chemistry is still required for the verification of these views and opinions. How far they are supported by the limited number of facts now adduced from anatomy, must be determined by future and more extended observations, which shall establish or disprove the general coincidence of Diabetes with the lesions and alterations which I have described. I therefore leave the inferences which I have drawn, as conjectures only, which may or may not be well-founded, but which, in the present state of our knowledge, will not, I trust, be deemed altogether unwarranted by the premises. In diseases which are both mysterious and fatal, the temptation to speculate is always strong; and I may, on the present occasion, have yielded too readily to the enticement, and so have given undue extension to this paper. I am more at ease with respect to another cause of the length which the communication has reached—the space, namely, which has been devoted to the complications met with in the several cases. It is scarcely necessary to observe, that no description of a case can be complete without a full account of its complications. These are rarely absent in any disease, however determinate and unequivocal its nature; and cannot, indeed, be disregarded by the practitioner; for, in whatever relation they may stand towards the dominant malady, they always constitute a serious element of perplexity or danger, embarrassing the diagnosis, thwarting the best devised remedial measures, exasperating sufferings, and, in fatal cases, often precipitating the inevitable crisis. In those diseases, again, whose nature is still obscure and undetermined, they seem no less deserving of attention and commemoration from their bearings on a true pathology. The history of medicine shews that, in not a few instances, what had been long known and received as a mere complication or frequent accessory, has proved to be the primary and real malady; and it is thus, probably, that, in the progress of pathological investigation, Diabetes will eventually be withdrawn from the category of urinary diseases strictly so called, and the kidneys, absolved from all blame in its production, be looked upon as really engaged in the friendly office of ridding the system of a pernicious poison.

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PROVIDENT DISPENSARIES: THEIR SOCIAL IMPORTANCE, AND THEIR ADVANTAGES TO THE MEDICAL PROFESSION.

By HENRY L. SMITH, Esq., Surgeon to the Eye and Ear Infirmary, Southam, Warwickshire.

THE formation of PROVIDENT DISPENSARIES is a subject to which I have, for upwards of thirty years, directed my attention. The plan, therefore, which I desire to propose is not a speculative opinion, but the matured result of practical experience of the working of institutions of which I have been, directly or indirectly, the founder.

Before entering on the general consideration of the subject, I will

briefly state the circumstances which first directed my attention to the formation of Provident Dispensaries.

In the early part of my medical career, I was for a short time attached to the army; and there acquired those ideas of order and discipline, which I have since endeavoured to carry out in the duties of practical charity. Subsequently, I proceeded to establish an Eye and Ear Infirmary in my native town; and soon received such an amount of support, as to be able to calculate on an annual income of £120. This would be sufficient to pay the rent of a house, also the matron and servants; but it would not maintain the patients. The committee therefore determined that the subscribers, or parishes sending patients, should pay sixpence a-day for each child, eightpence for each woman, and tenpence for each man. Up to the present time, we have been able to keep in constant usefulness an institution, in which fourteen beds are made up; and, without any other aid, we have accumulated, from the profit on the patients' board and surplus subscriptions, nearly £500; a large sum in a neighbourhood where the number of the rich is greatly limited. From the success which attended this institution, I conceived the idea of remodelling the common method of supplying the poor with medical attendance, by the establishment of self-supporting Dispensaries; and I published a pamphlet, setting forth my views on the subject. The practical results of the plan proposed by me will be subsequently illustrated.

The necessity of remodelling the administration of our public medical charity will be obvious, from a careful examination of the working of the methods by which the poor are at present generally supplied with medical attendance. To make my remarks on this subject more intelligible, society may be divided into three classes:

1. Those who are able to pay for whatever they require.
2. Those who are willing, but unable to pay the usual charges of medical attendance.
3. Those who are utterly unable to contribute anything, and not unfrequently unwilling.

Of the first class I will merely observe, that the second has many claims on their attention: and that this feeling actuates the members of the first class, the number of charitable institutions which abound in this country is a sufficient proof. They have, however, done great injury by not making a sufficient separation, and confounding the second with the third class—those who are unwilling to pay. It is from the first class also, that medical men must expect payment for their labour: they can expect no adequate remuneration from either of the other classes.

The second class, who are willing, but unable to pay for medical advice, are very numerous. That they are willing to procure medical advice when it is brought within their reach, is proved by the fact, that in every place where the plan proposed by me has been fairly tried, they have done all that could be expected of them.

