British Medical Journal.

SATURDAY, JULY 20th, 1907.

THE ANNUAL REPRESENTATIVE MEETING.

The Annual Representative Meeting of the Association will assemble in the Royal Public Rooms, Exeter, on Saturday, July 27th, immediately after the Annual General Meeting, which will be held at 9.30 a.m. We understand that it is the intention of the Chairman, Dr. J. A. Macdonald, to make a short statement to the meeting embodying an account of the progress made during the past year in carrying out the instructions and wishes of the Representative Body.

The first motion before the meeting will, we presume, have relation to the Standing Orders for the conduct of its business; with respect to these a number of amendments will be submitted by the Organization Committee. The most important would appear to be the proposed change in the Standing Order in which the mode of election of Committees is prescribed. Apart from certain minor matters of detail, the change suggested is that in the voting paper issued to each voter the names of all candidates duly nominated shall be arranged in three lists under the heads of England and Wales, Scotland, and Ireland respectively. In counting the votes the candidates on the English list who have obtained the highest number of votes, being not more than one-half of the total number of members to be elected, the candidates on the Scottish list who have obtained the highest number of votes, being not more than one-fourth of the total number to be elected, and the candidates on the Irish list who have obtained the highest number of votes, being not more than one-fourth of the number of candidates to be elected, shall be deemed to be elected. If any place on the Committee be still vacant, that candidate or those candidates shall be deemed to be elected who shall have obtained the highest number of votes, irrespective of the list in which the name of any such candidate appears. The object of the proposed change is of course to ensure that in the constitution of all Standing Committees the principle of regional representation shall be recognized, at any rate so far as the three kingdoms are concerned.

Upon the annual report of the Central Ethical Committee at least two questions of considerable general interest will arise. It will be remembered that a special report of this Committee on the ethical aspects of medical consultation[1] embodying a series of recommendations with regard to the proper method of arranging for and conducting consultations was submitted to the Representative Meeting in London last year. It was very briefly considered on that occasion, and afterwards on the motion of the Chairman referred to the Divisions, which had not then had the opportunity of considering it. A number of replies have been received from the Divisions, and will come up for discussion at the Representative Meeting this year; the suggested alterations all seem to be in the direction of making the wording of the preamble and the recommendations more precise, definite, and stringent. For instance, in the preamble as passed by the Committee, it was stated that if a patient sought an opinion from a practitioner other than his ordinary medical attendant without any introduction it was in general the duty of the practitioner consulted to ascertain whether the patient was already under medical treatment, and, if so, refuse to see the case until he had communicated with the ordinary medical attendant, provided that, if for any reason he thought it necessary to see the case at once, he should immediately afterwards communicate with the ordinary attendant. The Norwich Division suggests that this should be modified in such a way as to make it the duty of the practitioner consulted to decline to see the case "unless he receives permission to communicate "at the conclusion of the consultation with the ordi- "nary attendant." With regard to the arrangement of any future consultation, and as to any communication between the consultant and the patient subsequent to the first consultation, the Committee had recommended that, as a rule, such future consultations should be left to the initiative of the practitioner, and that all future communications should be made through the practitioner in attendance; the Blackpool Division desires to omit the words "as a rule." The Representative Meeting will also have before it in the annual report of the Council an expression of that body's regret that the report on the ethics of consultation has not been submitted to the opinion of some body representing consultants, whose concurrence is necessary to the success of any project of reform in procedure; the Council therefore suggests that any decision on the matter be deferred until such conference has taken place; there is also a motion from the Northampton Division to the effect that the report should be referred back to the Ethical Committee for further consideration. The Editorial experience is that there are few matters which are more fruitful sources of misunderstanding between honourable members of the profession than this of arranging consultations. The conduct of a consultation once it has been brought about is by comparison a simple matter. If the suggestion of the Ethical Committee "that it might "be to the advantage both of the profession and the "public if formal recognition was made for a distinct "class in the profession to be specially design- "ated consultants"—a proposal which has the support of several Divisions—were adopted it would no doubt simplify matters very much. The Committee suggest that the term "consultant" should be defined as meaning a practitioner who has adopted the rule of seeing only those patients who are referred to him by other practitioners already in attendance, and who does not himself act as a regular attendant in any case. So far as we are aware, such a class can hardly be said to exist at the present time; it could only be created by mutual consent, and there are no doubt certain practical difficulties in the way not unconnected with financial questions. There is also the closely-allied question of the proper position of the specialist. Many specialists—men of the highest personal honour and universally respected by the profession—hardly seem to regard themselves as, in the strict sense of the word, consultants. We miss from the recommendations any distinct reflex of a paragraph in the preamble dealing with cases seen at the consultant's house; but it may be that the Committee did not consider it desirable to overburden its report by entering into this department of the subject.

