

country it is necessary to know the number of its inhabitants under the heads of sexes, ages, occupations, and social condition. This information must form the standard of comparison for mortality tables, upon which the whole theory and practice of life assurance are based. The death-rate of a district can only be ascertained in like manner. The knowledge thus obtained has already led to the most material improvements in the public health; and the continued application of this test to particular districts will certainly be followed by equally happy results. By it we shall be able to trace the progressive improvement or deterioration of the health of the nation, or of sections of the community. The medical profession, which has always lent so willing a hand to the Registrar-General in the returns of the causes of death, will, we are sure, now do their utmost to facilitate the great work of the Census. In all that relates to life statistics this country occupies a foremost position amongst nations. For much of this honour England is indebted to the cordial public services of the medical profession and to the statistical administrative genius of one of its members—Dr. Farr. It concerns our credit to help on the work.

THE PAUPER'S DIET.

It is but justice to Dr. Joseph Rogers, the medical officer of the Strand Union, that we notice his recent beneficent and, we are glad to say, successful endeavours to improve the diet of the aged and infirm in an important London workhouse. This gentleman had for a long time observed that very many of such paupers either could not eat, or if they did so could not digest, the pudding and pea-soup given to them upon four days out of the seven. Continual complaints were made to him that the aged and infirm went without their dinners on those days rather than eat, and subsequently suffered from the flatulency and indigestion induced by their dietary. It was even found that large quantities of pudding and pea-soup, being left untouched, were ultimately thrown into the pig tub. After consultation with the master, Dr. Rogers determined to address the board of guardians, who referred his proposition to the Poor-law Board; the latter has granted its sanction for the proposed beneficial change. We subjoin a copy of the old dietary, and that proposed by Dr. Rogers as an improvement thereon. The medical officer recommends the alteration to be specially for those who, by reason of advanced age or other infirmity, are inmates of the sick or infirm wards, and whose cases are not sufficiently serious to require daily medical supervision, or, if the guardians prefer it, to let all paupers above sixty years of age participate in its advantages.

"Existing House Dietary."

- "Sunday—Boiled beef, 5 oz.; potatoes, 12 oz.
- "Monday—Suet pudding.
- "Tuesday—Boiled beef, 5 oz.; potatoes, 12 oz.
- "Wednesday—Pea-soup.
- "Thursday—Boiled beef, 5 oz.; potatoes, 12 oz.
- "Friday—Suet pudding.
- "Saturday—Pea-soup.

"Alterations sanctioned by the Guardians and the Poor-law Board."

- "Sunday—Beef, 4 oz.; potatoes, 12 oz.
- "Monday—Bread, 4 oz.; mutton broth, 1 pint; mutton, 4 oz.
- "Tuesday—Beef, 4 oz.; potatoes, 12 oz.
- "Wednesday—Leg-of-beef soup, 1 pint, containing bread, barley, and rice.
- "Thursday—Beef, 4 oz.; potatoes 12 oz.
- "Friday—Bread, 4 oz.; mutton broth, 1 pint; mutton, 4 oz.
- "Saturday—Leg-of-beef soup, 1 pint.
- "There is a reduction in the quantity of meat, in consequence of the more nutritious character of the dietary."

POISONING BY DISINFECTING FLUID.—An undertaker named Eames was poisoned last week by swallowing some chloride of zinc, which had been used for disinfecting purposes.

Correspondence.

"Audi alteram partem."

THE LATE DR. MATTHEW BAILLIE.

To the Editor of THE LANCET.

SIR,—Mr. Jeaffreson having recently stated that he had taken the story of Dr. Matthew Baillie's challenging Dr. Barrowby, third Censor of the Royal College of Physicians of London, from Dr. Winslow's "Physic and Physicians," it seems desirable to send you what I believe to be the original story as published in 1827 (about four years after Dr. Baillie's decease) by Mr. William Wadd, the celebrated collector of "Ana" about medical men, from which it will be seen that the supposed challenger was a totally different man from the celebrated Dr. Baillie:—

"Baillie—not Matthew Baillie, but an Irish gentleman who had been rejected by the College—called the next day upon Dr. Barrowby, who was one of the censors, and insisted upon his fighting him. Barrowby, who was a little puny man, declined it. 'I am only the third censor,' said he, 'in point of age; you must first call out your own countryman, Sir Hans Sloane, our president, and when you have fought him and the two senior censors then I shall be ready to meet you.'"
Extract from Wadd's "Mems, Maxims, and Memoirs," 1827, p. 264.

It is to be regretted that whoever has recently published this story did not notice Wadd's emphatic denial that it had any reference whatever to Dr. Matthew Baillie. I trust therefore that Mr. Jeaffreson will not omit all mention of the story in his second edition, but reinsert it in Wadd's own words, which cannot be misunderstood.

