MEDICAL NOTES ON THE MILITIA.

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No. II.

PREVALENT DISEASES AND MORTALITY AMONG MILITIAMEN: HOSPITAL REGULATIONS FOR THE PUBLIC SERVICE, ETC.

WITH regard to diseases and mortality amongst militiamen, I may state, that the mortality in my regiment was remarkably small. Our average strength at head-quarters was 626, exclusive of women and children, numbering 120; to which must be added a company of artillery, recruiting parties in the town, and the staff attached to the garrison; and, at intervals during the year, the pensioners of the district, when called up for duty. I lost two men only by death in eighteen months, out of above 800 cases treated: one death was from calcareous degeneration of the aortic valves; another from apoplexy from intemperance, a few days before the regiment was disembodied. The rate of mortality is below the average; for, according to official returns of Lieut.-Colonel Tulloch (*Vide Roberts on Recruiting*), the annual ratio of deaths per 1,000 of mean strength in the Dragoons and Dragoon Guards is 15.3. In a period of seven years, in the Artillery at home, the ratio is about 15.5, from a parliamentary return called for by Mr. Hume in 1845. The ratio in the foot guards, according to Lieut.-Colonel Tulloch, is 21.6 per 1,000. In order to account for this unusually low rate of mortality—two deaths in above 800 cases treated in hospital—I am bound in fairness to state, that several men were discharged during this period, as unfit for service, on account of disease. The militia surgeon has the power to discharge diseased men without calling a medical board (as required in the line), on reporting the cases to the Secretary-at-War. Some of these cases *might* have died within the eighteen months, had they been retained in the service; for four cases of pulmonic disease were discharged, a few cases of chronic rheumatism; two for mental imbecility, three for epilepsy, five for incontinence of urine, and five for diseases of the eye. These diseases had either come on since enrolment (which, it must be held in mind, took place twelve and eighteen months before embodiment), or had been concealed or denied (as, *e. g.*, epilepsy and incontinence of urine) at the time of enrolment. I only heard of two deaths occurring afterwards amongst these cases of discharge.

With regard to prevalent diseases and average amount of sick, we rarely averaged above 3 per cent. in hospital; but a number were allowed to attend for trifling ailments, and mild cases of gonorrhoea, etc. The prevalent diseases, as is usually the case in regiments on home service, were catarrhus acutus, gonorrhoea, syphilis primitiva, acute rheumatism, cutaneous affections, generally scabies, diarrhoea, contusions and wounds from accidents. Contusions and wounds from cricket-balls, happily, in our case, took the place of those from cannon and musket. A few of the wounds from accidents were severe and interesting: *e. g.*, one of complete division of the radial artery, from a fall through a window; and some that happened during ball and musketry practice. The number of cases of venereal disease (syphilis and gonorrhoea), and that were admitted during twelve months, was 176, of which 81 were cases of primitive syphilis, 10 of secondary syphilis, 9 of bubo, and 77 of gonorrhoea. Diseases of the eye were not prevalent; we had only 26 cases in the year. When the regiment first went to Hull citadel, the venereal cases were most abundant, as is generally the case in large seaport towns;

these diminished by degrees, as the men became more circumspect, and avoided the class of females hanging about barracks, and most likely to be diseased; the strange seamen, as they came into port, patronising these poor wretches, whilst the money kindly bestowed on them by sailors got spent by soldiers and "fancy" men. Before the regiment left Hull, the number of cases of venereal had diminished to a very small proportion. Adopting the table of admissions, etc., required to be filled up by the hospital regulations, and returned to the Medical Department in the annual report of sick, and kept in the *Historical Register*. I here give the results from April 1855 to March 1856.

	1855-56.	Acute diseases.	Chronic diseases.	Surgical diseases.	Total.	Died.
April	30	....	1	....	43	....
May	44	....	1	....	55	....
June	45	....	1	....	55	....
July	78	....	1	....	97	....
August ..	73	....	2	....	90	....
September	40	....	1	....	47	....
October ..	49	....	2	....	66	....
November	53	....	1	....	63	....
December	84	....	1	....	100	....
January ..	56	....	2	....	82	1
February..	81	....	....	....	97	....
March	63	....	4	....	81	....

