

preparation of a great variety of foods suitable for both sick persons and convalescents, the dishes varying from beef-tea, mutton-tea, and peptonised articles, to such delicacies as roast pheasants, baked sweetbreads, boiled tongue, omelettes, &c. There is an introduction in which the ability of the author is vouched for by the superintendent of cookery to the London School Board.

*The Surgical Diseases of Children.* By EDMUND OWEN, M.B.Lond., F.R.C.S. Eng., Senior Surgeon to the Hospital for Sick Children, Great Ormond-street; Senior Surgeon to, and Lecturer on Surgery at, St. Mary's Hospital, London. Illustrated with 5 Chromo-lithographs and 120 Engravings. Third Edition, revised and enlarged. London, Paris, and Melbourne: Cassell and Co. 1897. Pp. 504. Price 21s.—This new edition is an improvement in several ways on the first and second editions, and in its present state the work is a good introduction to the study of surgical diseases as they appear in children; but it is not, and is probably not intended to be, a complete treatise on the surgery of childhood. In the description of the treatment of a case of diphtheria we find the following sentences: "The fumes of burning sulphur with steam are the best general disinfectant for rooms and clothing. Indeed, the periodical burning of sulphur in the sick-room is expedient; children are but little irritated by the fumes." From the first half of this extract we do not dissent, but the second half is surely erroneous. Will sulphurous fumes which do not irritate the child prove very destructive to the bacillus diphtheriæ? The practice can have no real value and is on a par with the popular custom of placing in the sick-room saucers containing Condy's fluid. With Mr. Owen's remarks on craniotomy for microcephalic idiots we cordially agree. The operation was, indeed, a failure; in many cases it was rapidly fatal, and in those in which the patient survived the operation the mental improvement was extremely doubtful. A very good skiagram is given of a tuberculous hip (p. 424); it was taken by Dr. Macintyre, of Glasgow.

#### JOURNALS.

*Heilstätten-Korrespondenz (Sanatorium News).* Organ of the German Central Committee for the Providing of Establishments for the Treatment of Diseases of the Lungs. Under the direction of Dr. GOTTHOLD PANNWITZ, Business Manager of the Central Committee. No. 2. Berlin, Nov. 1st, 1897. First year of publication.—The following is from the current number of this journal: "Ever-widening circles take a lively interest in the systematic struggle against phthisis as it is carried on in Germany by the providing of adequate sanatoria for pulmonary cases, more particularly in connexion with institutions for invalids and for the insurance of old age pensions. In order to make the experience that has been gained in this department accessible to the public at large as well as in order to obtain due appreciation of the literature that has been collected on the subject the German Central Committee for the providing of Establishments for the Treatment of Diseases of the Lungs has determined to issue a *Heilstätten-Korrespondenz (Sanatorium News)*, reprints from which are on request willingly sent to newspaper offices free of charge. Application should be made to the business manager, 19 and 20, Klopstockstrasse, Berlin, N.W."

*The Journal of Balneology and Climatology.* Vol. I., Part 4. London: John Bale, Sons, and Danielsson, Limited. Price 2s.—This part marks the completion of the first volume of the official journal of the British Balneological and Climatological Society, a society which is doing good work in calling attention to our own health resorts, in furthering their improvement, and in establishing intercommunication between British medical men generally and the

practitioners who reside at the various British health resorts. "The Climate of the Dwelling House," by Dr. Poore, sounds a very necessary note of warning as to the futility of sending persons abroad to climates other than their own where, although the right conditions as to altitude, soil, sunlight, temperature, humidity, &c., may prevail, the air is impure. In this case "climatic treatment becomes a solemn and expensive farce." "Which of us," says Dr. Poore, "has not experienced the pleasure after a long day's tramp of descending through some valley of exquisite beauty to the village containing the hotel which is to afford dinner and a night's rest? We see our earthly paradise nestling far below—a dream of loveliness—but 'tis distance lends enchantment to the view,' and arrived at our destination the eyes have been quickly dissatisfied by the nose." Pure air is, we know, an important factor in health, and an active cause in producing impurity is overcrowding whether in cities, towns, or individual places of residence. Hotels are especially liable to this cause, and in addition the elaborate decorations of the interiors in many cases while pleasing to the eye act as dust traps which accumulate germs of all kinds. Dr. Poore instances the mediæval colleges as seen at Oxford and Cambridge as excellent models which the modern hotel architect might adopt. "They have as a rule ample curtilage, the public rooms are big and often in a building distinct from the living rooms, while the living rooms are quiet and connected with the public rooms by cloisters and covered ways." The article concludes with a plea for better food for invalids at some of the table d'hôtes. "In many hotels, especially in cheap 'pensions,' the feeding is execrable. It is meretricious rather than nutritious, and consists of dabs of disguised garbage to which absurd names are given by ignorant 'chefs' whose only knowledge of cooking consists of opening 'tins.'" Dr. Prosser James contributes an academic paper on the Earliest Recorded Discovery of Thermal Springs. Articles on Helouan-les-Bains, on the Claims of British Resorts with some remarks on Malvern as a Health Resort, and on the Royal Baths at Harrogate will be perused with interest.

*Scottish Medical and Surgical Journal.*—Four of the articles this month are highly instructive clinical records—namely, the contributions by Dr. Alexander Patterson (Glasgow), on Surgical Reminiscences, including Eighteen Years' Work in the Western Infirmary; by Dr. Byrom Bramwell (Edinburgh), on Cerebral Cases of Unusual Interest; by Dr. A. H. Freeland Barbour (Edinburgh), on Vaginal Hysterectomy by Doyen's Method, with Six Successful Cases; and by Dr. James Carmichael (Edinburgh), on Basal Meningitis. Dr. J. A. Kynoch (Dundee) describes a case of Tuberculosis of the Placenta, and Dr. J. W. Ballantyne writes on Transposition of the Viscera and collects the literature on the subject from 1894 to 1897 inclusive.

