AN ADDRESS ON THE HISTORY, CONSTITUTION, AND OBJECTS OF THE BRITISH MEDICAL ASSOCIATION:

AND ON MEDICAL ORGANISATION IN GLASGOW.

Delivered at the First Annual Meeting of the Glasgow and West of Scotland Branch.

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THE purpose of our present meeting is to establish for Glasgow and the western districts of Scotland a local Branch of that great national professional union known as the British Medical Association.

It is my first duty to thank you for the honour of requesting me to preside on this occasion. I cannot but feel that there are many closely connected with the practice of our profession who might more appropriately have been chosen, and who would have acted more efficiently as your leader in this movement; but, having been urged to accept the office of local president, I will endeavour to show my sense of your kindness by doing all in my power to promote the object of your meeting. I must, however, bespeak your indulgence for the imperfect manner in which my task may be accomplished.

As the nature and objects of the British Medical Association, though very familiar to many in England, may not be known to some of those whom I now address, it may be proper that I should in the outset refer very briefly to its origin, nature, and progress.

The Association was first formed in the year 1832, mainly, I believe, at the suggestion and through the exertions of Sir Charles Hastings, M.D., of Worcester; and, being designed to bring together the medical practitioners of the English counties, was at first called the Provincial Medical and Surgical Association. Its objects, as stated in the opening address of its founder at the time of its first establishment, were to remove the disadvantages under which the provincial members of the profession laboured from their isolation and want of co-operation; to render their exertions for the promotion of knowledge more effective and useful by combination; and to maintain the honour and respectability of the profession by the establishment of free intercourse and friendly feelings among its members.

For this purpose, annual meetings of the whole Association were arranged to take place in different localities; and it was intended that, by these meetings, and by the formation of local Branches to meet in different parts of the country, the members, besides being benefited socially and scientifically, should be encouraged to devote themselves more specially to the following objects, viz.:

1. To collect useful information of all kinds on speculative or practical professional subjects.
2. To cultivate a knowledge of the medical topography of England by statistical and scientific investigation.
3. To inquire into the spread of epidemic diseases in relation to the circumstances of each locality.
4. To promote the knowledge of hygiene, sanitary matters, and the adjustment of medico-legal questions.

By the zeal and assiduity of its founders, the organisation of the new Association was soon completed; and the fitness of the first plans, which have undergone little essential change since the commencement, has been evinced by the uniform success of the meetings and the steady progressive advance of the Association in numbers, influence, and usefulness.

In its first year (1832), 310 members had joined the Association. In 1843, at the end of its first decennial period, the number of members had increased to 1,300. In 1853, the number was 1,850. In 1863, it was only about 2,200; and in 1866, when the present editor assumed the management of the JOURNAL, it was about 2,500; but, from that time onwards, a very rapid increase took place, so that, in 1873, the number of members had risen to 5,500. It now probably approaches 7,000; amounting thus to about a third of the whole number of qualified medical practitioners in Great Britain and Ireland, which, as in-

dictated by the *Medical Register* and Churchill's *Directory*, is upwards of 22,000.*

The present revenue of the Association is upwards of £9,500; it is now free of debt, and has a growing surplus.

Forty-three annual or general meetings of the Association have been held in different places since the first, which took place at Worcester in 1833. In Birmingham and in Oxford the Association has met three times; and, in each of the following places two meetings have been held, viz., Edinburgh, Leeds, Liverpool, London, Manchester, Norwich, Worcester, and York; and one meeting only in the following towns, viz., Bath, Brighton, Bristol, Cambridge, Canterbury, Cheltenham, Chester, Derby, Dublin, Exeter, Hull, Leamington, Newcastle, Northampton, Nottingham, Plymouth, Sheffield,† Southampton, Swansea, Taunton, and Torquay.

The formation of local Branches has been gradual. Their number at present amounts to 29. Of the 29, only one, so far as I know, has been formed in Ireland. In the north of Scotland two have existed for some years; and the southern counties of Scotland are included in the Border Counties Branch. Another has, about the same time as ours, been formed in Edinburgh. Of the remaining Branches, two are Welsh, and 22 are English. The meetings of the local Branches vary according to the circumstances of their localities; being in some of them only once in the year, in others more frequently, in several three or four times, and in a few as often as monthly.

