

# THE LANCET.

LONDON: SATURDAY, JUNE 23, 1855.

It is the misfortune of Medicine, in its conflict with the prejudices of society, that it is continually exposed to discomfiture, through the perverse, crotchety, or treasonable behaviour of certain of its own disciples. This is never more true than when it is striving, in the purest and most disinterested spirit, to promote the welfare of society. A kind of antagonism is aroused and kept alive in the public mind, which is not less prejudicial to the public than unjust to Medicine. The free progress of science is always sure to advance the interests of humanity. Society but wounds itself when it seeks to discredit the teachings of Science, by setting against the comprehensive and well-weighted decisions of her true representatives, the crude opinions and hobbyistic dogmas of men whose perceptions are dimmed by the gloom of the den in which they think and move.

In the case of BURANELLI the civilized world has recently been scandalized by the spectacle of the law and the administration rejecting, with studied indifference, the direct evidence and the deliberate judgment of men whose names stand foremost in the rank of scientific and practical psychologists. And in this course the law and the administration fancy they were supported and justified, because they were able to procure the strictly individual opinions of two physicians.

We have another example in the conduct of the Committee on the Public Health and Nuisances Removal Bills, now before Parliament. It is known that these Bills have encountered a formidable opposition from a host of "vested interests" in the production of pestilent vapours, miasms, and loathsome abominations of every kind. These unsavoury persons, trembling for the conservation of their right to fatten upon the injury of their neighbours, came in a crowd, reeking with putrid grease, redolent of stinking bones, fresh from seething heaps of stercoraceous deposits, to lay their "case" before the Committee. They were eloquent upon the health-bestowing properties wafted in the air that had been enriched in its playful transit over depôts of rotten bones, stinking fat, steaming dungheaps, and other accumulations of animal matter, decomposing into wealth, such as the imagination shrinks from picturing, and which language cannot describe. The Committee had before it a soap-boiler, worthy of the fame conferred upon the enthusiastic tallow-chandler of SAMUEL JOHNSON: this tallow-chandler had the misfortune to grow rich; the insane ambition of retiring seized him; he sold his business, and bid adieu to happiness, until he had negotiated with his successor, at the cost of two hundred a year, for the privilege of assisting on melting-days! Mr. ARCHIBALD KINTREA (why should his name not live?) is a soap-boiler. He denies that soap-boiling produces disagreeable effluvia; he "rather likes it himself;" nay, more, "he means to say, that people generally enjoy it"—ladies especially. And as to its being prejudicial to health, he only knows, that whilst he and his children lived upon the premises, they revelled in exuberant health, and have fallen off since they left. The fact is, it is all a matter of association or of fashion. The odour of putrefying fat is not only salubrious, but agreeable, if

you can only make up your mind to discard vulgar prejudices.

"Rufillus pastillos olet, Gorgonius hircum."

Some ladies live in an atmosphere of Eau de Cologne or RIMMEL'S vinegar; others—Mr. KINTREA'S fair friends—dote upon the delicious fragrance of the copper "when the soap-boiling is going on with intensity."

But Mr. KINTREA and his colleagues do not rely upon these acts alone. They have "scientific" evidence! They bring before the Committee a doctor and a barrister. They have formed an Association. They have a Secretary, a bone-merchant, who has read the writings of Dr. SNOW. Now, the theory of Dr. SNOW tallies wonderfully with the views of the "Offensive Trades'" Association—we beg pardon if that is not the right appellation—and so the Secretary puts himself in communication with Dr. SNOW. And they could not possibly get a witness more to their purpose. Dr. SNOW tells the Committee that the effluvia from bone-boiling are not in any way prejudicial to the health of the inhabitants of the district; that "ordinary decomposing animal matter will not produce disease in the human subject." He is asked by Mr. ADDERLEY, "Have you never known the blood poisoned by inhaling putrid matter?—No; but by dissection-wounds the blood may be poisoned."