The other matter of particular interest arising in con-

[1] Supplement to the British Medical Journal of July 28th, 1906, p. 98 et seq.

nexion with the report of the Ethical Committee is the position of the Association with regard to the presentation of cases to the General Medical Council for inquiry. The report of the Committee gives a full explanation of the action taken by it pursuant to the instructions of the last Representative Meeting that the Association should act as complainants in cases before the General Medical Council, and the issue will be directly raised by a motion of which Dr. Hamilton, the representative on the Council of the Glasgow and West of Scotland Branch, has given notice, to the effect that, in view of the letter of the President of the General Medical Council, and in view of counsel's opinion placed before the Central Council on June 5th, the Representative Meeting should rescind for the present the resolution that it is absolutely necessary, in the interests of the medical profession, that the Association should take up penal cases before the General Medical Council.

The report of the Hospitals Committee also raises points of no little general interest. Last August the result of the deliberations of the Joint Committee, consisting of representatives of the Association and of many hospital Boards, were circulated to all hospitals in the country. During the deliberations of the Joint Committee there had been a certain amount of give and take, and as a result the representatives of the Association agreed to waive for the time being the recommendation approved by the Representative Meeting at Oxford to the effect that no payment should be made by a patient at a hospital. The report contains a number of recommendations as to general hospitals, cottage hospitals, the relation of hospitals to provident dispensaries, and other matters not as yet fully considered at a Representative Meeting, and the Hospitals Committee of the Association considers that the time has arrived when all these matters should be fully discussed, the movement for co-operation between the Association and the hospitals having been brought to a definite point by the conference held in London, in December last. The Representative Meeting at Exeter will be asked to pronounce upon all the recommendations of the Joint Committee, and also to consider a number of motions brought forward by Divisions as the result of their discussion of the report.

During the year, the Special Finance Inquiry Committee appointed at the meeting at Caxton Hall has held numerous meetings, and has prepared a report, which will be circulated immediately to the Chairmen, Secretaries, and Representatives of Divisions, and an opportunity will no doubt be found at the Representative Meeting for a discussion of its conclusions and recommendations. We understand that the report will show reasons for the opinion that there are no grounds for viewing the financial position of the Association with any alarm.

THE PATHOGENESIS OF MALIGNANT TUMOURS.

PROFESSOR E. VON LEYDEN AND Dr. P. BERGELL, of Berlin, have published recently a preliminary communication, giving the results of their recent investigations on the action of certain ferments on malignant tumours.[1] Since local pathogenesis and enormous energy of growth are the main characteristics of cancerous growths, and since, when a growth is locally damaged, it always responds by an increased growth, they argue that any destruction which is never followed by a reaction of increased growth must be regarded as a specific disintegration. From a study of the action of radio-active substances and of the pancreatic ferment, they came to the conclusion that these substances only possessed a theoretical interest, and had no real or practical importance. The cell solution produced by pancreatin is mostly only a circumscribed process, and when sufficiently large quantities of the ferment are injected, there is no selection between the carcinomatous and healthy tissue. The process consists in a more or less extensive necrosis of the tissue cells, which lose the capability of taking up the nuclear stain. Bacterial action may be regarded as being excluded.

In order to gain fresh light on the subject, they experimented with various proteolytic ferments. The ferment derived from the liver was one of the first tested. This was prepared by a method described by Bergell and Lewin.[2] It has been found to digest that portion of simple peptone which pancreatin does not digest, and further to dissociate glycylalanin, a peptide which resists the action of pancreatin. For the purposes of the experiments they used only the expressed juice of fresh livers. On introducing small quantities of the liver ferment into three large extensive malignant tumours, they were able to watch a rapid progressive disintegration of the masses. One of the cases was a large sarcoma of the neck, the second was a recurrent mammary carcinoma and the third was a uterine carcinoma extending to the vagina. All the cases were progressing rapidly and already showed signs of metastatic growths. This was confirmed in each case *post mortem*. The cases showed clearly that this liver ferment caused a progressive destruction of tissue, which has the typical characteristics of a necrosis produced by an enzyme and of a solution of tissue. The macroscopical appearance was that of softening and liquefaction of the tissue, while microscopically necrosis and loss of staining power of the nucleus were observed. Caseation was not met with, but a form of caseation was seen by Bergell and Lewin when small quantities of the ferment were introduced into carcinomata of mice. This caseation corresponds to the changes observed in cases of spontaneous cure of these tumours. A definite selection in the action is seen, inasmuch as practically only the carcinomatous tissue is attacked. Comparing the selectivity of the various forms of specific disintegration, they find that when tumours are exposed to the action of radium the selectivity is very slight. Radio-active substances when injected, on the other hand, do not act equally on all growths; but when they do act, the selection is much more marked. The destruction, however, is not permanent and is not progressive. In the case of pancreatin, the action is that of very incomplete selection. Compared with this, the action of the liver ferment has a high degree of selectivity.

It appears to be extremely difficult to utilize these observations practically in treatment. The destruction mentioned takes place so extensively and rapidly, and results in such toxic substances as products, that it would seem as if the new ferment could not be used as a therapeutic agent. The authors compare the action with an explosive. It is like a nitro-glycerine for which the "Kieselguhr" has not yet been discovered. The difficulties will be better understood if it is remembered that the ferment acts as an intracellular body, and therefore no dilution can effect a toning down of the action.

Leyden and Bergell, however, do not despair of finding some means of applying the theoretical considerations to practical use. In attempting to

[1] *Deut. med. Woch.*, June 6th, 1907.