The persons belonging to this class are mostly in a condition, in which, under the present system, they must either act dishonestly, by incurring medical bills which they know they can never pay; or they must lose their independence, and descend into the ranks of beggary, by soliciting a charity ticket to some honorary Dispensary, or, still worse, by applying to the relieving officer for a parish order. Or they may take quack

medicines, or obtain medical advice from druggists. Many, again, have too much intelligence, and too great a feeling of delicacy and independence, to submit to any of these degrading alternatives, and frequently die without any assistance whatever.

The remedy proposed for these evils, is the establishment of Provident Dispensaries, to which all those who are willing, but unable to pay a bill for medical attendance, might periodically contribute a small sum, in no case exceeding one per cent. of their earnings. By this means, efficient medical aid would be secured to them in illness; and they would still be enabled to maintain a feeling of independence on charity, and at the same time have their minds relieved from that most uncomfortable incubus—a long bill.

It is evident that that can be easily done by the aggregate, which would be perfectly ruinous to an individual. One penny per week from each of one hundred persons will give an income of £21 13s. 4d. per annum; a sum fully equal to pay for medical advice of the highest class. It is probable that a hundred average adults may not have three months of confinement to bed from sickness among all of them in the year; and a few may require single doses of medicine, which will often ward off more serious attacks.

The main feature in which Provident Dispensaries differ from the generality of charitable medical institutions, consists, then, in this: that, while the Dispensary is supported by the contributions of the more opulent, each person who receives benefit from it has paid his or her share towards its funds. They have, moreover, the advantage of not being liable to the perversion of charity, which obtains to such an extent in our hospitals and dispensaries. It is a notorious fact, that many of the patients of these institutions are persons who can well afford to pay for medical attendance; and that the system of admission by recommendation from governors has often, intentionally or unintentionally on their part, the effect of utterly perverting the charitable objects which such institutions may be expected to have in view. Is it wonderful, also, that many of the poor are so, because they find it the best and only means of obtaining the attention of the rich?

There is a class of Provident Institutions in many districts, in which each member, by payment of a certain sum to the common fund, entitles himself and his family to medical attendance and pecuniary aid during illness. The management of these clubs is in the hands of those who thus derive benefit from them; and the principle of mutual charity, which, if properly regulated, they would tend to support, is often perverted by the admission of persons who, though perfectly able to pay for medical advice on their own account, have not a sufficient sense of their own dignity, or of justice towards their medical attendant, to prevent them from availing themselves of the benefit afforded by such institutions, and to which their poorer brethren have mainly contributed. Provident Dispensaries, if properly managed by a committee selected from the subscribers to the honorary fund, and by the medical men connected with them, obviate this evil, by preventing the admission of any but those for whom they are originally intended.

PLAN OF FORMATION OF PROVIDENT DISPENSARIES. The following plan is founded on the rules of the Royal Victoria Dispensary at

Northampton. It will, of course, require modification in some of its details, according to circumstances. 1. The funds of the institution are to be derived from the subscriptions and donations of honorary members, and the payments of free members. The honorary members to be governors, according to a scale of payments. 2. The honorary fund shall bear the general expenses of the institution; the free members' fund shall defray the cost of drugs; and the remainder, together with such portion of the honorary fund as may be proper, shall be proportionately divided among the medical officers. 3. The institution shall be managed by a president and committee, elected from the honorary members, in such way as shall appear desirable. 4. The medical officers shall attend daily in rotation: all legally qualified practitioners practising in the neighbourhood shall be considered, unless they decline, as medical officers. 5. The free members shall consist of working persons and servants, their wives and children, not receiving parish relief, and being unable to pay for medical advice in the usual manner. Any such person wishing to become a free member, shall leave his or her name, age, residence, and occupation, at the Dispensary, and deposit one month's subscription, which will be returned if the depositor be not admitted a member. Every free member, above fourteen years of age, shall pay one penny, and under that age one half-penny a week; but twopence a week will be considered sufficient for a man, his wife, and all his children under fourteen years of age. Servants who may be judged eligible by the committee, shall pay five shillings a year, in not less than half-yearly payments. The payments of the free members shall be made in advance. No one in arrear will be entitled to the benefits of the institution; and each family or member shall pay a fine of one penny for the arrear of every week. If any member be more than five weeks in arrear, his or her name shall be erased from the books. No one actually labouring under sickness can be admitted a free member, unless he pay an entrance fee of five shillings, in addition to the usual weekly subscription, and all his family enter at the same time. If any free member shall, through improved circumstances or otherwise, be, in the opinion of the committee, no longer eligible to the benefits of the institution, his or her name shall be erased from the books. Every free member shall have the choice of whichever medical officer he may prefer; but he shall not change his medical attendant during his illness, without the sanction of the committee. Those patients who are able must attend at the Dispensary between and o'clock in the morning, bringing their admission ticket. Those who are too ill to attend at the Dispensary, must send their ticket before nine o'clock in the morning; the medical officer by whom they wish to be attended, will visit them at their own homes. In cases of accident, or sudden illness, they can have the attendance of any one of the medical officers, on sending their admission ticket to his residence. No free member will be visited at his own home, if he reside beyond the limits of the parish. Any married woman being a free member, subscribing with her family twopence a week, may have, during her confinement, the attendance of whichever medical officer she may prefer, on depositing at the Dispensary five (or ten) shillings three months previously. The same amount will be added to the fee of the

