is foreign to medicine. There is no science or art which may not be looked upon as its handmaid. The valuable assistance which has been derived from the stethoscope, the microscope, the laryngoscope, the ophthalmoscope, and the thermometer, warrants us in believing that further development of instruments of a like kind will form a characteristic of the future; whilst the facts with which we are already acquainted with reference to the germ-origin of certain diseases leads us to hope that some grand generalisations and brilliant practical results will accrue from further researches. The application of the so-called antiseptic system, or Listerism, to the treatment of wounds, will make the present epoch memorable in the history of surgery; and, if further investigations should demonstrate the existence of specific organisms in connection with certain fevers, they may lead to the adoption of a method of prevention and cure, which will prove of inestimable benefit to the human race.

Gentlemen, it will be for you to continue the researches which are now being carried on in these various directions. Those of you who practise in this great city will have ample opportunities for scientific investigation and clinical inquiry; and, therefore, on such will rest a graver responsibility. But some of the best original work ever done, has been done under circumstances apparently the most unfavourable; and, therefore, let no man imagine that, although located far from the busy centres of intellectual or practical life, he may not, whatever be his calling, and especially if it be medicine, contribute something to the stock of human knowledge—*non nobis solum nati sumus*. And I would have you feel that there is a true nobility in work; that it is work which ennobles character, which sanctifies life; and, gentlemen, I will now conclude with the expression of a fervent hope that, in the work which you have undertaken, you may find a perennial source of satisfaction, and of pleasure; that the labours of the life of each of you may be crowned with success; and that, when the close of that life shall come, you may have the satisfaction of feeling that you have honestly endeavoured to perform your duty; and that, if you have not been able to attain to the eminence of those distinguished men who have shed a lustre on our profession, you have, at all events, striven to imitate their example and to follow in their steps.

HALIFAX COMBINATION.—In the preface to his report for 1879, Dr. Britton attempts to defend himself against the criticisms of those who have suggested that his reports would be better if written less disjointedly, and if they contained more as to the district as a whole. We cannot think that Dr. Britton has been successful in this attempt; and the sentence in which he winds up his argument is so curiously antagonistic to the usually accepted principle on which reports of officers of health are framed, that we feel it necessary to quote it in full. Says Dr. Britton: "Reports, to be valuable, must be of local interest mainly, as showing the advances in sanitation to those who, from their local knowledge, can see the benefits to be derived from the improvements effected; and the more interesting, and, consequently, the more valuable, they are to the localities to which they relate, the less of interest are they to those living at a distance, and to the public generally." We do not profess to understand this singular doctrine; but, were other officers of health to be guided by the principles which seem to actuate Dr. Britton, the contributions to our general stock of knowledge with respect to the causation and spread of disease, which officers of health in all parts of the kingdom are now making through their published reports, would absolutely cease, and the usefulness of the sanitary medical service of the country would thus be, to an important degree, impaired. Dr. Britton, true to his convictions, gives but little information in his report as to the prevailing epidemics of the year, or as to their relations with each other. He reports, however, that the health of the people generally was "wonderfully good", and that in the summer there was an almost total absence of diarrhoea amongst children. Scarletina prevailed in many of the districts, and was very fatal at Brighouse and Rastrick, principally from sequelae, such as dropsy and abscess. Dr. Britton accounts for this partly by the damp and chilly weather, and partly by too early exposure to cold. As in former epidemics, the schools were the most fruitful source of infection. Lung diseases were unusually prevalent and very fatal, and there was a striking number of deaths from heart-disease, due, as Dr. Britton, thinks, to the hard times and consequent anxiety and worry. The percentage of uncertified deaths is extremely high in many of the districts. The subject of the water-supply has continued to receive Dr. Britton's attention, and sixty-eight analyses were made during the year. The death-rate of the entire district is not given, nor do the tabular statements in the report enable the number of deaths in the district from various causes to be readily stated.

