

noble calling, to be slurred over, because their richer brethren were enabled as youths to pass both ordeals. The twenty years' test would be a bitter mockery to the right-minded and liberal-thinking men in the profession.

If the college intend doing a really graceful act, they will admit every present member to the fellowship, and those gentlemen who are now prosecuting their studies could not fairly complain of hardship, because they well knew, before they entered as students, the regulations of the college.—I am, Sir, your obedient servant,

Norwich, December, 1849.

M.R.C.S. & L.A.C.

### MEDICAL MEN AT THE SUTLEJ.

*To the Editor of THE LANCET.*

SIR,—I avail myself of your invitation to mention a few facts illustrative of the position which the talented author of the "Summary" wishes to establish.

I remain, Sir, your obedient servant,

JOSEPH BURKE,  
Surgeon, 40th Regiment.

Richmond Barracks, Dublin, Dec. 18, 1849.

I had the honour of serving as assistant-surgeon of the 50th Queen's Own Regiment, during the campaign of the Sutlej, in 1845-46. During that short but eventful campaign, no less than *three medical officers* were killed, and one taken prisoner. Assistant-surgeon Graydon, of my own corps, Dr. Gahan, 9th foot, and Dr. Hoffmeister, surgeon to Prince Waldemar, of Prussia, fell by wounds received in action. Assistant-surgeon Banon, 62nd regiment, was taken prisoner at the unfortunate affair of Buddiwal, and was, after great suffering, constant peril, and considerable privations, liberated on the approach of the British army on Lahore.

At the battle of Moodkee, this day four years, the writer of this was in the discharge of his professional duty, within a short distance of the colours of the 50th regiment, exposed to a very heavy and galling musketry fire for nearly two hours. There was no distinction on this occasion between the medical officers and the rest. Hundreds fell dead around me. Amongst those who fell was Dr. Graydon, who received a mortal wound at the moment of tendering surgical aid to a wounded artillery-man. A more amiable, efficient, or excellent medical officer than assistant-surgeon Graydon I never met. His premature death was deeply lamented, and was, in truth, a great loss to the service of which he was an ornament. Allow me to state a simple fact, which will show the character of my poor friend. Although he had received a mortal wound, he was not so disabled but that, seeing a veteran officer,—brigadier Wheeler, of the Bengal Infantry,—near him, who was slightly wounded in the arm, he earnestly requested him to allow himself to be taken away from the scene of action in the dhooly which was appropriated for his own use. This was not acceded to by the gallant brigadier, and Dr. Graydon was brought back to camp, where, in my presence, he died on the following day. He had been wounded in the abdomen by a musket-ball, which lodged. He sank under hæmorrhage and mortification of the intestines.

Dr. Gahan sustained a wound which rendered amputation of the thigh necessary, and which was followed by secondary hæmorrhage and death. Dr. Hoffmeister was killed on his moment, a musket-ball passing right through his head. I had the pleasure of knowing him intimately, and I feel a melancholy satisfaction in bearing testimony to his worth and talents. He possessed great natural abilities, a warm, kindly disposition, and an intense love for science. Natural history was his favourite pursuit. In the company of his royal master Prince Waldemar, of Prussia, (a most amiable prince, since deceased,) he had travelled through an extensive portion of India, and had he survived, I doubt not he would have given the world an interesting monument of his labours and unceasing investigations. Dr. Banon is still alive, and able to tell his own story. I will not, therefore, enter on his case. My experience fully warrants me in affirming that a regimental medical officer who does his duty must be close to his regiment, and therefore must be exposed to the common danger. The talk of combatants and non-combatants is all nonsense. There is no such actual distinction when it really comes to the point. The medical officer is anxiously looked for by both officers and men; and if not in his position, would be considered as having deserted them in the hour of their greatest need. I would not envy the feelings of the medical officer who chose to be backward on such an occasion. He could never again hold up his head in his regiment. Although

capital operations are rarely performed under close fire, there is still more than enough to occupy the attention of the medical officer. Life oozing away may often be preserved by the immediate employment of the tourniquet, no matter how primitive or simple its construction. A spoonful of brandy may often enable the stunned soldier to find sufficient strength to make his way to the rear to have his wounds attended to.

In a hundred different ways may the prompt aid of the military surgeon on the spot tend to the preservation of life. These are facts well known to all military surgeons who have been on active service. The public, however, needs information; and it is well they should be aware that the military medical officer knows no immunity from danger in the hour of battle. To suppose so for a moment is a great delusion. His duties are fully as perilous as, and far more onerous than, those of other military officers. The duties of the medical officer do not terminate with the battle, as do those of most of his military brethren. On the contrary, notwithstanding his active employment on the field, his work is then only commencing. In fact, the military medical officer encounters all the perils of active service, all the risks of the engagement, with the harassing duties of civil life superadded. Medical officers are no more *non-combatants* than any other military officers, and are necessarily less so than quartermasters, paymasters, commissariat, &c., &c., &c. My experience fully warrants me in coinciding with Mr. Guthrie, when he states that the regimental medical officer, to do his duty, must be under fire. I believe there is no instance recorded of a military medical officer shirking that duty. The unavoidable inference is, that in every great battle medical officers must be, in the routine discharge of their professional duty exposed to imminent personal danger. I believe their non-professional military brethren have never attempted to deny this fact.

