

cotton-workers, &c., and subsequent to pneumonic consolidation; (c) syphilitic phthisis; (d) fibroid phthisis; (e) tubercular phthisis. All these are well described.

The author has not forgotten the laryngoscope, nor to tell the practitioner how to use it. The significance of alterations of temperature in diseases is noted too. On turning to the sections on the ophthalmoscope, we find it correctly stated that in cerebro-spinal diseases the occurrence of symptomatic lesions about the fundus of the eye is found to be the rule, rather than the exception; and the appearances in Bright's disease, brain inflammation, and syphilitic diseases are depicted. Bouchut's observations are mainly quoted; and the only point upon which we should be disposed to be critical is the non-mention of the observations of Clifford Allbutt and Hughlings Jackson: but we suppose space was precious. About 150 pages are devoted to diseases of females. Bright's disease is divided into acute and chronic, in accordance with the plan recently proposed by the College of Physicians; and the chronic variety is made to include the granular, the fatty, and the lardaceous kidney. The views recently propounded by Grainger Stewart, Dickinson, and others, have justice done to them. In the present edition 77 pages are devoted to the formulary, 23 to a section on climates for invalids, and 20 to mineral waters. In these sections a large mass of new and useful information is comprised. The index is a little work of itself: it is very copious, and extends to 46 pages.

The result of the labour bestowed upon the work by its author is evident everywhere in its pages, and it is for that reason that we have felt bound to notice the sixth edition at greater length than we should otherwise have done. Without instituting any close comparison between this and other standard works on Medicine, it may be fairly said that there is no work which better deserves the title of the "Practice of Medicine" than that under notice, and we are only doing Dr. Tanner justice in saying so. The publisher also has succeeded in his treatment of the book: the paper is good, and the printing large and clear.

THE
SICK POOR OF PARIS.
By BLANCHARD JERROLD.

No. VII.
HOSPITAL BEDS FOR THE POOR.

THE confused ideas about the proper relation of the hospital to the poor which have been manifested of late in England, provoked by Mr. Goschen's Bill, and Mr. Torrens' opposition to it in the company of nine metropolitan members, tempt me to offer your readers a brief indication of the manner in which the hospitals of Paris (the creations of public benevolence) are worked in harmony with the Assistance Publique laws. Here there are no establishments like those on which Mr. Goschen is good enough to propose the reduced expenditure of one million sterling, to be got out of the pockets of men, many of whom have not one farthing of property, and themselves depend on their daily health for their daily bread. The ideas which prevail in London and in official circles, as well as in the outer world, about the Assistance Publique of Paris, are, in many important respects, erroneous. To begin with, it is generally conceived that the gigantic infirmaries with which London is to be endowed, are recommended by the success of similar institutions in Paris: the fact being that here no necessity whatever exists for special hospitals

for the pauper sick; just as in Belgium there is no need for a separate series of pauper madhouses. Instead of perpetuating an expensive and a destructive confusion and antagonism between independent charity and State charity, the French were wise long ago, and took advantage of the gifts of noble citizens to the fullest, by putting the administration of them in harmonious operation with the help which the State or municipality had elected to bestow on the defenceless poor. No violence whatever was done to the testamentary wishes of hospital founders. The princely Montyon legacy to the lately suffering was held sacred in the channels originally traced for it. Every benevolent person who has founded a bed in the Incurables Hommes or Incurables Femmes has a right which is respected scrupulously. There is not in the Assistance Publique a centralisation which benumbs individual charity; but rather a sympathetic general direction that encourages it, by giving to every groat in the poor-box, every centime put into the bag at the church door, its fullest relief value. An admission card lies before me, given to me by M. Husson, on the back of which is printed a list of the various institutions which are under his sway. They will give the reader an idea of the comprehensiveness of the Paris system, and at the same time show him that Paris is not provided at the public expense with a series of district pauper hospitals. Here is the list:—

General Hospitals.—The Hôtel Dieu, Notre Dame de Pitié, Charité, Saint Antoine, Necker, Cochin, Beaujon, Lariboisière.

Special Hospitals.—Saint Louis, Midi, Lourcine, Enfants Malades, Sainte Eugénie, Maison d'Accouchement, Cliniques, Maison Municipale de Santé.