I am, Sir, your obedient servant,

S. WM. J. MERRIMAN, M.D.

Charles-street, Westbourne-terrace, April, 1861.

* * Dr. Winslow's "Physic and Physicians" was published anonymously nineteen years ago, and from this work Mr. Jeaffreson appears to have copied the anecdote respecting Dr. Baillie. The story as told in Dr. Winslow's work was extracted from a book of medical anecdotes. The error clearly arises from the fact of attributing the alleged rejection at the College of Physicians and subsequent duel to Dr. "Matthew" Baillie, instead of to an Irish physician of the same surname.—
ED. L.

THE MELBOURNE HOSPITAL, VICTORIA.

To the Editor of THE LANCET.

SIR,—Your sense of impartiality will probably permit one of your original subscribers and oldest admirers a small space to correct a few misstatements which have crept into your leader of the 6th October, 1860, on the affairs of the Melbourne Hospital, derived no doubt from one-sided documents.

In London, there are doubtless ways in which hospital abuses can be rectified without appealing to the subscribers. Public opinion, example, *esprit de corps*, work powerfully, and are for the most part sufficient to keep your medical charities in proper order. But here in this new world, whose chaotic elements are scarcely even now settling into place; where all journalists complain that there is no such thing as public opinion; where it is hardly possible to make men raise their eyes from the absorbing work of money-getting for any other purpose whatever; and where there are no public hospitals whose staffs might serve in any effectual manner to check each other,—we are in a state entirely new, and entirely different from what obtains in England.

The assembling of Englishmen from various quarters of the world, and the springing up of a vast and beautiful city around them with all its necessary institutions, create in their minds an earnest desire that such institutions, raised to last through a long future, should start free from the imperfections inseparable, perhaps, from those of an older state of society, and adapted to the newer one around them. It was to resist an attempt of the medical staff of the Melbourne Hospital to injure that invaluable institution, and to dishonour and degrade their profession, by the introduction of the very worst features of your endowed hospitals, that induced me to sacrifice my pecuniary interests, my professional advancement, and to hazard the loss of friendships I prized most dearly, to offer an open,

honest, and strictly constitutional opposition to their designs; and I beg to inform you, Sir, (which is almost my sole motive for addressing you,) that, first, contrary to what you have been led to believe (and lest the very charge you have advanced against the medical profession of Melbourne should be made), I from the first stood alone in this agitation, and to the close have remained without *party* of any kind; and, secondly, that from my diploma being excluded by the medical staff, I was not and could not be, as you represent, a candidate for a surgeoncy in the hospital.

The strictures on my conduct in this affair I fully respect and also regret, as no one likes, even by accident, to be censured. But as a counterbalance to this, I have the consolation of a certain conviction of the honour and probity of my every act; the unanimous support of the subscribers at a succession of the largest meetings ever held (with one exception) on the hospital affairs; the support of the majority of the new committee, not now the subservient instruments of the medical staff; the approval of a large majority of the medical profession, not only in this city, but also in many of the country districts, and even in the neighbouring colonies; and, lastly, more grateful to my feelings than all, I have the consciousness of my motives and conduct having been strictly scrutinized on the spot, and approved by our own Australian medical journal, whose impartiality no man can gainsay, and whose high principles and devoted love of the profession no journal has ever surpassed.

The hon. medical staff had brought the hospital to this pass—that had not reform been granted it would have presented to the world the scandalous spectacle of a charitable institution, supported by princely revenues, with its wards abandoned by the very working class—we have no poor here—for whom and by whom, in a large degree, it was erected; and its exchequer bankrupt from a recklessness of expenditure without a parallel.

Dishonourable means, or, as you term them, “the somewhat unprofessional expedient, to call it by no other name,” I used none; and the cases I brought forward I produced under such circumstances that were I not to have supported my assertions (which were purely general propositions—my sole arguments for two years and a half, by facts undeniable from my having witnessed them myself, I should have left that meeting ruined in character in the eyes of my fellow-citizens, and deservedly the scorn of every honourable man. No professional etiquette demands such a sacrifice. It has been made to appear, by one of the obscure journals which you quote, that these were isolated cases raked up and used for dishonourable purposes. Sir, the public papers have teemed for the last five years with complaints of neglect and ill-treatment, from patients in the hospital and their friends, without procuring the slightest redress; and the *Argus* (our *Victoria Times*) has repeatedly alluded to these abuses with like effect. The courts of justice have, even on the oaths of the medical officers themselves, proclaimed an amount of negligence or of incapacity in the hon. staff absolutely incredible in a public hospital. The labouring classes have combined, and refused to allow their mates to enter the hospital, and have subscribed to have them privately attended to. Had not the reforms I sought for been granted, I should have given formal notice at the last annual meeting of my intention to bring the subject of the treatment of the patients before our Lower House of Parliament, from which it draws four-fifths of its revenue; and I was prepared to *prove* a state of things unheard of in our times, saving, perhaps, in the hospitals of Scutari.