THOUGHTS ON IGNORANCE AND QUACKERY.

Being an Address delivered at Westminster Hospital Medical School, at the opening of the Session of 1880-81.

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GENTLEMEN,—Having undertaken, by the wish of my colleagues, the honourable charge of speaking to you on this the opening day of our medical year, I shall make no defence of the time-honoured institution of introductory lectures. That I now attempt, however unworthily, to address you, must be proof enough that I deem these occasions not unfitting for reflection on some of the many relations of our loved and laborious profession—a profession whose proper practice is based on knowledge that spreads its countless roots over the infinite field of nature.

I speak to you as a medical student to medical students, in the widest sense of the term, limiting it not to the few years—even for their purpose all too few—of the pre-examination period, which abler hands than mine have often treated. Our time for learning ends not here; to be capable and honest practitioners of medicine—the ostensible aim, I apprehend, of all, though often forgotten by many—we must remain its students as long as life shall last.

And, out of the many topics which might be chosen on which to address the student-practitioner at the beginning of his real life's work, I have taken to-day as one, though commonplace, yet not quite threadbare, the subject of the duty which he who would be a worthy professor of the art of medicine owes to society, not quite forgetting to consider a little the reciprocal attitude of society to the doctor; and, in reviewing our work from this point of view of duty, we may glance as we pass at some of the lures that turn us away therefrom, and some of the pitfalls into which we may unconsciously be cast.

It is, I think, the somewhat peculiar position of the practice of medicine, wherein so often duty and self-interest seem to clash, affording scope for the exercise of the highest as well as the lowest impulses, that justifies, as at least I hope, my choice of this subject. The man whose aim is the highest possible standard of excellence and honour in the knowledge and practice of medicine, is met, perhaps, with more serious lets and hindrances thereto than he of any other profession whatever. He, more than any, has to exercise, in the complexity of his relations, that fine taste, the heritage of the ages, which enables him to distinguish between the right and the wrong, and has constantly, while regarding his own necessary self-interest, to keep in view his bounden duty to his fellow-men. The doctor alone is paid for doing what all right-minded men would freely do for their fellows—all that is in their power. Part of the work of all of us is that of lessening human suffering; it is the doctor's proper work, and he is especially equipped for the task. Not only is he obviously skilled above all others to succour the body, but now, more than at any time, he may be able to minister even to the mind, at once a work more hopeful and a duty more binding in this day, when moral and natural science have met together, and physiology and psychology have kissed each other. Should we not all strive to do our share of such work as this? Do we not see an increasing number of those who do it, not greedy of reward, but because they must; because in the action itself they find their meed of pleasure? If we are all bound to shield our fellows, as far as may in us lie, from harm or death; to stay, for instance, a bleeding which might be fatal, or save a life from drowning, is not a doctor's obligation manifold, with his special skill, to do the like? And must we not regard a doctor, possessed of as deep and scientific a knowledge as possible of his profession, and intimately acquainted as he should be with human nature, as one pre-eminent bound to apply his pre-eminent power for the good of his fellows.

But we must look at this from another point of view, and one no less true. It is not quite spontaneously that men fill the responsible position of which I have spoken, nor is the desire of being the ministers of humanity the efficient cause of the making of medical men. The chief stimulus to the acquisition of the special knowledge that seems to add such a grave charge to its possessor, is not the love of its exercise, however strongly this may actuate many, but mainly its capability of being

of exchangeable value. Doctors, like most other things, exist because there is a demand for them, and are, as a rule, as absolutely dependent on, as they are or ought to be worthy of the hire which often but scantily and tardily repays their long expenditure of time and money and infinite labour on the attainment of that knowledge which is required of them. The doctor cannot exist without reward, though the tacit assumption that he can is too often made by thoughtless, selfish, and exacting men and women.