Asylums and Retreats.—Bicêtre, Salpêtrière, Incurables Hommes, Incurables Femmes, Enfants Assistés, Ménages, Devillas, La Rouchefoucauld, Sainte Périne, Chardon Lagache, Saint Michel, La Reconnaissance.

Establishments for the General Service of the above.—Central Bakery, Central Pharmacy, Magasin Central, Central Meat Dépôt, Central Wine Cellar, Anatomical Amphitheatre, the Municipal Direction for Nurses.

The asylums and retreats, like the hospitals, are private foundations; and the history of most of them is to be found in "Les Bienfaiteurs des Pauvres" in the "Annuaire de la Charité, &c." Pious people will found a bed at the Incurables, Hommes or Femmes; and they are masters of it, subject, of course, as in every private charity, to the rules of the place. This subordination of private as well as State charity to one intelligent central authority does not, I insist, weaken the spontaneous benevolence of individuals; nor does the strictness with which the Assistance authorities require their unpaid visitors and committeemen to attend to their duties to the poor and in the council chamber, lessen the number of gratuitous servants of the administration. There is nothing sadder nor more scandalous in the history of English charity than the records of millions wasted which it comprehends. With British generosity and French administration, the case of even our great army of martyrs to a bad Poor Law might be grasped. As it is, we show builders for ever busy on new architectural wings; the London Tavern perpetually steaming with the rich juices of charity dinners; and 20, 30, 40, nay 50 per cent. of Samaritan gold warming the palms of secretaries, architects, and the like. Nor is this all, nor the worst part of the blundering. The poorest are not the people mostly helped. The French have their *pauvres honteux*, of whom they take the most delicate care; while we are the dupes of hosts of unabashed and undeserving poor, who hunt up votes for admissions to asylums, have an unerring scent after tickets of all kinds, and have the charities of London

as closely at their finger-ends as Mr. Sampson Low, jun. The oldest as well as the newest of our great private charities are diverted, in some measure, from their proper uses. Each independent body acts in royal independence of its neighbour. The governors know little or nothing of the general condition of the poor. Nobody takes the trouble to glance into the neighbouring parish. There is a vulgar, bustling hunt after patrons in all directions. The personages who deign to preside when the charity is bound to speak in public, and to implore yet another wing, are posted up for the occasion, and dutifully earwigged by "our indefatigable secretary." Brown and Jones discuss the amount they *must* give, over their plovers' eggs.

This may be charity, and charity made easy; but it is, I venture to submit, clumsy, wasteful, and harmful. The reform which is wanted, to begin with, in England, is in the direction of consolidation, and not of new barracks for mad or sick. The philanthropically disposed are repelled from the workhouse. Who offers assistance, in a spirit of brotherly kindness, to the Poor-law authorities? Is there the least community of feeling or of opinion between Poor-law officers and, say, the Society for the Relief of Destitution in the Metropolis? The vast and splendid hospitals with which London is provided show many empty beds; while the workhouse infirmaries are over-crowded. Each parish works in its own way; each hospital is a separate kingdom; each asylum is a fortress. The poor are neglected in one street, and kindly used in another. Even decent mortuaries are not uniformly provided in every part of London. All is hap-hazard, sloth or activity, with self-sufficiency agog in every vestry and board-room. The money spent is enormous, and the result is, a daily increasing rate of pauperism,—because the sick are neglected until they become permanent paupers; because the children are left in the streets; because none of the relief is remedial—except that which the Jewish guardians afford to their people. In Whitechapel, the poor Jew is the only man who is helped intelligently out of his poverty. The reason is, because the Jewish guardians are modeled, in their ways of proceeding, on the harmonious machinery of the French Assistance Publique. They have a searching system of out-door relief for the sick, conducted by voluntary visitors of their own persuasion, accompanied by efficient relief that keeps the home together; and they have hospital beds to which they can send those patients who cannot be treated at home. All their charities are in unison, and act and react upon each other. The volunteers who serve the poor are in force; and hence a thorough inquiry into the condition and deserts of every applicant for relief. Among the Christian guardians the inquiry is a mockery; and the relief is only bread enough to keep the applicant alive till his turn comes round again. Sick, he finds a difficulty in getting advice, and almost the impossibility of procuring the medicine he is ordered. The parish cannot give him a bed in an hospital; but he may reach the workhouse infirmary, and, as a preliminary, break up his home. Or, he may set forth begging among the private charities—to fall presently into the ranks of the professional ticket-hunters.