"Never by inhaling putrid matter?—No; gases produced by decomposition, when very concentrated, will produce sudden death; but when the person is not killed, if he recovers, he has no fever or illness."

Dr. SNOW next admits that gases from the decay of animal matter may produce vomiting, but says this would not be injurious unless frequently repeated.

Is this evidence scientific? Is it consistent with itself? Is it in accordance with the experience of men who have studied the question without being blinded by theories?

Let it first be observed that Dr. SNOW admits that the gases from decomposing animal matter may kill outright—a pretty convincing proof of their potency. He also admits that in a less concentrated form they may cause vomiting. And here he stops, assuring us, that if they don't kill us, or cause repeated vomiting, they do us no harm. Now, as a mere matter of reasoning, we think the conclusion inevitable, that agents capable, when in a certain degree of concentration, of killing or causing vomiting, will, in a lesser degree of concentration, also act on the animal economy; albeit, in a less sudden and perceptible manner. It will be very difficult to persuade us that the long-continued action of gases known to have such lethal powers, if concentrated, is not injurious to health when in a state of dilution. We shall not easily be reconciled, on the assurance of Dr. SNOW, to endure a leakage in our house-drains. We have a strong conviction, that as soon as our noses give us intimation of a communication between those conduits of decomposing animal and vegetable matter and our dwellings, it is time to call in bricklayer and plumber. We decline to wait until repeated vomiting, or a sudden death amongst our children, satisfy us that the gases evolved are in a highly concentrated state. Our professional avocations have, indeed, frequently given us the opportunity of tracing failing strength, flabby muscles, pallid cheeks, lassitude of body, and torpidity of mind to this cause. We have felt it our duty to urge removal from the houses so affected, when the drains could not be repaired effectually, and we have commonly been gratified by observing a restoration to bodily and mental vigour. And we presume that there is hardly a practitioner of experience and average

powers of observation who does not daily observe the same thing. Why is it, then, that Dr. SNOW is so singular in his opinion? Has he any facts to show in proof? No! but he has a theory, to the effect that animal matters are only injurious when swallowed! The lungs are proof against animal poisons; but the alimentary canal affords a ready inlet. Dr. SNOW is satisfied that every case of cholera for instance, depends upon a previous case of cholera, and is caused by swallowing the excrementitious matter voided by cholera patients. Very good! But if we admit this, how does it follow that the gases from decomposing animal matter are innocuous? We cannot tell. But Dr. SNOW claims to have discovered that the law of propagation of cholera is the drinking of sewage-water. His theory, of course, displaces all other theories. Other theories attribute great efficacy in the spread of cholera to bad drainage and atmospheric impurities. *Therefore*, says Dr. SNOW, gases from animal and vegetable decomposition are innocuous! If this logic does not satisfy reason, it satisfies a theory; and we all know that theory is often more despotic than reason. The fact is, that the well whence Dr. SNOW draws all sanitary truth is the main sewer. His *specus*, or den, is a drain. In riding his hobby very hard, he has fallen down through a gully-hole and has never since been able to get out again.

“Facilis descensus Averni:

Sed revocare gradum, superasque evadere ad auras;  
Hoc opus, hic labor est;”

And to Dr. SNOW an impossible one: so there we leave him.

In that dismal Acherontic stream is contained the one and only true cholera-germ, and if you take care not to swallow that you are safe from harm. Smell it you may, breathe it fearlessly, but don't eat it.

