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The poor-law commissioners are about to lay their grasp on the medical charities of Ireland, and we fear that, unless a very strong effort be made, the whole of the medical institutions in that country will be delivered over to the systematic oppressors of the medical

Circumstances, to which it were needless to refer, have given rise to a system of medical relief peculiar to Ireland. The institutions devoted to the relief of the sick poor in Ireland are of three kinds-viz., county infirmaries, fever hospitals, and dispensaries. These are not supported, as is the case in England, exclusively by private contributions, but partly by subscriptions, and partly by a county rate. Thus the total annual income of dispensaries and fever hospitals is £98,301; of which £56,405 are raised by county rates, and £41,896 by voluntary contributions. The sum levied upon the county for the support of each dispensary is, we believe, equal to the sum raised by private subscription for the same object. The election of medical officers and the general management of the dispensaries are vested in the body of subscribers

The system, of which we have thus given a very brief sketch, has excited the displeasure of the poorlaw commissioners. Animated by an unbounded zeal for the welfare of the sick poor, they think it "highly objectionable that the establishment of any medical institutions for their relief should be contingent on voluntary subscriptions." The word "poor," be it remarked, does not here designate paupers, but the class of labourers and small occupiers of land placed immediately above them.

Again, the commissioners are shocked at the idea that any dispensary doctor should live ten or twelve miles from the extremity of his district; the dispensaries are too few, and in some places, where resident gentry do not abound, the districts are of inconvenient extent. These things are discovered to be evils in Ireland; in England they were regarded with indifference; that which was white here becomes black there. But, thus, it has ever been; reason and truth are pliant twigs in the hands of officials, who have a special object to carry.

"Seeing, therefore (say the commissioners), that the subscription system is defective in principle, productive of that want of harmony which too often, unhappily, exists in the managements of dispensaries and fever hospitals, and that it moreover does not ensure provision for a sufficient amount of relief, or for adequate arrangements in its distribution, the commissioners recommend that subscriptions be altogether | to add that the scheme of the poor-law commissioners

discontinued, and that the funds requisite for these institutions be raised as a portion of the poor-rate."

Such is the pith of a proposition put forth by the poor-law commissioners, and which they are now intent on converting into a legislative enactment. The principle of "voluntary contributions" for the relief of the sick poor is, for sooth, a vicious one. The lords of the soil in Ireland have no compassion for their tenantry, while the commissioners' bowels yearn with benevolence and brotherly love. The men who cast a brand of discord amongst the profession in this country affect to admire "harmony" in Ireland; and, above all, the individuals who, under the pretence of economy, invented the tender system, and endeavoured to reduce the English practitioner below the rank of a menial, are ready to sacrifice £42,000 per annum for the purpose of bringing the Irish medical charities under their own control. Assuredly, the love of power is as accursed as the "thirst for gold;" yet shall we be the victims of both, if delivered into the hands of this power-seeking, place-hunting commission.

The scheme by which the commissioners propose to disqualify the benevolent and charitable inhabitants of Ireland from contributing to the relief of their afflicted brethren, is briefly this. A number of dispensary districts is to be formed in the different electoral divisions of the country, by the several boards of guardians. The funds for the dispensaries and fever hospitals are to be raised through the intervention of the boards of guardians—that is to say, are to become part and parcel of the poor-rates. The management of the institutions is to be entrusted to the guardians, perhaps to the clergy, and to a certain number of rate-payers, elected either by the guardians or their fellow rate-payers. In order to insure efficiency and economy in the conducting the numerous institutions thus brought into existence, the several boards of guardians and the poor-law commissioners are to be held responsible for the application of the funds, and the accounts must be subject to the same audit as the other accounts of the unions.

Finally, in order to assist the aforesaid boards of guardians and commissioners in the execution of duties of which they are profoundly ignorant, a medical charities' board is to be instituted in Dublin. The board, it is proposed, shall consist of five or seven eminent medical practitioners residing in the capital, but to prevent any unfortunate conflict between the board and poor-law authorities, its functions are to be purely suggestive—that is to say, five of the most eminent practitioners of Dublin are to assemble weekly, with a salary of two guineas a week each, for the purpose of suggesting measures which the commissioners may adopt if it suit their purpose. A hopeful avocation truly, and well requited.

