

sixteen rupees, be sent to Messrs. Grindlay Gunn, of Bombay, and that the sum collected by them be sent to the secretary appointed at home; and I would beg to call for an early supply through the same source of the method proposed of carrying on any agitation affecting the department or individuals. It seems to be the universal opinion that unless some such steps be taken our interests will grow less and less, and we shall be still further trampled upon. It seems sad, furthermore, that the gazettement of medical officers to the Reserve is increasing, and a sad blow is being delivered at us by our brother medical officers; this is bitterly felt out in India.

PROMOTION.

FIAT JUSTITIA writes: In two months' time the officers who, in August, 1876, competed for commissions in the Army, Navy, and Indian Medical Services, will all have completed their twelve years' service, when the regulations prior to the change made by the Secretary of State's instructions in the warrant of 1880, provides for their promotion to the rank of surgeon-major. From information derived from Parliamentary reports I learn that it is the intention of the present Government to promote all the officers of the Naval and Indian Medical Services over the heads of their seniors in the Army Medical Staff. This is felt to be a grave injustice and unmerited; and as the Treasury refuse to incur further expense, I would suggest that all these officers be promoted at the same time, but that a warrant or other authority be issued providing that the pay and allowances be not according to rank, but be governed entirely by length of service. This would get over the present slight, and provide for those cases of half-pay owing to sickness or wounds incurred in and by the service, without any cost to the country.

STATISTICS OF THE ARMY MEDICAL DEPARTMENT.

SURGEON-MAJOR J. P. H. BOILEAU writes: In reply to "Inquirer" the tables quoted do not contain the data necessary for the calculation, and the application of the figures made by "Inquirer" is not admissible; hence the conclusion that a medical officer, now of twelve years' service, may be in a position to expect his promotion in less than four years is erroneous. An officer now in his twelfth year of service may expect his turn for promotion to arrive in less than ten years, or, if the changes amongst the senior officers continue to be as they have been since 1879, in eight years, or less.

SURGEON asks if there is any work published on the duties of volunteer medical officers.

. There is no book published on the duties of volunteer medical officers. Information is given in the Volunteer Regulations, 1887, the Army Medical Regulations, and the Manual of the Medical Staff Corps.

MEDICO-LEGAL AND MEDICO-ETHICAL.

CORONERS AND MEDICAL WITNESSES.

MR. F. SHAPLEY, M.R.C.S. (Sideup, S.E.), after detailing circumstances in connection with an inquest on a man who fell off the steps of a brake, and was run over by the wheels of another brake closely following the one from which the deceased fell, he being so injured "that there was not a sound bone left in the poor man's face," asks the following questions:

1. Having seen the deceased at the time of his death, ought I not to have been called as a medical witness?
2. Is the coroner not to blame for refusing to call me when requested by the jury?
3. Was the coroner justified in saying that, if he did call me, my expenses would not be allowed by the magistrates?

. In answer to the first and second questions, it is undoubtedly the duty of the coroner, through his officer, to summon all such witnesses as can give reliable information concerning the death of a deceased person upon whom an inquest is held; and if at the first inquiry the cause of death is not satisfactorily explained to the coroner and jury, an adjournment can take place, and either the coroner or the jury can request the attendance of any further witnesses they may require. With regard to medical witnesses, it is within the power of the jury to request the coroner to summon any or "such medical witness as they may name to him in writing," and the coroner is bound to summon such witness to attend at the adjournments. With regard to the third question, the coroner was evidently mistaken if he said "the magistrates would not allow the expenses of a medical witness." The fees payable to a medical witness are fixed by Act of Parliament, and do not come under the schedule of fees allowable by the magistrates, and, unless the inquest is illegally or improperly held, the county treasurer is bound to recoup the coroner for the advance of any fees paid by him to the witnesses at an inquest.

FIXED AND INCREASED FEES FOR MEDICAL WITNESSES.

MR. J. DYSART McCAW, F.R.C.S. (Alba House, Portglenone, Belfast) writes: The subject of fees to medical witnesses is one of almost equal importance and interest to the expert, the consultant, and the general practitioner; and has, I have noticed recently, been occupying the attention of some of the most influential Branches of our Association.