medical officer out of the honorary fund. No woman is entitled to the benefit of this rule, unless she has been a member at least six months. Patients must find their own bottles. The children of the free members may be vaccinated on any morning, at o'clock. The medical officers will attend at the Dispensary every morning, except Sunday, in rotation.

SOCIAL IMPORTANCE OF PROVIDENT DISPENSARIES. The advantages conferred on all classes of the community by a well managed Dispensary of the class under consideration, are numerous; it will, therefore, be sufficient to call attention to a few of the most obvious.

1. As has been already pointed out, they offer material aid to those who are able and willing to maintain themselves by their own labour, but whose resources are not sufficient for the expenses incurred by illness. To such persons, they offer a ready means of obviating the alternative of either the degradation (to them) of applying for parish relief, of incurring bills for medical attendance, which they can never pay, of consulting ignorant and unqualified persons who pretend to treat diseases, or of allowing disease to obtain, unchecked, the mastery over their constitutions.

2. They tend to foster practical habits of forethought and economy. Having once perceived the advantages derivable from Provident Dispensaries, those who have received these benefits will be led to enter into combination for provision against other necessities or casualties of life, as clothing, old age, etc. Hence will arise, as has already been the case in several places, the formation of Mutual Benefit Associations for the supply of food, clothing, etc., to those who are in need. During any extraordinary epidemic visitation of sickness, also, the recipients of the benefits afforded by a Provident Dispensary, will be easily led to make some temporary provision to meet the additional wants which they may incur. As an instance of this, I may mention, that during the prevalence of cholera, in 1832, the free members of the Provident Dispensary in Southam were induced to subscribe an additional sum of sixpence per week for each family during the prevalence of the epidemic, and the proportion which was found remaining at its termination, was returned to them.

3. These Institutions also leave the patients, to a great extent, unembarrassed in their choice of a medical attendant. Confidence in the skill of the practitioner employed, is more or less essential to the successful treatment of disease; but this can hardly be expected to be the case when, as under the present system of parochial relief, the patient is required to call in the parish medical officer. Under the system of Provident Dispensaries, each free member has the power of selecting a medical attendant, and of changing the same at the end of a certain period, or often, if there be sufficient reason, at any time. It moreover enables them to easily have the combined medical skill of the Institution applied in cases of emergency.

4. Provident Dispensaries obviate the indiscriminate abuse of medical charity constantly practised in our Hospitals and Dispensaries. It is well known, that in such institutions, little or no discrimination is exercised by the governors in the granting of tickets of admission to applicants for relief: and the natural consequence is, that the benefits

of the institution are afforded to many who are well able to pay independently for medical attendance, while those who are really destitute are excluded. On this subject, I would refer the reader to the excellent pamphlet on *Sanitary Economics*, by Dr. A. P. Stewart, who has ably pointed out the evils of the present system of medical charity.¹

5. Another benefit is, that the poor are led to apply for timely aid against the inroads of disease. I have already referred to the fact, that many of these prefer allowing disease to make progress—it may be irrestrainable—in their constitution, rather than submit to the degrading alternative at present offered to them. But the restraint thus imposed on their spirit of independence and honesty, is removed by the power of obtaining such assistance as is afforded by a Provident Dispensary: and that this is actually the case, is proved by the large proportion of applications for medical relief, made by persons labouring under latent ailments, during the first year of the opening of such institutions.

6. Provident Dispensaries will tend to diminish the expense which is incurred under the present system of poor-law relief. By enabling many to obtain medical aid without applying to the parish, they will directly diminish the burden of the poor-rates, which will thus be more especially applied to the objects for which they are properly designed. There will still be many of those who are able to provide for themselves and their families, but yet have not sufficient honest pride to keep them from falling into the ranks of pauperism. I do not anticipate a complete reform in this respect; but the system which is the subject of this paper, will tend to effect a separation between those who are embarrassed by temporary necessity, and the pauper from obstinate improvidence. And it is probable that Provident Dispensaries will be found to possess such advantages, as to lead parish authorities to contract with them for medical attendance on the paupers. By this means, many of the evils arising from the farming of the sick poor will be averted.

