

the registration of deaths, as it exists in Boston. The limitations and defects of the system are exposed, and improvements suggested. The paper may be profitably read by every physician who has to sign death certificates, and by all interested in registration. The registrar should be a medical man, and the bureau should be under the control of the local or general health-board.

Mr. J. M. Merrick has been employed to examine and analyze samples of common groceries, and other dietetic preparations.

Prepared yeasts were found to be practically pure and good. Baking powders, liberating carbonic acid, are believed to be less wholesome than good yeast.

Confectionery was found poisonously coloured often enough to warrant great caution in its use. Ought there not to be in every city some system of inspection of candies?

Sugars proved uniformly pure and wholesome. The so-called wine vinegar is made from whiskey. Sulphuric acid was largely present in some samples of "cider vinegar." Three out of four samples of pickles contained copper; and all, alum. Canned fruits were found to contain tin in considerable amount, with mere traces of lead and copper. Ale and lager beer were found pure. Only two samples of kerosene out of twenty-two could be deemed safe. The gross fraud of professing to render oils safe by adding secret powders to them, is here again exposed. Hair dyes were found to be all strongly impregnated with lead, and hence dangerous. Lotions, etc., for the skin, vary from perfectly innocuous to highly detrimental. Samples of ground coffee were found to be generally grossly adulterated. Cheap teas were found to be adulterated with clay and sand, and to consist in part of exhausted leaves. Pepper and mustard were mostly weakened with sand, flour, and tarmeric.

Analyses of several specimens of well-water gave the most startling results, both as to the enormous difference in different wells, and the inferiority of all to the Cochituate water. One sample of well-water contained 116.6 grains of foreign matters to the gallon, while the aqueduct water had but 3.18!

B. L. R.

ART. XXXV.—Recent Articles on Quarantine.

1. *Extrait du Dictionnaire Encyclopédique des Sciences Médicales*, publié sous la Direction du Dr. A. Dechambre. Article, *Quarantaines*. Par M. le Dr. LÉON COLIN, Médecin Principal de l'Armée, Professeur d'Épidémiologie à l'École du Val-de-Grace.

Extract from the Encyclopedic Dictionary of the Medical Sciences, published under the direction of Dr. A. Dechambre. Article, *Quarantines*. By Dr. LÉON COLIN, Principal Physician of the Army, Professor of Epidemiology in the School of Val-de-Grace.

2. *Quarantine; General Principles Affecting its Organization* By S. OAKLEY VANDERPOEL, M.D., Health Officer of the Port of New York, etc. etc.
3. *Annual Report of the Commissioners of Quarantine of the State of New York*. Transmitted to the Legislature, January 6, 1874.
4. *Conclusions of the International Sanitary Conference, held at Vienna, July, 1874.* (Supplement to the *Medical News and Library*, November, 1874.)

Dr. LÉON COLIN, in the cyclopedic article above named, truly remarks that the question of quarantine is one of the most complex in hygiene and medi-

eine. He deals exhaustively with the subject, giving its history from the Middle Ages, as divided into three periods: first, the period of leprosy; secondly, that of the plague; lastly, that of yellow fever and cholera. The second of these began about the end of the fourteenth century, and extended to the middle of the nineteenth. The last has followed, comprising the principles and applications of quarantine at the present day. Dr. Colin traces, step by step, the progress of experience, with the alternations of opinion; from the strong impression in favour of contagion, made by the work of Fracastor (Venice, 1546), to the comparatively late reactions effected by John Howard, in England, and by Chervin, in France, after their observations of plague and yellow fever, on the continent of Europe and in America. The evils of mediæval, and even of modern, quarantines and lazarettos are vividly portrayed. Their frequent total failures are fairly set forth. Material is given abundantly, in the 171 pages of this elaborate and well-digested article, for the refutation of all arguments ever advanced on behalf of personal quarantine, either against plague, yellow fever, or cholera. Yet (it seems to us) with Dr. Colin, as with many others on both sides of the Atlantic, support of exclusive measures of quarantine is so much a *faregone conclusion*, that no facts can quite displace it. But the modifications which the common sense and urgent necessities, as well as the humanity, of nations have from time to time compelled, are very instructive; and, for the future, they are encouraging.

The extreme of endeavour after the forced protection of men from men was exemplified at Digne, in France, in 1629, when the peasantry of the surrounding country deliberated upon the project of committing the plague-stricken town, wherein were already fifteen hundred unhurried dead, to the flames! They were only prevented from accomplishing this upon the invasion, by the plague, of four other towns in their neighbourhood.