Now we do not think it necessary to prove, by adducing evidence in opposition to Dr. SNOW, that decomposing animal and vegetable matters are injurious to health. They ought not to be suffered to be stored in inhabited localities. We are not acquainted with a single medical practitioner of established reputation who would not consider that the removal of deposits of decomposing animal and vegetable matters was an essential condition for the improvement of the health of towns. We have adverted to the evidence of Dr. SNOW, for the purpose of repudiating it as the expression of the teaching of medical science. We have made it the subject of stricture for the same reason that we have lately animadverted upon the pseudo-medical evidence of Drs. MAYO and SUTHERLAND—that is, to prevent true science from being misrepresented and ridiculed, and to protect the community from injury. The Committee seems to have contented itself with listening to the statements and objections of those who are interested in opposing the Bills. Those objections it was of course bound to hear. If it did not call for any scientific evidence in reply, we hope it was because the statements of the dirt-and-effluvium-interest contained their own refutation. The only thoroughly scientific witness examined was Dr. FARR, and his evidence bore upon a totally distinct question. He did not deal with the causes of mortality, but with the rates of mortality in different districts. The facts he adduced went to prove that there is a natural mortality which does not exceed 17 in 1000; that whensoever that rate is exceeded there are noxious and generally removable causes in operation, and therefore that any excess of deaths above this proportion ought to be the signal for applying the resources of science to the improvement of the health of the district. In the original Public Health Bill it was proposed that a mortality

of 23 in 1000 should warrant the extension of the Act to any locality. After hearing the objection of the great Bone and Stench-interest, and the evidence of Dr. FARR, which proves to demonstration that anything over 17 in 1000 is unnatural, the Committee has amended the Bill by raising the rate which shall bring the Board of Health into action to 27 in 1000! Verily the Committee has small faith, or little courage.

We shall review this branch of the subject next week.

WITH whatever obstinacy the authorities at the Admiralty may strive to maintain the Assistant-Surgeons in the Navy in their present degraded position, it is certain that they must eventually be defeated. With the energy characteristic of Englishmen, the reformers of this abuse obtain new strength the longer they are engaged in the righteous struggle. Originally the agitation was commenced by the assistant-surgeons themselves, aided solely by this Journal and the powerful pens of Dr. MACWILLIAM and Dr. J. F. BROWN. Subsequently other journals lent their influence, until the public mind became universally impressed with the vital importance of the contest. It has been lamentable to observe the mean subterfuges to which the authorities have resorted to evade the petitions and remonstrances, and even a vote of the House of Commons, which have been brought to bear upon them. Now, however, they have opposed to them an organization, which, if properly carried out—and we are confident it will be so—cannot fail to be triumphant. Not the least significant element of this organization consists in the fact that it has been formed and is carried on by the medical students of the kingdom. The Naval Medical Reform Association originated in the great meeting at St. Martin's Hall. Already it has attracted to itself an amount of support through the country which is really astonishing, considering the short time it has been in operation. In every considerable town of the kingdom the Association has one or more representatives, in the form of honorary secretaries. It has also at its disposal that which in agitations of this description is “the sinews of war”—money. The Association, fully alive to the importance of bringing Parliamentary influence to its aid, has circulated throughout the length and breadth of the land not only an able and energetic address, but forms of petitions which may be presented to the Legislature both by members of the profession and by the public at large. Already petitions on this basis have been presented from various places, and we cannot doubt that ere long every member of each House of Parliament will have a similar petition entrusted to his care. We would take the liberty of suggesting to the gentlemen composing the Association, that deputations should be formed in every Parliamentary district to wait upon their representatives, to urge upon them, not only the necessity of their assistance, but of the record of their votes in favour of the movement. Such a course of proceeding would infallibly ensure a vast majority in favour of the movement in any subsequent division. Petitions should be presented not only from colleges, associations, and towns, but also from individuals. The shorter such petitions can be made the better; and we would suggest that, as the grievances under which the assistant-surgeons in the Navy labour are patent to every intelligent member of the community, all purposes would be answered by the embodiment of the last paragraph in the petition circulated by the Association. That paragraph is to the following effect:—

“6. That your petitioners, feeling deeply how important

it is that, at the present crisis, the fleets should be supplied with men who may safely be entrusted with the lives of Her Majesty's sailors, and believing that it is only by relieving the assistant-surgeons in Her Majesty's Navy from the grievances under which they labour that the services of such men can be obtained, earnestly pray that your honourable House will be pleased to direct that regulations so destructive to the interests of the country, the profession, and the service, shall be immediately amended.

"And your petitioners will ever pray.