It appears from the above table that the months of December, February, July, and August, were the most unhealthy. In my annual report of sick for the 4th West York Regiment, furnished to the Medical Department, according to the regulations of the service, the leading points connected with the hygiene of the regiment are briefly alluded to; I therefore transcribe a portion of this report, as illustrative of the subjects under consideration. It is drawn up in accordance with the instructions given in the hospital regulations.

Stations, Topography, etc. From January to June 1855, the regiment was stationed at Bradford Moor Barracks (part old and part new, and good), the situation of which is high, dry, and cold (the hospital here is a wretched place, a few cottages converted into wards, holding only about sixteen beds); and during this time the health of the men was extremely good, and no prevalent disease existed.

Barracks. From June 1855 to May 1856, the regiment was at the citadel, Hull; the barracks here very old, and built of brick (in the time of Queen Anne), low, little above high water mark, surrounded with a moat, close to the banks of the Humber, exposed to the river fogs and great moisture. The lowness of the situation prevents efficient drainage, for want of fall, though every means has been used to render it efficient, but without success. On my report to the Board of Ordnance, the drains were cleansed, as they have been frequently done before. During the time the cholera raged at Hull, the highest engineer officers made suggestions to improve the drainage, but with little or no effect. The barracks accommodate about 300 men; the rest of our men were in billets. The men's rooms are small, low, and confined. I may add, these barracks are now condemned; but Government has not yet sold the property, nor bought a site for new ones. It is understood the new site will be nearer the sea, but in a position for guns to command the passage of the river. The outhouses and kitchens are pretty good. The cells, being of comparatively modern construction, are very good, airy, and well ventilated. The privies require much improvement.

Hospital. The hospital is the best part of the barracks; it contains thirty-seven beds, and would hold more. The wards are almost too large for comfort, especially in winter; they vary in size from 31 feet by 29 feet to 27 feet by 18 feet; they are remarkably airy and lofty. Ventilation is good, but our offices only tolerable, and require improvement. The kitchen is good. The building itself was the governor's house in the citadel; it is brick, covered with cement; and is surrounded with a high wall and circular

range of buildings, used as an armoury. In a sanitary point of view, this high wall and circular building are detrimental; but the building itself being very high, and all the wards up stairs at a considerable elevation, the ill effects of this arrangement are not so objectionable. It is, in fact, an imposing old building, and in summer makes an excellent hospital. The supply of water is pretty good, but the quality of it is not what it should be.

Rations and Diet. These are good. The former are duly inspected by the officers; the men mess together; have three meals; and recruits soon become stout and robust. The hospital diets, under the control of the medical officer, are good, and varied as required. The meat is of good quality, and, for hospital diets, a little higher price is allowed to be given for it. The effect of the men's messing together is very beneficial, and teaches them orderly habits.

Duty and Employment. The duty is moderate and very regular, and by no means so severe as to prove prejudicial to the health of the men.

Internal Economy. No canteen exists; hence intemperance is checked, but by no means prevented, as one-half the regiment is billeted out, and consequently, in a large seaport town like Hull, the men are much exposed to temptation.

Crimes and Punishment. Crimes and punishment, for the number of men, are below the average; and, on the whole, their conduct has been exemplary, and the men are popular with the residents. Desertions were not frequent, and generally amongst the recruits who were attested, but did not join when the regiment was embodied. Three or four were branded with letter D. The propriety of this may be fairly questioned in a militia regiment.

Exercise, etc. The barrack-yard and ramparts afford space for exercise and amusement. Cricket, football, quoits, racket, and other games, are encouraged, in which the officers join (the "doctor" not the least active of the party).

