

THE DEPARTMENTAL COMMITTEE ON VACCINATION.

SIR,—As I am appointed to give evidence before the Departmental Commission of the Local Government Board on behalf of the Public Vaccinators in Rural Districts of England and Wales, I should be glad to receive from those gentlemen information giving instances of excessive distances, and any accurate statistics of the proportion of visits paid to the number of vaccinations effected. In all cases the various fees allowed to each vaccinator should be given. Correspondence should be addressed to me direct, and must reach me within the next two weeks.—I am, etc.,

Winterton House, Westerham, Oct. 12th.

A. MAUDE.

MEDICAL ACTS AMENDMENT BILL.

SIR,—I am requested by the Council of the Association of Physicians and Surgeons of the Society of Apothecaries, Limited, to draw your attention to their resolutions on the above-mentioned subject, of which I enclose a copy. While doing so, I should like also to point out that we have the opinions of the leading medical journals in favour of our contentions.

The *Lancet* of June 24th, 1899, p. 1725, says: "The medical profession is no longer divisible mechanically into apothecaries, surgeons, and physicians, and the sooner the law and the interpretation of the law are brought to recognize this equality before the law of all registered medical practitioners the better."

The *BRITISH MEDICAL JOURNAL* of January 28th, 1899, says: "It seems very undesirable to engage in litigation with a practitioner who is unquestionably legally qualified, because he uses a style such as 'physician and surgeon.' . . . It surely savours of retrogression for the General Medical Council to revive those distinctions which marked the intercollegiate jealousies of former days." Again, on December 14th, 1895: "The modern tendency is evidently to get rid of the academic and restricted meaning of the terms physician and doctor as limited to those only who hold a specific licence or university degree, and rightly or wrongly to extend the application of those terms to all who are duly licensed to practise medicine."

The *Medical Press and Circular* of November 7th, 1900, says: "Some change from the title of apothecary is certainly desirable and only fair to those who pass the L.S.A. The word 'apothecary' has become as obsolete as 'barber surgeon,' and a change is evidently necessary."

The present condition of the law renders possible a repetition of the grave scandal which arose from the prosecution of the late H. Kingsley Hunter, L.S.A., by the General Medical Council for using the title "physician."

A society of Conjoint Board diploma holders was, I believe, recently dissolved, and I should like to mention that this Association is working in the same direction as the late society, and would welcome conjoint men as extra members in furtherance of our common interests.

Finally, may I ask all licentiates of the Apothecaries' Societies, who have not already done so, to fill up and send to me, their forms of application for membership, without delay? All subscriptions date as from October 1st.—I am, etc.,

A. RIVERS-WILLSON.

Treasurer and Acting Secretary.

At the September meeting of the Council of the Association of Physicians and Surgeons of the Society of Apothecaries, Limited, it was resolved that, in the opinion of this Association no Medical Acts Amendment Bill can be considered satisfactory which does not include the following provisions:

1. That all persons registered under the Medical Act of 1858 in respect of qualifications to practise medicine shall henceforth be described as physicians, and all persons registered in respect of qualifications to practise surgery shall henceforth be described as surgeons.

2. That all persons registered under the Amending Act, and under the Medical Act of 1886, shall be described as physicians and surgeons.

3. That the annual registration certificate shall state that the person mentioned thereon is entitled to practise medicine or surgery (either alone or in conjunction with midwifery), or medicine and surgery and midwifery, as the case may be.

4. That the title of doctor may be used by all registered medical practitioners who are entitled under the Amending Act to describe themselves as physicians, or as physicians and surgeons.

It was also resolved: That this Association will actively oppose any Bill not containing provisions 1 and 2.

THE ROLE OF EYESTRAIN IN CIVILIZATION.

SIR,—As one who tries to take an intelligent interest in his patients I should like to utter a word of protest against the two letters which have appeared criticizing the paper with the above title. I cannot think such letters serve any useful purpose beyond displaying the lack of good taste and of the imaginative faculty in their authors. Any one could see at once that the paper was the work of an enthusiast, but surely it would be better to accept gracefully such a view of eyestrain,

etc., and then make allowance for the writer's personal equation, than hastily to pour ridicule upon the whole study of the author.