This, then, was no question of professional jealousy, envy, or ambition, as you would be made to believe; but the honest attempt of an honest citizen to free his profession and the public from an evil, the magnitude of which can only be estimated on the spot. Were it a question of mere monopoly, it should indeed never have been disturbed by me. Such it was not: what it was, I could not permit myself in the pages of a public journal to designate.

I am, Sir, your obedient servant,
Melbourne, Dec. 24th, 1860. J. WM. MACKENNA, Surgeon.

A CASE OF NERVOUS DISEASE.

To the Editor of THE LANCET.

SIR,—Will you kindly insert the following case in your journal:—

A. B—, aged twelve, whilst at play in January, 1860, in crossing a slide, fell and injured her knee. She walked home, about a mile distant, with very great difficulty. The knee speedily became swollen, and the pain increased. To relieve

these recourse was had to fomentations, leeches, &c. After some few weeks the swelling quite disappeared, but she had constant pain. I was requested to see her on the 14th of January of the present year, and found her sitting in a chair, resting her leg on another chair, which position she had been compelled to keep by day from the date of the injury. On examination of the knee, I could detect no enlargement, but tenderness to the touch, and great pain, *referred to the throat*. When I touched the knee, even with the greatest care, “the pain flew to the throat, and she swallowed it,” as she herself expressed it. Up to this date she had been using only local applications—fomentations, embrocations, and leeches. I ordered all local means to be discontinued, and prescribed the following mixture:—Tincture of the sesquichloride of iron, tincture of valerian, of each one ounce: to take a teaspoonful three times a day in water. This she took very regularly, and by the kindness of friends she had a liberal supply of nutritious food. I paid her an occasional visit, but could discover no marked improvement. She had a constant nervous shaking of the head, which came on, according to her mother’s account, about six months ago; she had considerable pain in the hip-joint, especially on moving the knee, or attempting to put her foot to the ground. On the 18th ultimo I called upon her, and found her in a state of great delight, as, about two hours before my visit, the use of her so-long disabled limb had been fully restored to her, and she had been walking about the garden before my arrival, though she had not been able to touch the ground with her foot for more than thirteen months. She thus describes the restoration of the use of her leg: “She was putting on her boot in the morning, and was suddenly seized with most acute pain in the hip, extending downwards to the knee and foot. So violent was the pain that she almost fainted. She called her mother to her assistance, who was quite alarmed at the intense pain the child was suffering. In a short time the pain subsided, and she was sensible of a marked difference in the feeling of the limb; on putting her foot to the ground, she was delighted to find the use of the limb restored, and that she could move about with ease.” On the 22nd of February she walked to the neighbouring town, a distance of four miles, (there and back,) without the least inconvenience, and I observed that the nervous shaking of the head had very sensibly diminished. I am, Sir, your obedient servant,

Nantwich, March, 1861.

EDWIN S. BELLISE, M.D.

ON THE INJURIOUS EFFECTS OF TOBACCO-SMOKING.

To the Editor of THE LANCET.

SIR,—If you think the following account may prove of service to your readers, I shall feel honoured by its insertion in THE LANCET. As I write from experience, and not from any theoretical notions, the facts I am stating may be relied upon. I have been a smoker for many years, and have now relinquished the habit; I presume, therefore, that I am entitled to give an opinion on the subject.

After being addicted to the use of tobacco (from the common pigtail to the finest Latakia) daily for the last ten years, I have arrived at the following conclusion: that the habitual use of tobacco in any shape is extremely injurious to the human system; and that in nine cases out of ten it produces disease sooner or later. After experimenting extensively on myself and others, I found it give rise to the following symptoms: on receiving an ordinary dose, the mouth and fauces became excessively dry, with intense thirst; then the eyes got into a heavy, sleepy condition, sometimes accompanied with a twitching of the eyelids; the face became deadly pale, with loss of expression; and sometimes vertigo or palpitation supervened. But by far the most frequent disease produced by it is dyspepsia with loss of appetite. I find that three-fourths of the cases of dyspepsia that come under my notice occur in smokers; and previous to my abandoning the habit I was upon the same list, but now dyspepsia (which had been troubling me for many years before) has entirely disappeared, and I feel vastly improved both mentally and bodily.

Perhaps a few words on the general effects of tobacco may not be out of place. As I wish to deal plainly with facts, I shall follow neither extreme. I cannot say that I quite agree with those who affirm that all smokers are dunces; neither can I coincide with those who hold smoking to be innocuous: on the contrary, I think that the keener the imaginative and perceptive faculties (though we meet with exceptions), the more apt are such persons to be led to practise this vice habitually. But there can be little doubt that it does stupefy after a time,