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THE REPORT OF THE COMMISSION ON THE  
PUBLIC CHARITABLE AND REFORMATORY  
INTERESTS AND INSTITUTIONS OF THE  
COMMONWEALTH OF MASSACHUSETTS.

The Commission, consisting of Hon. William F. Wharton, Dr. C. F. Folsom and Prof. Davis R. Dewey, appointed last May by the governor, to investigate the charitable and reformatory interests and institutions of the Commonwealth of Massachusetts, has sent in its report, which is now before the legislature. The report with appendices will be published and ready for distribution at an early date.

The Commission recommend:

First, the creation of a Department for Children, for the care, custody and control of the more than two thousand juvenile offenders, dependent and neglected children and foundlings or destitute infants now under the charge of the State, to be composed of seven unpaid members.

Second, the creation of a State Board of Insanity, to be composed of a chairman and two other members serving without pay except their expenses, and two members to receive each a salary of \$5,000 a year and necessary expenses.

Third, a State Board of Charity, of seven members, of whom the secretary is to receive a salary of \$3,500 and expenses.

Fourth, a simplification of the settlement laws and less difficulty in acquiring settlements.

Fifth, certain changes in the laws to render the Foxboro Hospital (for dipsomaniacs and inebriates) experiment more successful.

Sixth, State control of all the penal and reformatory institutions, and the abolition of the county houses of correction as such, with the following ends in view:

- (1) The abolition of unclassified prisons.
- (2) The initiation and development of reformatory measures for a larger number of prisoners who are susceptible to reform.
- (3) Uniformity in the management of the prisons and the prisoners.
- (4) Uniformity in the terms of sentences and in the granting of permits to be at liberty.

- (5) The better regulation of labor in the prisons.
- (6) The more complete separation of the sexes.
- (7) The abandonment of prisons now quite unfit for their purpose, as, for instance, the House of Correction at South Boston, and wiser provisions for relieving our overcrowded prisons.
- (8) The more intelligent study and treatment of the problem of drunkenness.

Seventh, the abolition of fines as punishments for drunkenness, the placing of occasional drunkenness without other offence against the law outside the list of crimes and misdemeanors, and the subjection of habitual and confirmed inebriety to reformatory treatment.

The Commission also recommends that the Board of Commissioners of Prisons consist of two salaried members and of three members, including the chairman, who receive no pay except for necessary expenses.

The Commission recommends that all insane persons, acute and chronic, who are supported at public expense, be placed under the care, custody and control of the authorities of the Commonwealth, and that the expense of their support be borne entirely by the Commonwealth, taking them entirely out of the hands of the local authorities and from the uncertainties of almshouse treatment. It also advises that the State Board of Insanity should have charge of the boarded-out insane until their number reaches such proportions that a separate department should be created to take charge of the work. The trustees of the several hospitals for the insane are to be allowed to board out any of their patients, subject to the supervision of the State Board of Insanity.

The recommendations as regards the insane chiefly interest the medical profession, and we quote the Commission's general suggestions upon that point in full:

Great weight should be attached to the thorough inspection of all the hospitals and asylums for the insane brought under the supervision of the State Board of Insanity, and in order to insure such inspection we would suggest that the following provisions be incorporated in the law and made mandatory:

- (1) That the Board or any two members of it should visit every hospital and asylum under its supervision at least twice a year.
- (2) That every part of the institution visited should be carefully inspected.
- (3) That every patient should be interviewed, or an opportunity offered to each one to hold an interview.
- (4) That every certificate of commitment entered or filed since the last visitation should be inspected.
- (5) That entries should be made by the visiting Board or the visiting members in a visitor's book of minutes of the condition of the institution at that time, of the patients therein, of the patients under restraint and their number, and any criticisms or observations that the Board of visiting members may have to make, — for instance, as to the occupation, amusement or classification of the patients, as to the cleanliness and sanitary condition of the institution, as to the diet of the patients, and any other matters that they may deem worthy of observation or criticism.