I think it is the old story over again of our own insular prejudice and want of ability to grasp the views of others. What eyestrain really means only those who suffer with it perpetually throughout the best years of their lives really know. I doubt if the picture of it is at all exaggerated. My own experience leads me to suppose that it is by no means confined to the more cultivated classes or even to those who live in fairly large towns; with our present educational system it will probably not diminish. The treatment by rhubarb, blue pill, headache powders, and injunctions not to use the eyes, always seems to me somewhat beside the mark. I think, too, that the more marked cases of eyestrain, that is, the slighter degrees of ametropia, are by no means so easily cured, or even relieved, by glasses, as Dr. Gould's paper might lead one to suppose. Any one who cares to refer to *Nuttall's Dictionary* will see that "incarnadine" is both an adjective (flesh-coloured, pale-red) and a verb (to dye red), perhaps more commonly the former.—I am, etc.,

Whitby, Yorkshire, Oct. 5th.

A. J. SHARP.

THE WILLIAM CADGE MEMORIAL IN THE CATHEDRAL AT NORWICH.

SIR,—Subscriptions have been received from the following since you published the first list:

Sir William Broadbent, London.	Dr. J. M. Jay, Chippenham.
Sir Anderson Critchett, London.	Dr. Vawdrey Lush, Weymouth.
Mr. Jonathan Hutchinson, London.	Dr. H. Briggs, Southport.
Mr. Christopher Heath, London.	Dr. Bridgwater, Uckford.
Mr. Mayo Robson, London.	Dr. Walker, Peterborough.
Mr. Work Dodd, London.	Dr. Thresh, Chelmsford.
Mr. A. E. Barker, London.	Mr. Lettis, Yarmouth.
Dr. Charlton Bastian, London.	Dr. Collier, Yarmouth.
Dr. Duka, London.	Dr. Hepburn, Lowestoft.
Brigade - Surgeon - Lieutenant - Col. Keegan, London.	Mr. H. Taylor, Wroxham.
Mr. G. S. Bates, London.	Dr. Mallins, Watton.
Dr. J. H. Galton, London.	Mr. Lack, Hingham.
Dr. Dudley Buxton, London.	Mr. Ellis, Attleboro.
Professor John Chiene, Edinburgh.	Dr. Owens, Long Stratton.
Dr. Griffiths (President British Medical Association), Swansea.	Mr. F. Clowes, Sutton-Stalham.
Mr. Evan Jones, Aberdare.	Dr. Hamill, Burnham Market.
Mr. H. Littlewood, Leeds.	Dr. Griffith Williams, Matteshall.
	Mr. Everett, Norwich.
	Mr. Watson Turner, Norwich.

The subscription list will be closed at the end of the month. —We are, etc.,

WILLIAM H. DAY, *Chairman.*MICHAEL BEVERLEY, *Treasurer.*

Norwich, Oct. 12th.

PUERPERAL FEVER.

SIR,—Most important—both to the already overburdened practitioner and to his lying-in patients—is the issue so ably raised by Dr. George D. Wilson under the above heading. From a considerable past experience I feel convinced that treatment in the overcrowded and otherwise insanitary houses of the very poor is simply a game of chance, and that undoubtedly the only humane course to adopt is the early removal and isolation of the patient. Under such circumstances—as your correspondent suggests—every general hospital, and, I would add, every parish infirmary, should have the necessary accommodation to admit such urgent cases, for it certainly seems a most astounding fact that no provision at present exists for the proper mitigation of the mortality of this virulent form of sepsis—the bugbear of the general practitioner, and the most detrimental to his practice.—I am, etc.,

Harley Street, W., Sept. 29th.

RONALD DANIEL.

ALCOHOL IN RELATION TO MENTAL DISORDERS: A CORRECTION.

SIR,—In the *BRITISH MEDICAL JOURNAL* of October 3rd, p. 822, the following paragraph appears: "In 44 per cent. of those treated at Dr. Stewart's private asylum (*sic*) one of the parents or," etc. The reporter must have taken me up wrongly, for I am most careful not to use the word "asylum" in reference to what is merely a private home for a few gentlefolk who seek my protection from King Alcohol. I never have in my house anyone who could be described as a "nervous" case or on the "borderland."—I am, etc.,

Clifton, Oct. 9th.

JAMES STEWART, B.A., F.R.C.P. Edin.

ASEPTIC SILENCE.

SIR,—A propos of this subject, may I suggest that it is the bounden duty of every operative surgeon to be clean shaven! Under the ordinary conditions of town life, is it possible to keep a beard or moustache aseptic?—I am, etc.,

Wimpole Street, W., Oct. 9th.

KENNETH CAMPBELL.