[2] *Zeit. f. Exp. Pathol. u. Therap.*

explain the pathogenesis of carcinoma, they suppose that the tumour tissue is an extremely suitable substratum for the action of a ferment. Since the destruction and solution extends in the form of a sort of liquefaction in the environment of the cell, it may further be assumed that the action is that of a proteolytic ferment. It seems, however, that the liver ferment does not attack the albumin of the tumour when isolated or removed from the living organism. Pepsin does not attack the albumin of the living tumour, and leaves dead carcinomatous material fairly intact, and isolated albumin from the tumour proves refractory to pepsin. Pancreatin digests isolated tumour albumin fairly easily, and also digests the tumour *in vitro*, but it has less action on the living tumour. Liver ferment, on the other hand, is relatively indifferent toward isolated albumin and tumour *in vitro*, but acts with avidity on the living tumour.

The observations made by the authors have driven them to frame a theory as to the nature of carcinoma. They say: "We must assume that the unimpeded "growth of the tumour, which evidences its malignancy, "depends on the want or insufficiency of a ferment "hydrolytic power on the part of the organism. This "power is probably specific. . . . We assume, on the "basis of our experiments, that the capability of the "formation of a local 'varying,' in the sense in which "Kraus explained it, albumin synthesis, governs the "nature of malignancy, but not in the sense in which it "has been erroneously understood, that a specific "carcinoma albumin exists, or even that there is such a "thing as a specific cancer poison." If this theory be accepted, it would follow that the carcinomatous growth does not contain a certain ferment-like substance which is present in the healthy body. The absence or diminution in quantity of this substance would then explain the local unlimited growth. The avidity of the carcinoma cell itself can only be an element in the pathogenesis of secondary importance. Further experimental studies are required to clear up many points, and will, the authors believe, bring to light further facts in support of their theory.

THE INSECURITY OF TENURE OF MEDICAL OFFICERS OF HEALTH.

One of the most recent instances of the inability of local sanitary authorities to appreciate their responsibilities comes to us in an account of a meeting of the rural district council of Southwell in Nottinghamshire. Southwell has a population approaching 20,000 persons, and an area of 177,484 acres. For nearly thirty years Dr. Charles Wills has been the medical officer of the district at a salary of £214 per annum. In accordance with the extraordinary and baneful custom which prevails in the provinces he has been subject to re-election year by year. He is also medical officer of health for four other districts, the whole area under his administration having a population of about 67,000 persons, and being in extent some 234,000 acres. At the last meeting of the Southwell District Council a resolution was carried by 9 votes to 7 appointing Dr. Wills for a further period of one year, but at a salary of £107, or one-half that which he has been receiving hitherto. Fortunately for the credit of local government this resolution cannot take effect until the sanction of the Local Government Board has been obtained, and we cannot believe that the Board will consent to be a party to such shabby treatment towards an official whose best years have been spent in looking after the public health interests of this district. If Dr. Wills had neglected his duties there might, perhaps, be some excuse for penalizing him in this way; but the contrary is the fact. Dr. Wills's reports show that he is active in carrying out his duties, and one member of the council quite frankly accused him of writing to the Local Government Board and advising the appointment of a second sanitary inspector. An additional inspector was appointed, at a cost to the council of £100 per annum, and the council desire apparently to make Dr. Wills pay this sum because the Local Government Board was of opinion, from the facts stated in his annual reports (he did not write specifically on the subject), that the district required more sustained sanitary inspection. This story is not at all pleasant reading, and ought to bring home to those who have hitherto opposed the measure the absolute necessity of making the appointments of all medical officers of health non-lapsing. No one could then be subjected to such outrageous treatment as that which this District Council proposes to mete out to Dr. Wills, but which we trust the Local Government Board will refuse to permit.

AN AMATEUR IN DRUGS.

It is possibly too much to expect that the ordinary layman should bestow serious attention on the rules of medical ethics framed primarily not for the advantage and protection of medical practitioners, but of the world of men and women among whom they practise. Here and there an individual may be met with who can grasp the axiom that, in medicine, the end does not always justify the means; but, as a rule, the ordinary layman remains stone-deaf to the argument that things which it is better for medical men not to do, it is better for him also not to do. There is one question, however, which should be reiterated to the amateur prescriber, Is it good to advertise and recommend drugs (of the real action of which one knows nothing) on the sole authority of the vendors; and is it good to be instrumental in putting these things into the bodies of persons of whose real condition one knows nothing at all, or to whose diseases one could not, if called upon to do so, give a name? The goodness of heart of the amiable amateur in drugs is undoubted, even if his want of physiological imagination and ordinary common sense is little short of appalling. The guiding principle of such a person seems to be: When unwell, take something; and, rather than take nothing, take anything. For every symptom there is a drug. Restore, recuperate, stimulate, and the cure is complete. It is true that over-fatigue, sleeplessness, tired nerves, failing memory, incapacity for mental effort are symptoms —often early symptoms—of all kinds of serious organic disease; but what does the amateur prescriber know or care about that? It is a small matter when some well-known individual gives a picturesque testimonial advertising a skin food, a hair dye, or a soap. These things carry their own rewards and punishments with them. Proprietors of those really useful preparations prescribed by medical men on account of sterling merit do not invoke the aid of the philanthropist, the actor, or the popular preacher in advertising their goods, for the simple reason that they do not stand to benefit in the long run by this method of making their preparations known. There are wiser ways. An example of a particularly unwise way emanates from the pen of a well-known philanthropist —Lady Henry Somerset. It is in the form of a letter to a friend and runs, "there does not seem to me to be any "reason why you should continue so overweighted "by a weakness which is not brought about by any con- "dition of actual disease, but which seems *to arise from* "*an even graver trouble.*" (The italics are ours). It might be thought that a "graver trouble" than "actua disease" was one in which medical men themselves