Now it is this double aspect of the doctor's position, on the one hand his necessary and indefeasible right to be paid, and better paid than he is, for the exercise of his special skill, and on the other his obvious duty, in common with all, to do what in him lies for his fellows, that has often struck me as placing our profession in a category by itself, loading it with difficulties of a most harassing kind, but at the same time perhaps suggesting a little explanation for some of the all too numerous sins of dishonest quackery, committed even in what public opinion might deem the "high places" of the profession.

On the one aspect of this position, on the obvious necessity and even duty of the medical man to regard duly his self-interest, I will not here enlarge; perhaps it is scarcely necessary. It is rather the derelictions from his duty to the world, both in the way of sins of omission and sins of commission, that strike us as we reflect on the obligations of the medical man to society. It is before all things true for us that, though we are men of business and have to work for our bread, we are first, at least potentially, the ablest and so the most responsible benefactors of the human race.

Clearly, our first duty is to endeavour to acquire the widest and deepest knowledge that is possible of the subject-matter with which we have in our work to deal. The wide and ever wider-growing field of study which modern science is opening to us, and rendering necessary to those who would keep in the front rank of medical knowledge, has been the valuable and fascinating text of so many addresses on many occasions by some of our ablest men, that I must ask you not to conclude that the meagreness of my speech on this head is any measure of its magnitude and importance. The progress of the sciences, and notably those of physiology and its complement pathology, on which we, as doctors, have largely to rely in that struggle against disease which forms such a weighty part of our duty, has of late years been so fruitful as largely to increase the responsibilities of those who elect to make the practice of medicine their life's work. The fulfilment of the obligation which binds us all to do our best, whether in the grave matter of forming an opinion—that highest work, as Hippocrates tells us, of the physician—or that which is of equal importance, of combating disease, is rendered daily harder by the ever-increasing array of discovered facts which must be mastered and taken into account. Time is too short for me to glance, however hurriedly, at the progress which has, even quite recently, been made in our means of detecting, and to some extent of alleviating disease; but I would refer you to the Address in Medicine delivered this summer by Dr. Bradbury at Cambridge, for an interesting sketch of what late research has added to our knowledge. The use alone of such instruments as those which show us the interior of the eye and of the larynx, not to speak of many other inventions, has given us valuable help; but has multiplied considerably the labour of those who desire that their work should be thoroughly done, and their opinions honestly given. It is your duty, then, to neglect no one of the sciences on which our art is founded, but to begin forthwith to study well, and hereafter strive to contribute in your place to that vast work on the institutes of medicine, which it is the glory of our time that earnest workers everywhere are writing now.

No less pressing a duty than this of eagerly availing ourselves of the latest lights of science, is that of keeping firm hold of, and endeavouring to make our own, the vast amount of knowledge accumulated during past ages, and handed down to us from the earlier great ones of our craft. Nay, rather will it always be the heaviest and largest part of our work. And I would ask your earnest attention to this, for, especially in these recent times, there is a danger in the fascination of new discoveries that the products of the less ordered, less definite, and less communicable, though no less valuable experience of the past, may be over lightly looked at, or altogether thrown aside. Progress along her every line of march numbers some base members in her retinue, nor is it only in the sphere of politics or of art that reaction does its temporarily baneful work. Such influence is not unfelt on the practice of medicine to-day. There is a danger, and no fancied one, of straying too far from the old well-trodden paths of laborious learning and personal clinical observation of facts long known and faithfully reported by the masters of old; and many, occupied wholly with what is new, neglect to make their own, and so quite fail to utilise the noble heritage of ancestral knowledge. Though it is not long since we have hailed with delight the aids to be derived from improved

