

with very small numbers. But, nevertheless, it gives an infantile death-rate of 58.2 per 1,000 births, which is quite different to 330 per 1,000, as is stated to be the usual rate in workhouses. Further, it is less than half that for the population at large, which is 121 per 1,000.

The fact that most of the babies born in workhouses are illegitimate may account to some extent for the high death-rate in some institutions. Of the 103 children mentioned above, the large number of 97 were illegitimate. Again, in these cases, the mother has so often weakened herself by abortifacients and the anxiety caused by her condition, to which is often added venereal disease, that the infant has a poor chance to survive.

It is extremely difficult for any one well acquainted with the conditions that exist in the homes of some of the poorer classes to believe that children living in these surroundings can have a better chance of surviving than children in an institution under the constant supervision of a Local Government Board inspector, a medical man, and trained nurses.—I am, etc.,

DUDLEY W. BOSWELL, M.D.,
Medical Officer to Oulton Workhouse Infirmary and
District, Lowestoft.

March 23rd.

THE TREATMENT OF SCHOOL CHILDREN.

SIR,—If one may judge from the newspaper reports of the meetings of various education authorities, it would seem to be urgently necessary for the members of the medical profession to realize that such developments are taking place as will vitally affect their interests in the future. At the present time many education committees are actually in the process of negotiations with lay hospital committees for the services of the medical staff of the hospital, and if any uniform action is to be taken by the profession it is necessary that such action should be organized at once.

There appears to be no reason why the existing charities should not be used for suitable poor cases discovered during medical inspection of school children, so far as is possible with their present funds and arrangements. In fact, the help afforded by medical inspectors in sorting out cases requiring attention should result in the prevention of a considerable amount of waste. Even this, however, is a matter that should be carefully considered. But it does not require much consideration to convince one that the medical profession should permit no extension of these charities by means of public money in order that these cases may be dealt with. All arrangements for the necessary additional treatment that is required should be made between the public authorities on the one hand and the medical profession on the other, without the intervention of any third party in the form of lay hospital committees.

Of course the whole problem is greatly complicated by the long association of the medical profession with charities and charitable institutions in a manner in which no other members of the community are associated. The fact that the medical profession has for so long given services instead of money to charities is the key to the situation, and the question naturally arises whether the present time is not opportune for the medical profession to cease to give services at these institutions as charity. It is doubtful whether any other step would effectually prevent the further exploitation of the profession by the public.—I am, etc.,

Winchester, March 2nd.

ROBERT A. LYSTER.

INSURANCE AGAINST COSTS AND DAMAGES IN CIVIL ACTIONS.

SIR,—In consequence of the demand which has lately sprung up for insurance of medical practitioners against the risk of pecuniary loss when adverse verdicts, involving payment of plaintiff's costs and "damages," are returned against them in civil actions in their professional work, the Council of the Medical Defence Union has concluded arrangements with a company of the very highest repute—the Yorkshire Insurance Company—for such indemnity. All members of the Medical Defence Union can now, by payment of a yearly premium of the small sum of 7s. 6d., effect insurance up to the limit of £2,000, and for a payment of 9s. up to the limit of £2,500—in any case defended by the Union in this respect. For fuller particulars and

general conditions members are referred to the Secretary of the Yorkshire Insurance Company (founded 1824), Bank Buildings, Princes Street, E.C., to whom all applications by members of the Union for policies should be made.

The Medical Defence Union will, as heretofore, guarantee the legal expenses connected with the defence of their members in any case taken up by the council, and conduct such defence through their solicitor and counsel; the Yorkshire Insurance Company will, in addition, guarantee the costs ordered to be paid and any damages up to £2,000 or £2,500 respectively in any individual action in which a verdict adverse to the member defendant is obtained. Thus a complete guarantee against pecuniary loss, up to these limits, to an individual member of the Medical Defence Union is secured in this respect; and further, by effecting the insurance, the members of the medical profession will, I hope, no longer be harassed by appeals to their charity for defraying the expenses incurred when actions are recorded against the individual practitioner concerned, and this will undoubtedly be a great gain individually and collectively.—I am, etc.,

A. G. BATEMAN,
General Secretary, Medical Defence Union.

London, W.C., March 21st.

RURAL NURSING ASSOCIATIONS.

SIR,—Dr. Milligan's excellent letter in the JOURNAL of March 13th exactly illustrates the manner in which my "withers" were wrung, under a nursing committee, and I am glad that attention has been called to the matter in such an able manner. I have had the unfortunate experience of being so handled by a local committee of influential ladies that, though being on the committee, the nurse was always upheld on occasions when she interfered with my patients, and took upon herself to criticize my methods and to attend surgical cases without my consent. It is absolutely true that the nurse touted for patients, and in every way tried to make herself of much importance. Also the nurse would leave a case when she thought proper, and thus sometimes endangered the life of her patient, on some occasions, because the rules of the home from which she was sent were that she was not to stay longer than a certain time at one case. Thus the committee and the home controlled her, and the doctor and patients were without her help when it was really needed. I trust the British Medical Association will seriously give their attention to this matter.—I am, etc.,

March 19th.

VICTIM.

A MEDICAL DEGREE FOR LONDON STUDENTS.

SIR,—Graduates of the London University should be grateful for any adverse criticism of the extraordinary proposals of the Conjoint Board, and the inherent absurdity of the scheme could not have been more ably exposed than in Dr. Mercier's letter. I am sure, however, he is mistaken when he says that the crux of the matter is the matriculation examination. Many years' experience has taught me that a very considerable number of students matriculate, and even pass the preliminary scientific, and subsequently decline graduation at the University of London. The fact is that the scope and character of the professional examinations is such that graduation means in every case one, and in many cases two, extra years added to the curriculum. This price the average student will not pay, and his objections are often strengthened by the average parent. The present agitation for an easy London degree has arisen contemporaneously with the establishment of the new provincial universities, and the consequent depletion of the London schools. London has only two advantages to offer a student: One is its unrivalled clinical material and teaching, and the other is its highly considered degree. Post-graduate schools have practically destroyed the first advantage, and if the second is to be destroyed the number of London students is not likely to increase. Why should a provincial student come to London to work for a degree which will be no better than any other? The grievance of the average London student is no doubt legitimate and pressing, but little will be gained by degrading an old and valued degree to meet it. Robbing Peter to pay Paul is an ancient and attractive process, but results gained in that way have not in practice proved particularly satisfactory.—I am, etc.,

Wanstead Park, March 18th.

A. CAMPBELL STARK.