We further recommend:

That all patients in any hospital, asylum or receptacle for the insane shall be allowed, subject to the regulations of the Board, to write freely to the State Board of Insanity, if created, and that the letters so written shall be forwarded unopened by the superintendent or person in charge to the said Board, for such disposition as it shall deem right; and that the said Board shall have the right to send any letters, or other communications that it may deem proper, to such patients.

That whenever any person is received by the superintendent or physician in charge of any insane hospital or asylum, and

there is a question as to the propriety of his or her commitment, the said superintendent or physician shall immediately notify the State Board of Insanity, who shall inquire into the insanity of such patient and into the question of the propriety of the commitment.

That, in taking and transferring patients to and from the institutions for the insane, the nurses of the hospitals and asylums should be employed, as far as practicable, instead of officers of the law.

That a uniform system of keeping accounts in the several State hospitals and asylums be prescribed by the State Board of Insanity, and that the same be universally adopted by those institutions.

That the State Board of Insanity and the boards of trustees of the several hospitals and asylums for the insane, whose responsibilities should not be lessened, meet quarterly for purposes of consultation and harmonious action. Some of the topics to be considered at such meetings might be the apportionment of patients to the several hospitals and asylums, the examination by experts of questions of diet, ventilation, drainage, new construction, improved facilities for treating acute curable cases, occupation for the patients and gymnastics as a means of physical and mental training.

That there be referred to the Board or its officers questions of the sanity of inmates of the penal, reformatory and other institutions who present indications of insanity.

That the use of the word "lunatic" be abandoned, and that the term "insane" or "insane person" be substituted for it wherever it occurs in the names of the several hospitals and in the laws relating to the insane.

The presentation of this admirable report marks an epoch in the history of the charitable and reformatory work of our Commonwealth. The three commissioners were men of eminent intelligence, and unswayed by selfish or political considerations, and they have had the opportunity, and seen fit to utilize it, of looking over the whole ground, and formulating a comprehensive and consistent scheme, whereas the General Court is ordinarily called upon to make one and another single change which the exigencies of the moment seem to demand, so that their reforms are almost necessarily a sort of patch-work.

The task set before them has been accomplished by the commissioners in a masterly way and evidently as the result of deep study and thought, after consultation with every one who wished to be heard on any part of the problem. Their recommendations can hardly fail to be a guide for present and future legislation, for they express the best knowledge of the best men in the community.

With the general aim of carrying out fully the plan which is already somewhat in vogue, they propose to place the different blocks of work—the care of the paupers, of the children, of the insane—under the charge of unpaid boards of trustees, who shall be or become, to a certain extent, experts in their several departments; and to provide for adequate supervision of their work by the appointment of a Board of Charities and a Board of Insanity, who shall not be hampered by administrative duties.

The supervision thus provided for is not a mere contrivance for criticism, but a scheme for the encouragement and stimulation of the individual boards of trustees, with due regard to the general interests of the Commonwealth.

The State Board of Health occupies already a truly judicial position, and its opinions are respected by the

local boards, because its members are recognized as authorities in their branch; and these proposed boards would soon come to occupy the same position as regards scientific charity and insanity. It is probable that any measure asked for by the boards of trustees, and endorsed by these supervising boards, would promptly be granted by the legislature; and so the supervising boards would inevitably have both a stimulating and a restraining influence on the trustees of the individual institutions.

The recommendation that all the penal institutions and the institutions for the insane, should be placed under the charge of the State, so as to bring about a more efficient and more uniform administration of them, would be a step forward of which physicians should eminently approve.

There may be objections to this arrangement, on the part of the county and municipal officers, because it takes away some of their present power and prerogatives, or for other reasons; but in the end they must surely see that it will work to the general good.