The niggardly remuneration given by the Crown authorities for medical evidence and advice is admittedly a medical grievance in every part of the United Kingdom, and demands prompt redress. The fee for medical evidence in criminal, as well as in civil, cases—at Petty Sessions, at Quarter Sessions, at Assizes, and at the High Courts of Justice—ought not only to be increased, but should be fixed at a certain definite sum, and not left, as at present, to the caprice or temper of the president of the different tribunals before which we have to appear. Here, in Ireland, the fee for medical evidence at Petty Sessions courts is generally a guinea, two guineas a day, with travelling expenses, being allowed at Quarter Sessions. Strange to say, however, the medical fee for attending assize courts varies under different judges.

At the last Summer Assizes (1887), held in Londonderry, the presiding judge (the Right Honourable Justice Murphy) allowed me, as a medical witness, three guineas a day, exclusive of hotel and travelling expenses; whilst at the Ulster Winter Assizes at Belfast last December (1887), the Right Honourable Justice Harrison allowed me only two guineas a day, with, of course, the usual allowance for hotel and travelling expenses. In the beginning of this year I was subpoenaed to one of the High Courts of Justice in Dublin to give evidence in an important civil action; but, owing to the unsatisfactory state of the law, I was compelled, very unwillingly, to accept a fee ridiculously small compared with the importance of the testimony I had to give, and the length of the journey I was obliged to travel.

The remedy is, I think, in our own hands. We must agitate, wisely and constitutionally, for increased and fixed fees for medical evidence; and we must agitate in this direction immediately and persistently, until our just claims are recognised. The Irish Medical Association is deserving of our warmest thanks for its indefatigable efforts to obtain an increased scale of fees and allowances to medical witnesses, which I regret to say for so far have been unsuccessful. The British Medical Association and the Irish Medical Association might, with mutual advantage, I think, co-operate in this matter, and press the subject on the notice of the authorities; and I believe if prompt and determined action be thus taken, a more reasonable and higher scale of remuneration would soon be fixed for medical witnesses.

"FETCHING THE DOCTOR."

L. M. S. writes: Recently the police were ejecting a man and wife from their house. On going upstairs they found the man hanging to a beam in the bedroom. After cutting him down, the wife said, "What about a doctor?" The police said, "Send for one by all means." Whereupon the wife sent her child for me, and I attended. Later in the day the police sent the same child for me, and I attended again. In due course I sent in my account to the Superintendent of Police, who says he cannot pay me, as he considers the police never sent for me, and, if they did, he is unable to debit the county with my account, as my patient died, and his name never appeared on any of their charge sheets, so that I must look to the wife for payment. Now, have I any power to enforce the payment from the police? The wife, I know, will not pay, as she is a notoriously bad character, and has left the neighbourhood owing me money.

. The policeman who said "send for a doctor" might be personally liable to pay his reasonable fee, but the courts cannot be said to have authorised the employment of a medical man; and we do not see how payment can be claimed from them.

"PRACTISCHER ARZT."

M. B., M.A.—In cases of alleged practice by persons not possessing a qualification, it is advisable, in the first place, to state the circumstances to Mr. Upton, Clerk to the Apothecaries' Society, Blackfriars, E.C.

M. B., M.A.—It is a matter of great difficulty to obtain a conviction for taking money under false pretences in cases such as that mentioned. The proper course, provided the practice in question is not of a surgical character, would be an action for the recovery of the penalty inflicted by the Apothecaries' Act. For this purpose, the Clerk of the Apothecaries' Society, Blackfriars, should be communicated with.

DUNGARVEN.—A person registered under the Dentists' Act is entitled to use the name or title of "Surgeon Dentist," although he is so registered by virtue only of his having "at the passing of the Act been *bona fide* engaged in the practice of dental surgery."

THE PATIENT'S RIGHT OF CHOICE.