methods of investigation and more exact research, yet a danger has sprung up in the very wake of discovery, and the eyes of some seem dazzled by too exclusively gazing at the newest lights. We must beware of taking a too near-sighted or oblique view of the cases which come before us, and of missing salient points while overrating the more minute. The unremitting and earnest study of disease at the bedside, seeing and recognising for ourselves the unnumbered signs of infinite import which, though known of old, are to the beginner ever new, must take the largest share in the work of those who would practise their profession aright. Honestly to do this, with the help of past observers, instead of wholly striving to put forth some new thing, irksome though it be to some, will have its own reward, and will work for good in more ways than one. Day after day utters new books, though not always new knowledge; and the work of those who have gone is either forgotten or reproduced, not always even then improved. We should perchance be spared some of the immoderate plague of crude and superfluous medical writing, were men more given to the study even of ancient works, and of those of the great departed moderns in their original form. And not only would literature be the gainer, but sound clinical knowledge would more abundantly flourish were the original writings of such men as Cullen, and of Bright in later days, and of some, too, whom we are proud to have amongst us now, to occupy more of our student time. Practical medicine would scarcely be the loser were a colder welcome given to the appearance of compendiums and bald abstracts of others' works, and a less price offered for the committal to memory of lifeless catalogues of facts, a labour through which it seems before all things necessary that he who would be highly examined must pass.

One other point I would urge you not to forget when practising your art on the living material which is its subject. Think not you have discharged all your duty when you have minutely examined the body according to the fullest lights of past knowledge and contemporary research. The terms mental and physical, as applied to the causes of disease, are still of practical descriptive value, though the line which separates their fields is often faint and wavy. It is the ignorance or forgetfulness of the fact that many very palpable maladies can be traced no further back in the chain of causation than to a link distinctly mental,—however subtly, as we may allow, some physical change may underlie it—that leads so many of us at the present day to commit the gravest errors of opinion and practice. Leaving out of sight some diseases well known and trenchantly marked out by clear-cut symptoms, which can be referred with the greatest probability to an origin other than confessedly physical, there are many less definite but troublesome ailments which defy all treatment, while their emotional cause remains undiscovered by the ignorance or indolent incredulity of the doctor. On the one hand, such maladies are derided as shams, or on the other are put down, to the infinite hurt of the patient, to some condition existing only in the mind of the physician, to cover his escape from the unpleasant necessity of confessing his ignorance. I cannot here expand this subject; but I have known cases of patients who suffered from wasting and many symptoms of failing health, sent airily away, after a short interview with a doctor, to a distant country, with the false brand of "threatened consumption" upon them, to the great damage of their life's work and prospects, when their every ailment was due to a mental trouble, which a little insight and sympathy would have induced them to reveal, and which, by such revelation, might have been largely, if not wholly, dispelled. Inquiry into the mental condition and social surroundings of the patient who consults you, will often aid you in detecting the cause, and perhaps finding the remedy, for many a bodily affection, otherwise obscure in its origin, and rebellious to treatment. Remember when you are studying humanity to study it in its entirety, and call to mind not only the points of likeness, but the points of difference, between the individuals with whom you have to deal. Anatomy and physiology may teach you chiefly that which is common to every human subject; but there are subtle differences, of no mean import to the practical physician, which can only reveal themselves to the careful observer and sympathetic student of human character. Although there are many cases of disease so definitely marked that our treatment may be mainly directed thereto, uninfluenced by considerations of individuality and idiosyncrasy, the personal factor being almost eliminated by the common symptoms, yet we must far oftener acknowledge the truth of what Aristotle taught of old, and say, with a deeper meaning than that mighty thinker, "It is the individual, not the disease, that the physician has to treat." I would have you learn, as far as may be, the antecedents and life-history of those whom you may have to advise or treat, and strive to put yourself in others' places.

It is but a scanty and meagre picture of the work you are bound to do that I have tried to sketch in outline for you; the work is, indeed, a life's work, to be attacked not only with continuous, but hearty, effort.

Is it to be wondered at, then, that so many fall short of the standard at which they ought to aim?

Yet the falling short of some is apparently attended by so much complacency and contentment, nay, often wears an aspect so gravely suspicious of conscious crime, that a few words of exposure and warning may be forgiven me.

