

courts. There is some controversy as to the status of the medical profession, but in many parts of Germany it is, we are told, regarded as a trade, practitioners having to take out a trade licence and pay trade taxes. In Prussia, however, it is admitted to be a scientific calling, the only exception being in the case of a doctor who carries on an institution for profit—such as a private lunatic asylum. The legal privileges of the doctor in Germany are that he alone may use medical titles or receive recognition by the State and public authorities, and that he alone is eligible to hold State and municipal appointments. His horse, carriage, and forage are exempt from military requisition; he is not liable to serve on juries or in various honorary municipal offices, and he may plead "professional secrecy" in a court of law; he must, however, serve on sanitary boards; he has a prior claim in bankruptcy over other creditors to the extent of one year's fees, and his instruments, including his watch and necessary clothes and the furniture of his consulting room, are exempt from distraint.

In Germany the highest ambition of the budding doctor is to become a specialist. Some of the medical courts and medical societies have laid down the rule that specialism must not be combined with general practice. In Prussia specialism is allowed only in certain subjects, and the specialist must qualify himself by studies carried on for at least three years beyond the ordinary curriculum either in a university department or some special institution, or in the wards of a large hospital, or by acting as assistant to a recognized specialist.

The medical profession in Germany is regulated by (1) the State and (2) voluntary societies. There are legally-qualified courts of medical honour which are elected by the medical men in each district, and are of two grades, a lower court composed solely of medical men, and a higher court of appeal where a legal assessor sits with the medical representatives. These courts try medical practitioners accused of various professional offences, and have the power to impose penalties, including censure, fines, and suspension from the medical franchise. As condemnation may involve the loss of public appointments, the decisions of these courts exercise considerable influence.

The voluntary societies are not scientific bodies, but are of the type of the Leipzig Union of German Medical Practitioners for the promotion of their business interests, founded by Dr. Hartmann. A principal object appears to be to watch over the relations of medical men to the State dispensary system, and to agitate for improved conditions of service. It would seem that these societies are practically trades unions; their methods are the same, and they contemplate organizing strikes if necessary to enforce their objects. Dr. Fuerst considers that the medical profession is not treated fairly by the State in Germany, and that the Social Democratic party desires to enslave it. He refers to schemes for converting the medical profession into a State service, a project which is not without supporters in this country. He thinks the plan is not in the interests of the profession or of the public or of science, and that the position of medical men would be unendurable if the public could demand their services at will. Doctors if made State officials would fall off in diligence and efficiency from the absence of competition. He approves a State service of doctors to perform such duties as attendance on the poor and on schools in connexion with State insurance, vaccination, and so forth.

Quackery, he says, is a great evil, though he does not believe that any law can stop it, as it is founded on inherent human weaknesses; he complains, however, of the state of the law in Germany, which sanctions medical treatment by unqualified persons and the traffic in secret remedies. He reproaches qualified men with being willing to take service with quacks. The most rampant form of quackery in Germany is the "Naturheilkunde," but this "Natural" treatment is a false pretence; scientific medicine includes the use of all "natural" means, drugs being as natural as water, sunlight, or fresh air; the title therefore misleads the public. Further, he states that it is within his knowledge that the claim to use no drugs is false, as in the course of his work as school doctor he has seen prescriptions drawn up by these so-called "natural treatment" doctors for morphine and other drugs.

Dr. Fuerst urges the doctor to be an active citizen, taking

his share in public life, in which he is fitted by his education to play a prominent and leading part.

The book is a compendium of information upon the state of the medical profession in Germany, but in spite of some advantages, chiefly on the educational side, there is reason to doubt if its condition compares on the whole favourably with the corresponding condition in this country, either in official legal status, social recognition, or pecuniary reward.

NOTES ON BOOKS.

THE reissue of the *Dictionary of National Biography*, edited by Mr. SIDNEY LEE,² is now approaching completion. Volume xvii, to the publication of which we have not previously referred, contains a biography of Shakespeare, by the editor, the longest, we believe, in the book, since it occupies nearly fifty pages, and the biographies of the Scotts, a family which has achieved distinction in many directions, no less than some ninety individuals appearing here. Volume xviii has a long and sympathetic account of Smollett and a short biography of William Smellie. The next volume contains the biographies of Sydenham, Benjamin Travers, Dr. Hack Tuke, Samuel Tuke (the founder in 1792 of the retreat for the insane at York), and of Dr. Todd (the first Professor of Physiology at King's College, London). The twentieth volume, comprising the names in the fifty-eighth, fifty-ninth, and sixtieth volumes of the original edition, takes us as far as Whewell, the famous Master of Trinity College, Cambridge. Among the biographies in this volume are those of the Wellesleys, including the first Duke of Wellington, the Vanes, the Vaughans, and the Walpoles. Among the medical names are those of Dr. Waller and Dr. Charles West, while there is an interesting account of the checkered career of David Urquhart, diplomatist and publicist, to whose advocacy the naturalization of the Turkish bath in the British Isles is mainly due. The reissue will be completed by the publication of two more volumes.

