

of the cases of insanity said to be due to the abuse of Indian hemp, and that the patients have only taken to its use after they are becoming insane cannot be treated seriously without assuming a very great ignorance of the subject. We can, however, agree so far with him by believing that whenever a man takes to over-indulgence in cannabis there is good reason for questioning his sanity.

"Pyramid" admits that the special laws in Egypt have at least made haschisch dearer in price, and this in a poor country amounts to something in restricting its use. It is probable that the substances which are used in Egypt to adulterate it, of which he complains so much, are less harmful than the pure hemp. As to its pernicious effects in British Guiana and the West Indies there can be no doubt, and "Pyramid" may easily get more testimony than mine.—I am, etc.,

Carlisle, Sept. 26th.

THOMAS IRELAND.

#### DENTISTS AND THE COLLEGE OF SURGEONS.

SIR,—The physician who delivered the introductory address yesterday at the Westminster Hospital, referring to the dental profession, is reported to have raised the question "whether it would not be wise for the College of Surgeons to dissociate itself from this Branch altogether." As a lecturer myself, I am willing to make every charitable allowance for the exigencies of an introductory oration, but such an attack was quite unmerited. I might with equal justice enlarge upon the chief forms of malpractice by which a horde of charlatans prey upon the medical profession, but I should think it unfair, and scarcely in good taste. The dental profession is making every effort to free itself from unprofessional practitioners, and at the present moment a petition is being numerously signed in various parts of the kingdom praying the General Medical Council to declare advertising by dentists to be disgraceful conduct in a professional sense, and to erase the names of advertisers from the *Register*. Were these powers conceded, we should know how to deal with offenders.—I am, etc.,

F. NEWLAND-PEDLEY, F.R.C.S., L.D.S.

London, Oct. 3rd.

#### THE ST. JOHN AMBULANCE ASSOCIATION AND ITS DOCTORS.

SIR,—I notice a letter under this heading, signed "Justice," in the *JOURNAL* of September 30th. With much contained in it I fully agree; but to my mind the writer does not go far enough. Why should not medical men be paid for their services in coin of the realm when such services are rendered on behalf of a wealthy association? Surely a profession which in its individual work is so often compelled by the law of humanity to labour gratuitously should be paid, and that well, by the Order of St. John for lectures given on its behalf. Our butcher and our baker, not to speak of the other small items of housekeeping, must be paid in hard cash, so why should the medical profession accept any other form of payment?—I am, etc.,

Weymouth Street, W., Oct. 3rd.

G. CHARLES WILKIN.

#### DEATH CERTIFICATION.

SIR,—I am sorry to take up your time and space, and would not do so were it not that Mr. Nelson Hardy, in his letter in the *BRITISH MEDICAL JOURNAL* of September 30th, accuses me of soliciting your aid, and that of the *JOURNAL*, on my behalf. I do nothing of the kind. I simply hoped that you and the *JOURNAL* would support the Commission's proposal.

Your leaderette failed to give due prominence to the alternative named by Mr. Hardy, and he gladly takes the opportunity to name the police surgeon. Of course, being one, he cannot be considered absolutely disinterested.

I agree with him, however, that the medical officer of health in the case he offers would not do as medical certifier, but that a man should be appointed for the purpose, who would devote all his time to the duties of his office.

In the country districts frequently there are no "police surgeons," and my knowledge of the "powers that be" convinces me that they would never grant a salary sufficient to enable a man to devote all his time, in which case there is no one more suited than a medical officer of health.—I am, etc.,

A MEDICAL OFFICER OF HEALTH.

#### THE VACCINATION COMMISSION.

SIR,—In a letter to the *Times* of September 26th, Mr. Tebb strikes a note to which all will cordially respond who have given the subject their serious consideration. As he observes, the Royal Commission on Vaccination has now been sitting more than four years without making a sign as yet that their protracted gestation is nearing its term. Even antivaccinationists, for whose behoof the inquiry was instituted, are showing impatience at its interminable length. But there are pressing reasons, not alluded to by Mr. Tebb, why the Commissioners should pronounce their verdict on the questions submitted to them without further delay. In many parts of the kingdom the vaccination laws have been virtually in abeyance since the Commission began its sittings.

Boards of guardians, always unwilling agents in carrying out the provisions of the Acts, have made it a pretext for postponing action that the question of compulsion is *sub judice*, and in the meantime grace must be allowed to the recusants. The Local Government Board, in deference to this view, has suspended all active interference for the present. As the result of this anarchy, a free hand has been given to the antivaccination societies in their crusade against the compulsory clauses of the Acts; and we now see such a falling off in the number of public vaccinations throughout the country as must give cause for serious alarm in the near future. To take one instance among many, the vaccination returns presented to the board of guardians of the union of King's Lynn at a late meeting showed that the number of births registered was 257, of which number 21 children were successfully vaccinated, 29 died unvaccinated, and 207 were not accounted for. As a similar state of things is known to exist in many towns having larger populations than Lynn, we may take it to mean that a large proportion of children will fall victims to the next epidemic of small-pox, such as will bear some comparison with the small-pox mortality of prevaccination times. Besides the loss of life must be reckoned the contingent expenses of the epidemic in the shape of charges for hospital treatment, isolation, disinfection, and it may be for maintenance of families during quarantine, the bulk of which will have to be borne by the more sensible and law-abiding section of the ratepayers.

Looking, then, at the gravity of the situation, and at the calamitous results to be apprehended from a continuance of the present deadlock, may we not reasonably ask to have the closure applied to the deliberations of the Royal Commission, with such an expression of opinion on the whole question as can be formed upon the evidence before them?—I am, etc.,

Guildford, Sept. 28th.

HENRY TAYLOR.

#### "HORROR" AND IMPERFECT CHLOROFORM ANÆSTHESIA.

SIR,—In these days chloroform has been blamed in many cases as being the cause of death during operations. Correspondents of the *BRITISH MEDICAL JOURNAL* have also written on faulty administration, but few, if any, have put any blame on the operator or on the nervous condition of the patient. No doubt deaths have occurred through the anæsthetic itself; also through faulty administration, by haste, unscientific inhalers, etc. But, working, both as an operator and as an anæsthetist, I have several times had experience of patients who almost died on the table from (if themselves) very trivial causes. It must always be remembered that, in ninety-nine cases out of a hundred among adults the patient dreads the operation. Some dread the result, others the pain, or, to their mind's eye, the appearance of the wound, although they never see it. I myself have suffered from shock in having a tooth taken out, not from pain, but from a strange sense of horror. I also suffered from this shock when I had another tooth taken out under nitrous oxide gas, painlessly, but, through not being under sufficiently, I knew all that was going on and felt the horror as badly as before.

Now chloroform does not intoxicate in the same way as ether, and I have seen shock produced by beginning the operation before the patient was quite under the influence of the anæsthetic—profound shock produced in the simplest way and caused only by the fact that the patient was sufficiently conscious to be aware that the operation had com-