A. C. C. writes: During the course of a tedious labour, A., being disabled from temporary indisposition (severe sick-headache), introduces a friend and colleague, B., who completes the case, and receives half the fee. A. giving the after attendance. On the occasion of the patient's next confinement, without any communication with A., who continues the family medical attendant, and on friendly terms with B., B. is engaged and attends. Is he justified in so doing, or does he thereby commit any breach of professional etiquette?

. B., in courtesy, ought to have informed A. that he had been asked to attend in the second confinement. But the right of a patient to select a medical man cannot be disputed.

MEDICO-PARLIAMENTARY.

HOUSE OF LORDS.—Friday, July 20th.

The Pollution of the Clyde.—The Duke of ARGYLL called attention to the reports to the Secretary for Scotland on the pollution of the waters of Loch Gail and Loch Long.—The Marquis of LOTHIAN agreed that it was a matter of the greatest importance that the river Clyde should be purified. He believed that in 1876 the city of Glasgow had, at great expense, had the matter examined into by Sir John Hawkshaw, who had reported on the subject, but the scheme had met with such strong opposition that it was withdrawn. Last year he had directed Mr. Fletcher and Dr. Littlejohn to inquire into the matter, and their report entirely justified the complaints made. He would do all in his power to stop the nuisance.

HOUSE OF COMMONS.—Thursday, July 19th.

Medical Officers of Health and the Local Government Bill.—The House, on going into Committee on this Bill, resumed the con-

sideration of the clause moved at the previous sitting by Sir LYON PLAYFAIR (for Sir Walter Foster), which we published in our issue of last week.—Mr. RITCHIE said that the latter part of the amendment would entail the necessity of all medical officers of health for any district containing more than 50,000 inhabitants having a diploma in sanitary science, public health, or State medicine, under the 21st section of the Medical Act, 1886. A certain portion of the examination contemplated under that clause was of an elementary character, and would almost necessitate a certain number of medical men recommencing their professional education and going back again to school. It was well known how rusty many very capable men became in the course of practice in regard to certain elementary subjects of examination. If the House were to pass a Bill saying that no member of Parliament should be a member of any Government unless he should pass in the sixth standard, he suspected that a law of that kind might be very apt to spread consternation in the ranks of those who held office in the past or who might hold office in the future. He would suggest that if the Committee saw fit practically to accept that amendment, it should be so amended that medical officers who had served for a certain time should be qualified for those appointments without having to undergo the examination indicated by the right hon. gentleman opposite. He would suggest that a proviso should be inserted at the end of the clause, to the effect that a medical officer who had served three years in a district with a population of 20,000 prior to the clause coming into force should not be required to pass an examination for a diploma.—Mr. MALLOCK asked whether medical officers of small districts would be able to retain appointments without being examined.—Mr. RITCHIE replied that they would if they had been medical officers for districts of 20,000 inhabitants for three years prior to the clause coming into force.—Mr. STEPHENS thought that the amendment would disastrously restrict the free choice of the local authority. The object of the Bill was not to place the whole country under an agency of experts. The system would not work under which a medical man, who had lived a long time in a district and knew its needs thoroughly, was told to go back to school to pass an examination, or to be superseded by some stripping of paper knowledge and of paper qualification.—Sir GUYER HUNTER submitted that the freedom of choice would not be restricted when it became known that in appointing a medical officer a diploma would be a *sine qua non*.—Mr. RITCHIE said that if a medical officer had served in a district with 20,000 inhabitants for three years prior to the clause coming into force he would not be required to pass an examination to qualify him.—Sir G. HUNTER observed that the diploma could be easily obtained, and the right hon. gentleman should, as far as possible, see that all officers who exercised the functions of officers of health were possessed of diplomas.—Dr. FARQUHARSON congratulated the President of the Local Government Board upon the line he had taken. The proposal would promote a great national scientific sanitary service throughout the country. It would improve the *status* of medical officers, and he hoped that these gentlemen would be well paid.—Dr. CLARK contended that the ordinary qualifications of a medical man did not fit him to discharge the duties of a medical officer of health; and he was sorry the Government were going to continue in office inefficient men who would do their work perhaps as well as they would be paid for it.—Sir L. PLAYFAIR said that the public health diplomas had existed only for the last few years, and some of the best of our officers of health, who were in charge of large districts and had reduced the mortality from zymotic diseases by one-half, had not the modern special qualification. It was only fair to recognise the value of the experience that had been thus gained and to except from the clause officers of health who had done such useful sanitary work.—Mr. RITCHIE said the proposed addition to the clause would do away with the safeguards it was desired to set up. All that the proviso did was to recognise the fact that men might be qualified by other means than the passing of a particular examination. A medical man who had been for years engaged in sanitary work might be as well qualified by his experience as a younger man who had passed a special examination. This exemption was not inconsistent with requiring that after a certain date those who were not exempted should be required to have the special qualification.—After some brief conversation, the proviso suggested by Mr. RITCHIE was accepted in the following form:—"Or has been during the three preceding years medical officer of a district or combination of districts with a population according to the last census of not less than 20,000."—The clause as amended was then added to the Bill.

