

Association has recently been entirely reorganised, and has entered, I trust, on a fresh career of usefulness and energy; so I would appeal to my brethren in the ranks of the dispensary doctors to give it a trial, and see if by combination we cannot compel the attention of Government and the country to a too long neglected class.—I am, etc.,
Bagenalstown. J. COOPER STAWELL, M.B.

SIR,—A letter appears in the BRITISH MEDICAL JOURNAL of August 22nd signed "Not a Dispensary Doctor," in reference to the Irish country dispensary doctor and his duty, or rather neglect of duty. In the name of that overworked, underpaid, and much abused body of men, I beg to protest, and to protest most emphatically. The writer says he will give one instance out of many that have come under his own notice, and goes on to give a most graphic description of the dispensary doctor when called out at night to attend a dispensary midwifery case, pleading absence through his wife, he at the same time being comfortably in bed. That such a case may have occurred—and the story is wonderfully complete as told by "Not a Dispensary Doctor"—I do not deny, but that it is of common occurrence I beg to question. In every body of men some unprincipled persons are to be found, but that this case should be given as a fair example of the manner in which dispensary doctors treat their dispensary patients is simply monstrous. Why, may I ask "Not a Dispensary Doctor," was not the erring one brought before the Local Government Board, where I feel satisfied punishment swift and sure would have been meted out to him? I have known a dispensary doctor receive severe censure from that august body for what seemed to most people a very trivial act of indiscretion.

We have doubtless many grievances to complain of, for which I believe the only remedy is the popular Irish one—agitation. That our position will be improved by men going out of their way to show that we are grossly unfitted for the trust committed to us no one will be prepared to admit.—I am, etc.,
A COUNTRY DISPENSARY DOCTOR (No. 2).

SIR,—As an Irish dispensary doctor, I hope the discussion which has been started in the Correspondence column of the BRITISH MEDICAL JOURNAL on this subject will have some tangible result, leading or helping to lead to an amelioration of the condition of this hard-worked and half-paid body of public servants. If it have no other result than the gain of the advocacy—the powerful advocacy—of the BRITISH MEDICAL JOURNAL, that will be at least a big step in the right direction. For my own part, I cannot understand what cause—whether indifference, half-heartedness, or actual despair—prevented the body of Irish dispensary doctors from long ago forming themselves into a federation to agitate for the redress of their wrongs. Surely the opportunity that this discussion in your columns affords ought not to be allowed to pass without some practical steps being taken towards the formation of such an association or federation. Your correspondents, "Poor-law Guardian" and "Not a Dispensary Doctor," have already taken advantage of it to air their grievances or their spleen. "Poor-law Guardian" has already been effectively answered by Dr. Patterson; it is necessity which forces Irish dispensary medical men to figure occasionally in the rôle of land agent, farmer, or amateur horsedealer, in order that they may supplement their very inadequate income as doctors. For here in Ireland, and quite the reverse of what obtains in England, private practice is always, or nearly always, subservient to our Poor-law public appointments, badly paid as these latter are; and this is more especially the case in country districts, which, as a rule, afford very limited scope for private practice, even when there is practically no opposition, as is very often the case, to the dispensary doctor. As one, I have to make my most emphatic protest against the letter, or rather the tale which adorns it, of "Not a Dispensary Doctor." I have some experience, and not a very limited one either, of my *confères*, and it is, on the whole, somewhat happier than that of "Not a Dispensary Doctor's." I do not say that his illustration is untrue, after allowing for his, perhaps, unconscious exaggerations; such as the woman being "two nights and a day bad in labour," and her friends not seeing the force of sending for a doctor until

2 A.M. on the second night (or was it the third night?) of her illness; but I do hope, for the sake of the noble profession of which I am a member, that the case he depicts is very exceptional. As far as my knowledge of dispensary medical officers goes, they are not wont to shirk their duty, but, on the contrary, they very often exceed it, in cases similar to that which "Not a Dispensary Doctor" has cited as an example against them. For, not infrequently, the ticket, or "scarlet runner," which is supposed to be presented to the doctor before he is bound to attend the case, is not forthcoming at the time on account of the difficulty of procuring it in the middle of the night; but the doctor, never heeding, goes forth and does his duty, to humanity at least, which often entails a journey of a dozen or fifteen Irish miles in questionable weather, in an open trap, over roads not altogether innocent of tuberosities, and the spending of at least an hour, and sometimes many hours, in an Irish cabin in whose construction ventilation had not been a primary consideration.—I am, etc.,
Fethard, co. Wexford. W. J. SHEE.

METROPOLITAN DIPLOMATES AND THE UNIVERSITY QUESTION.