Under the present arrangement each of the local boards must study by itself the subject of crime, of pauperism or of insanity on such a small scale that its conclusions are likely to be narrow and its methods inharmonious; whereas the supervising boards would be able to collate the best experience of the world, and to suggest such methods of application as would be suitable for individual cases.

The changes suggested by the commissioners in the Settlement Law, by which settlement is acquired in three years instead of five, may also meet with opposition. But it must be remembered that if paupers are not taken care of by the towns they must be taken care of by the State, so that the taxes come ultimately from the same persons; and also that large sums of money which are now spent in determining settlements will be saved to the tax-payers under the new scheme. These changes in the Settlement Law have, as a matter of fact, been approved by the Association of Relief Officers of the towns.

Among the most valuable of the recommendations of the report is that providing for a special department for all the children now placed out in families throughout this and neighboring States.

There are, it should be said, well-informed persons who doubt whether it would be wise to change the status of those children of the Lyman and Industrial schools not actually in the schools but placed out under their custody, on the ground that the selection of the best places for these children and the return of them to the school when necessary, cannot be conducted by anybody else so well as by the officers and trustees of the schools themselves.

Well informed persons differ with the Commission in other matters, and other plans will be proposed. The sincerity of the opposition of members and officers of the Board of Lunacy and Charity, their zeal and the excellence of much of their work under difficulties entitle them to a respectful consideration.

These reforms seem to us so important that the legislature must in the end adopt them, in all essential respects, and if it does not do so this year, it may delay but it cannot permanently check the tide of progress. Public opinion is now strongly roused; and its force can be counted upon by those public-spirited legislators who are endeavoring to accomplish the adoption of these improvements.

#### THE REGULATION OF PRIVATE HOSPITALS FOR INFECTIOUS DISEASES.

IN a recent number of the JOURNAL (February 25, 1897) the provisions of a bill introduced in the Massachusetts State Legislature, for the regulation of private hospitals for infectious diseases were published, and since then several hearings have been given at the State House before the Committee on Public Health to the supporters and the opponents of the bill.

Although including all of the various so-called infectious diseases like small-pox, diphtheria, typhus fever, etc., the bill was professedly framed by owners of real-estate in Dorchester who have strenuously opposed the further existence of two private institutions for the care of consumptives in that district on the ground of the great danger in which these hospitals are supposed to place the surrounding community.

During the past year or two we have had some extraordinary examples of the lengths to which the laity will go in their discussions upon matters pertaining to public health. Views even more extreme than those of some of the medical profession themselves are expressed; and in the late discussion upon tuberculosis at the State House the almost frenzied statements of the laity would be ludicrous did they not reveal at times an underlying selfishness anything but edifying to witness. The opposition we believe to be based upon a false conception of the danger of infection from such institutions when properly regulated.

We have been taught that the chief danger lies in the dried sputa inhaled as dust. In all properly managed hospitals strict attention to the disposal of sputa is now insisted upon, and the recent experiments of Dr. Irwin W. Hance with the dust taken from the rooms of the Adirondack Sanitarium, as well as the tests made by the bacteriologists of the New York City Board of Health, show conclusively how little danger is to be apprehended when the sputum is disposed of suitably.

In the villages near the two largest sanitarium for consumptives in the world, Goerbersdorf and Falkenstein, the death-rate from consumption among the native population has steadily decreased since the foundation of these two institutions.

A statement has recently been made also by an eminent physician and climatologist in Colorado Springs that since the settlement of the town only

twenty cases have been known to begin in the native population, and this in spite of the fact that the place is filled with consumptives from all parts of the world.

Recent experiments, moreover, by Delépine and Ransome in England, have shown that the effect of sunshine upon the bacilli has been to render them inert. James B. Russell, the senior medical officer of health in Glasgow, in a pamphlet entitled "The Prevention of Tuberculosis," lately reprinted by our State Board of Health—a pamphlet to which we have before referred and which in our opinion should be read by every member of the profession—confirms this view by statements which should make us pause before we speak of *danger* from sputa expectorated into the open sunlight, even while we condemn and prohibit the practice of expectoration in public anywhere.