I have read diligently both sides of the question in regard to the asylums which are to grow, at enormous cost, in or near London, and I am only more firmly convinced than I was before Mr. Goschen's Bill was debated, that you are on the high road to deeper mischief, unless while these barracks are building you reform the Poor-law root and branch. Every home the law breaks up spreads new pauperism. The wise Jews, imitating our prudent and thoughtfully methodical neighbours, have made their medical staff for the poor perfect, and have helped the doctor with a kitchen as well as a pharmacy. Their vigour has been in

the direction of home; and so has that of M. Husson's department. The striving of the French poor administrators has been to keep the old people in the home as well; not to mass them in the asylums. The workhouse is the mistake in the English Poor-law system; and we will not see it, nor be at the trouble of mastering the details of a better system—cheaper and kindlier,—although it is flourishing within ten hours of Whitechapel, and serves the poor of a vast metropolis without a workhouse, and without oppressing those who are only just removed from a condition of want, with poor-rates.

Consider the case of the poor Paris workman who is disabled by disease. The Maison de Secours is at hand. The doctor reaches him, and leaves a record of the hour of each visit and the condition of the patient. He is followed by inspector and visitor, who attend to the poor man's wants, and help the family. It is cheapest to get the man to work again as soon as possible, and to keep the home together. When his case requires particular treatment or peculiar skill, he is removed by the Poor-law officers, upon a decent covered litter, to the special hospital which treats his disease. The home relief, the attendance, medicines, the hospital, and the carriage thither—nay, the convalescent hospital at Vincennes for fresh air,—are all harmoniously and cheaply worked together, through (1) the Maison de Secours, (2) the Arrondissement Bureau, and (3) the General or Central Bureau.

Consider the case of the poor sick workman in London. His family are invited into the workhouse to begin with. If they hold together—some six or seven in a room,—he is sparingly attended; his supply of medicines is dubious; no volunteer visitor keeps a rigorous superintendence over the Poor-law doings; his family starve on parish bread under his eyes, goaded incessantly with invitations to give up independence and go into the house, and become regular paupers, leaving an inheritance of workhouse morality to their children. Consider the case of the Jewish workman again, who, in the midst of the atrocious and costly barbarism to which the poor Christian of Whitechapel is subjected, is well nourished and attended in sickness, and sees his wife and children cared for until he can be the breadwinner again. The Rothschilds, who have graced their wealth always, both in London and Paris, with a most chivalrous and open-handed service of the poor—service of thought and time, as well as of money,—have been workers in this direction. But Gwydyr House is suffering, I fear, from *mortar* on the brain.

NEWCASTLE-UPON-TYNE INFIRMARY: THE C.M. OF DURHAM.

To the Editor of THE LANCET.

SIR,—Permit me to hand you the subjoined report of a special meeting of the Medical Board of the Infirmary, held this morning. Present: Dr. Embleton (in the chair), Dr. Charlton, Dr. Heath, Dr. Gibb, Mr. Russell, Dr. Arnison.

A letter was read from Dr. Philipson, stating his inability to attend.

The Chairman stated that the object of the meeting was to take notice of certain paragraphs in THE LANCET during the last three weeks, copied into the local newspapers, and relative to the degree of M.C. of the University of Durham.

Resolved,—“That the Medical Board having had their attention drawn to the fact that, in remodeling the old rules, they had omitted to consider the propriety of admitting the degree of M.C. of any British university as a sufficient qualification for the offices of surgeon and assistant-surgeon, the Secretary be requested to write to THE LANCET, and state that the Medical Board has already given notice that, at the next Court of Governors, the rule of the Infirmary relative to surgical qualifications be so altered as to admit the degree of M.C. of any British university as a sufficient qualification for any of the surgical offices of the Infirmary.”

I am, Sir, your obedient servant,

Newcastle-upon-Tyne Infirmary,
July 19th, 1869.

STANLEY PEACOCK,
Hon. Sec. to the Medical Board.

*** We congratulate the holders of this degree upon its proper recognition.—ED. L.