Thursday, July 19th.

Death in Colney Hatch Asylum.—Mr. MATTHEWS, in reply to Mr. W. REDMOND, said the Committee of Visitors had made a searching inquiry into the death of the man Stickleby at Colney Hatch Asylum, which had been reviewed by the Commissioners. The result was that Stickleby's injuries were believed to have occurred after he had been received in the asylum, but there was nothing to suggest any suspicion of violence or rough usage on the part of any officer or servant. The Commissioners had censured the medical superintendent severely for laxity in his examination of the patient, and for omissions in the notice of death to the coroner. They had also blamed the assistant medical officer, and had recommended the dismissal of two attendants in the bath-room who left the patient before he was completely dressed. The Commissioners were of opinion that further inquiry would not lead to any good result. Every effort had been made to ascertain how the injuries were sustained, but the Commissioners failed to get any complete account.—In reply to Mr. CHILDERS, Mr. MATTHEWS said he was not aware whether the Commissioners thought the medical officer deserved dismissal as well as censure. His censure was for his careless examination of the patient, but whether that amounted to anything calling for dismissal he was not aware.—Mr. CHILDERS remarked that he did not suggest the dismissal, but the transfer of the medical officer.—Mr. MATTHEWS promised to consider the question, and also whether the report of the Commissioners should be laid upon the table of the House.

Friday, July 20th.

Coroners' Bill.—The report of amendments to the Coroners' Bill was received, and the Bill ordered for third reading.

The Execution at Oxford.—Mr. MATTHEWS, in reply to Mr. KENYON, said his attention had been called to the accounts published of the recent execution at Oxford, which had been fully inquired into. Whatever method were adopted of inflicting capital punishment by hanging there was a liability to accidents. Upon the whole, the accidents that might occur in the system followed at Oxford were less objectionable and revolting than those to which a system involving a shorter drop was liable. He should be unable to suggest a measure which would make these deplorable accidents impossible. He was glad to state that they were not frequent.

Monday, July 23rd.

Sanitary Regulations of Buildings.—Leave was granted to Dr. FARQUHARSON to bring in a Bill for the better sanitation of dwelling-houses, schools, colleges, hospitals, factories, workshops, hotels, lodging-houses, and other buildings within the United Kingdom. The Bill was subsequently brought up and read a first time.

The Execution of Criminals.—Dr. BROOKFIELD, in calling attention to the lamentable blunders occurring from time to time in the execution of criminals, and to the recent execution at Oxford, asked the Secretary for the Home Department whether his attention had been called to Dr. Marshall's contrivance for producing instantaneous death with a drop only of three feet, and whether he could state how soon the report of the Committee on Capital Punishment would be printed and issued.—Mr. MATTHEWS replied that only two such accidents had occurred since 1878. Dr. Marshall's suggestion was known to the authorities, but it was not thought that its adoption would lead to the expected result.—In reply to a further question by Dr. FARQUHARSON, he said the question of substituting electricity for the present mode of execution was a matter well deserving consideration. The Departmental Committee appointed to inquire into the matter had gone into the subject, but he did not think they had extended the scope of their inquiries so far as to consider the merits of the electrical methods of executing criminals. There would be no objection to lay the report of this Committee upon the table if desired.

