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occupies the chair of anthropology at Berlin University, and has spent thirty years studying the anthropology of Western Asia, personally informed me last year, in answer to specific inquiries on my part, that Western Kurdistan presents in a marked degree the climatic characters just enumerated, and in this respect differs materially from the rest of Asia Minor.

But, apart from types which have preserved or reverted to more or less pure racial characters and types specialized for this or that locality, there is a large proportion of the nation who belong to neither of these classes, being inextricably hybrid in appearance and descent. It is among the healthy stocks of this last class that greater adaptive powers are to be found. They appear to be richer in the resources of their intracellular elements3 when the call is made for adaptive response, an educability of tissue to be attributed apparently to the varied evolutionary experience of their ancestry. The Scots notoriously excel in this power of response to change, and the explanation is doubtless to be found in the early and thorough fusion of racial elements which has taken place in many parts of Scotland, together with the severe pruning of enfeebled stocks, that has resulted from the centuries of strenuous national life in that country. However, you cannot get more power out of a machine than you put into it; and, similarly, you cannot get wider natural adaptive powers out of an individual than those contributed by his ancestry. Of course, a man being a man and not an animal, he can exercise some degree of control over his surroundings, and, to a limited extent, adapt his environment to his own particular requirements. But man's resources in this respect are still very limited. He may be able greatly to reduce the mortality from tropical disease of picked gangs of workers for a limited number of years in a place like Panama, but this does not prove that he can establish there all the conditions necessary to continued reproduction of his race generation by generation without deteriorating. All the evidence of history and the lessons of biology are against it. If the ancestry, however mixed, of a group of individuals were derived from races evolved solely in temperate regions, it is impossible for the descendants of that group to escape eventual degeneration if they attempt sudden settlement in tropical or subtropical regions. Is it imagined that because we can control to some extent the ravages of malaria and similar tropical diseases that we have mastered the thousand and one subtler adverse influences of an environment alien to our race? Time will speedily prove the contrary. To what extent, for instance, can we modify the temperature and humidity of the all-pervading atmosphere which can produce marked effects on migrating stocks even within the compass of the British Isles?

This brings me to my second point—the suggested wholesale colonization of northern Australia with white and preferably British immigrants. When an Australian doctor wrote to me last year informing me that such a scheme was in contemplation I would have found it hard to believe that the teaching of the past could be so utterly set at nought did I not know that the ever present menace from the north is well calculated to warp the judgement of Australian statesmen and render them willing to embark on what you rightly term "A Great Experiment" in order to create a bulwark against Asiatic invasion. But the whole history of migration teems with evidence against such an experiment proving to be anything but a disastrous failure. Even if adequate adaptation is ultimately achieved, which is improbable, it will only be after a terrible weeding out of unsuitable types with all the distressing phenomena attendant on such a process. A far more likely result of indiscriminate immigration from British sources is a progressive racial enfeeblement, culminating in the fate that sooner or later terminates such a process—domination by another and stronger people.—I am, etc.,

London, N.W.

J. S. MACKINTOSH.

left estate in the United Kingdom valued at £10,315.
THE Chelsea Hospital for Women has received from the Grocers' Company a donation of £100 to its Rebuilding Fund.

## Obituary.

THOMAS KIRKWOOD, M.B., C.M.GLASG., NEWCASTLE-UPON-TYNE

By the death of Dr. Thomas Kirkwood, which took place on July 18th, Newcastle upon-Tyne has lost one of the most respected of her medical practitioners. Born in Dalry, Ayrshire, in 1850, and for two years in early manhood a certificated assistant in the Glasgow Highland Society's Schools, Dr. Kirkwood renounced the profession of teaching for that of medicine, and became a student of Glasgow University. After graduating in medicine and surgery he practised for several years in Rutherglen. Upwards of a quarter of a century ago he came to New-castle, where in the West End of the city he added considerably to the practice he had taken over from the family of the late Dr. Scott. Those who had the privilege of knowing Dr. Kirkwood feel that they have lost a true friend. With nothing but a good word for every one, he made no enemies. Few men had the interest of his patients more at heart than he had. He took little active interest in affairs outside his profession. His death came unexpectedly after an operation, and when to his surgical attendants all seemed to be going on well. Mrs. Kirkwood predeceased her husband only a few months ago. One son alone remains. The funeral was attended by a large number of his patients, many of whom were evidently deeply affected, also by many members of the medical profession, especially of the West End, by whom he was held in high esteem.

## Public Health

## LAW MEDICAL: SERVICES.

DUTIES OF A DISTRICT MEDICAL OFFFICER. IGNORAMUS writes: I am district medical officer, but attendance on the inmates of the casual ward is not included in my bond. There is no official police doctor, and I generally do the police work, but the police avoid all liability for payment by taking their cases to the casual ward and then sending for me from there. What shall I do?

there. What shall I do?

\*\*\* We fail to see that our correspondent is called upon to

the population of the police. If attend at the casual ward on the request of the police. If cases are taken there by the police in order that they may secure medical attendance gratuitously, our correspondent would be justified in declining to give his services.

## Medical Aelus.

THE library and offices of the Royal Society of Medicine will be closed from Thursday, August 1st, to Saturday, August 51st, inclusive.

A MEMORIAL to Mr. Asquith in support of the Criminal Law Amendment Bill is in course of signature by medical women; 120 names have already been appended, and others who are willing to sign are asked to communicate with the secretary of the "Pass the Bill Committee," 19, Tothill Street, Westminster.

WE are asked to state that the annual circular asking for information to maintain the correctness of the Medical Directory was posted to the members of the medical profession on August 1st, and the volume will be published on December 16th. Messrs. J. and A. Churchill appeal to all medical practitioners to make their returns as quickly as

THE proceeds of the bazaar held in the Drill Hall, Southampton, which was opened by H.R.H. Princess Henry of Battenberg on July 11th, for establishing a home of recovery in Hampshire similar to that which exists in Surrey, exceeded £1,000. This sum will be added to the endowment fund, and is a happy augury of the ultimate

success of the venture.

THE proceedings of the International Congress of THE proceedings of the International Congress of Obstetrics and Gynaecology in Berlin will commence on Monday, September 9th, when the International Organization Committee meets. The discussions will commence on Tuesday, September 10th, and will continue until the following Thursday. Full information may be had from the Honorary Secretary to the Congress, Dr. E. Martin, Berlin N., 24, Artillerierstr., 18.

<sup>&</sup>lt;sup>2</sup> See "The Immunity Problem and Organic Evolution," by C. J. Bond, F.R C.S., BRITISH MEDICAL JOURNAL, February 24th, 1912.

THE late Sir William Thornley Stoker, Bart., of Dublin,