The three volumes recording the occurrences at the Australasian Medical Congress (formerly called the Inter-Colonial Medical Congress of Australasia), held at Melbourne just a year ago, have now appeared, under the title of *Transactions of the Eighth Session of the Australasian Medical Congress*,³ the editor-in-chief being Dr. ALEXANDER LEWERS. The proceedings are reported very fully, the remarks of some of the speakers at some of the debates being transcribed, it would seem, verbatim. The first volume covers general meetings and the work of the sections of medicine and surgery; the second the sections of obstetrics and gynaecology, public health, anatomy and physiology, and pathology and bacteriology; the third the work of the sections devoted to diseases of children, dermatology, neurology, ophthalmology, laryngology and otology, and military and naval hygiene. There are three indexes, the most useful being that in the third volume, which gives a classified list of all papers read. Among the most interesting discussions are those which took place in full session on the subjects of the relations of hospitals to the medical profession and the administrative treatment of syphilis. Several papers read in the section of military and naval hygiene contain references to the South African war, and show, amongst other things, that it was not alone from England that many physically unfit men started for the front.

Dr. MEYER has undertaken a difficult task, nevertheless his *Lexicon Medicum* is a satisfactory publication, complete and yet portable.⁴ His method of including the necessary amount of lexicographical matter within a small compass is ingenious. The paper is very thin, yet the print is quite clear. The English reader who, for instance, wishes to know the Italian for "cough" will find "*Cough* (e) = Husten (o)." By o it is understood that under the word before it all translations are to be found. The reader, then, turning to the word in question in this case,

² *Dictionary of National Biography*. Edited by Sidney Lee. Vols. xvii-xx. London: Smith, Elder, and Co. 1909. (Roy. 8vo, pp. 1418, 1348, 1407, and 1394 respectively. 15s. per vol.)

³ *Australasian Medical Congress. Transactions of the Eighth Session*. Melbourne: J. Kemp. 1909. (Roy. 8vo, pp. 1261, 3 vols.)

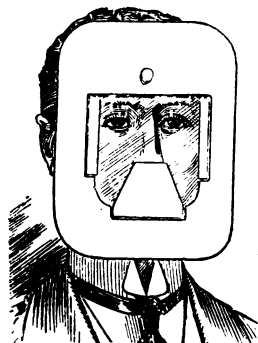
⁴ *Lexicon Medicum; Pocket Medical Dictionary in Eight Languages*. Edited by Dr. J. Meyer, Berlin, in collaboration with Dr. O.C. Finigan, M.D. Berl., M.R.C.P. Lond., Assistant Physician, German Hospital, Dalston. London: W. Lockwood and Co.; and Berlin and Vienna: Urban and Schwarzenberg. 1909. (Fcap. 8vo, pp. 816. 20s.)

will find *Husten*, *e* cough, *f* toux, *i* tosse, *j* gaisō; *seki*, *r* kaschelij, *s* tos, *u* köhögés." Thus, he will learn without much difficulty that "tosse" is the Italian for cough. The Hungarian doctor who desires to know the English for "cough" will find "*Köhögés* (*u*)=*Husten* (*o*)," and then, turning to that German heading, will learn what he sought; and so will the Frenchman, Italian, Japanese, Russian, or Spaniard when he looks up the word in his own language, as the reference will be to the German heading which includes "omnia" or "o." Those who read German works or wish to converse with German-speaking doctors or patients will find reference very convenient when they hear the German word and seek for its English equivalent direct, as it includes English among the rest. The compiler states in his preface that this lexicon is designed for the use of medical men who go to foreign countries as visitors to congresses, ship surgeons, medical officers in the services, students and inspectors of foreign sanitary methods, and for consultation and practice abroad, or with foreigners in the doctor's own country. The lexicon appears to be fairly complete, especially as to the medical names of disorders. A few English words in general use, such as "chicken-pox" and "stye," are omitted; in respect to the last word, we must add that not only do we fail to find "compère loriot," but "Gerstenkorn" and "Hordeolum" are likewise absent. The lexicon is, however, a very satisfactory compilation. It is significant to find that Spanish is becoming more and more studied, and not only in commercial circles; but it is not surprising, for from the frontier of Texas to Cape Horn the language of Cervantes and the cognate tongue of Camoens prevail. Many Englishmen go to Spanish America, and there is a good school of medicine at Buenos Ayres.

MEDICAL AND SURGICAL APPLIANCES.

Garrould's Zymotic Face Protector.

MESSRS. E. AND R. GARROULD (150, Edgware Road, London, W.) have introduced a zymotic face protector for the use of medical men and nurses.



The invention consists of a shield of thin aluminium with a transparent outlook, and is designed for the purpose of protecting the face from infectious matter or involuntary expectoration in diphtheria, fever, or other cases. The only objection we can see to this apparatus is that the breath of the wearer condenses on the glass screen; and we fear that in cold weather, even in a ward, the condensation would interfere seriously with the sight when the protector was being worn for longer than a minute or so. Otherwise the protector would be useful; though it is very difficult

to persuade nurses to wear screens of this sort. Fortunately the risk to the eyes, which this instrument is designed to avoid, is very slight. The price of the appliance is 10s. 6d.