### THE ASSURANCE OFFICES AND THE MEDICAL PROFESSION.

*To the Editor of THE LANCET.*

SIR,—Much of late has been written in your journal on the subject of the justice and injustice of remunerating or not remunerating the private medical attendant for opinions to assurance offices on the state of the health of such of their patients who may wish to insure their lives. For my own part, I have long considered that assurance companies were the parties mostly benefited by obtaining the conscientious opinion of the constant medical attendant, and who alone can furnish a satisfactory opinion in very many cases. For twenty years I have held these opinions, and have almost constantly refused to fill up assurance papers without the promise of a fee from the office who may have made the application. I think, perhaps, a case in point, showing the real value of such an opinion, in which one of the old offices was taken-in for a sum of £1500—but I will relate the case.

A few years ago, a patient of mine called on me, and said that he was about to assure his life for £1000 in one of the old and respectable offices, and that he had referred the office to me as his private medical attendant. I immediately told him, if he had done so, my answers would be such that he would not be allowed to effect his assurance, but that in case the office declined paying me my fee, he would then be turned over to the company's medical referee. Such was the case, and again I was applied to for my opinion, which I declined to give unless my fee were paid. I need not lengthen my narrative: suffice it, the assurance was effected, and to my astonishment, in a few months more, another assurance on the same life was effected for a further sum of £500. Now for the sequel. This patient was diseased, and I would not have guaranteed his life for a single month; he lived, however, longer than I expected,—I believe two or three years,—while the whole of the money was paid over to the executors, after some little delay and inquiry. I need not point out that this money would have been saved to the office by the payment of my fee of one guinea. No doubt, many of our patients are well pleased to be turned over to the medical man connected with the assurance office, who cannot detect disease in very many instances, notwithstanding every precaution; and I consider it would be much to the advantage of all assurance offices if they relied solely on the opinion of the private medical attendant than solely on the medical referee of the office.

If you think these remarks of any value, they are at your service.

I am, Sir, your obedient servant,

Frampton-on-Severn, Dec. 19, 1849.

THOMAS WATTS.

MR. WISEMAN presents his compliments to the Editor of *THE LANCET*, and requests the favour of the publication of the following correspondence. It indicates that the important office of the Leeds and Yorkshire Assurance Company is giving way to the pressure from without, which, in justice to the office, ought to be known to the profession.

Ossett, Sept. 24, 1849.

DEAR SIR,—I have received an assurance paper to be filled up, as the medical attendant of Mr. T. H. I——, sent by you as agent to the Leeds and Yorkshire Assurance Office. I beg to say, that I invariably refuse to furnish the information required, unless the application is accompanied by a fee, or a promise to pay the same, by the office—viz., half-a-guinea, if the amount to be assured is under £500, and one guinea if above that sum.

I am happy to observe, that the company acknowledge that "all communications of this nature are intended equally for the benefit of the party to be assured and that of the company." With this I entirely concur; some companies deny that they are benefited thereby, and refuse to pay on that account, stating that the patient ought to pay.

There are now a number of respectable offices who (recognising the just claims of the profession) pay for the information required, and if my request is not complied with, I shall feel it my duty to recommend Mr. I—— to endeavour to effect an assurance with one of them.

I am, dear Sir, yours truly,

To W. Scholefield, Esq.

W. W. WISEMAN.

Dewsbury, Sept. 25, 1849.

DEAR SIR,—I have received your letter of yesterday, and beg to say that I shall be happy to pay the fee you require in Mr. T. H. I——'s case, which will be ten shillings and sixpence, the sum assured being under £500.

The fee may be paid in any manner you may direct. You will please, therefore, to send off the papers as soon as you conveniently can.

I am, dear Sir, yours respectfully,

W. W. Wiseman, Esq., Surgeon, Ossett.

W. SCHOLEFIELD.

SIR,—I am sure you will have pleasure in inserting the accompanying extract from a circular letter addressed by the manager to the agents of an important northern office—The Scottish Equitable.—I am, Sir, your obliged servant,

H. LUCAS.

Scottish Equitable Office, Edinburgh, 30th July, 1849.

"I have the pleasure to inform you, that in consequence of the objections made by many of the medical referees of parties proposing life assurances to furnish reports unless a fee be paid them by the Society, the directors have resolved to alter the rule on which they have hitherto acted, and to comply with the desire of the medical profession. You will therefore, in future, send the medical referee, along with the queries put to him, the same fee in each case as is allowed to the medical adviser of the Society.

ROBERT CHRISTIE, Manager."

North of England Insurance Office, Sheffield, August, 1849.

SIR,—I beg respectfully to acquaint you that the directors of this office have resolved to allow a fee to the medical profession for their opinion, when referred to in any manner in connexion with proposals for life assurance made to the Company, after the rate of one guinea where the sum to be assured amounts to £500, and half-a-guinea when under that amount. From a brief prospectus of the office, you will observe that the rates of premium are particularly favourable to young lives.—I am, Sir, yours most respectfully,

THOS. BELL, Actuary.