7. The medical profession will also derive no small share of benefit from the establishment of Provident Dispensaries. They will be spared the irksome task of sending bills for attendance to persons who cannot pay the usual fees, while, at the same time, they will receive a greater amount of remuneration for their labour, provided care be taken to admit none but the really needy to the benefits of the institution. The restraint imposed by the idea of unpaid bills, or by the fear of incurring them, being removed, the patients will be led to apply at a sufficiently early period to enable the medical man to use the proper means of treatment, with some probability of success; and the result of this may be an increased confidence in his skill on the part of his patients.

The system will, moreover, tend to bring practitioners into closer contact with each other; and, while it increases their mutual good-feeling, will afford them opportunities of obtaining that improvement in professional knowledge, which is better effected by a combination, than by the unaided labours of a single individual.

Many other advantages arising from the adoption of Provident Dis-

¹ See a review of Dr. Stewart's pamphlet in the LONDON JOURNAL OF MEDICINE for February, p. 178.

pensaries might be pointed out ; but I will content myself by quoting some extracts from letters received by me from the vice-president, and from one of the surgeons of the Dispensary at Northampton, illustrating the practical working of the system in that town.

The following is an extract from the letter of H. B. Whitworth, Esq., Vice-President : it is dated 5th January, 1850. " The Northampton Dispensary was commenced under very unfavourable circumstances ; but the institution has now, I think, taken a firm hold on the affections of the classes for whom it was established, which has been proved beyond all doubt within the last six months.

" About the month of August last, the cholera broke out in this place, when, at the request of a self-constituted Board of Health, and of the Improvement Commissioners, the Dispensary was thrown open to all persons labouring under cholera and diarrhoea. This proved to be very efficient, as upwards of 400 applications were made at the Dispensary, and about three times as many visits were made by the medical officers of the institution at the homes of the patients ; but the most surprising result, was the increased number of applications that were made at that time to enter the Dispensary, viz., about 500 in the four consecutive weeks after the opening of the Dispensary to the public ; and from that time to the present about 500 more : so that upwards of 1000 new members have entered since August last ; and our receipts are now upwards of £10 per week from the poor, and our total number of members is upwards of 4000.

" In a social point of view, I consider that the working of the provident principle is doing a great good ; and I doubt not but that, in a few years, the Dispensary will be considered, by all classes, as the most important public institution connected with our town.

" With my best wishes for your success, believe me, dear sir, yours sincerely,

" HENRY B. WHITWORTH."

Mr. Spurgin, one of the surgeons to the institution, writes as follows : " I am decidedly of opinion that Dispensaries, based on the principles referred to, are capable of affording incalculable benefit to our community. Considerable vigilance and care should be taken by the executive committee in the selection of objects, or it would unquestionably clash with the interests of the practitioners in the locality, and of course with that of the officers themselves. The honest man, having no other resources than his own industry, is the party to admit. A second class of persons are admitted, who would not pay at all, and in this way positive relief is afforded to the medical man ; the trouble of keeping accounts, of bill delivering, of bad debts, and of sore mortification, is often and assuredly prevented, by the admission of this class. I would also refer to a third class of patients, now very generally admitted ; these are domestic servants. I have given this grade much thought, and am of opinion, that where they are receiving a certain amount of wages, they ought not to be admitted. I have for many years found them quite competent and very ready to pay ; I should not admit them when they are receiving over £9 or £10 a year. The introduction of this system has a great tendency to prevent the illegal and highly injurious, and frequently fatal practice of the druggist ; and

I am sorry to state that I have met with many instances of mal-practice, attended with fatal consequences,—a practice, too, which I feel it my duty to prevent and expose, whenever and wherever it may come fairly before me. Of course, for similar reasons, the administration of quack medicine may be prevented. With regard to our own Dispensary, I believe it is becoming more and more appreciated, as proved, not only by the great and rapid increase of members, but also by the expressions of gratitude with which we, as its medical officers, are frequently meeting. Yours very faithfully, B. SPURGIN."

With these testimonies in favour of the system I advocate, I conclude. If the remarks I have here made, in any way tend to the more extended adoption of the plan in behalf of which I have so long laboured, and which I am convinced is fraught with great benefit, both in the avoidance of evil, and in the conferring of positive advantage on all classes of the community, I shall receive a great reward.

Southam, Warwickshire,
March 1850.