Means of Ablution. Supply of water good, but very hard. The lavatory is tolerable, but the floor is stone instead of wood, and not sufficiently large for the number of men stationed here (about 700). In the summer, bathing is allowed in the river, under superintendence. I may add here, that one of the great advantages of the public service is the acquiring of habits of cleanliness, and appreciating the comfort of personal ablution, which so many of the working classes are in the habit of neglecting. Ignorance about the importance and luxury of personal cleanliness is much to be regretted. By weekly inspection of all the men by the surgeon, cleanliness of the skin is insisted upon, and disease early detected. Public lavatories in large towns might be established, I think, with great advantage, as well as cheap coffee-houses or restaurants, for the work-people to dine together with something like comfort.

Vaccination. The state of vaccination is satisfactory, and no case of small-pox has occurred since embodiment.

Note. One case of small-pox was admitted after this report was written, at the end of the military medical year, March 31st, and just before the regiment returned to Leeds for disembodiment.

Ocular Diseases. Ocular diseases have been below the average. We have had a few cases of gonorrhoeal ophthalmia and syphilitic iritis.

General Treatment. Syphilis and gonorrhoea have prevailed, especially on first coming to this station; but they gradually diminished. Mercury is never given in large quantities, or for any length of time. Mild salivation has been required in a few inveterate cases of syphilis. A large quantity of copaiba has been consumed; about thirty pounds during the year. A few cases of gonorrhoeal rheumatism have proved very tedious.

Post Mortem. As we have only had one death in the regiment, these inspections have happily not been frequent.

In the solitary fatal case, disease of the heart and calcareous degeneration of the aortic semilunar valves were found. The preparation was sent to the museum of the Leeds School of Medicine, to which I am attached as one of the anatomical teachers.

Phthisis. No cases, except a Royal Artilleryman found in hospital on joining the station; and he was invalided, and sent to Woolwich. A few cases of incipient pulmonary disease have been discharged the service.

I have made this abstract because it was a novelty to me to draw up a regimental sick report, having never seen one in print or elsewhere, though thousands must be deposited in the archives of the Medical Department; and it will serve to elucidate the nature of the medical duties of the service. The reports published by inspecting medical officers, such as the very interesting and valuable ones by Dr. Hall from the recent seat of war, must be founded on the respective regimental medical reports. In writing this paper, I do not presume to address experienced line surgeons, but my brother civil practitioners.

I have next to venture upon a few remarks on the hospital regulations of the service.

[To be continued.]

[ERRATUM. In Mr. Ikin's paper in the last number of the JOURNAL, p. 1054, col. 2, line 14 from bottom, the words "one-fourth were passed as fit", should be "one-fourth were rejected as unfit".]

ON MEDICAL EVIDENCE.

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[Read at the Quarterly Meeting of the Bath and Bristol Branch, November 20th, 1856.]

If we will be at the trouble to look about us, and keep our senses awake to the ever varying and oft succeeding phases of medical life and experience, we shall have no difficulty in convincing ourselves that much yet remains to be done to improve the character of our profession, as well as to ameliorate the status of physicians and surgeons, and not the less to promote the interests of society at large. The liberal education and peculiar knowledge of a medical man place him of necessity far above his neighbours, of whatever calling. Acquainted with the constitution of man, and well informed of the nature of the external world; appreciating also, as he does, the nature and extent of their adaptation to each other, and of the resulting health or disease to either the individual or the masses of mankind, the medical practitioner is even now recognised as the most fitting person to have the charge of the sanitary arrangements at this time in progress in all our large towns, and the general direction of all the details connected therewith. If we are but true to ourselves, we shall not fail to improve this occasion. The physician or surgeon thus, in point of fact, holds the office of a public functionary, with duties of the most honourable and responsible character; and whilst he would, on hygienic principles, defend the body from disease and physical suffering, and so maintain health and preserve life, he would, if he were allowed, and in the capacity of a psychologist, devise means whereby to preserve the *mens sana in corpore sano*, and thus increase his claims on the public regard and sympathy.

The appointment of medical coroners, the creation of local health officers, and of medical commissioners of lunacy, etc., assure us that we, as members of the medical profession, are improving our status, and, naturally enough,