might hesitate to intervene. Here, however, Lady Henry Somerset steps in with confidence, and proceeds to prescribe a preparation which she informs her friend is "essentially a nerve reconstructive," whatever that may mean. It is also said by her to have an "invigo- "rating power on worn-out nerves," and to give tone to "exhausted tissues." It is also said to be a substitute for alcoholic stimulants and "restores sleep." There are two other respects in which the advertisement is an example of how *not* to advertise. It is addressed from the Inebriate Farm Colony at Duxhurst, and reference is made to the good the preparation has done to the patients in that institution "whose health had been so seriously undermined by "their own misdeeds." Whatever the misdeeds of the unfortunate people who have placed themselves for treatment at Duxhurst, they hardly deserve to be pilloried in this fashion to support a proprietary remedy. Charity and good taste seem to demand something different from this. Their own opinion on the matter would probably be interesting to hear. Again, the Inebriate Farm Colony at Duxhurst has a medical officer. If any one is responsible for the drugs given at Duxhurst, it is or ought to be the medical officer. Lady Henry Somerset's learned discourse on her own medical experiences among his patients is no compliment to their real doctor. If testimony or sound medical reports are to be given concerning advantageous methods of treatment followed at Duxhurst, the person to give them is undoubtedly the medical officer of the institution himself. Lady Henry Somerset would be well advised, in the interests of all concerned, to abandon the rôle of amateur prescriber through the advertisement pages of a popular magazine.

THE FOUNDER OF THE ANILINE INDUSTRY.

IN the death of Sir W. H. Perkin, on July 14th, we have to record the loss of perhaps the most eminent of those English scientists who have devoted the main portion of their energies to the application of scientific discovery to the development of commerce. Sir William Perkin was connected with the great names of chemistry such as Faraday and Hofman, attending Faraday's lectures on electricity when a boy of 14, and being admitted shortly after leaving school to Hofman's private research laboratory at the Royal College of Science. The discovery of the first of the aniline dyes, with which his name will ever be associated, was the result of researches undertaken with a view to the artificial synthesis of quinine. Encouraged by Messrs. Pullar's report, Perkin, then only a boy of 18, aided by his father and brother, built his works at Greenford Green for the preparation of the dye. Other processes were soon added, including the production from anthracene of alizarin, the red dye formerly obtained from the root of the madder. He was also honourably connected with the chemistry of the artificial manufacture of indigo. His contributions to theoretical chemistry were also considerable. In 1867 he read before the Royal Society a paper in which he showed that tartaric acid was not tetrabasic as had been supposed by many observers but that it was succinic acid in which two hydrogen atoms were replaced by alcoholic hydroxyl, his method consisting of acting on tartaric ether with the chlorides of acid radicals. An even more important research was that reported in the same year on salicylic aldehyde when, by replacing the supposed alcoholic hydrogen by benzoyl, he found that the body retained the properties of an aldehyde and was, therefore, both an alcohol and an aldehyde, for had the hydrogen replaced formed part of an aldehyde group he would have had a mixed acid radical. The accuracy of his original statement was confirmed by further experiments conducted during the next few years. Another research of considerable value resulted in the discovery of the famous "Perkin's Reaction" whereby the principle of "condensation" is utilized in the preparation of many of the unsaturated carbon acids, while his work on the relation between magnetic properties and the stöchiometric constitution of chemical compounds won recognition from the Royal Society in the shape of the Davy medal in 1889. Sir William Perkin was a Fellow of the Royal Society, and was awarded the Royal medal. He was both Secretary and President of the Chemical Society, which granted him the Longstaffe medal in 1889. He received the Hofman medal from the Deutsche Chemische Gesellschaft, the Lavoisier medal from the Société Chimique de Paris, and the Albert medal from the Society of Arts. In connexion with the fiftieth anniversary of the aniline discovery last year Sir William was granted the honour of knighthood, while his latest distinction was to receive the honorary degree of D.Sc. from the University of Oxford.

CHRISTIAN SCIENCE IN FICTION.