We have the sincerest desire to be just to the advocates of this bill who seek to remove these hospitals from their district, but we maintain that the bill in its present shape is not only unjust (to say the least) but unnecessary. By its very stringency it excites an unwarranted fear in the minds of the community and while its advocates vaguely say that they wish the institutions to be in less thickly populated districts they would make it practically impossible for any individual or set of individuals to establish such a hospital in any town in the State, and this at a time when the importance of special institutions for consumptives is being recognized and acted upon all over the civilized world.

There doubtless exists in the minds of many people a sentimental objection to the neighborhood of any or all hospitals. This objection is not easily combated by facts or by reasoning. It is fomented and increased by such an agitation as has been going on with reference to these hospitals for consumptives in Dorchester. In so far as it exists and in so far as this feeling is encouraged, it does much more to injure the value of real-estate propinquitous to a hospital than any actual influence from the presence of the sick themselves. This sentiment, this property nervousness, is, however, a positive force and must be reckoned with. It is not always enough to reassure real-estate interests to show, for instance, by irrefutable data, as may be done in the case of the Contagious Department of the Boston City Hospital, that there are within a given radius fewer cases of the disease treated at an incriminated institution than in other parts of the city.

Some suitable method for licensing and supervising private hospitals for certain infectious diseases might probably be devised; but great prudence should be exercised in devising such a method—a prudence of which there is no evidence in the bill which has led to these strictures. It would be very easy by ill-considered and hasty measures to do far more injury to the community at large than could be offset by any sentimental or pecuniary satisfaction accruing to any single locality, or to several localities.

## AN ALTERNATIVE TO THE WINTER MIGRATION.

THERE was comment in the editorial columns of the last issue of the JOURNAL upon the winter migration to the South, and the suggestion was made for the consideration of some who go away and reap more loss than profit, for the consolation of others who would like to go but cannot, and as a warning to those who undertake to care for the wanderers but sometimes fall short of their promises, that there is an alternative—that alternative is simply to stay at home. For the well-to-do, who form the majority of the travellers, this plan is easy and may be made attractive; for the less well-to-do it is still easier, and at the same time profitable. Few people who have not tried it, with philosophy and ingenuity called to aid, have a realizing sense of how much rest, peace, satisfaction and refreshment can be had in this way.

If about the middle of February or the first of March you are wearied with the exactions of business or what is ordinarily called pleasure, or bored with the routine of the constantly recurring round of daily duties, or disgusted with the extreme changes and buffetings of our overmuch meteorology with the varying ice and slush and mud and dust of the streets; if you have a catarrhal mucous membrane which persists,—send for your doctor and tell him you want a change at home. Let him label you with a suitable disease according to the amount of protection you require from external exactions. Let him order you to stay on one floor, in one room of which, at least, there must be sunshine during part of the day. Have the ventilation and heating carefully attended to. Have your diet changed and regulated. Cast aside the stiff and formal clothing of a perverted civilization—starched shirts and collars, trousers and coats, corsets and starched petticoats, *et id omne genus*. Go to bed as early as you like and get up as late as you like, or as early and as late as your doctor directs. Have a nurse if you are really something of an invalid, or an attendant, at any rate, to wait upon you and respond to your wishes. Collect about you all your favorite old books, and the best new ones. Have some games of chance or of skill. Let your old friends treat you with that kind attention which they will be tempted to show the sufferer. Add to these suggestions anything else which your doctor's ingenuity or your own inventiveness may prompt—it will probably be much—and you who have never tried it will be surprised to find how much refreshment and renewed vigor to body and mind will result from four or five weeks of this kind of change. Try it once and compare it with four or five weeks spent in hurrying to the South and back again.