All honour is due to the young gentlemen who are defending their brethren against a system which has hitherto operated with so disastrous an effect upon the naval service of their country; and it cannot but be a source of gratification to us that so just an agitation, commenced in the pages of this Journal, should after so extended a contest be crowned by success.

A CONTEST, highly interesting to the medical profession at Paris, has just closed by the election of M. CLOQUET to the Membership of the Academy of Sciences, left vacant by the death of M. LALLEMAND. Our readers are probably aware that this is one of the highest distinctions which may be conferred upon a medical man in the French capital, and hence we find that the competitors, in the present election, ranked amongst the most distinguished surgeons of Paris; they were, MESSRS. LEROY D'ÉTIOLLES, MAISONNEUVE, LAUGIER, BAUDENS, GERDY, JULES GUERIN, and JOBERT DE LAMBALLE.

The Academy of Sciences is divided into eleven sections, comprising the whole range of the natural and physical sciences, and the section of Medicine and Surgery is composed of three physicians, two surgeons, and one physiologist, whose names are as follow: MESSRS. MAGENDIE, SERRES, and ANDRAL, for Physic; MESSRS. VELPEAU, and CLOQUET, (the latter succeeds the late M. LALLEMAND,) for Surgery; and M. CLAUDE BERNARD, for physiology. These eminent men mostly belong, besides, to the Academy of Medicine, a learned body quite distinct from the Academy of Sciences.

It is not a little instructive, when such contests as the one above mentioned take place, to observe how, by dint of industry and a clear intellect, men gradually attain professional distinctions amongst our Gallic neighbours. Honorary or material rewards attend every step of those who devote themselves with perseverance to medical pursuits, and whose mental powers are in keeping with their ambition. Competition is, in almost all instances, the mode of election; and the publication of works of merit is sure to be attended with advantages of various kinds to their authors. The aspirant, at the lower end of the scale, begins by obtaining distinctions during his studentship, and rises, by competition, to the rank of physician or surgeon of hospitals, deputy professor at the Faculty, &c. If his published works take a prominent place in medical literature, or his talents are otherwise made conspicuous, he obtains the much-prized Cross of the Legion of Honour, takes eventually his seat at the Academy of Medicine, then at the Academy of Sciences, is promoted to higher ranks in the Legion of Honour, stands equal to the highest of the land, and is often called to take a share in the government of the country in various scientific capacities. Up to a late period, the Professors' chairs at the Faculty were given by competition, but political reasons have been found strong enough to lead to an alteration of the system, giving to the Crown the nomination of professors out of a certain number of candidates presented by the Faculty.

We leave our readers to think what an incentive the sketch

we have just attempted must be to gifted men amongst our excellent neighbours and friends. No individual of actual worth can be crushed and harassed; for even long before a man has given evident proofs of superior mental capabilities, he is allowed by the Faculty to give lectures, in their own building, on subjects most congenial to his tastes and studies. These lectures, which are also unofficially given by physicians or surgeons at their hospitals, give young aspirants to fame excellent opportunities of coming forward to advantage; and, like the lawyers, who, at the beginning of their career, are favoured with some important briefs, the young lecturers can at once impress the professional world with the measure of their talent. Nor is this all, for it is strictly in accordance with professional etiquette in Paris for a physician or surgeon to start a dispensary, where he may, if so disposed, give proofs of his aptitude in the treatment of distinct classes of disease, these establishments entailing but little expense, as none but prescriptions are given.

Thus, either officially or not, talent may carve its way through the throng, and, if genuine, is sure to find its reward. In the official path, the labourer is cheered on by what *we* call bits of ribbon and baubles, but these give him at once, independently of money and connexion, an enviable standing in society, and place him side by side with the military man or the lawyer, long before he has attained the higher distinctions of his profession. The medical man thus comes to form an important element in the social scheme, and does not remain, as in some countries, isolated and unconnected with the state or social machinery, and forced, to a certain extent, to seek that consolation which *£ s. d.* can afford.