Rectifier for Converting Alternating Currents.

The need for some simple and compact apparatus by means of which alternating current from the mains may be converted into continuous for the smaller powers has long been felt by users of electricity for medical and other purposes. The systems already in use, such as the electrolytic rectifier, the mercury lamp, and perhaps in a less degree the motor generating set, have their own disadvantages, either in the shape of unsatisfactory working, costly upkeep, or loss of efficiency in transformation. We have had the opportunity of witnessing a demonstration of a new apparatus, which possesses an efficiency of about 90 per cent., and may be said closely to approach the standard of the ideal rectifier. It has been placed on the market by the Premier Ampero Electric Company (Premier House, Dover Street, W.), whose name it bears. Its simplicity and portability are its first claims to favour, for there are no brushes to look after, no chemicals to employ, and no mercury lamps to replace; moreover, it can be safely left in the hands of one who is non-expert in electrical technique. The principle of the instrument depends upon the fact that if two secondaries of a transformer are alternately put into circuit at each half period, the induced current feeding the secondary circuit will be unidirectional. One of the second-

aries of this transformer feeds two electro-magnets, which are wound so as to give the same polarity simultaneously. Then an armature, pivoted at the centre, is magnetized by two small coils, which are wound so as to give opposite polarity, and are excited by direct current taken from one of the cells on charge, or from a special cell if the rectifier is not being used for battery charging. The rapid change of the magnets in polarity when excited by alternating current causes the armature to be attracted and repelled synchronously, and, by means of a contact piece, its oscillations alternately make and break the contacts, each of which is connected to an end of the secondary winding. This is the rough outline of the plan by which the current is made continuous. An important feature of the device, which was effectively demonstrated, is its action as an automatic cut-out. If the current from the mains stops flowing, the rectifier itself will stop and automatically cut off the accumulator connexions. Add to this its freedom from noise and the prevention by means of small condensers of sparking at the contacts, and it will be evident that we have here no inconsiderable boon to the medical electrician and the hospital department.

MEDICINAL AND DIETETIC ARTICLES.

Bulgarian Sour Milk with Various Medicaments.

MR. W. MARTINDALE (10, New Cavendish Street, London, W.) is now preparing Bulgarian sour milk—to his preparation of which he gives the name Trilactine milk—with the addition of various medicaments. He has submitted for our examination specimens of a number of such combinations, including Trilactine milk with carbolic acid, potassium iodide, iron, and salicylates of bismuth and sodium; other kinds are also prepared. It is suggested that the Bulgarian sour milk may prove a useful medium for the administration of various drugs, especially where prolonged treatment is required. Examination of the samples submitted showed that the presence of the medicament had not prevented the formation of a very satisfactory curd. Microscopic slides of some of these preparations were also sent, and these showed abundance of the rod-like bacilli.

Biscuits with Protein.

We have received from Messrs. Huntley and Palmers, Limited (Reading) samples of three new biscuits which they have recently placed on the market, under the names "Apax," "Spartan," and "Akoll" biscuits, and which possess considerable dietetic value. They are particularly characterized by the large amounts of protein of vegetable origin which they contain. Our analysis showed the Spartan biscuits to contain 18.4 per cent. of protein, or about the same proportion as exists in beef or mutton of average fatness, and three times as much as is contained in bread. The Apax biscuits showed 23 per cent. of protein; both these biscuits are of the palatable and attractive character usually found in the products of this firm. Akoll biscuits are intended for diabetic patients or others to whom carbohydrates are forbidden; our analysis showed them to contain 54 per cent. of protein, and not more than negligible traces of sugar or starch. They are quite palatable, and could doubtless form a large item in a diet for a long time without producing any distaste for them.

THE CIVIL SERVICE SUPERANNUATION ACT.

THE Act to amend the Civil Service Superannuation Acts of 1834 to 1892 received the Royal assent on September 20th, and as many medical men may shortly find themselves requested by their patients to make an examination, and to fill up the prescribed form of medical certificate which it is necessary that every male civil servant over 55 years of age should supply if he desires to be brought under the provisions of the Act, the following summary explanatory of the main provisions of the Bill may prove useful:

Clause 3, Section 1.—The acceptance of the proposed scheme of superannuation to be optional to all members at present in the service under the age of 60 years.

Clause 2, Section 1.—The granting to the legal personal representatives of any officer with service of five years or upwards who dies in harness a gratuity equal to the annual salary and emoluments of his office.

Clause 1, Section 1.—The superannuation allowance to be calculated at one-eightieth of the annual salary and emoluments, multiplied by the number of completed years of service.

Clause 1, Section 2.—In addition to the superannuation allowance, the granting of a lump sum equal to one-thirtieth of the annual salary and emoluments, multiplied by the number of completed years of service, and