SIR,—Mr. Gardner, in his letter published in The BRITISH MEDICAL JOURNAL of August 15th, shows the usual want of appreciation of the difference between a diplomate in medicine and a university graduate, and argues the supposed grievance of his class from a standpoint which has no chance of recognition in influential circles. A university degree should be taken as evidence not of greater accumulation of facts in the mind of its possessor, nor necessarily of a better practical training in the art of medicine, but as evidence of a course which should have included a standard of general and scientific education and of social culture of which naturally a diploma affords no guarantee. Very likely a metropolitan diplomate needs for his final examinations a larger store of medical facts and a more complete technical training than the graduates of certain universities, but this is not the point at all. A doctor's usefulness depends far more upon his mental training and power of thought, than upon anything which the ordinary medical examinations can be a test of.

Unfortunately, it is only too notorious that the standard of medical knowledge and practical training exacted by some universities is lamentably deficient; but this is a defect of which some of the medical colleges are also guilty. Would that the General Medical Council would expend their energies on securing a uniform and adequate standard of examination based upon a broader and more liberal education, especially in arts, rather than busy themselves about a fifth year, instruction in fevers, and other un-called-for proposals.

No doubt Mr. Gardner will rejoice that the general and scientific training of some universities is nothing to boast of—and with truth. Alas! too, if the Albert University had been the outcome of a desire for a more perfect university training than is afforded by the London University, rather than regard for their commercial interests on the part of University and King's Colleges and the medical schools, and a clamour for easy degrees, not a better training, it might have commanded more undivided sympathy.

As to the commercial value of an M.D. degree, it is very small; a diplomate who happens to have had the training or the accomplishments which a university career offers will do well in general practice without the degree. In every district some of the most successful practitioners have no degrees. In my earlier days I was accustomed to a class of medical men commanding the very best country practices who consistently maintain the title of "Mr." and never fail to correct anyone who calls them "Dr." And I am sure of this, that the assumption on the part of diplomates, and on their behalf by others, of a title which anyone can withhold does not fail in the long run to tell to their disadvantage.—I am, etc.,
M.D. LOND.

SIR,—I wish to endorse most thoroughly the remarks made by your two correspondents in the BRITISH MEDICAL JOURNAL of August 22nd, concerning the injustice that threatens men already holding the M.R.C.S., L.R.C.P.

There is no doubt that after the Albert University is formed all students will take the M.D., so in a few years the

present holders of the double qualification of the Royal Colleges will be stranded amongst a mass of M.D.'s, and will be proportionately looked down upon. It will be cruel unfairness if these practitioners are not admitted into the new university, or failing that, given the right to call themselves doctor, and so do away with the gross absurdity of a qualified physician being called Mr. So-and-so.

I also beg you to use your powerful influence in preventing this great injustice.—I am, etc.,
St. Leonards.

R. S. THOMAS.

THE NEW UNIVERSITY IN LONDON.

SIR,—One would suppose, from the greater part of what is written on the above subject, that the whole scheme was simply intended for the purpose of facilitating the attainment by all and everyone of the M.D. decoration. Unless the new university is started with higher aspirations than this, it will assuredly be a failure, even if a colossal one. That London ought to have a teaching university it would be difficult to gainsay, unless on the ground that such university would injure the other universities which are at present doing good work. But surely the important consideration ought to be how it may best be made a thoroughly efficient instrument for giving a liberal and thorough university training in such a way as to enable all suitable candidates to take advantage of it. The new university ought to have its professors who could devote their whole energies to the particular subject which they teach. In these days each of such subjects as anatomy, physiology, chemistry, etc., affords ample scope for the energies of an individual wholly devoted to it, and the teaching of those who take such studies up merely as secondary to their professional work will seldom be adequate to modern requirements.

The new university ought to have teachers wholly devoted to their particular subjects, and well equipped with the best laboratories and instruments required for teaching the subjects, and encouraging original research. If the teaching is thus made of a superior order, the examinations can be maintained at a high standard without hardship. It is the difficulty of obtaining a teaching suitable to prepare them for examination which presses hardly on students. Like the Israelites of old, they have the full sum of bricks demanded from them, but they are given no straw.

As regards medical degrees in the new university, it is of the utmost importance that such degrees shall indicate the possession of a fair, or rather high amount of general knowledge. I believe that it is because a larger number of M.D.'s have received a good general education that the public have learned to esteem that qualification a good one. To give the M.D. degree to illiterate men, however highly proficient in technical matters, will soon take away any special value which that degree may now possess, and attention will be directed to the possession, or otherwise, of a degree in Arts.

