cases in which there *must* be an inquest. But no notice is taken of the large intermediate class of deaths in which practitioners may have grave doubts as to whether they ought to certify or to refuse to do so. To adopt the first course might subject them to the pains and penalties of Clause 40, which enforces fine and imprisonment for a false certificate, while to refuse a certificate "without reasonable excuse" entails a penalty of 40s.; and even if in adopting the former course the certifying practitioner were relieved from a charge of giving a false certificate, he might still be subjected to great annoyance should an inquest be held and the coroner or jury blame him for giving a certificate at all. On the other hand, the refusal of one, even for the best reasons, subjects him to abuse from the relatives of the deceased; for the giving or refusing a certificate is no longer a matter of choice, but of duty and even compulsion.

The Coroners Act, 1887, Clause 3, defines the following as cases in which the coroner shall issue his warrant for summoning a jury and holding an inquest: "A violent or an unnatural death a sudden death, of which the cause is unknown, or that such person has died in prison, or in such place or under such circumstances as to require an inquest in pursuance of any Act." It is clear that these must comprise many cases in which the deceased had been attended by a registered medical practitioner, who will most certainly be asked to give a certificate. The above Act assumes that the coroner is informed of all such deaths, but does not specify the informant. It seems to me that the first reform required is to amend Section 2 of Clause 30 of the Births and Deaths Registration Act by adding the words, "Should the death have been in all respects a perfectly natural one" between the words "shall" and "sign." The third section might be left as it is, since it will apply to those cases where an inquest is held as a matter of course, and in which a certificate is not asked for—cases of drowning, hanging, murder, manslaughter, accident &c., of which the coroner is informed by the police or other medical informants.

A fourth section should be added. I suggest the following in the hope that all readers of THE LANCET will carefully

peruse them and suggest such alterations and improvements as may occur to them:—"In the case of the death of any person who has been attended in his last illness by a registered medical practitioner, that practitioner shall, should the death have been an unnatural one, or a sudden death of which the cause is unknown, or from violence as a primary cause within twelve months of the death, or should the death have taken place in such place or under such circumstances as to require an inquest in pursuance of any Act, not sign or give a certificate of the cause of death, but shall at once send information of the death to the coroner of the district, either directly or through the coroner's officer or local constabulary." Or the following as an addendum to Section 2: "But no registered medical practitioner is justified in giving a certificate unless he was personally in attendance upon the deceased during the last illness; nor in any of the cases of death specified in Clause 3 of the Coroners Act, 1887. In any or every such case he shall at once inform the coroner of the district," &c., as above.

I am not without hopes that eventually medical practitioners may be remunerated for these certificates, and also that a medical officer analogous to the *médecin vérificateur* of the Continent may be appointed to verify each death, and in other ways to make our Death Registration more perfect. Meanwhile I feel sure that some such changes as I have suggested would tend to simplify the duties of medical practitioners with regard to certificates of death, relieving them from an amount of anxiety and responsibility which they ought not to be called upon to suffer.

I am, Sirs, yours faithfully,

Liverpool, Nov. 5th, 1892.

FRED. W. LOWNDES.

"EXPERIMENTS UPON ANIMALS."

To the Editors of THE LANCET.

SIRS,—To question the loftiness of Mr. Berdoo's sentiments would be unkind and rude. It would be worse to cast doubt upon the sincerity of his conviction—a conviction opposed to what is held by nineteen out of twenty among physiological and clinical authorities—that experimentation on living animals is so much wanton cruelty, since it never has done and never can achieve anything for the advancement of knowledge which might not as certainly be achieved by other and unobjectionable means. Inspired by the elevated ideas his writings express, strengthened by fervid convictions and with full mastery of the facts, it seems a pity Mr. Berdoo has not chosen to speak for himself rather than yield himself up as the willing instrument of an anti-vivisection propaganda. Of that propaganda the votaries are in the main intelligent, albeit sentimental, individuals who through long contemplation of imaginary evils and atrocities have allowed themselves to become the victims of a fixed idea. Others are less intelligent and still more impressionable, who are willing to accept at second hand any facts, arguments and conclusions which harmonise with their ultra-humanitarian predispositions. This party during some twenty-five years has been engaged in systematic persistent public vilification of a body of high-minded men, of many of whom at least it may without cant be said that they must be included among the select minority in modern society who have throughout led noble lives, men of whose class Pasteur is perhaps the most striking example, men who by sheer force of intellect and hard work have risen to their eminent position, who in a sordid, money-grubbing age have rejected the wealth which their discoveries might have brought them, have given the fruits of their labours freely to the world and have devoted themselves with perfect single-mindedness of purpose to the one object—the pursuit of truth and promotion of scientific knowledge. When Mr. Berdoo complains that "his party does not receive the justice their cause demands," he strangely ignores such facts as these, and appears curiously oblivious of what has been thrust beneath his eyes within the last few weeks in the public press and notably in *The Times*—namely, the statements of injured individuals (physiologists and surgeons) who have brought forward ample proof that they have been most shamefully and foully libelled in the publications of the Society which Mr. Berdoo defends and supports.