The Pharmacy Acts Amendment Bill.—On the motion to defer the second reading of this Bill until Monday next, Dr. TANNER asked when the Bill was to be proceeded with.—Dr. FARQUHARSON said that Sir H. Roscoe, who was in charge of the Bill, would take any opportunity he could find to press it forward.—The motion was agreed to.

Colour Blindness in Seamen.—Sir G. BADEN-POWELL asked the President of the Board of Trade whether he had received a memorandum from Dr. K. Grossmann, of Liverpool, on the subject of colour blindness in seamen; whether that memorandum advocated the extension to seamen of the mercantile marine compulsory examination for colour blindness at present in force in regard to

officers; and whether he would consider the expediency of affording facilities to seamen and railway servants to obtain certificates that they were not colour blind.—Sir MICHAEL HICKS-BEACH in reply, said that arrangements were already in existence under which certain persons in the mercantile marine might be examined for colour blindness. The railway companies had already taken steps to examine persons in their employment as to colour blindness.

OBITUARY.

GEORGE THOMPSON GREAM, M.D. King's Col. Aberdeen,
F.R.C.P. Lond.,

Physician Accoucheur to the Princess of Wales.

DR. GREAM, formerly one of the best known and most popular fashionable accoucheurs in the West End of London, died, aged 76, on July 20th at his residence in Brighton, after having retired from practice for many years owing to ill health. For the greater part of the time during which he lived in London his residence was in Upper Brook Street. He possessed those social and professional qualities which specially fitted him for the line of practice to which he devoted himself. Dr. Gream understood thoroughly how to gain the confidence of his patients; he spared no pains and neglected no precautions in the simplest cases of labour entrusted to his care, and was competent to face any of the sudden, perilous emergencies of childbed. At the same time, he ever thought it his duty to call in the assistance of a scientific obstetrician in cases where he believed that such a step was necessary. Dr. Gream openly held the opinion that the practitioner should perfect himself in practice rather than plunge into the subtleties of science; therefore he troubled little about the rarer complications of labour, leaving such matters to other hands. He also had a wholesome distrust of new practices as well as new theories, and would speak wisely against indiscriminate advocacy of ergot, of the forceps, or of the perforator. Once he was led into error, as time proved, by his fear of innovations, yet not only did he err in good company, but his action was quite justifiable at the time, granting that no man can be a prophet. In 1848 he brought out a work entitled *Remarks on the Employment of Anæsthetic Agents in Midwifery*, and he also wrote on the *Misapplication of Anæsthesia in Childbirth*. In both publications he dwelt on the dangers of chloroform, and spoke of the accelerated action of the fœtal heart endangering the child, of the terrible convulsions which followed anæsthesia, and of the symptoms of puerperal mania observed as the effects of chloroform were passing off. He was answered by a literary broadside from Sir James Simpson, but remained unconvinced for several years later. When we consider his objections, raised at a time when experience in anæsthetics was so small, we are bound to admit that he was quite justified in dreading the routine use of chloroform or ether in private practice. There were then no accumulation of evidence and no statistics to prove that the acceleration of the fœtal heart was not invariable nor necessarily dangerous when it did occur, and that contorted features, incoherent speech, and spasmodic movements of the limbs occurred in men as well as in women in labour who were recovering from chloroform, and were as a rule of little import. Had Dr. Gream been an enthusiast, and had Dr. Francis Ramsbotham refrained from deprecating anæsthesia in his celebrated *Principles and Practice of Obstetric Medicine and Surgery*, it is highly probable that many lives would have been lost and anæsthetics consequently discredited for many years.

Dr. Gream was consulting physician to Queen Charlotte's Hospital, and took great interest in the administration of that institution. Owing to his line of practice and his professional principles, as above set forth, he did little work for societies, yet on account of his reputation as an accoucheur he was elected on the Council of the Obstetrical Society of London in 1862, and was Vice-President from 1864 to 1866.