Many, doubtless, who enter the profession of medicine are unable to grasp its scope, or see the import of its practice; and thus, more from ignorance and intellectual defect than from confessed carelessness, they occupy a position wherein, were the scales to fall from their eyes, the sins they commit and the duties they neglect would sorely smite their conscience. But these are not the only defaulters, and there are worse even than those who sink back appalled by the difficulties of their chosen work, and are content with but half performing it. The quack is not yet gone from amongst us; nay, rather, he lives and he flourishes, Protean in form, and chameleon-like in hue. These are they who turn aside from the path of that duty which their profession, in its true and highest meaning, involves, at the lure of those rewards which fall alike to the unjust and the just, if, indeed, they come not to the first of these in the richest profusion. Trading, and only trading, in the name of science and humanity, they desecrate the one and make sport of the other for their own ignoble ends, using the screen of distorted knowledge to hide their base but too successful endeavours to build a fortune out of the ignorance and superstition of the public whom they rob.

Of those vulgar and confessed quacks who are allowed by the Government and the press to deceive the people by their patents and advertisements, I will not speak, though their gain is gathered, not only from the obviously unlettered ranks, but from those whose wealth, if not education, renders them culpable in wilfully turning away from the light, and blindly encouraging the deceivers.

But of the class of outwardly respectable charlatans, I would say a few words; of those who, under various names, or, still more subtly, under no special name at all, profess to be the possessors of a system of therapeutics. It is the treatment of disease, which naturally, out of the many branches of medical study, most attracts the interest of the public, whose ear often he most readily gains who not only claims the best results, but professes the most seemingly perfect and definite method of procedure. It is not the place here for me to enlarge on the present impossibility of any ostensibly complete system of therapeutics being even approximately scientific, and by consequence, true. The knowledge of disease must be far advanced beyond its present limits before the most sanguine among us may dream of this; and many more requirements are there, of a perhaps impossible nature, to make that dream at all coherent. This view, I think, must be held by every honest and really thoughtful man; but nowhere do I know it to be more clearly or powerfully expressed than in an Address in Medicine given eight years ago at the British Medical Association, by one of our greatest philosopher-physicians, Dr. Wilks; an address which students of all ages would do well to read. I would go even further than this, and say there is no reason in nature, nor does science grant us right to claim, that we should look for our diseases to be "cured" at all. There is a widespread and world-old belief, that every disease has its remedy, if only the doctors could find it out; and this superstition, groundless as it is, has in some form or other influenced the mind of both the doctors and the patients of every age and every clime. The wish is father to this thought, which is no child of philosophy. Rather would I hold his attitude more rational who is surprised and thankful that so many of human nature's pains and ills can be stayed or relieved by medicine and other means from the rich store of our experience, than his who grumbles at the inefficiency of our art to dissipate them all. Men seem to look upon diseases as a series of separate existences, and drugs, past, present, and to come, as a parallel series of pre-ordained remedies; and believe that a time is coming, or has almost come, when the problem will be solved of making the one series properly dovetail into the other. Is not the term "opprobrium medicinæ", which so often, with a falsely humble, but really arrogant, implication, is scattered about the pages of medical writings, a proof of this? a term applied to those diseases which as yet even the quack scarce dares to affirm are curable. Not only the public, seemingly, but the doctors too, with difficulty unlearn the gratuitous doctrine of a pre-established harmony between drugs and disease.

A scientific notion of what disease is, and of man's place in nature, might go far to disabuse the people of this common superstition, born of their own undue self-importance, and fostered by those false prophets of medicine of whom I am speaking. Disease is not, in the main, a thing which may be destroyed, or nullified by some ready-made antidote; rather is it, to a large extent at least, an accident of develop-

ment; a part of the common lot, of that degeneration and decay which is the inseparable accompaniment of the biological struggle for existence. Even if we could scientifically follow all morbid processes in their course, and our pathology were a completely written chapter, we might have none the more reason to hope for remedies for even a large proportion of our maladies. We may be able to moderate many diseases, and to cure some; but we may not thence infer, on whatever other grounds we may hope for advance, that we have a right to prophesy or profess a perfect system of treating them all. Our treatment as yet must chiefly remain, as all the best treatment has ever been, empirical; and they who hold this view will ever be more ready and able to welcome additions and aids to the therapeutic art, unhampered as they are by the trammels of preconceived and exclusive theories.