## CAUSES OF THE SOUNDS OF THE HEART.

To the Editor of *THE LANCET*.

SIR,—As the value of your journal has ever been highly estimated by the profession for the opportunity which it gives them freely to discuss all scientific subjects, perhaps you will allow me to make a few remarks on Mr. Brakyn's communication to Dr. Billing on the sounds of the heart, which was published in *THE LANCET* of Nov. 24th.

As Dr. Billing is the channel of communication of this paper of Mr. Brakyn's, I am bound to consider that Dr. Billing, in all respects, not only entertains an opinion which he published, with regard to the cause of the sounds, but that he admits

the accuracy of the physical principles on which Mr. Brakyn has made his experiments, and the conclusions he has drawn from them. Had Dr. Billing not come forward on this occasion, Mr. Brakyn's experiments might have passed unnoticed; but I shall endeavour to show that they are so unphilosophical, and his conclusions so erroneous, that until they were published, like many others, I had been impressed with the notion that Dr. Billing must have relinquished his theory of the heart's sounds, though certainly he had not publicly renounced his untenable hypothesis.

Without going into any details regarding the experiments of Mr. Brakyn, or entering upon the physical principles on which Dr. Billing founded his hypothesis, I have only to state that these principles on which the hypothesis was founded and the experiments were made, instead of the results being "triumphant," are decidedly erroneous; and the fallacious inductions to which Mr. Brakyn's experiments lead, arose entirely from confounding an *acoustic* with a *hydraulic* phenomenon. It is difficult to comprehend how any one who is acquainted with the first elements of physical science should have, for a series of years, allowed himself to employ a chain of reasoning on the influence of the currents of *water*, and endeavoured to establish that by experiments upon *air*.

The hydraulic and acoustic laws are so totally dissimilar, that the sounds produced by the vibrations of the valves in air is a fact which could never be disputed, and which every tyro in physical science must be perfectly familiar with. The same vibration of a membrane performed in a fluid like the blood cannot, however, produce any audible sounds, more than the vibratory movements of the fins and tail of a fish when swimming in its native element.

Edinburgh University, Dec. 1849.

SCRUTATOR

## Medical News.

APOTHECARIES' HALL.—Names of gentlemen who passed their examination in the science and practice of medicine, and received certificates to practise, on

Thursday, Dec. 27th, 1849.

CLARKE, GEORGE, Bath.

JONES, WILLIAM VAUGHAN, Festiniog, North Wales.

PITT, EDWARD GOLLEDGE, London.

WHITBY, CHARLES WILLIAM.

ANATOMICAL SCHOOLS IN LONDON.—It appears that subjects have been extremely scarce this session—so much so, that anatomical teachers have met for the purpose of effecting some change in the present method of distributing them. We understand that steps are being taken regarding this matter, and that a memorial is to be sent to Sir George Grey to obtain some modification in the present arrangements.

THE MORTALITY FROM CHOLERA AMONGST DIFFERENT CLASSES.—Dr. Guy has favoured the registrar-general with the following account of the professions or occupations of 4312 men of the age of 15 and upwards who were destroyed by cholera. It will be seen that the disease in London was not only fatal to the poor, but to many artisans, tradesmen, shopkeepers, professional people, and persons of independent means. Of the men who died of cholera 135 were returned simply as gentlemen or of independent means: 6 were clergymen or ministers of religion, 16 medical men, 13 magistrates or lawyers, 11 architects or engineers, 11 merchants, 11 officers in the army and navy, 25 master mariners, 100 clerks or accountants, 11 Custom-house, 7 Excise, officers, 14 builders, 14 booksellers, &c., 14 carpenters, undertakers, &c., 13 cheese-mongers, 17 drapers, &c., 11 fishmongers, 12 fruiterers, 20 grocers, 13 oilmen, 42 licensed victuallers, 5 wine merchants, 8 master shoemakers, 6 master tailors, 6 tobacconists, 19 travellers. Of the classes returned as artisans and labourers, 52 were bakers, 32 butchers, 102 weavers, 80 tailors, 151 shoemakers, 47 bricklayers, 17 masons, 20 plasterers, 70 cabinet-makers, 111 carpenters, 28 coopers, 73 painters and plumbers, 33 sawyers, 20 shipwrights, 22 tanners, 18 turners, 16 coach-makers, 35 cabmen, 57 coachmen and cabmen, 15 saddlers, 52 carmen and carriers, 37 grooms and ostlers, 6 drovers, 44 engineers, 10 railway guards, 13 stokers, 16 letter carriers and postmen, 99 porters or messengers, 24 policemen, 7 watchmen, 62 soldiers, 299 sailors and Greenwich pensioners, 27 watermen, 18 bargemen, 7 ballast heavers, 53 coalporters and coal-heavers, 25 footmen and man servants. 756 labourers are returned. Dr. Guy has given in the table "a rough approximation to the ratio which the deaths bear to the living" in the several occupations. This determination is as difficult as it is