affecting the vital interests of the profession—and, therefore, of the public—require free discussion.—Yours faithfully, W. J. MARSH.

Shrewsbury, February 9th, 1878.

SIR,—For years past, it has been a matter of surprise to me that our profession could rest content with the anomalous condition of its different grades, and that the "one portal" question could be discussed, and almost settled, without a thought being directed to the legal or ethical status of the members after their admission into the profession. Accordingly, I hailed your "leader" and the correspondence following it as the key-note of a much needed reform.

It has always appeared to me that there ought to be a very broad line of distinction between consultants and ordinary practitioners; not only in the matter of remuneration, but in the lines of practice open to them respectively. It matters not to what branch of practice a man devotes himself, he cannot or ought not to be at once a consultant and an ordinary practitioner. It is essential to have two classes, as distinct as barrister and attorney; but it is equally essential that there should be no possibility of competition between them. At present, there is no distinction, but universal competition. The same man is consultant in one house and general practitioner in another; his fees are sometimes honoraria, sometimes matters of account; and the fees of the general practitioner are often as large as those of the consultant for ordinary attendance. How is this to be obviated?

I venture to suggest that the Medical Council should take steps to separate the two classes, somewhat in this manner. The consultant should hold a special diploma; undergo a special course of study; and give evidence, in public gratuitous practice (hospitals), of his qualification for the position to which he aspires. A central authority should then have power to license or "call" him to practise as consultant in the special branch to which he has devoted himself. His practice should consist in giving counsel and advice, in consultation with general practitioners; and he should be precluded from holding communication with any patient, except through general practitioners. His fees should be honoraria, and not recoverable at law.

On the other hand, the general practitioner (so called until a better name is coined), holding certain diplomas, should be allowed to engage in one or all the branches of practice, and should be the ordinary medical and surgical adviser in all cases. He should be obliged to take out an annual licence to practise, which should give him a legal status to recover debts for professional service, in accordance with an established scale of charges. Such a scale would not prevent his charging more or less, according to circumstances; but would fix the amount recoverable at law, and so form a data for ordinary charges.

Such a division would correspond somewhat with barrister and attorney-at-law, and would be returning very much to the position of the profession in the last generation, when the apothecary was the ordinary attendant, and the physician or surgeon was called in to advise in difficult cases. It might possibly, at first sight, wound the susceptibilities of the more aspiring; but this is a matter of small moment compared with the advantage to the profession at large. There would be no longer any jealousy between the consultant and general practitioner. The former could not, if he would, be a competitor with the latter; and consultations would be more frequent, more cordial, and better paid than they are at present. There would be some reason then (and an explanation to the public) for men spending so much of their time in hospital and other gratuitous work, when it became necessary for them to prove their competence to fill the lucrative position of consultants. Professors or teachers would be drawn exclusively from their ranks, and many appointments would be open only to them; while the general practitioners would have all the family practice, with a legal basis for their charges.

I refrain from entering into details out of respect for the space in your columns, and am, sir, yours, EDWARD CROSSMAN.

Hambrook, near Bristol, February 4th, 1878.

CATGUT-DRAINAGE.

SIR,—Mr. Bradley, in his paper on Antiseptic Surgery (February 23rd, 1878), speaking of drainage, says, "Chiene's catgut method of drainage, which acts by capillary attraction, is perhaps the most inefficient of all". Mr. Bradley does not give his grounds for this assertion. I ask him to do so in your JOURNAL.—Yours, etc.,

Edinburgh, February 25th, 1878. JOHN CHIENE.

DONATIONS, ETC.—E. A. S. has given £100 "In Memoriam", to found a bed in the Cripples' Home, Bray. The late Edmond Burke of Cork has bequeathed £50 to the North Infirmary, Cork, and a similar amount to the Mercy Hospital in the same town.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

A CONSTITUTIONAL QUESTION.

THE correspondence which has taken place between Mr. Buck of Newport, Essex, the Board of Guardians, and the Local Government Board, raises points of such importance to all Poor-law medical officers whose stipends are arranged in accordance with the Consolidated Orders, that we shall briefly comment on it. It would appear that, in April 1877, Mr. Buck was ordered by the relieving officer to visit two of the children of a labouring man named Wright, who were affected with bronchitis. Their names were duly entered in the medical relief-book, and they were attended until well, no objection being raised at that time to the propriety of such attendance. That the relieving officer was justified in giving such an order, is evident from the fact that Wright has seven children, the eldest aged only fourteen; this one, a girl, earns one shilling a week and her board; a younger one earns three shillings a week; the united earnings of the family—out of which rent, clothing, and food have to be found—amounting only to seventeen shillings a week.

In December last, Mr. Buck was called to attend one of the same children, whose leg was fractured. On the father applying to the relieving officer for an order, it was refused; that official, however, permitted him to apply to the Board of Guardians, but with no better success. Thereupon Mr. Buck wrote to the Board, requesting to know the reason why they refused to grant an order in December when one was sanctioned in April. After three several applications, he received, on the 16th ultimo, a letter through their clerk, simply acknowledging the receipt of his three letters. Not daunted by this, Mr. Buck again wrote, and demanded an explanation of their action in granting an order for medical attendance in April and refusing it in December, the circumstances of the party remaining the same. In their reply, the Guardians state "that they consider the case in no way altered, and adhere to their former opinion (when expressed does not appear), that is, that Wright's case was not one that called for assistance from them".

Whilst this correspondence was going on, Mr. Buck wrote to the Local Government Board, giving the facts of the case, and inquiring whether, having ordered his attendance on the family in April, the guardians could refuse an order in December. He received for answer that the guardians were the sole judges when an order for relief, medical or otherwise, should be granted; that if an order for medical relief were granted, such order only remained in force so long as the illness continued; and, therefore, an order for relief given in April would not apply to a fracture of a leg of one of the children in the following December; but expressing no opinion on the fairness of the guardians towards him.

Now, we can have no hesitation in expressing our decided opinion that Mr. Buck has been most meanly used by this Board of Guardians; for it will be noticed that, when medical relief pure and simple is ordered for Wright's children, no objection is raised; directly, however, that an accident occurs, the treatment of which involves a fee of £3, then the order is refused. Our readers will also not fail to observe that the Local Government Board do not give any opinion on the merits of the case, beyond stating that the guardians are the sole judges when relief should be afforded. Seeing, however, that Mr. Buck holds office under the provisions of the Consolidated Orders, we are of opinion that successful action could be taken in the County Court for recovery of the fee; at any rate it would be worth the trial, as it would determine the legality or otherwise of a board of guardians directing their medical officer to attend a case of ordinary illness, and refusing the same when such attendance carried with it a fee.

We would also advise Mr. Buck to get a question asked in the House of Commons on the subject, upon the framing of which question we should be very pleased to advise him, if he should make application to us.

POOR-LAW MEDICAL APPOINTMENTS.

MACLAUGHLIN, F. P., M.B., appointed Medical Officer of the Strangford Dispensary District of the Downpatrick Union, *vice* W. Chartres, L.K.Q.C.P.I., resigned.

THOMSON, J. A. Mulville, L.K.Q.C.P.I., appointed Medical Officer to the Workhouse and Public Vaccinator, Newport (Salop) Union.