WE print elsewhere that portion of the Report of the Committee on the State of the Army before Sebastopol which relates especially to the Medical Department. Much of this has been so completely anticipated by our own comments upon the sanitary history of the army, that it might almost have been transcribed from our leading columns. Upon the whole, the Medical Department will not, we think, complain of the Report. Ample justice has been done to the individual zeal and efficiency of the medical staff, from Dr. ANDREW SMITH downwards, and some amends were made to Dr. MENZIES for the not very courteous treatment he experienced when under examination. The Committee has not been so unjust as to attribute to individual deficiency the terrible shortcomings in the arrangements for the care of the health of the troops. It fairly exonerates the medical staff by showing that the department was powerless for independent action, and effectually fettered by the despotism and insensate interference of other departments and amateur Medical Director-Generals, who neglected their own business in order to carry confusion into the Medical Department.

As a whole, the Report must be admitted to fall short of the conclusions that are fairly established by the evidence. The case is bad enough as an exposure of administrative incapacity, it is true; but those who read the evidence with attention cannot fail to see that the Committee has summed up with an evident desire to deal tenderly with the *régime* under whose blighting influence such terrible disasters have come to pass.

One remark, which we have on a previous occasion made, we cannot forbear, with the report before us, to repeat—namely, that the investigation into the sanitary arrangements of the Army would have been far more complete and accurate

had the inquiry been conducted with the aid of a competent knowledge of medical matters. It is much to be regretted that no member of the medical profession sat upon the Committee.

A Congress will shortly take place in Paris of the leading life-statisticians of Europe. One of the objects will be, to settle a comprehensive and uniform scheme for registering the causes of death throughout Europe. This country has now enjoyed for seventeen years many of the advantages that cannot fail to flow from an efficient system of registration. Other advantages—and those, perhaps, the greatest—are denied to us through the want of the necessary elements of comparison. The Registration Act of England and Wales does not extend to Ireland; and a similar Act is only now, after much not very enlightened opposition from our Northern brethren, coming into operation in Scotland. On the Continent, in different countries, various systems of registration, some very imperfect and untrustworthy, are established. But it is obvious that, even if excellent in themselves, many truths of the highest importance to each nation of the European family to determine, must remain hidden or, at best, cannot rise above the rule of probabilities, until one uniform system of registration shall prevail throughout all, and supply each with the materials for new and enlarged comparisons.

It will be gratifying to our profession, and not less so to all of every class, to know that England will be represented at this important Congress by Dr. FARR.

## Correspondence.

“Audi alteram partem.”

### ARMY RETURNS OF THE CAUSE OF DEATH.

To the Editor of THE LANCET.

SIR,—Admitting to a great extent the truth of your remarks on this subject in your number of May 12th, and the necessity for an improvement on this head, you must allow me to say that I think you have rather over-stated the case, or that you have not been quite correctly informed.

In civil hospitals, as far as I am aware, no periodical returns of the number of individuals sick admitted are required, so that however often in the course of a single case the disease may change, but one entry is made, and in the event of a fatal result, the last phase only is of course the one registered as the cause of death.

In the army, again, the system is different. The surgeons of regiments have to forward monthly, quarterly, and annual “Returns of Sick and Wounded,” in which the number of men admitted into hospital must correspond with returns forwarded by the paymasters and adjutants to the War Office, and to the Horse Guards, relative to the number of men absent from duty, and under hospital stoppages.

Thus, statistically, the number of *men* returned “in hospital” must be correct; but, as stated by you, it does not follow that the number of *diseases* treated will correspond with that of the men, because in some cases the diseases change before the patient is discharged, or dies.

To meet this contingency, an official Memorandum from the Army and Ordnance Medical Department directs “when the disease of a patient while under treatment shall change, the alteration must be shown in next return; at present it is not uncommon to find a man returned as died from chronic catarrh, while the death was actually occasioned by phthisis pulmonalis.”

