

healthy and active until the mother gave milk, when it thrived well. I have repeatedly seen similar instances of deprivation for shorter periods, and have always found that, provided the infants were kept warm, no harm ensued.

As a rule, I do not permit nurses to give milk or gruel; and I always prohibit the administration of "butter and sugar", "foods", and other abominations to newly born children. If the mothers' breasts yield nothing, the children get nothing until the natural time for the establishment of lactation has arrived. If the formation of milk fail, of course the infants are artificially fed. I am inclined to think that very young babies, not the newly born, are less able to resist prolonged fasting than infants under a week old, whose vitality, if they be kept warm, is amazing. It is interesting to note, in connexion with this subject, that the colostrum, or first secreted milk, is very rich and fat; and thus a large amount of heat-forming material is rapidly afforded to the system as soon as the infant gets it.

It is worthy of remark, too, in connexion with the case mentioned by Mr. Dixon, that Samaria is a warm country, and newly born infants would probably suffer less inconvenience from fasting there than in a colder climate. I am, etc., ALFRED WILTSHIRE, M.D.

56, Wimpole Street, Cavendish Square, W., March 1871.

THE POOR-LAW MEDICAL SERVICE OF GREAT BRITAIN.

At a meeting of the Chamber of Agriculture to be held at the Salisbury Arms on the first Tuesday in April—Sir Massey Lopes in the chair—the subject of Poor-law Medical Relief will be discussed in its national economic relations. Application has been made by influential members of the Chamber to the Poor-law medical officers' Association for information bearing on the subject, which has been duly furnished; and the discussion will be opened by a statement from Dr. Rogers expressing the views of the Association, as already detailed in this JOURNAL. Sir G. Jenkinson, M.P., and Mr. Corrance, M.P., and others, have expressed their intention of taking part in the discussion.

AN EAST-END JURY.

We have to note with pain that a Poor-law medical officer in the East of London has been committed by a coroner's jury for manslaughter, on account of alleged culpability in respect to the death of a lying-in woman. Without entering into details, we may state that the jury relied upon the evidence of Mr. George Phillips, surgeon, who made the *post mortem* examination, and who is reported as having stated that the circumstances showed "either a great amount of ignorance or great carelessness". The coroner declared that, even on this evidence, the charge did not amount to crime, and that the verdict would be nullified by the decision of the superior court. But the jury insisted on their verdict, observing that the medical officer had treated them with contempt in not attending, and they would make him go where he would be compelled to answer. The verdict is, therefore, intended as a punishment for contumacy, rather than for the offence charged. The medical officer has, perhaps, under these circumstances, reason to be thankful that, in the spasm of offended dignity, the jury did not charge him with wilful murder. As it stands at present, it is a verdict of "Manslaughter—for non-attendance on a coroner's jury."

THE DAWN OF SANITARY REFORM.

THE Poor-law medical officers of Kensington have submitted to the Vestry the desirability of appointing them as a staff of district medical officers of health, in lieu of filling, by a single and separate appointment, the vacant position of officer of health for the district. This suggestion, they point out, is in accordance with the recommendations of the Royal Sanitary Commission and the Poor-law Medical Officers' Association. They dwell with just emphasis on the excellent results in Ireland of the combination of preventive with curative functions in the dispensary medical officers. They have laid before the Vestry the recent numbers of the BRITISH MEDICAL JOURNAL containing information on this subject. They point out that in Fulham a similar system has been adopted for some years with excellent results.

A HINT TO RURAL GUARDIANS.

THE example of the guardians of the Leicester Union may, in one respect, be recommended to other Boards. One of the greatest blots in

the rural workhouse infirmaries is the low quality of the nursing. It would be hard to name a more dangerous defect, or one more likely to counteract good intentions and liberal arrangements, where such exist. At Leicester Workhouse Infirmary, Dr. Clarke has undertaken since 1867, with the consent of the guardians, a system of training nurses in the wards, on a regularly organised plan. So successful has it proved, that one of the nurses so trained is now a superintendent nurse in the male infirmary; a second is at the schools; a third at the Blaby Union; a fourth at the Rugby Union. Two are now in training. Dr. Clarke now proposes to the guardians to have these women taught the art of preparing nicely the most useful special articles of dietary for the sickward, and indicates the means of extending the system by which paupers are redeemed from uselessness and destitution, and made to play an useful part in the world. It may appear, on the surface, that such a scheme involves great difficulties. The best answer to such an objection is the practical success attained at Leicester. Here nurses are trained in excess of the wants of the wards, and the results are excellent. This speaks, indeed, well for all concerned. It is at once a pledge of good order in the wards, and an indication of more than ordinary enterprise and intelligence in the managers. More than one neighbouring infirmary has been supplied, since 1867, with nurses trained at Leicester Infirmary.

VACANCIES.

BOOTLE UNION, Cumberland—Medical Officers and Public Vaccinators for the Workhouse, the Bootle District, the Millom District, and the Muncaster District.
CAMELFORD UNION, Cornwall—Medical Officer for the Bosccastle District.
HOXNE UNION, Suffolk—Medical Officer for the Saxsted District.
ORMSKIRK UNION, Lancashire—Medical Officer for District No. 4.
PLOMESGATE UNION, Suffolk—Medical Officer for the Framlingham District.
ST. IVES (Hunts) UNION—Medical Officer and Public Vaccinator for the District of Somersham.
SLEAFORD UNION, Lincolnshire—Medical Officer for the Osbournby District.
WESTRAY, Orkney—Parochial Medical Officer.
WOOLWICH UNION, Kent—Medical Officer for new Workhouse at Plumstead.

THE POOR-LAW MEDICAL SERVICE OF IRELAND.

SANITARY FUNCTIONS OF POOR-LAW MEDICAL OFFICERS.

THE following form has been issued by the Sanitary Committee of the Dublin Corporation, to be handed to the sanitary inspectors by the dispensary medical officers.

I hereby certify that the cleansing and disinfecting of the room in No. , and of the bedding and clothing of , now ill of , would prevent the spread of infectious or contagious disease. Medical Officer of No. Dispensary. Dated this day of 187 . To , or the owner or occupier of .

GRATUITOUS MEDICAL RELIEF TO SERVANTS.

THE question whether a servant in the employment of a gentleman is eligible for gratuitous medical relief, has been lately brought before the Irish Poor-law Commissioners by the Waterford Guardians. The Commissioners have, in reply, stated that the Medical Charities Act limits the relief to be given, under its provisions, to "poor persons," and gives no further definition, leaving the determination of the fitness of any particular person as an object of such relief, to those persons who are authorised to issue tickets, subject to the power of the majority of members of the committee to cancel any ticket issued to a person whom they may consider not a fit object. The Commissioners further point out that every master is liable for the cost of the maintenance of his servants, while relieved in Workhouse Infirmary or Fever Hospital, so long as the service shall continue.

VACANCIES.

BALTINGLASS UNION, co. Wicklow—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Rathvilly Dispensary District.
CAHERCIVEN UNION, co. Kerry—Medical Officer for the Emlagh Dispensary District.
CALLAN UNION, co. Kilkenny—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Kilmoganny Dispensary District.
GALWAY UNION—Medical Officer and Public Vaccinator for the Spiddal Dispensary District.
DUNSLAUGHLIN UNION, co. Meath—Medical Officer for the Dunboyne Dispensary District.
TULLAMORE UNION, King's County—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Kilbeggan Dispensary District.
WESTPORT UNION, co. Mayo—Medical Officer for the Islandeady Dispensary District.