But this almost innate belief in the human right to be free from diseases, and the probability of there being remedies for all, furnishes an ample and fertile field for the impostures of those who claim to be the happy possessors of a system of therapeutics. This is the opportunity chosen by the various species of charlatans who, not only under the name of homœopathy, often but half-confessed or wholly denied, but under that of orthodox medicine, even in our very midst, wax fat and kick on the gains they gather from their patient dupes. The masses believe that all their pains and aches can be cured; but they can see no further back than the symptoms from which they suffer. And do we not find, in proportion to the loudness of the preaching of the curability of disease by drugs and fascinating systems of therapeutics, that symptoms are brought into strong relief, and that pathology, or the investigation of the causes which are behind the symptoms, is almost entirely ignored? Dr. Wilks, in the address I have already mentioned, says: "All quackery has for its basis science falsely so called; and it is because of this that uneducated persons are mostly influenced by those who purify the blood or put fresh vitality into the nerves. I may say, moreover, that all quack systems, as well as the worst methods within the pale of orthodoxy, proceed upon the plan of treating symptoms. The more closely a medical man adopts this method, wittingly or not, the nearer does he approach the charlatan."

The preaching falls upon willing ears. Surely the homœopath is wise in his generation. He saves his own brain-power by looking no further than the symptoms for the enemy he pretends to attack; and flatters the intellect, and so secures the confidence of his patient, by treating him on a system which he is only too ready to plausibly profess to explain. He has his reward, for he flourishes well.

I have said that even in our own ranks we find examples of more or less serious defections from the paths of honourable duty, caused by the tempting success which public ignorance makes so easy. Many are the forms which the lying spirit assumes; and, though some of its work may not be powerful for harm, there is much of which the product is sad and hideous. And chief among these forms is that of exaggerated and perverted specialism, which, with a pseudo-scientific aspect, first falsely teaches and then fleeces the people. In ancient Egypt, before the dawning of science's true light, we learn from the Father of History that there were exclusive specialists in every place;* nor has this plague of Egypt been ever stamped out from our midst. Now, when science shows us the marvellous complexity of the human organism, and the intimate interdependence of all its systems is more apparent as our study becomes the closer, so that we are often at a loss to discover to what system, organ, or tissue, as the *fons et origo mali*, we should refer a disease,—now more than ever must the implied teaching be untrue, that the body can be studied piecemeal, now more than ever must the resulting practice be both bad and dishonest. That specialism within due limits must in the nature of things exist, considering the vast range of medical art, I do not for one moment deny; nor would I even decry it. Where special manual skill, attainable only by habit, is required, as in many departments of surgery, there must be specialists in practice, sometimes even in spite of themselves; and humanity would be much the worse off without them; and there are branches of practice not strictly surgical which seem in a manner naturally, and for manifold reasons, to crystallise out from the general mass and become both necessary and justifiable. Of strictly medical specialities, where the attention is limited to one organ or one narrow class of diseases, I would bid both the doctor and the patient beware; the risk to both is sufficiently obvious. But there is a peculiar danger to the public from some recent developments of specialism, a danger ironically enhanced by the perverted use of instruments of research of great intrinsic worth, of which I must speak before I close. The possibility of exploring parts of the body invisible to the unaided eye and beyond the patient's own power of observation, valuable and welcome

* There were doctors (says Herodotus, Book II, §4) for each disease, and that disease only. Every place was full of doctors, some for the eyes, some for the head, some for the teeth; others for the belly, and others for secret diseases.