I am, Sirs, yours truly,

Wimpole-street, W., Nov. 5th, 1892.

HENRY SEWILL.

To the Editors of THE LANCET.

SIRS,—There is a fallacy in the argument of Mr. Bowreman Jessett which I trust you will permit me to discuss. He

seems to assume that the use of decalcified plates, or some similar contrivance, is essential to the successful union of divided intestine, and concludes that because Senn and others (best of all, my old pupil, Dr. F. Byron Robinson) have made experiments on animals with these plates that the success of intestinal surgery is due to such experiments. No conclusion could be more fallacious.

Years before the experiments of Senn, Robinson or Jessett were ever heard of I had successfully applied the flap-splitting method to the union of intestine. I have used it in some two or three scores of cases, and have failed only once. Nothing could be simpler or more effectual than this method; nothing, in my opinion, could be clumsier than the plates, bobbins &c., which I have seen recommended by various authorities. Resection of the intestine does not differ in any one of the principles involved, nor very much in details. In whatever part of the intestinal canal it is practised "Pylorectomy" has nothing therefore to single it out as a case where experiments on animals are required more than in other parts of the intestine. But if Mr. Jessett wishes to claim for it such a character I will grant his premise at once, because it is one of the class of operations which I utterly condemn. I have never done it, and I never shall, for the disease is malignant nine hundred and ninety-nine times in a thousand, and inevitably returns. In the odd case where the disease is not malignant the operation of pyloric dilatation (Loreta) has been shown to be sufficient. We now know also that such operations as gastro-enterostomy lead to permanent and continuous fecal regurgitation, so that the whole scheme of such operations is gradually being dropped. This is the fate I predicted for them years ago, and if Mr. Bowreman Jessett claims for them an origin in experiments on animals, I gladly let him have it; they are worthy of such a fallacious origin. I know of no operation in intestinal surgery to which I would myself submit which I had not performed many times and many years before the dates given by Mr. Jessett.

I am, Sirs, yours faithfully,

Nov. 8th, 1892.

LAWSON TAIT.

To the Editors of THE LANCET.

SIRS,—Mr. Jessett and Dr. Clarke have mistaken the point of my letter, and it would almost appear from their remarks that I was siding with the anti-research agitators. My object in writing was that the public should have full opportunity of hearing our side of the question, and this can only be done by a more systematic method of educating the public upon the use and morality of animal experimentation than has existed in the past. I would suggest that the published works of the Society for the Advancement of Medicine by Research should be made more public and popular, that the Society should have in readiness one or more trained lecturers to combat the errors of the anti-vivisectionists, and that the pamphlets of the Victoria-street Society should undergo a critical examination; and this last seems now more than ever necessary. The educated people are almost wholly with us; but as almost everyone now has a vote—and one vote is equal to another in a Parliamentary sense—it is necessary to correct the false views of the ignorant, so that a catch vote adverse to scientific research may not be taken in the House of Commons; for, after all, it is with the Commons that the power for good or evil in this matter rests.

I am, Sirs, yours truly,

Folkestone, Nov. 7th, 1892.

W. J. TYSON, M.D. Durh. &c.

"CHLORIDE OF ETHYL."

To the Editors of THE LANCET.

SIRS,—I am sure that all dental surgeons will be much obliged to Dr. Radcliffe Crocker for the warning he gives as regards the use of chloride of ethyl. I have used it pretty extensively for several months in extracting teeth, making incisions in the gums &c., but I have not observed any of the untoward symptoms which Dr. Crocker's patient exhibited. I use on an average about one-quarter to one-third of a small tube, and I think it advisable to break the neck of the tube as near its extremity as possible, in order to obtain a fine stream and a perfect and rapid evaporation. To effect the same purpose also the tube should be held a considerable distance from the spot to be frozen, say eight to twelve inches. Dr. Crocker's letter, I am sure, will have the effect of placing all users of this anæsthetic upon their guard.

I am, Sirs, yours faithfully,

Harley-street, Nov. 8th, 1892.

WM. RUSHTON.