Dr. Gream was surgeon-accoucheur to the Princess of Wales, and, what is of special interest at the present moment, he held a similar appointment in a less honorary sense to the Empress-Queen Frederick, whom he attended in all her later confinements. He was childless, though twice married. His second wife, to whom he was united in 1873, was Lady Gooch, widow of Sir Edward Sherlock Gooch, seventh baronet, and daughter of R. A. Hankey Hirst, Esq., of Basingstoke.

Dr. Gream was Knight of the Order of the Crown of Prussia, justice of the peace for Hants, and deputy-lieutenant of Middlesex. He was buried on Thursday at Aldenham, Herts.

PROFESSOR SALVATORE TOMMASI, M.D., Naples.

SENATOR SALVATORE TOMMASI was born in 1813 at Roccaraso in the Abruzzi, and was educated at the University of Naples, where he took his Doctor's degree. In 1842 he founded a medical journal which he called *Il Sarcone*, after the celebrated Neapolitan physician of that name; in 1846 he obtained the Chair of Pathology in the University of Naples, and in 1848 he became a Deputy in the Neapolitan Parliament. He was an ardent Liberal, but his career as a politician ended in exile and poverty, and for some years he was engaged in general practice in Turin. In 1860 he was appointed Professor of Clinical Medicine in the University of Pavia, a post which he held with much distinction for some years. He afterwards exchanged his chair at Pavia for the corresponding one in his own University of Naples, which he continued to hold till his death.

Professor Tommasi contributed largely to professional literature, and was recognised throughout Italy as one of the foremost clinical teachers of his day. He was also honoured by his countrymen as a sincere and thoroughly disinterested patriot.

HOSPITAL AND DISPENSARY MANAGEMENT.

EXTENSION OF ABERDEEN LUNATIC ASYLUM.

THE Aberdeen Infirmary and Lunatic Asylum Corporation have agreed to purchase the mansion-house of Glack, with 283 acres of land in the parish of Daviot, at a cost of £11,000, to be used as a branch asylum for lunatic patients.

AVERAGE RESIDENCE OF PATIENTS IN HOSPITALS.

OUR Glasgow correspondent writes: Some correspondence in the public press has recently taken place on the subject of pressure in our infirmaries, and various suggestions for their relief have been made, such as the establishment of pay hospitals and of convalescent homes. A writer in the *Glasgow Herald* has further called attention to the prolonged residence of patients in the Glasgow infirmaries, and thinks that the beds in these infirmaries are not utilised to their proper extent, as he finds that a much shorter residence is sufficient in similar institutions in other parts of the country. The following table shows the average number of days each patient stays in the Glasgow Infirmary and in those of other places:

	Days.		Days.
Glasgow, Western...	37.2	Hull	21.0
Glasgow, Royal	36.17	Wolverhampton	21.0
Edinburgh, Royal... ..	26.1	Leeds	20.72
Dundee	27.0	Manchester, Royal	20.5
The "London," London... ..	28.05	Preston	19.0
Reduced from 36 in 1876.		Blackburn	19.0
Yarmouth	27.7	Reduced from 38.5 in 1865.	
Birmingham, General	25.5		

Glasgow's pre-eminence in this list is certainly marked, but it is a mistake to suppose that the managers of our infirmaries are either ignorant of, or careless, in regard to it. We believe this disparity capable of complete explanation, and we doubt not, seeing the question has been so publicly brought forward, that it will receive as public and satisfactory an answer.

UNIVERSITY INTELLIGENCE.

OXFORD.

A LONG VACATION TERM.—Balliol College is setting a good example this vacation by encouraging undergraduates reading for Honour Schools to stay up for a part of the vacation. The attempt appears very successful, as about twenty men have availed themselves of the opportunity. Of these, curiously enough, the majority are men who are reading for Classical Honour Schools, whilst science men are not represented amongst them. It is much to be hoped that the precedent of a long vacation term will next year be more largely followed, and that the science students will muster in force. During the vacation