Those who cannot afford the full programme, may substitute an occasional twenty-four solid hours in bed—a simple therapeutic measure which is not sufficiently resorted to by our overwrought people.

It should not be forgotten that for others who must or will leave home for a comparatively short

period there are places like Newport, the mountains of New Hampshire, the forests of the Adirondacks, which are easy of access, which offer much comfort without crowds, and where a very pure air, free from dust, from rawness or from moisture, may be found.

## MEDICAL NOTES.

THE AMERICAN SOCIETY OF NATURALISTS.—The American Society of Naturalists, the American Physiological Society, the American Morphological Society and the American Psychological Association will meet at Cornell University, Ithaca, N. Y., on December 28, 29 and 30, 1897.

A NEW LABORATORY FOR HYGIENE.—A new laboratory for hygiene has been erected and recently opened at the University of Freiburg. It is under the directorship of Prof. M. Schottelius.

THE ARREST OF A DIPLOMA MANUFACTURER.—Frederick Rutland, "Ph.D., M.D.," the president of the Wisconsin Eclectic Medical College, an account of which was given in our issue of November 19, 1896, has been arrested in Chicago on the charge of using the mails to defraud.

ALEXANDER J. C. SKENE, M.D., LL.D.—A cablegram from London states that the senate of the University of Aberdeen has decided to confer the degree of LL.D. upon Professor Skene, of the Long Island Medical College, Brooklyn, N. Y.

THE HEROISM OF TWO PHYSICIANS COMMEMORATED.—A stained-glass window has been placed in St. Peter's Church, Fernandina, Fla., by Dr. J. Baxter Upham, in commemoration of Drs. Francis Preston Welford and James Carmichael Herndon who died there during the epidemic of yellow fever of 1877 in the heroic discharge of their self-imposed duty.

ABNORMAL DEVELOPMENT OF THE RIGHT ARM OF A CHILD.—Dr. Goldstein, of the New York Polyclinic, recently presented at the clinic of Professor Fowler, a child who has in her right arm two distinct humeri, each articulating with separate glenoid fossae of the scapula; three ulnæ, two radii, and three perfectly formed hands. Each of the hands has four perfect fingers and each a perfect thumb. Not only this, but every muscle of every finger and thumb is under the control of the girl, and she can write and perform other operations with any hand. The girl is quite sensitive regarding her deformity. She is bright and studious, but dislikes attending school because she becomes so great a curiosity among her classmates. An expert medical photographer who is employed by the Polyclinic, has recently made some skiagrams of the arm, which plainly show the existence of the distinct bones, humeri, ulnæ, and radii, and the manner in which the three hands are attached to the wrist.—*Medical News*.

TWELFTH INTERNATIONAL MEDICAL CONGRESS AT MOSCOW.—In a letter dated Moscow, February 14th,

the Secretary-General, Prof. W. K. Roth, communicates the following facts for the information of the American physicians who intend to participate in the Twelfth International Congress which is to be held at Moscow from August 19th to 26th. The Transatlantic Steamship Companies refuse one and all any reduction of the usual charges. In their replies, most of which are couched in courteous language, they admit the existence of a trust, or contract, or agreement, which prevents them from lowering their prices; a few are so polite as to express their regrets. Reductions of fares on Russian railroads are expected shortly. The French, Spanish, Swedish and Hungarian railroads promise a reduction of 50 per cent.; so do the Italian for a distance of 500 kilometres; less (down to 30 per cent.) for shorter distances. The Mediterranean lines (Messageries Maritimes, General Italian Navigation Company, Austrian Lloyd) grant from 25 to 50 per cent. The chairman of the American National Committee is not authorized to issue certificates of any kind in favor of congressists. He will try to ascertain, however, in what way their movements may be facilitated, and may receive a reply in the second half of April. Extracts of papers to be read before any of the Sections ought to reach the Secretary-General before June 1st, in order to be printed in the preliminary volume. A special prospectus containing the final details referring to travelling, lodging, festivities, etc., is promised for the near future. It will be communicated at once to the medical journals, and to the press of the country.