as is the aid thereby given to scientific medicine, has perhaps been no unmixed benefit. May not this very possibility evoke sometimes from its lurking place, though we would hope but rarely, that evil spirit of designing quackery which sinks the profession in the trade of medicine, and tempt it to turn invention to its own base ends by forcing even the "regular" practitioner, whose body it too often inhabits, to raise a false alarm of a disease which he declares himself specially able to cure? And a fancy not over-fertile might picture a perhaps fabulous or professedly curable ailment of one organ of the body, exclusively treated by such perverted art, while fatal maladies are running their silent course in that same body, unrecognised, or, still worse, unreported by the "specially" skilled observer. Truly we must all deplore that ever the ark of science should be touched by such unholy hands.

Let me now dwell for a moment on some aspects of the attitude towards the doctor of the people at large, who, from their own deep ignorance of what science means and what the art of medicine can do, foster, if they do not create, those evils among us which with pain and shame we must acknowledge in order to destroy.

It may be said with truth that society itself is greatly answerable for those spurious specimens of the doctor who too frequently disgrace our ranks. The supply of this article is to a large extent a natural response to the demand made for it by the real ignorance but fancied knowledge of the public. The mystery which has always too much surrounded, and which still surrounds, the art of medicine—a mystery which is practically kept up even by those who plausibly pretend to enlighten, but really hoodwink their patients by explaining to them their "systems" of treatment—might to a great extent be dispelled, and the doctor and patient thereby meet together still more frequently than they do as honest and reasonable beings, were information more widely spread as to what the science and art of medicine really are, on what foundations they rest, and how far their scope extends. But, even in this later day, how common it is to find in all classes those who make light of the value of the severer and fundamental studies which form the very life and soul of medical science, and are generally impatient of the methods and results of accurate investigation. Much of this opposition to science is passive, and springs from simple ignorance; but society is more than sprinkled with members of a heterogeneous alliance of sectarians of almost every sort, whose chief bond of union seems to be the possession in a marked degree of the antiscientific bias. They cannot tolerate to be brought to the scientific grindstone of fact; and, disliking the trouble of sifting any matter to the bottom, they make capital out of, and boast of a false liberty of opinion. To the patronage of such as these is to be credited the extension and success of all the superficial, professedly philosophical, but really emotional systems and opinions of the day on matters which can properly be seen by the "dry light" of science alone; and the motley crew of antivivisectional, antivaccinational, homœopathic, spiritualistic, vegetarian, and total-abstaining fanatics has done the cause of honest work no little mischief. The cultus of the "fair virgin Truth" for her own sake is not yet wholly free from persecution. But to return to our own department of science. Do we not everywhere meet those who assume that they can do the preliminary work of diagnosing their own diseases and those of their friends; and, having satisfied themselves, in total ignorance of anatomy and physiology, of the organ which is at fault in their malady, choose straightway for their doctor the man whom they believe to be, but who far more often is not, specially skilled to treat it. Is it not this blind-eyed public who really manufactures the doctor for the kidney, and the heart, and the liver, and the lung; and offers a ready bait to those who know they can hide their own ignorance of their science, or their conscious disobedience to its precepts, by loudly proclaiming a peculiar knowledge of the professedly peccant part? Not only pity, then, is to be felt for those who become the helpless victims of the unscrupulous adventurers for whose very existence they are themselves so much to blame. Once more; from a superstitious and overweening belief in cut-and-dried systems of treatment, and the assumption that there is in almost every case a royal road from disease to health, if only they can find the key to its gate, the public is perhaps chiefly responsible for the greatly vaunted host of new and often useless, if not harmful, "remedies" which, sometimes with the vernal stamp of medical authority, too often fill the advertising pages of prints, professional and lay alike. How many little systems, which "have their day and cease to be", would never see the light at all, were society at large to aid the profession, which, in the main, is both ready and willing to eschew all mystery, by taking the trouble to inform itself of the kind of work it should expect from the hands of its doctors! A little more enlightenment on these matters would, I apprehend, have an influence quite in the contrary direction to what the fears of many would lead them to believe. At the present day, the