MEDICINE and its professors occupy a large place in modern fiction, and therefore it is not surprising that one of the "eminent hands" in that line of literary work should make Christian Science the subject of a novel. Considered simply as a novel, we confess we do not find Mr. E. F. Benson's *House of Defence* particularly interesting. It can safely be taken to bed without risk of the fascination of the story cheating one of hours that should be given to sleep; indeed, we should be disposed to recommend it as a useful substitute for some possibly less harmful "drowsy syrup." The book is dedicated to a friend who is reminded that he was cured, as both he and the author know, of a disease that medical science had pronounced incurable, by a certain Christian Science healer, who used neither knife nor drugs upon him. Both the author and the patient think that the disease was nervous in origin, and a "wise and "skilful physician" (who by the way is described as wearing a black frock coat, with yellow boots and a red tie!) is said to have shared this belief. But the disease, whatever it may have been, was already organic when the patient went to the oracle, and he, after consultation with others, pronounced it incurable. "At the same "time," we are told, "he acknowledged its nervous "origin, and you [it is the patient who is addressed] "will acknowledge that with the utmost frankness he "confessed entire inability to say *how* a nervous affec- "tion entered the more obviously material world of "organic trouble." This does not inspire us with confidence in the knowledge of the "wise and skilful man" who clearly knows little of neurology. Mr. Benson's faith is not so strong as that of his friend, for he declines to believe that "any man living upon this "earth can make it happen that bones that are broken "should join together (especially when the fracture is "compound and they stick out of the skin) without "assisting Nature by what you call 'mere manipula- "'tion,' but by what I call 'setting the bone.'" Mr. Benson's knowledge of the healing process would seem to be no greater than his friend's. His difficulty in regard to compound fractures reminds us of the answer of a French lady to some *esprit fort* who was arguing against the miracle of Saint Denis (of whom the legend says that he carried his severed head in his hands for several miles) because it was incredible that a decapitated man could have walked so far: "Eh, monsieur, dans une "telle promenade ce n'est que le premier pas qui "coute!" Mrs. Eddy herself has confessed that surgery lies outside the sphere of influence of Christian Science. But if faith can heal a broken bone, it can unite a compound as easily as a simple fracture. What old critics called the "catastrophe" of the book, however, is the cure of the opium habit by the Christian

Scientist, who drinks before the patient a dose that "by all that is known of the drug" should have killed him. The saving grace, we gather, was the "complete "and absolute confidence" of the disciple of Mrs. Eddy that the drug could not possibly hurt him. To the ordinary mind this would seem to prove that the drinking was a harmless amusement rather than a "beastly habit." But the logic of the Christian Scientist is like Bottom's dream, in that it hath no bottom; therefore, it gives no footing for men who are guided by mere reason. Mr. Benson himself appears to have some suspicion of the conclusiveness of the case which he quotes, for he says: "It is true . . . that it is not "quite easy to poison oneself with laudanum, because "the amateur will usually take too much and be sick, or "too little and thus not imbibe a fatal dose." If he is interested in the subject beyond the immediate purpose of his fiction, he may with advantage refer to that not very recondite work, the *Confessions of an English Opium Eater*, in which he will find that De Quincey at one time habitually took 320 grains of opium daily, without any apparent ill-effect, and that he once gave a Malay a quantity of opium, "enough to kill some half "dozen dragoons together with their horses," which his Asiatic visitor bolted at one mouthful without anything particular happening. De Quincey quotes the case of a London magistrate who, on the first occasion of his trying laudanum for the gout, took forty drops, the next night sixty, and the fifth eighty without any effect whatever. We may add that, as is well known, the celebrated Scottish metaphysician, Sir William Hamilton, could swallow an ounce of opium without its having any action at all upon him, and this peculiarity was inherited by his eldest son. It would, of course, be rash for any person to follow these examples; we merely quote them to show the futility of Mr. Benson's *instantia crucis* of the Christian Scientist's immunity in regard to poisons. The doctrine seems to us open to objection in other ways. Thus, is drunkenness to be cured by the "healer" sharing the whisky bottle with the patient? Of the silliness of Mr. Benson's description of a poor gillie dying of typhoid, after perforation has taken place, being cured by being told that all the false belief which has made him ill is coming out of his mind, and assured that "sin is gone, illness is gone; all is gone except "the great light," we forbear to speak. We sympathize with those who believe in the healing effect of prayer, and we do not know enough of what are called the "laws" of Nature to affirm that miracles are impossible. But with the make-believe which denies the existence of pain and disease we have no patience. If Christian Science is true, it should expel not only sin but death from the world, yet the disciples of Mrs. Eddy die like other people; they are fed with the same food, hurt with the same weapons, and subject to the same diseases. Mr. Benson's book is mischievous in its tendency, particularly in the suggestion which it conveys that an epidemic of typhoid fever can be checked by the shallow patter of Christian Science.

NATIONAL ASSOCIATION FOR THE FEEBLE-MINDED.

