

injudicial position! Has "Professional Union" never heard of the one-portal system of examination, which was encouraged some twenty-two years ago by an enormous majority of those on the *Register* and by the *BRITISH MEDICAL JOURNAL*? A scheme which was within a hair's breadth of accomplishment, but, unfortunately, at the last moment Lord Carlingford's Bill was crowded out owing to the extraordinary pressure of Government business. Would not the one-portal system be a most distinct and important advance in the direction of professional unity? Not unity in every direction, but in the particular line which comes immediately under the supervision of the General Medical Council. Instead of, as now, twenty very varying standards of examination, there would be only one. The Council, if reorganized, could carry through such a matter if it chose to exert itself and obtain increased powers to carry out its decisions.

On one point, "Professional Union" (who seems a much greater admirer of the existing constitution of the Council than his name would warrant) and I agree entirely, and that is in admiration of the splendid work for the good of the whole calling accomplished by the British Medical Association. That it has no legal status at present is a weak point. It is my most earnest hope that this may soon be remedied, and a Charter granted.

The British Medical Association will be the first body in the twentieth century of truly imperial influence, stretching to every corner of the empire, supporting its units, supported by them, a great power for attack, defence, and advancing professional and public good. In fact, it will be the body trying to achieve the unity of the medical profession in every direction, and being founded on healthy lines will probably succeed.—I am, etc.,

London, W., Oct. 28th.

HERBERT SIEVEKING.

AN IRISH DISPENSARY DOCTOR ADMITTED TO THE WORKHOUSE AS A PAUPER.

SIR,—I daresay many of my professional brethren will be as much shocked as I was this morning on entering the Cootehill Union Workhouse, of which I am the medical officer, when the master informed me that Dr. Carr, late medical officer of the dispensary district in which I reside, had been admitted the previous evening on a ticket from the returning officer.

The history of the case may be told in a few words. Dr. Carr is an old man, probably over 70 years of age. His salary as dispensary doctor was £100 a year. He was also registrar of births, deaths, and marriages, but being unable, owing to failing sight, to discharge the duties of the latter office he was deprived of it by the Registrar-General a year ago. The same cause had sufficed to deprive him of any small private practice he may have had.

During the winter of 1905-6 he was off duty for five or six months owing to dilated heart, and when he resumed an inspector of the Local Government Board was quickly on the scene, and he was compelled to resign or be dismissed. He chose the latter course, and on Friday, October 26th, made a pathetic appeal to the Board of Guardians for superannuation. This was refused, and his small means being exhausted, he had to enter the workhouse.

Needless to say I shall not allow him to remain there as a pauper, but the fact of his being there speaks volumes for the treatment of the Irish Poor-law medical service by their new masters.—I am, etc.,

Cootehill, Oct. 27th.

T. H. MOORHEAD, M.D.,
President Irish Poor-Law Association.

MEDICAL INSPECTION OF SCHOOL CHILDREN.

SIR,—I beg to thank you for your courteous reference to two points mentioned by me in a paper on the medical inspection of children attending elementary schools. These are the only schools attended by many of the children of the empire, and it seems as if school were the only place to teach many of these citizens of to-morrow certain facts. How many young mothers know that the chances of life are 15 to 1 in favour of the baby nursed by its mother, as compared with the baby not nursed by its mother? How many people have a saving sense of the fact that a baby's chance of life depends directly on warmth, cleanliness, and good air to breathe? How many people really know when it is safe to give a baby solid food, or

fruit? These things should be part of "the foundation of education," and a girl of 12 years old had far better learn these things, and have the beginnings of a health conscience, than be taught certain geographical and mathematical facts.

Last year, travelling from Kingston to Toronto, I had as fellow passengers a mother and her little daughter, 7 years old. The little girl had a doll, and the doll was provided with a glass feeding-bottle, with rubber mouthpiece and all, quite complete! I think the manufacturer of doll's feeding-bottles is "an enemy to the republic." That was a bad object-lesson for the little girl, and it would have been well to have it corrected when she went to school.

In regard to the second point, "the man in the street" has not time to learn bacteriology; but he has time to learn that when a man gets typhoid fever the cause was in the water or in the milk or other food that he put into his own mouth himself a short time before he was taken ill. When he once has mastered this fact he will probably be as careful as are the Japanese soldiers, or he will insist on having his supplies of these necessities of life above suspicion. He should know that there is such a cause for every case of typhoid, and it does not need a Sherlock Holmes to find it out.

Not long ago I sat at dinner beside an eminent Canadian lawyer. He turned the conversation on typhoid fever. "The real cause is bad drains, isn't it?" he said vaguely. I thought it was my duty to tell him that typhoid was caused by a certain germ, and unless that germ was in his water or in his food or on his fingers he would not likely get typhoid from drains.—I am, etc.,

Toronto, Oct. 15th.

HELEN MACMURCHY.

THE RUBBER TEAT AND DEFORMITIES OF THE JAWS.

SIR,—Nowhere, at the least not anywhere where babies are fed otherwise than in Nature's own way, can Dr. Pedley's paper in the *BRITISH MEDICAL JOURNAL* be without interest and grave significance. It would seem that he has proved his thesis to demonstration. All of us must remain indebted deeply to him for his showing us how some prevalent deformities, and the physiological disabilities and pathological possibilities which result from them, may be prevented, to the decrease of disease and to the increase of happiness. No medical man would encourage any feeding of babies but from the breast. But such feeding in particular cases is not always possible. May we not hope that improved rubber "teats" may soon be procurable, made as Dr. Pedley would have them made, that is, so constructed as to obviate so far as may be in their use the dangers which he had so clearly pointed out?—I am, etc.,

Birmingham, Oct. 28th.

JAMES SAWYER, M.D., F.R.C.P.

OBITUARY.

THOMAS KIRSOPP, M.B.LOND., M.R.C.S., L.S.A.,
CHAIRMAN OF THE DARLINGTON DIVISION OF THE BRITISH MEDICAL ASSOCIATION.

WE regret to announce the sudden death of Dr. Thomas Kirsopp, at his residence in Darlington on October 23rd. He was actively engaged in his practice until a few hours before his death.

He was born at Hexham, Northumberland, in 1857, was educated at Durham Grammar School, and received his medical education at St. Bartholomew's Hospital, London. He became M.R.C.S.Eng. and L.S.A. in 1879, graduated M.B.Lond. in 1882, and was Lawrence Gold Medallist. Before starting in practice in Darlington nine years ago he was Assistant House-Surgeon at the Sheffield General Infirmary, Resident Medical Officer at the York Dispensary, and for a time in practice at Horsham. He took a keen interest in the Darlington Medical Society, for which he was an active secretary, and when this society was incorporated with the Darlington Division of the British Medical Association at the commencement of the present winter session he was elected Chairman.

His particularly genial, kind manner won for him a large circle of friends in Darlington, and his relations with his medical brethren were marked with a strict sense of uprightness which made him a universal favourite. Amongst his patients he will be very much