*Edinburgh Medical Journal.*—The opening paper deals with the Hepatic Complications of Typhoid Fever, the author being Professor William Osler, of Johns Hopkins University, Baltimore. The complications described are focal neuroses, jaundice, abscess, the presence of typhoid bacilli in the gall-bladder, the occurrence of acute cholecystitis and cholangitis, and the relation of typhoid fever to gall-stones. He records a case in which Eberth's bacillus was found at a cholecystotomy, although there were no symptoms of typhoid fever. Mr. W. Roger Williams brings forward arguments against the view that cancer is a "morbus miseræ." The "Medico-legal Notes," by Mr. H. Nelson Hardy and Mr. F. W. Lowndes, contain much salutary advice in reference to the examination of unwilling persons, especially in cases of suspected pregnancy. Altogether there are nine original articles.

# THE LANCET.

LONDON: SATURDAY, NOVEMBER 27, 1897.

THE General Medical Council has done one very considerable piece of business during the session which commenced last Tuesday. It resolved with practical unanimity to make a departure in the statement of its objections to the employment of unqualified assistants. The departure consisted in stating clearly that henceforth the employment of an unqualified assistant, except in the form of a pupil, will be apt to be considered by the Council as "infamous conduct in a professional respect," to be punished by removal from the Register. Perhaps a little more time might have been given with advantage to the shape in which the future intentions of the Council were announced and to making clearer the precise nature of the offence which it is proposed in the future to regard so seriously. The language of the new notice makes of it an amplification of the resolutions passed on several occasions already by the Council in condemnation of the employment of unqualified assistants, and it practically makes it an offence to use the services of any unqualified person save such as may be rendered by a pupil to a general practitioner or in a hospital by dressers and clerks to the members of the senior or junior staffs. But the position of the pupil towards the general practitioner is different to his position towards the hospital officer. In the view of the General Medical Council, a body made up predominantly of medical teachers and examiners or of gentlemen representing the teaching and examining bodies of the profession, a general practitioner can only be allowed to have as assistant a pupil for a period of six months in the last or fifth year of his medical curriculum. A junior student is not eligible to assist the general practitioner, nor is the senior student eligible, we suppose, for a longer period than six months. These restrictions may be taken to reflect upon teachers and examiners as much as upon the general practitioner, for they would seem to imply that those who teach and examine medical men have but a small faith in their work, so that they cannot trust (except in a very limited manner) their former charges to transmit to others the lessons they have learnt. Be this as it may, it is not clear from the language of the Council whether a medical man will be allowed to keep a pupil for a longer period than six months without incurring the risk of employing an unqualified assistant.

We do not labour this point for it is quite clear that abuse might arise—nay, it is well known that it has arisen—from the employment of senior students as assistants, but the position of the Council requires exact definition in the interest of employer and employé alike, and this brings us to a point that will be likely, judging from the discussion in the Council, to influence the Council in estimating whether a person employed by a registered

practitioner in connexion with his professional practice is an assistant or a pupil. It seems that if the principal pays, the individual employed will be apt to be regarded as an unqualified assistant; while if the payment is the other way round, he will be regarded as a *bonâ fide* pupil. This is a question which is not settled by the language of the Council and which we would urge must and should be settled. For if such points are left in dubiety the profession will be harassed on a large scale by prosecutions which will often end in failure and the funds of the Council will be drained to no purpose. We are no apologists for the employment of unqualified assistants—we are too well aware of the evil that has in some places arisen in this way—but the practice is too old and has been too much connived at by the General Medical Council for it to be abolished with a stroke of the pen. In particular is it necessary that the stroke be unmistakable in meaning. The past action of the Council has only touched the surface of the evil. It has had reference to gross covering or gross misuse of unqualified assistants. The practitioners offending or found guilty of "infamous conduct" for such offences have been comparatively few; probably not fifty in all. The offence created by the action of the Council this week is practised by hundreds of medical men, probably by thousands. Before a sense of ill-doing can be effectually brought home to them the intentions of the Council must be stated with much more detail and precision than as yet they have been.

Of the main decision of the Council we entirely approve. It is a complete anachronism that half or a third of the work of the medical profession should be done by persons who are not in any sense of the word medical practitioners. Such an arrangement is deceptive as regards the public who think they are getting the advice of qualified persons, and it is grossly unjust towards young practitioners who should find their first and most valuable work in the field of private practice under the supervision of an intelligent and experienced principal. The General Medical Council is doing its duty by legislating for the suppression of all inferior and unqualified forms of practice and all who have the interests of the medical profession at heart will recognise this and applaud its action. But we would beg the Council to make its views very clear indeed, otherwise not only will much irritation be caused but actual injustice will be done.

THE mere mention of the Muzzling Order at the present time seems to excite general attention and bring out a variety of suggestions, so that when the subject was alluded to before a political meeting by the Right Hon. WALTER LONG, who holds the important and responsible post of Minister of Agriculture, it was to be expected that the daily press and the public would freely comment upon his words. Both have done so and the views elicited have been many and divergent, but there can be only one opinion for sensible citizens as to the value of the Muzzling Order as a whole, however open certain details in its working may be to criticism. In the course of his speech before a Conservative meeting at Bournemouth last week Mr. LONG mentioned certain facts which prove incontestably the beneficial effect which has