THE eleventh annual report, lately issued, shows considerable increase in the multifarious activities of this Association for the welfare of the feeble-minded. Aiming, as it does, at the co-ordination of many scattered efforts for this afflicted class, it is satisfactory to find from a map of England illustrating the report that centres of work connected with the Association extend from Newcastle and Morpeth in the north-east to Brighton and Plymouth in the south and west, and that though more concentrated in the metropolitan area, many of the large provincial towns are represented. During the past year the honorary medical consulting staff has been considerably augmented, especially by the addition of well-known provincial physicians. Their primary function is to examine candidates and visit homes; they meet also periodically as a Medical Committee, thus giving an opportunity for general discussion upon questions of medical interest in relation to the feeble-minded. At a recent meeting alcoholism was considered in its bearing upon mental deficiency, and the conclusions reached have been already reported in this JOURNAL.[1] A considerable amount of information with regard to family history is accumulating in the case-papers of candidates, and may lead to further interesting discussions. The number of branches has increased during the year, and a new Home for Feeble-minded Girls has been opened at Shepherd's Bush in premises formerly occupied by feeble-minded mothers and their infants, now removed to more rural surroundings at North Finchley. Thus there are at present four homes directly connected with the Association, one of them (at Upshire, Essex) being for youths beyond school age who are trained in farm and garden work. The more promising among the latter are from time to time placed out in situations as farm hands, and eighteen so placed are periodically visited and reported on by the Master of the Home. The necessity of after-care is very obvious with regard to all defective cases, however well trained, and one of the objects of the Association has been the organization of after-care committees throughout the country to watch over and assist the career of the children taught in the special schools. An annual conference of representatives of such committees has been established, the first having been held in London last autumn. The most effectual form of after-care for the majority of defectives will no doubt be found in industrial colonies where, under supervision, their work can be turned to account. Indeed, an appeal has been issued, bearing the signature of H.R.H. Princess Christian, Patroness of the Association, for funds to provide such a colony, in connexion with which there will be residential schools for feeble-minded children as well as industrial homes for adults. About £1,200 has already been promised for this object and additional contributions will be welcomed by the Secretary, Miss A. Kirby, Denison House, Vauxhall Bridge Road, S.W.

DEATH OF PROFESSOR GRANCHER.

BY the death of Professor Grancher, who passed away a few days ago in Paris, at the age of 64, France has lost one of her most eminent physicians and the war against tuberculosis one of its most prominent champions. Jacques Joseph Grancher was born at Felletin in the Creuse department in 1843. In early life he had to struggle with poverty, and only the self-sacrifice of a devoted mother made it possible for him to enter the medical profession. He studied in Paris, and became Professeur Agrégé in 1873. At the time when Pasteur was making his researches on rabies, and had succeeded in rendering dogs refractory to the infection, Grancher was working in his laboratory. The story of how, on July 6th, 1885, Pasteur was suddenly appealed to by the mother of Joseph Meister, a boy of 9, who had been bitten by a rabid dog, is well known. The medical advisers to whom Pasteur turned in the emergency were Vulpian and Grancher, and it was on their recommendation and in their presence that the first inoculation was made. Later, when the escape of Meister from the dreaded disease was noised abroad and persons who had been bitten by rabid dogs began to flock to Paris, Grancher was one of four—the others being Roux, Chantemesse,

[1] BRITISH MEDICAL JOURNAL, May 11th, 1907, p. 1140.

and Charrin—who undertook to make the inoculations in the temporary buildings which had been assigned for the purpose. In January, 1887, when during Pasteur's absence on the Riviera owing to ill health his theory and even his honesty was violently attacked in the Académie de Médecine, Grancher stood forward as one of his most ardent and effective defenders. In 1879 Grancher won the appointment of Physician to the Paris hospitals, and in 1885 he succeeded Parrot as Clinical Professor of Children's Diseases. Shortly afterwards he was elected a member of the Academy of Medicine. Thenceforward he devoted himself largely to the hygiene of infancy, and in particular to the prevention of tuberculosis in childhood. He was the initiator of a movement for the safeguarding of the health of children in schools and in the family. He examined more than 4,000 children in the Paris schools, who either showed signs of tuberculosis or were threatened with the disease. On the basis of these examinations he drew up a series of statistics, which he laid before the municipal authorities, from whom he obtained a promise that open-air schools would be established. He also insisted that whenever tuberculosis showed itself in any member of a family the children should be boarded out in the country among healthy people. At the present time 290 children are thus provided for, and the example of Paris has been followed by Marseilles, Bordeaux, Lille, Havre, and other towns, which have some 200 children boarded out in the country. Professor Grancher's work was all the more remarkable from the fact that he was himself for some thirty years the subject of tuberculosis, and he owed the preservation of a life so useful to his fellow-men solely to intelligent care of his health, and to that strenuous will to resist the encroachments of the disease of which M. Léon Daudet has given so vivid a picture in his recent novel, *La Lutte*. He was the author of a number of works on tuberculous and caseous pneumonia, the early diagnosis of pulmonary phthisis, antituberculous vaccination, a treatise on diseases of children, etc. He had been more or less an invalid for more than thirty years. To science his death is a heavy loss not only on account of his indefatigable labours in the elucidation of the problems of tuberculosis, but perhaps still more because his help enabled Pasteur to pursue his researches on rabies to their triumphant issue. Pasteur was not a member of the medical profession, and it was Grancher who first took the bold step of testing the inoculations on man. He was one of the first who formed a true conception of the ideas and aims of Pasteur, and he contiuued to collaborate with the famous investigator. At the time of his death he was Chairman of the Council of Management of the Pasteur Institute. As soon as the news of his death was announced the President of the French Republic sent a representative to convey his condolences to the widow. Grancher was a man of the noblest and most unselfish character, and of so retiring a disposition that strangers were often repelled by the coldness of his manner. But beneath the icy surface he concealed a heart burning with the zeal of humanity.