#### BOSTON AND NEW ENGLAND.

**ACUTE INFECTIOUS DISEASES IN BOSTON.**—For the week ending at noon, March 10, 1897, there were reported to the Board of Health, of Boston, the following numbers of cases of acute infectious disease: diphtheria 84, scarlet fever 45, measles 183, typhoid fever 5. For the week ending March 17, the following cases were reported: diphtheria 74, scarlet fever 58, measles 146, typhoid fever 7.

**A DEPARTMENT FOR CHILDREN.**—A hearing was held at the State House on Wednesday, March 17th, on the subject of the creation of a Department for Children, to have charge of the State's minor wards, as recommended by the commission to investigate the charitable and reformatory interests and institutions of the State.

**THE ADMINISTRATION OF CITY PUBLIC SCHOOLS.**—A meeting of the Women's Education Association will be held in Huntington Hall, Boston, March 25th, at 7.45 P. M., at which "The Administration of City Public Schools," will be discussed by Andrew S. Draper, President of University of Illinois, Champaign, Ill., formerly Superintendent of Instruction in the Public Schools of Cleveland, O.; Charles W. Eliot, President of Harvard University, Cambridge, Mass., and others. A letter will be read from Daniel C. Gilman, President of Johns Hopkins University, Baltimore, Md.

**THE WEST END NURSERY AND INFANTS' HOSPITAL.**—The fourteenth annual report of this hospital, recently issued, shows that 134 cases have been treated in the wards during the year 1896, and 2,285 in the out-patient department. A lecture-room, which provides seats for 150 people, has been added to the hospital. A training-school for graduate nurses is conducted in connection with the hospital; and since this school was opened in February, 1895, 18 nurses have received diplomas.

**TO REGULATE THE MILK-SUPPLY.**—The following bill to regulate the milk-supply, accompanies a petition which has been presented to the Massachusetts Legislature by the Bay State Agricultural Society: "The State Board of Health and all local boards of health may make such regulations for the inspection and sale of milk within their respective jurisdictions as will protect the public from the consumption of milk from cows which are diseased or kept in improper sanitary conditions."

**THE OLDEST MEDICAL STUDENT.**—An ex-minister of the Baptist church has begun the three years' course at the Maine Medical School at Portland. He will be over sixty by the time he receives his degree. He will possess a certain advantage over the average medical graduate, in that his services will probably be not often refused because he looks "so young and inexperienced." Most practitioners, unless blessed with a bald head or a gray beard, are objected to on such grounds until they have arrived at about the age at which this student will begin practice.

#### NEW YORK.

**DEATH OF DR. DUSSELDORF.**—Dr. Otto L. Dusseldorf, a retired physician of some prominence, died at the residence of his son, Dr. Louis M. Dusseldorf, in Brooklyn, on March 5th. He was born in Germany in 1829 and came to this country when a boy. Another son of his, Dr. John E. Dusseldorf, is a practising physician at Parkville, Long Island.

**DEATH AT THE AGE OF ONE HUNDRED AND THREE.**—Thomas Baldwin, said to have been the oldest man on Long Island, died at his residence at Seaford, L. I., on March 4th, at the age of one hundred and three.

**DEATH AT AN ADVANCED AGE.**—Mrs. Yetta Gerler died on March 1st in a New York tenement-house at the reputed age of one hundred and six years. It is stated that she was born in Poland in 1791, and that she was already married and entertained the French soldiers at her house when Napoleon marched through the country on his way to Russia.

**DEATH OF DR. SUMNER A. MASON.**—Dr. Sumner A. Mason, a well-known practitioner in the upper part of New York City, died of Bright's disease on March 12th, at the age of fifty-eight. He was born in New Hampshire, and commenced the study of medicine in Boston. He afterwards attended the