After what we have said, it is almost unnecessary

has met with the most active and determined resistance on the part of the profession in Ireland. Sir Henry Marsh, Dr. Stokes, and Mr. Cusack have proceeded to London to counteract, if possible, the Medical Charities' Bill, founded on the views of the commissioners. At a meeting of the Royal College of Surgeons, held on the 22d of April, a series of resolutions, condemnatory of the scheme, was unanimously The college express the utmost surprise and regret at learning that legislative measures are in preparation for transferring the government of the medical charities of Ireland to the poor-law authorities. The college affirms that the imperfections of the present system have been greatly exaggerated, and that the existing charities admit of being reformed, without destruction of their present organisation, and the substituting a plan of doubtful efficacy.

The college justly observes, that the proposal to sacrifice £42,000 per annum, derived from voluntary subscriptions, contrasts, in the most extraordinary manner, with the beggarly parsimony of the commissioners in their expenditure for the medical relief of the poor now entrusted to their care; and it regards such a sacrifice as uncalled for and wasteful. The present method of raising funds by county-rates is neither inefficient nor unpopular, and it would be premature and impolitic to abandon this method for a poor-rate, which may prove an unproductive or even an obnoxious tax. Finally, the college protests against giving the poor-law authorities power to remove the present fever hospitals and dispensaries from the situations which they now occupy, because such is equivalent to a power of appointing medical officers to these institutions.

The arguments of the college are conclusive, and cannot, we should think, fail to produce due effect.

At a numerous meeting of the Midland Medical Association of Ireland, resolutions to the same effect were also unanimously adopted. These measures will, we sincerely trust, induce the executive government to pause before it hands over the medical charities of Ireland to the poor-law commissioners. The scheme is, in truth, a most preposterous one. What would people in this country say if the commissioners proposed to abandon one half of the sums so munificently furnished by the English public for the relief of the sick poor, and to levy an equivalent through the poor-rate? The idea would be scouted, not only as an absurdity, but as an impertinence. What would the governors of our English county infirmaries and dispensaries think if the poor-law authorities were to come to them and say, "We will relieve you of the trouble and expense of these institutions; they shall henceforward be supported out of the poor-rate, and we will undertake the duty of managing them ourselves."

The commissioners are not yet quite barefaced

enough to propose absurdities of this kind in England; like the political "shave-beggars," they commence with Ireland, where so many deeds of injustice and oppression have been done unheeded. But if their attempt be successful, who shall say where their pretensions will stop? The poor-law commissioners have, we firmly believe, conceived the hopeful scheme of bringing the whole medical profession of these countries under their jurisdiction. Already have they enslaved the union officers; their grasp is now firmly fixed on the medical charities of Ireland; and the time is probably not far distant when the independence of the whole profession in England will be attacked by an attempt to convert the poor-law commission into a permanent board of health.

LECTURE

ON

TWO NEWLY-DISCOVERED QUADRUPEDS, THE MYLODON AND GLYPTODON.

Delivered on May 4,

By ROBERT OWEN, Esq., F.R.S., &c.

Mr. Owen delivered a lecture in the library of the College of Surgeons, on Wednesday evening, on the nature and affinities of the mylodon and glyptodon, two extinct animals, recently discovered in a fossil state in South America, specimens of which had been added to the museum within the last twelvemonth.

Mr. Owen introduced the subject by pointing out and demonstrating the application of comparative anatomy to the investigation of the remains of those animals, which have long since passed away from the theatre of animated nature. He gave a brief notice of the labours of John Hunter in this interesting field of research, and proceeded afterwards to speak more particularly of those of Cuvier, to whom a wide field of discovery was opened in the tertiary strata below the catacombs of Paris. To Cuvier we owe the principle by which alone fossil remains can be studied, the principle of correlation or co-existence of animal structure—as, for example, let a single bone be taken, the least significant, the last phalanx of the fore foot. The comparative anatomist will see, by its formation, if it has constituted a part of a hoof, and if so, he will know that the animal to which it belonged has lived on vegetable food, and having occasion to pass rapidly from pasture to pasture, the rotatory motion of the forearm would be useless, and he would consequently expect to find the bones fixed, and a corresponding modification of the humerus. The teeth, again, would be implanted in a particular form, and have flat surfaces for grinding the food, and the cranium be so shaped as to admit of the attachment of the muscles necessary for the grinding process. In addition, he would infer the existence of an alimentary canal, suited for the digestion of vegetable food. If, on the other hand, the phalanx was of the long claw shape, the forearm would possess the full rotatory power, and