

teacher was recognised by his fellow teachers, and they unjealously raised him to the head of the colleges with which he was associated. He was, next, a very active practitioner, being recognised as probably having the leading general practice among the eight hundred thousand souls living in the West Division of the city. He was a deep thinker, and a writer of much energy, his contributions always being eagerly sought and thoughtfully considered as emanating from a well-regulated intellect. Then, *plus* all this, he was a public-spirited and representative citizen; and, lastly, a noble man in the environs of his own fireside. Altogether he was a man in every sense of the word, of whom we were justly proud, and his loss will long be felt. He was but 48 years of age at death—just in the height of his greatest vigour.

The formal dedication of the new laboratory building of Rush Medical College took place on December 4th, 1893. The address of presentation was made by Henry M. Lyman, A.M., M.D., who reviewed the history of medicine, and dwelt upon the value of the newer methods of experimental and practical teaching. The laboratory is a large five-storey modern building, and, of course, is peculiarly adapted in all directions for the purposes to which it will be entirely devoted. All of the leading regular schools of Chicago are now thoroughly provided with space and other means for the satisfactory prosecution of the analytical, experimental, and otherwise practical branches belonging to a medical course of instruction.

Another of our physicians of recognised worth and high standing has found it necessary to—temporarily at least—seek the advantages of a less harsh climate. I refer to Dr. Sanger Brown, who is known to many London medical men. Dr. Brown found himself failing, and discovered, so it is understood, alarming signs of pulmonary trouble, and he immediately set off for the south, not stopping, I believe, until he reached El Paso, Texas, very close to the Mexican border line. He has now been away two or three months, and is reported to be doing well towards recovery. The wisdom of a decisive removal cannot be questioned under such circumstances, and often—indeed, in the majority of instances—it is found that the retirement from the more northern latitudes must be permanent. All of the northern section of the United States, where the elevation is but little above the sea, and where, consequently, the absolute humidity of the atmosphere is great, and abrupt changes in the temperature are very prone to occur, is favourable for the development of the “seeds” of tuberculosis. This being the case, and where the value of the reverse of these climatic conditions is fully appreciated, a change as quickly as possible is at once urged upon the occurrence of indisputable signs of disease.

## CORRESPONDENCE.

### THE INDIAN OPIUM QUESTION.

SIR,—For nearly twelve years I filled the post of residency surgeon at Hyderabad, in the Deccan, now so worthily occupied by Dr. Lawrie. I had during this long time of service unequalled opportunities of observing the habits, customs, and mode of life of the native noblemen and gentlemen in and about the Court of His Highness the Nizam. The then Minister to the Nizam was my patient, and with him I lived on terms of intimacy and confidence, and at his palace, as well as elsewhere, I almost daily had familiar intercourse with the “classes” in this large Mahomedan society. The use of opium amongst them was, I may say, universal, except in the small minority, who, contrary to the precepts of their religion, secretly indulged in the use of alcohol. It was not used clandestinely, as something of which they were ashamed, but openly, generally in the shape of a small pill of solid opium, taken in the course of conversation, as a cigar or cigarette among ourselves is taken and offered in a smoking room or railway carriage.

I not only never met with a “victim to opium,” in the Exeter Hall sense of the term, but never saw any bad results from the moderate use of the drug in the mode described.

If the pages of the BRITISH MEDICAL JOURNAL were a suitable place to discuss the political side of this question, I could, I think, show the well-meaning people in and out of

the House of Commons who have raised it, that since the days of the “greased cartridges” a more thorny inquiry was never entered on, or one more fraught with serious consequences.—I am, etc.,  
Southampton, Dec. 5th.  
W. C. MACLEAN,  
Surgeon-General.

### THE PROPOSED AMENDMENT OF THE PENAL CLAUSES OF THE MEDICAL ACTS.

SIR,—I have read with very great interest the report of the Parliamentary Bills Committee of the Association, presented by you on November 22nd. In it I note Dr. Bateman's proposed substitute for the 40th Section of the Medical Act, 1858.

Unfortunately, the substitute makes no advance on the complained-of clause, since the terms (as given by Dr. Bateman), “style, title, addition, or description, implying that he is a duly qualified practitioner, or that he is registered under this Act, or that he is recognised by law as, etc.” all three mean the same thing. It was on this account that the words “possessed of a diploma” were suggested in place of the words “qualified by law,” which appeared in Sec. 27, subsec. 4 (b), line 2, of the Medical Act Amendment Bill, 1884. I do not think that the opinion of the man Hamilton, referred to by Dr. Bateman, will be regarded as of authority.

The majority of the amendments to the 1884 Bill, which I drafted, appeared on the amendment paper, and were favourably received. Following the words “on and after the said appointed day, if any person, whether a registered medical practitioner or not, who practises or professes to practise, or publishes his name as practising medicine or surgery for gain, or receives any payment for practising medicine or surgery, takes or uses a medical title which is by this Act not permitted to be entered on the *Register*, he shall, on summary conviction, be liable to a penalty not exceeding twenty pounds” (Sec. 27, subsec. 2), I proposed the insertion of the words, “and shall pay the expenses of the prosecution; and on a third conviction under this section shall, in addition to the before-mentioned penalty and the payment of the expenses of the prosecution, be liable to be imprisoned with or without hard labour for a period not exceeding three months.”

As this subsection dealt only with the assumption of a non-registrable medical title I proposed a new subsection between subsections 2 and 3, thus:

“On and after the said appointed day any person who, not being a registered medical practitioner, practises or professes to practise or publishes his name as practising any branch of medicine or surgery shall, on summary conviction, be liable to a penalty of forty pounds and the payment of the expenses of the prosecution.”

With a view to the prevention of practitioners in future employing unqualified (and often ignorant and incompetent) assistants and placing them in sole charge of dispensaries or so-called branch practices, often at great distances (sometimes many miles) away from the place at which the practitioner is to be found, I drafted the following, to appear after the 4th subsection:

“On and after the said appointed day, if any person, whether a registered practitioner or not, employs an unregistered person to take charge of or conduct any practice, branch practice, or dispensary carried on apart from the residence of the employer such employing person shall, on summary conviction, be liable to a penalty not exceeding twenty pounds and shall pay the expenses of the prosecution.”

The point raised on the 42nd Section of the 1858 Act, as to the destination of the sums recovered as penalties within the metropolitan area and on the provisions of the Metropolitan Police Courts Act, is one which does not present the difficulty sometimes supposed, especially as nothing could be clearer than the words of the section itself, namely:

“Any sum or sums of money arising from conviction or recovery of penalties as aforesaid shall be paid to the Treasurer of the General Council.”—I am, etc.,

Lincoln's Inn, Dec. 2nd. BERNARD O'CONNOR.

### THE PRESENT EXAMINATION SYSTEM.

SIR,—I feel convinced that the better way to deal with the matter of rejections at professional examinations would be to have a much more severe test a preliminary examina-