JAPANESE FOLK MEDICINES.

WE learn from our always interesting contemporary *Janus* that a general meeting of the Asiatic Society of Japan was held at Tokyo on February 20th. Taking as his text a paper on Japanese Patent Medicines read by Mr. W. M. Royds, British Acting Vice-Consul at Kobe, Mr. Ernest W. Clement read some interesting notes on Japanese Folk Medicine. Among the remedies mentioned were *hotan* (gem or jewel medicine), a cordial composed of camphor and peppermint; *hankontan*, which means "reviving soul medicine," and is credited with the power of restoring the dead to life; *chujoto*, a specific for female complaints, the name of which comes from the Princess Chujo, who lived in the time of the Empress Koken (A.D. 749-758) and the Emperor Junnin (A.D. 759-764); *hyakuso* ("hundred-grasses"), a strong, bitter medicine for diarrhoea and stomach troubles, which is said to have been discovered by a virtuous Emperor of China who, with the object of finding a good medicine for his subjects, tasted one by one all the plants he could get, and at last found this one, which is profitable to all. If this account is to be believed, it can only have been the virtue of the Emperor that preserved him from death by poisoning. We know from the dispatches of the generals and admirals in the late war how potent is the virtue of the Japanese Emperor, and that of his imperial brother of China would appear to be in its way not less thaumaturgic. We are sorry to be unable to give his name, but we hope our antivivisectionist friends will take note of his self-sacrifice. Then there is *Uiro-gusuri*, or *Uiro*, a nostrum originally brought from China, and supposed to be a specific for expectoration. It is sold in Odawara, a grand old building, with an eight-ridged roof, much admired by old-fashioned carpenters. *Usaikaku*, or powdered rhinoceros horn, is used as a specific in fevers of all kinds. The manifold virtues of *Seishintan*, or refreshing heart medicine, may be gathered from the following advertisement:

Seishintan (Pilla).
Indispensable both at Home and Abroad.
(In Case, Bottle, Package, Nickel, Tin, etc.)

As an invigorator and for curing Headache, Giddiness, and for refreshing the Drooping Mind. Those occupied in busy professions are advised to provide themselves with Our Pills without fail.

Take a few of Our Pills after every meal, and Your Digestions will be improved, and Your Stomach and Bowels be kept healthy, whereby you will always be a stranger to all sorts of ailments arising from the disorder of those parts.

Very Fragrant; keep the mouth from all Offensive Smell as well as from Fever; clear the throat of Phlegm, keep it moist, and clear the Voice. Very necessary for a Vocalist and Society Ladies and Gentlemen.

Have Mysterious Powers of remedying Seasickness and every sort of illness to which you may be liable during the hot or cold season. Ward off the Attack of Dangerous Fever.

Good for Stomachache, Diarrhoea, etc., arising from the use of strange drinking water, and for any other sort of illness you may often suffer from while on a journey. A Traveller, careful of his health, ought to carry Our Seishintan.

Sold at all the druggists throughout Japan, but purchasers are cautioned against Fradulent Imitations, looking always for our Trade Mark "Mermaid."

This advertisement shows that the Japanese have shown an adaptiveness to Western methods in the matter of advertising equal to that displayed by them in the other arts of peace and war. Considerations of space prevent our mentioning more remedies, except one, known as *nihachisui*, or "twice-eight water," which is warranted to make girls sweet sixteen. What would not our Society beauties give for an elixir that could be trusted to work this miracle for them? Some Japanese proverbs relating to medicines are suggestive. "There is no medicine for a fool" might find an application elsewhere. "Good medicine is bitter to the mouth" embodies a belief which is widely prevalent among ourselves. The fact that the doctor does not always practise what he preaches is expressed in the phrase *Isha no fuyojo* ("the doctor's carelessness").

BRITISH DENTAL ASSOCIATION.

THE annual meeting of the North Midland Branch of the British Dental Association was held in Manchester last week, under the presidentship of Mr. G. O. Whittaker. The Vice-Chancellor of the University, in an address of welcome, referred to the closer connexion between the University and the dental profession which had grown up within recent years. To meet the growing requirements of that profession the University had

instituted a degree and a diploma in dentistry, of which many of the dental students studying at the University were taking advantage. The President, in his address, pointed to the amount of physical disability caused by neglect of the teeth, and to the consequent national loss. He suggested that the Manchester education authority should be asked to appoint a dentist to one of the elementary schools; to provide for dental hygiene lectures being given at pupil-teacher centres and training schools; to have dental hygiene charts hung in the schoolrooms; to make rules that no teacher should be engaged whose teeth had not been properly attended to, that no pupil be admitted to a scholarship unless his teeth had been treated as required, and that teachers be instructed to see that the children's teeth are kept clean as well as their hands and faces. He thought it was also desirable that a dentist should be appointed on the Committee of the Manchester and Salford Sanitary Association. At the annual dinner it was stated that the Committee of the Victoria Dental Hospital was short of £7,000 for the completion of the new hospital now being erected near the university. The hospital relieves about 17,000 people a year, or one in twelve of the population.