tendency is for the patient to take into his own hands what is often the most important step towards the treatment of his malady, by claiming the ability, ignorant though he be, to at least roughly detect its cause. But even a slight knowledge of the principles of physiology would reveal so clearly the complexity of the human organism, and the mutual connection of its parts, that most men would smile at their former temerity in looking so lightly at the task of detecting disease, and would be more than ever ready to cast the whole burden of investigation and treatment on the shoulders of those whose special work it is. A more wide-spread teaching of the elements of biological science would tend, I believe, largely to the benefit of the community, and would both purge and strengthen the ranks of our profession. If knowledge be sound and true, a little of it can never be a dangerous thing.

The increasing attention now being paid to the cultivation of natural science in our schools and universities gives a ground of hope for the future. The time may not be very distant when a sounder knowledge may go far towards dispelling the ignorant and almost superstitious credulity which still exists, and rendering impossible much of the quackery and mystery which as yet disfigure the profession of medicine. And, having at heart the improvement and refining of that profession itself which, with all its faults, we love so wisely and so well, we ought to look with pleasure on the help held out to it now by one at least of our ancient universities, and hope for new encouragement hereafter from the other. While recognising that the people generally stand specially in need of more of that light which science alone can give, we must acknowledge too that the ranks of our scientific profession would gather social strength, and grow in usefulness and influence, were it endowed with a wider general culture. To the attainment of such an end as this, fruitful alike for the profession and the people, it is in the power of our universities effectively to contribute by rendering it possible for at least the greater part, if not the whole, of the medical curriculum to be followed out during those years when most men are desirous of beginning to prepare for their special work in life. The due establishment of the faculty of medicine in our universities would not only furnish a grateful and fruitful soil for the higher intellectual and social culture which is their proper boast, but would confer a benefit, in its turn, on university life itself, by giving thereto an additional element of widest interest; and natural science would find a firmer basis and extend its operations further, strengthened by such an ally as medicine, from whose ranks so many of its students have been recruited.

I would speak but one more word. If I have seemed to over-wantonly expose some plague-spots in our midst, or speak too strongly of our sins, I can say no more in extenuation than that I have felt as strongly; and should any of you, especially those who are to-day beginning your work among us, be aided by one word of mine to realise or call to mind afresh the arduous and manifold obligations of the life that you have chosen, I shall stand in need of no excuse.

FLACCIDITY OF THE IRIS IN DEATH.

IN the last issue of the JOURNAL (September 25th, 1880) appears a communication from Dr. B. B. Joll, commenting on and recommending the presence of flaccidity of the iris as a test of real death. As with Dr. Joll, this was first brought under my notice by Sir William Jenner, and I have made numerous observations on this point; but unfortunately I am compelled to report that it is unreliable. I am unable to remember all the cases in which I have found this flaccidity present during life, but the following three cases have impressed themselves on my memory.

1. The case of a lad who became severely collapsed while under chloroform with a view to operation. He recovered.

2. The case of a lad who died within two days from purpura hæmorrhagica.

3. The case of a girl, which came under my notice a few days back. She was admitted under a colleague for anomalous cerebral symptoms; she suddenly stopped breathing, but life was prolonged for six hours by means of artificial respiration, which was continued till cardiac action ceased. The flaccidity was well marked in her case four hours before the pulse ceased to beat. *Post mortem*.—No morbid appearances were discovered beyond extreme distension of the cerebral ventricles. My friend Dr. John Mortimer, house physician to our General Hospital, informs me that he has not infrequently noticed the same condition of the iris in patients when well under the influence of chloroform. Of course in none of these cases is the flaccidity so well-marked as it is in those who have been dead some twenty hours or more; but it has been sufficiently distinct to destroy its importance as a medico-legal test.

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