

part of the tumour, a dull sound is elicited during ordinary respiration; but when the patient takes a deep inspiration, an intestinal resonance is there perceptible. Mr. Brown then alluded to those diseases which may be mistaken for ovarian dropsy, and slightly remarked on their peculiar signs. They were—1st, retroflexion and retroversion of the uterus; 2ndly, tumours of the uterus; 3rdly, cystic tumours of the abdomen; 4thly, ascites; 5thly, pregnancy; 6thly, distended bladder; 7thly, distended bowels from flatus; 8thly, fæces in the intestines; 9thly, diseased viscera of the abdomen.—*Medical Gazette.*

Correspondence.

MEDICAL REFORM.

To the Editors of the Provincial Medical and Surgical Journal.

GENTLEMEN,—The Medical Reform question has arrived at a critical stage of its progress. A deep sense of the importance of it induces me to trespass on your indulgence. I was a member of the National Association, but never had the honour of belonging to the National Institute. I think, nevertheless, that it has exhibited great moderation, and (considering that it was originally established with a particular object in view,) every disposition to conciliate. Further, that if ever there is to be a satisfactory settlement of this question, and the necessity of a new Charter of Incorporation obviated, it must be by concession on the part of the College of Surgeons of the fair and just demands, which not only the National Institute, but other numerous associations of its members require. To constitute the College of Surgeons and the College of Physicians conjointly, the licensing authorities of the general practitioners would be, in my humble opinion, to perpetuate the anomalous position of parties now existing, and effectually to degrade the latter by making them a marked and really inferior class of practitioners. It is not to be supposed that a licensing board or boards, independent of us, would exact that high standard of qualification to which we must look more than to anything else, as the point after all which will decide our standing with the public, and which I believe will not be secured by any other than a College representing the general practitioners in its council and government. Why should not a third College do all this, though it might want the prestige of antiquity, and be deficient in comfortable examinerships, professorships, curatorships, and beadships? I presume the licentiates would be eligible to public appointments. From whence then could the degradation come which you, gentlemen, apprehend? If one might indulge the hope that our friends in Lincoln's Inn Fields could be persuaded to admit us to a full participation of rights and privileges, these unnecessary distinctions of class and order in our profession would terminate, and individual merit supply the place of honorary titles. I fear, however, we may as reasonably expect the Greek Kalends as concession to the full extent of justice from the Council of the College of Surgeons. The Charter

of 1844 is the great difficulty in the way of arrangement. The Council cannot return to what diplomatists call the "*status quo ante.*" Any attempt to annul the obnoxious Charter involves an apparent injustice to the Fellows of the College. The proposed amendment of it will not remove the difficulty, or dispose them to regard the new claimants of the dignity in any other light than that of interlopers. A very shabby set of fellows indeed! In conclusion, allow me to say, that I acknowledge the many claims on our regard which the College of Surgeons possesses, connected as it is with a long line of illustrious names; and though my devotion may not be of that extreme character which your correspondent, "One of the Thirteen Thousand," illustrates by a humorous but rather profane parody on Holy Writ, I would not willingly transfer my allegiance to any new institution.

I remain, Gentlemen, yours obediently,
ROBERT HAMILTON.

Derby, March 30, 1850.

To the Editor of the Provincial Medical and Surgical Journal.

SIR,—The clouds that lowered upon our already gloomy prospects have been still further darkened by the late gathering of Fellows by Examination at the Freemason's Tavern. I would not hastily impugn motives, but when I see a set of men arrogating to themselves a superior position, from the possession of an unmeaning title, I feel myself at liberty to question their right to do so.

To the Consulting Surgeon I can understand the imperative necessity for qualifying as a Fellow, to be on an equality with his colleagues; but at a time when the whole body of general practitioners is groaning under the weight of injustice and degradation placed upon them, nothing, as I conceive, but personal and selfish motives could have induced men to submit to a second examination, in no respect more profound than the first, and the injustice of which is evident from the impossibility of the majority to avail themselves of it, if inclined.

Let us take a retrospect of the membership examination. One dozen men are in the anti-room; all have brought the same, or at least the requisite, testimonials, and ready to submit to any test of their professional knowledge. Now what takes place in the Court to make a distinction in these candidates? The examination is passed, and no questions are asked as to their future intentions relative to practice—the class they intend to join; but the member is admitted a *surgeon*, whether he join the *pures* or the *generals*. Is it not then a gross insult and injustice to require of me more than the *pure*, who passed with me when our original admission to the College was upon the self-same test of surgical knowledge?

I would ask whether any first-class man would like to submit to re-examination for honors twenty years after he attained them? yet he is not considered unfit for his duties, whatever they may be. The whole scheme is an absurdity and an unjust reflection on the members of the College, only to be surpassed by the insult offered by the Fellows' memorial.