If this Memorandum were carefully adhered to, (though I admit it is but a clumsy contrivance,) the number of *diseases* treated would also be statistically correct, and in the event of a fatal case, would sufficiently answer the purpose of legislation, were a note always appended, that such and such a case was the same which had been admitted under a different head.

Such is the plan which I have for years adopted. I do not say that it might not be materially improved, but, under the existing system, I must be permitted to qualify the following sentence in your remarks:—“the medical officer has ten cases of catarrh to account for; let them die of what they may,—and catarrh is not a very probable cause,—yet to catarrh must their death be laid!” I have shown above that there is no such necessity for medical officers to stultify themselves.

It is the “Monthly Return of the Sick” which originates most of the confusion, and which is unquestionably the chief cause of the non-agreement (when such exists) between the number of men admitted, and the number of diseases treated. Thus, on April 18th, I admit private Thomas Jones for *catarrhus acutus*. In my return forwarded to the Army Medical Board on the last day of April, he was returned as still in hospital for that disease; but on the 2nd or 3rd of May, my patient while convalescent is attacked with acute *diorrhœa*, which proves fatal in ten days. Must the surgeon necessarily on the 31st of May report the death as having resulted from catarrh? Certainly not. What, then, is his duty; for, remember, that he has got to account for the case of catarrh “remaining” from last month? Why, to state in his Medical Register and monthly returns, that on the 2nd or 3rd of the second month, symptoms of a wholly different disease having developed themselves, the patient is “discharged under this head (catarrh), to be re-admitted under diarrhœa.”

In this way the real cause of death cannot be misrepresented. It will be the statistical state of the number of sick, out of a certain strength, which is found to be fallacious, unless thoroughly explained.

Were annual returns only required from army medical officers, the original admissions as to men might remain unaltered, and the statistics of numbers be thus correct, while the numbers as to diseases could then scarcely be confounded, since “ample time and verge enough” would thus be given for a correct return of the primary and secondary causes (if both existed) of death in any case.

I have written more at length than I intended, and perhaps have failed in making myself sufficiently understood; but I was unwilling to allow your article (if I read it aright) to attribute more blame to a defective system than really is attached to it. Would that it, and many other abuses which I could enumerate, were swept away from the Medical Department of the Army! It were well if some of the movers for administrative reform would make themselves thoroughly acquainted with the wants, position, and wishes of so important a department of the public service, and act accordingly.

I have the honour to be, Sir, your obedient servant,

A REGIMENTAL SURGEON OF NEARLY SEVENTEEN  
Manchester, May, 1855. YEARS’ STANDING.

### THE TREATMENT OF OTORRHŒA.

To the Editor of THE LANCET.

SIR,—Although entirely opposed to my own views and experience, I have read an article “On the Treatment of Otorrhœa,” at page 583 of THE LANCET of the 9th inst, *with much satisfaction*, because, by placing his opinions on record, the writer at once relieves me from the very disagreeable apprehension of finding a claim of priority set up, or my mode of treatment appropriated, with a modification, of course, to save appearances, but without the slightest acknowledgment, as in the case of the Artificial Tympanum.

Objections of a similar nature to those urged by the present writer have been offered to the greater number of useful improvements in aural medicine, for example:—loss of voice, wasting of the mammæ in women, and of the testicles in man, with a variety of dreadful results, were said to follow removal of morbid growths of the tonsils; but these objections to this valuable operation were uttered in vain. Tonsil-cutting has not only maintained its hold on the profession, but has grown rapidly in public estimation.

The author of the article in question now attempts to raise an alarm by writing up “dangerous” against the method of inserting dry cotton into the ear to cure a discharge.

It is but justice to myself to state, that I am not in the habit of bringing before the profession new modes of practice which have not been well tested and proved by the result of experience. For three years, at least, I have treated cases of otorrhœa systematically by the introduction of dry cotton, and my statements of its curative value are fortified by the successful termination of more than a hundred cases to which I can refer.

It is Mr. Toynbee’s peculiarity to divide and subdivide a