THE CHARITY GREEN FLY.

THE current number of the *World* contains a very timely article on a form of pest infecting social charity enterprises which is not inaptly compared to green fly on a rose; the individual parasites are insignificant, but their combined effect is to blight the rose. A chance collection of amateurs brought together haphazard for some social function in aid of a charity is rarely competent to undertake the executive duties of organizing an enterprise which involves collecting a good deal of money and spending not a little on clerical labour, workmen, and contractors. Hence a person having experience in such organizing work is engaged, and is annually paid stipulated fees or commission. So far all is above board, but our contemporary goes on to say: "Unfortunately, apart from these professional organizers, too frequently the green fly in the guise of hangers on, male and female, appears." One will undertake to get paragraphs into the papers, charging the charity committee a fee for each paragraph published; another will arrange for the loan of chairs from a charitable tradesman, but charges an absurd price for cartage, and so on. Finally, when the accounts come to be made up, the expenses, especially under the convenient head of petty cash, are found to be much larger, and the sum to be paid to the charity much smaller, than was expected. We are afraid that the picture is not at all overdrawn, and that, in fact, it might have been painted in much darker colours. The remedies suggested are either the publication of a full balance sheet or a business audit. We would have supposed that the one implied the other; but however this may be, we entirely agree that in connexion with some at least of the more ambitious fêtes given on behalf of charities abuses exist which, though they may be individually small, become serious in the aggregate, and that the true remedy is the application of business methods to the supervision of the financial side of such undertakings and the fullest publicity for the auditor's report and statement of income, expenditure, and balance. The *World* has done a useful service by publishing an outspoken article which in its pages will, it may be expected, be read by those classes of society without whose help these big charity fêtes could not hope for success.

THE Royal Society has awarded the studentship in biology to Dr. H. M. Woodcock to aid him in working out the life-history of certain hematozoa of birds; the investigation will be carried out at the Lister Institute. The income of the Gunning Fund accrued during the past three years has been placed at the disposal of Dr. F. H. Scott for the continuance of his investigations into the metabolic processes in nerve cells.

MEMBERS attending the Annual Meeting at Exeter, who intend to be present at the Cathedral service and President's address in academic costume, are requested to communicate their names to Dr. A. Fortescue Sayres, the Barnfield, Exeter.

Medical Notes in Parliament.

[FROM OUR LOBBY CORRESPONDENT.]

The Board of Education and a Medical Bureau.—Last week, in the discussion on the Education Estimates, Mr. Masterman criticized the action of the Education Department as regards its administration of the Act passed last session for feeding school children. He contended that the comparative failure of the Act had been largely due to the manner in which the Board of Education had brought it to the notice of the authorities. The circular implied that only in special circumstances of emergency was there to be an attempt to feed the children. That was contrary to the intention of Parliament. He also argued that grants to necessitous districts were insufficient, and urged that provision should be made for organizing a Central Medical Department of the Board of Education to carry out the medical inspection of children, and that moral instruction should be made a compulsory subject. Mr. McKenna, in his reply, said the circular issued by the Board with regard to the feeding of school children was framed solely with the intention of inciting local authorities to act up to the spirit of the Act. With regard to medical inspection, it was the intention of the Board, if the Bill now before Parliament passed, to establish a medical bureau, which would guide and advise local authorities as to the nature of the work they would have to do under the Act, and he hoped that when the names were published the House would be fully satisfied.

The Medical Bureau of the Education Department.—Mr. Alden asked the Secretary to the Board of Education if he could state the nature and work of the Medical Board which it was proposed to form in connexion with his department; what would be the number of doctors which would compose that Board; how many of them would be women; and whether their duties would be of a purely advisory character? Mr. Lough replied that when the duty of medical inspection of children in public elementary schools had been imposed by statute upon local education authorities, the Board of Education proposed to establish a medical staff to assist them in advising local education authorities in regard to certain points arising under the Bill, to collect and correlate the information obtained through the medical inspection carried out by the authorities, and to issue periodical reports based upon that information. In making appointments regard would of course be had to the possession of special knowledge of such branches of medicine as bear upon the medical treatment of children, hygiene, public health, including sanitation, and kindred subjects. It would be premature to enter into greater detail at the present time.

Health Teaching in Public Elementary Schools.—Mr. Wedgwood asked the President of the Board of Education whether his attention had been drawn to a volume by Sir Victor Horsley and Dr. Mary Sturge, entitled *Alcohol and the Human Body*, in which it was stated that evidence was steadily accumulating that the stunted frames and weak development of many poor children was at any rate partly due, both directly and indirectly, to the action of alcohol; that one of the most frequent causes of evil habits and of sexual immorality among young people was the taking of alcohol; that for the sake of national morality as well as physique it was clear that in no form whatever should alcohol be used by the young, either in childhood or adolescence; if he would say what teaching, if any, was given on the subject in the public elementary schools;