In conclusion I would say that, before sneering at Irish and Scotch degrees in medicine and surgery, it would be well to have at least one English university which gives a better training in these subjects than can be obtained in Ireland or Scotland. I myself studied out of England because I believed that I could thus obtain a better training than in England, and I have not altered that opinion. Let us trust that the new university will make such an opinion no longer tenable.—I am, etc.,

HIGHGATE, N.

HUGH WOODS.

VACCINATION IN WHOOPING-COUGH.

SIR,—In the SUPPLEMENT to the BRITISH MEDICAL JOURNAL of August 22nd, paragraph 210, I see a case recorded by Dr. Emile Müller in the *Gazette Médicale de Strasbourg*, July 1st, 1891, of the beneficial effects of vaccination in a case of whooping-cough.

Allow me to say that some twelve years ago I read in an American medical paper, the name of which I do not remember, records of the very beneficial effects of this practice, and ever since I have been in the habit, whenever I had a chance—and they have been numerous—of following this out. Often infants are brought to me to have the vaccination postponed because they are suffering from pertussis; in all cases I refuse, and assure the parents or persons in charge that, so far

from vaccination injuring the young patient, it is the very best treatment for the disease. I find that it almost invariably cures the whooping-cough in about ten or twelve days, leaving a slight catarrhal cough, which is easily got rid of. I do not remember a single case where it has failed, no matter how severe the attack. Revaccination in cases of pertussis does not, however, seem of any value in mitigating the disease; I have tried it in many cases, but never found it of any use.

I am one of the medical officers of the South City Dispensaries here, and so a public vaccinator, and have very many opportunities of testing this matter, and I can conscientiously say that I have never seen the slightest untoward result following even in the worst cases of whooping cough.—I am, etc.

THOMAS PURCELL, M.R.C.P.I., L.R.C.S.I.,

Dublin. Medical Officer No. 1 South City Dispensary.

MONSTERS AND TERATOLOGY.

SIR,—I can heartily agree with the statements contained in your paragraph on "Monsters and Teratology" in the BRITISH MEDICAL JOURNAL of August 22nd. I have for some time been engaged in the preparation of a book on the diseases of the fetus, and have met with considerable difficulty in the collection of records of cases of monstrosity from the medical literature of past years, and even of the present time. A British atlas of teratology would certainly be a boon to all, and would, in my opinion, be best accomplished by means of a small committee containing anatomists, obstetricians, and surgeons. The collaborators might share the financial as well as the literary responsibility of the work.

Many of the cases of monstrosity reported in our medical journals and in the transactions of our obstetrical societies are sadly deficient in details; some contain a good account of the mother's labour, with the additional remark that the "monster shown" was the result, and others contain a full description of the dissection of the monster, and a reference to its place in a teratological classification, but neglect to inform us of the nature of the labour, the characters of the placenta, the history of the pregnancy, etc. Much material of a most valuable kind is thus lost annually to the scientific teratologist.

I have recently applied the frozen section method to the study of monsters, and have in this way investigated the relations of parts in the anencephalic fetus, and in the fetus with generalised dropsy. This method would, I feel sure, yield good results if extended to other forms of monstrosity, and is now so well known that it might be easily carried out in any anatomical school. I handed in a paper on the Anatomy of the Anencephalic Fetus studied by means of Frozen Sections at the Leeds meeting of the Association, in which I endeavoured to show the value of sectional as well as dissectional methods in the investigation of the visceral peculiarities of monsters.

The proposed atlas of teratology might also with profit include a discussion upon the etiology of monsters, and the experiments of Dareste on the artificial production of monsters might usefully be repeated, extended, or corrected by observers in this country.

I trust the proposal contained in the BRITISH MEDICAL JOURNAL of August 22nd will not be allowed to drop, and, having already gone over much of the ground, I do not see that there should be any insuperable difficulties in the way of carrying it out.—I am, etc.,

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Edinburgh. School of Medicine, Edinburgh.

MEDICO-LEGAL AND MEDICO-ETHICAL.

A "PRIVATE HOME HOSPITAL."

M.B., F.R.C.S.I.—Although there can, in our opinion, be little doubt as to the quackish character of the advertisement in question, in which the personality and professional position of the "medical attendant" are so prominently set forth, it is, we think, questionable whether the disciplinary laws of the Colleges of which he is a member can be successfully invoked so long as the announcement is restricted to *bona fide* medical periodicals, notwithstanding the alleged gratuitous distribution among the various hotels in Ireland of the one in which it at present appears, of which assumed fact, however, the practitioner in question cannot be held as personally cognisant, even if it be a fact.