The futility of "*cordons sanitaires*" against cholera on land, was amply proved in Europe, in 1831-1832. The horrors of the lazaretto became long ago so familiar as to lead to demands for *reform* of quarantine. Sanitary improvements have been demonstrated to possess power to abate very greatly the destructiveness of all malignant epidemics. Plague has disappeared from Europe. Why? Certainly not from increased rigor of quarantines. Yellow fever does not invade England. Dr. Colin rightly points out that this immunity is related to climate. Then yellow fever is clearly not a humanly contagious disease, but a *regional epidemic*, nowhere needing personal quarantine. Cholera was reduced immensely in its extension and fatality in London, Paris, New York, and Philadelphia, in its later visitations, down to 1866 and since. Again, why? Neither of these localities has *shut out* cholera by quarantine. Preventive local measures, belonging to *sanitary police*, have made this momentous difference.

Turning from Dr. Colin's able and valuable article to the other pamphlets and documents referred to at the head of this notice, farther reason appears for the conviction, that, notwithstanding a very general, and, so as, almost accountable prepossession in its favour, the days of *personal* quarantine are numbered—it ought nowhere to outlast this century. Formerly, it was not uncommon to compel the residence of all persons detained at quarantine, on board of the condemned or suspected vessel. The time, at first, was forty days. Long ago this was variously shortened at different places, and, quite arbitrarily, on imaginary grounds, made of different lengths for plague, yellow fever, and cholera.

Now, as set forth by Dr. Vanderpoel, and by the Commissioners of Quarantine for New York, at the station provided for the protection of that city,

vessels suspected or known to have yellow fever or cholera on board are promptly emptied of their passengers, for sanitary inspection and purification. They are then detained for "observation;" in the case of yellow fever for five, and in that of cholera at the most for eight days.

These changes are all in the direction of improvement. More will inevitably follow; until the last remnant of the semi-barbarism of personal quarantine shall have gone out of existence. Intelligent measures, not only of local preventive sanitation, but of *maritime hygiene*, and also of the *inspection* and compulsory *purification of vessels* at quarantine stations, will remain, and will produce those effects vainly sought through rigid quarantines.

Let us see, finally, what conclusions the International Conference of last summer attained to, notwithstanding all the pressure of the advocates of the contagiousness of cholera. Under the head of "measures to be taken in European ports," the Conference *recommends a system of medical inspection*, in place of quarantine. If any States prefer the latter, it submits principles for its regulation. On these principles, the period named for detention of passengers and others for "observation," when they have arrived on a vessel having, or suspected of having, cholera on board, is seven days.

This allowance of quarantine, for a period so comparatively moderate, by the Conference, is certainly no more than was to be expected under its circumstances. But its distinct and decided *recommendation*, instead, of the system of *medical inspection*, is an immense step in sanitary progress. All the restriction provided for upon *this* system, in the terms prescribed by the Conference, is that the ship, passengers, and crew shall be thoroughly disinfected; after which "the property of the passengers and crew will be restored to them, and they will be admitted to *free pratique*." H. H.

ART. XXXVI.—*The Handbook for Midwives*. By HENRY FLY SMITH, B.A., M.B. Oxon., M.R.C.S. Eng., etc. 12mo. pp. 158. London: Longmans, Green & Co. Boston: Jas. Campbell, 1873.

THE proper instruction of midwives is a question which demands earnest consideration. In America, where honour commands a high reward, the poorer classes usually have the means to secure the services of competent medical attendants, nevertheless many women, the wives of labourers and mechanics, trust their lives in the hands of midwives, at least after their first or second labour, when the rapidly increasing family has to be supported by a sum that is no greater than "the day when the twain were made one flesh."

We have no means of estimating the preventable mortality among this class. It must be considerable. Another consideration of almost equal importance is the fact that parturition, though a purely physiological process, is attended not only with immediate but with prospective danger. The parturient woman may escape with her life, and happily imagining that all her trouble is over, get up from her lying-in bed to find that, through the ignorance of the midwife whom she trusted, she is the victim of some of the many disorders to which her sex is heir, and which, if they do not endanger life, make existence little less than a torment, or render her a mere consumer in a community in which she should be a productive agent.

In view of these facts we hail with pleasure any work or system of teaching which will improve our midwives, and make them more fit to discharge their