

cessor is not only to alleviate present suffering, but also to endeavour to trace the cause of the mischief and thereby put himself in a better position to deal with the disease and to prevent its recurrence. A wider knowledge is required of the pharmacist, and he should endeavour to become a scientific expert to whom the physician can look for assistance in the examination of urine, of sputum, etc. Such work undertaken by the pharmacist will forge another link between him and the doctor, resulting in benefit to both as well as to the public. The pharmacist expert would soon become known, and thereby obtain a fresh source of income. The closer relationship established between the doctor and chemist would help to expedite a more general transference of dispensing from the surgery to the pharmacy. In order to obtain a position satisfactory to himself and creditable to his calling it is necessary that the pharmacist should, at the outset of his career, have a good general education. Much of the chemical knowledge and skill required for his business should be obtained behind the counter and in the laboratory during the period of apprenticeship, and this knowledge completed by a definite course of teaching, both theoretical and practical, in a well-equipped school of pharmacy before entering for the qualifying or minor examination of the Pharmaceutical Society. The chemist and druggist should not be satisfied to rest with this examination, he must undergo that course of training which will enable him to surmount the major examination and become a pharmaceutical chemist. The increased knowledge he will obtain by so doing will be of the greatest value to him in his career as a pharmacist, and confer upon him that educational stamp which brings with it respect and confidence.

THE ANNUAL REPORT OF THE MEDICAL OFFICER OF THE LOCAL GOVERNMENT BOARD, 1895-96.

[FIRST NOTICE.]

This volume deals with the twelve months ending March, 1896. After paying a well-deserved tribute to the late Mr. T. W. Thompson, and referring to the permanent and temporary appointments of Drs. Wheaton and St. George Mivart respectively, Sir Richard Thorne Thorne passes to a consideration of the vaccination returns of England and Wales in so far as they relate to children born during 1893.

Sir Richard has again to deplore the story told by the returns, the defaulters under the Vaccination Acts amounting to 15.7 per cent. of births in the provinces, and to 18.2 per cent. in the metropolis, the last figure, it is true, showing a slight check received in the preceding annually increasing default in London, whilst the percentage was still further augmented in the provinces. In the matter of counties which are in bad case in the direction of default, we find Bedford with 58.0 per cent., Leicester with 67.9, and Northampton with 55.5 per cent.; whilst on the other hand we have Cambridge with 6.2, Chester with 6.4, Huntingdon with 2.9, and Glamorgan with 4.6 per cent. We need not multiply the examples of very numerous instances of large default, nor need we dwell upon the relatively few cases of good results. The cases returned as "insusceptible" were again numerous, being at the rate of 34 per 10,000 births in the provinces, and 707 in the 133,083 births, or 53 per 10,000, in London; whilst among 95,677 consecutive primary vaccinations by the public vaccinators of the Local Government Board not a single instance of insusceptibility has been chronicled. Yet we have 138 cases in Middlesex, 505 in Lancashire, and 410 in the West Riding. At the Board's Animal Vaccine Station in Lamb's Conduit Street calf-to-arm vaccinations yielded an insertion success-rate of 95.5 per cent., against 65.3 per cent. when stored calf lymph was used.

Sir Richard demonstrates in simple, yet forceful, style the large amount of sanitary work accomplished by his staff of medical inspectors both in local conferences and inquiries. In addition, however, to duties fulfilled out of office, there have been numerous conferences at office, local sanitary bodies having taken advantage of the opportunity of securing the advice of the permanent officials of the Department. Thus points arising out of hospital and by-law proposals have been in this way settled, and time and labour saved to all

parties. The local conferences, inquiries, and etiological and sanitary investigations during 1895 were many in number, and included instances of proposed loans for hospitals, port sanitary administration, the prevalence of disease, inefficient enforcement of the Public Health Acts, county council complaints, epidemic skin disease and small-pox, defects of scavenging and water supply, and other cognate matters.

A very interesting double inquiry was that instituted into outbreaks of enteric fever at Chipping Wycombe and at High Wycombe, the latter village receiving into its wells, under certain local conditions, the effluent from the sewage farm of Chipping Wycombe, and having in this way contracted later, by the way of its drinking water, the fever which had earlier caused specific pollution of the sewers and sewage farm of the borough. The two reports, by Drs. Wheaton and Buchanan respectively, are reproduced in the volume, and furnish significant reading.

The report by Dr. Buchanan is, as the medical officer of the Board points out, the more interesting, since it illustrates a danger which may devolve on one community as the result of works carried out solely in the interests of another community. A report on waterborne enteric fever at Loddon, in Norfolk, the result of a "soakage well" near the pump well of the village, is also reproduced; as also one on diphtheria at Llanfynydd, in Carmarthenshire, wherein is illustrated the favourable foothold which preventable disease obtains where persistent sanitary neglect lends its aid.

Diphtheria and "pneumonia" at Flint form the subjects of a report by Dr. Reece, the latter malady making its appearance whilst the people were suffering from privation and want, and whilst the town was undergoing a visitation of epidemic influenza. Dr. Copeman's report on epidemic skin disease in Enfield Workhouse shows once again the part a particular supply of milk has played in the causation of the disease. There is also reproduced the introductory pages of Mr. T. W. Thompson's report on his inspection of certain South Wales valleys, wherein he discusses problems of main drainage and the like.

The notification returns for certain diseases in London and some eighty provincial districts quarter by quarter are given in customary fashion, and a brief summary of cholera prevalences in Europe in 1894 and 1895 takes the place of the historic record which would have been given if one of the staff, to whom the work had been entrusted had not been temporarily incapacitated. We trust the record will be preserved and placed in evidence in a later volume. Once more the year passed without the spread of cholera to anyone living in this country.

THE ARMY MEDICAL SERVICE AND PUBLIC OPINION.

The report and appendix drawn up by the Parliamentary Bills Committee on the Army Medical Service has recently been sent to a number of leading papers in various parts of the kingdom, and the articles which are now appearing present a striking unanimity of opinion. The public is evidently becoming more and more aroused to the real state of affairs. One well-known paper, lately bitterly hostile, has just declared itself on the side of the Committee, and closes an able and thoughtful article with the words: "The remedy for the present discontent is undoubtedly the formation of an Army Medical Corps with army rank and simple military titles."

The *Belfast Newsletter* says: "The demands preferred ought to be conceded at once. If the military authorities will not do so, pressure must be brought to bear upon Parliament through public opinion." The *Birmingham Gazette* writes: "The Army Medical Service requires to be placed upon a new basis, and we trust the public will support the medical profession in their efforts to secure a change."

The *Cork Examiner* says: "The unprejudiced observer must be struck by the justice of the case presented by the profession, and the monstrous indifference exhibited by the military authorities." The *Cork Herald* points out that a service recruited as the medical service now is cannot possibly be efficient. "It is perfectly obvious that this state of things, cannot long continue, unless the organisation and working of