It was a part of the original plan of the Association to publish and circulate among its members the various memoirs and contributions read at the meetings. The Association, indeed, appears in some measure to have taken its rise among the supporters of a journal which was begun in the year 1828, under the name of the *Midland Medical and Surgical Reporter*, and which was carried on with success during the four succeeding years. It was, however, arranged at first, to issue the papers and addresses brought forward at the Association meetings by means of *Transactions*, of which nineteen volumes were printed nearly annually, or in the course of the first twenty-one years of the existence of the Association, and distributed to the members.

In 1840, the *Provincial Medical and Surgical Journal* was originated by Dr. Hennis Green of London, not being originally connected with the Association, but professing to carry out its objects; and one of the Worcester Council of the Association, Dr. Streeten, was at Dr. Green's request associated with him as co editor. An arrangement was made with the proprietors of the *Journal*, by which every member of the Association was to be supplied with a copy of the *Journal*, while they continued to receive also the volume of *Transactions* for the year. In 1844, the *Journal* became officially connected with the Association; and, in 1845, it was placed under the management of the Committee. This *Journal* was for a time published weekly in London, but it appears to have languished and to have caused financial difficulties, and it was thereafter for a time issued only fortnightly in Worcester.

As the number of members of the Association, however, increased, and its activity and influence came to be more felt and acknowledged, it was deemed expedient to give the union a wider scope, to include within its operations the practitioners of London and the neighbouring metropolitan counties, and to extend its membership to Scotland and Ireland. In 1853, after considerable discussion, the *Journal* was transferred to London under a new editorship, that of Dr. John Rose Cormack, and was published weekly in an improved form under the name of the ASSOCIATION MEDICAL JOURNAL.

In 1856, the Association assumed the name of "*British Medical*"

* In 1871, the whole population of Great Britain and Ireland being about 31,500,000, the number of registered medical practitioners was about 21,200, or nearly in the proportion of one medical man to 1,485 of the inhabitants.

I subjoin the following view of the relation between the membership of the Association and the number of the profession in the several divisions of the kingdom, as given in the ASSOCIATION MEDICAL JOURNAL for October 21st, 1853, p. 912.

	Number of Medical Men.	Members of the Association.
England.. .. .	9,315	1,748
Wales	315	112
Scotland.. .. .	1,623	47
Ireland	2,100	4

The whole number of the Association in this year is stated at 1,926.

At the end of 1870, the relation between the number of members of the Association and the profession was as follows (see BRITISH MEDICAL JOURNAL, January 7th, 1871, page 22).

	Number of Medical Men.	Members of the Association.
England and Wales	13,455	3,739
Scotland	2,000 (about)	102
Ireland.. .. .	2,400 (about)	298

Including members in the Army and Navy, Colonies, etc., the total number at the end of 1870 is stated to be 4,201. At the annual meeting in Edinburgh in 1875, the number was 6,112; and there have since been numerous accessions.

† A second meeting in Sheffield will be held this year.

instead of that of "*Provincial Medical and Surgical*"; and the JOURNAL accordingly, in 1857, appeared under the new name of BRITISH MEDICAL JOURNAL, and was edited by Dr. Andrew Wynter. In 1861, two volumes of the JOURNAL came to be issued annually instead of one as formerly; and now Dr. William O. Markham became the editor.

For the last ten years, or since the beginning of 1867, except during an interval of a year in 1869-70, when the JOURNAL was conducted by Mr. Jonathan Hutchinson, Mr. Ernest Hart has acted as editor; and, under his able and judicious conduct, the JOURNAL, besides giving a full account of all the business and transactions of the Association, of which it is the authorised organ, with the enormous circulation of 7,750 copies, maintains an honourable and useful place among the records of the medical literature of the time.

The Association is composed entirely of legally qualified members of the profession, and it is now incorporated (1874) under the Board of Trade according to the "Companies' Act" of 1867, Section 23. By this agreement, the funds of the Association must be entirely expended in the promotion of the objects of the Association, and no portion of them can be applied, directly or indirectly, by way of dividend or bonus, or otherwise to the profit of any of the members of the Association, excepting in so far as concerns the payment of the services of the officers of the Association.

The objects of the Association under the memorandum of its incorporation are—

- a. The periodical meetings of the Association and the profession generally.
- b. The publication of a JOURNAL and occasional *Transactions*.
- c. The grant of moneys for the promotion of medical and allied sciences.

The annual payment of a guinea by each member entitles the payer to receive a copy of the JOURNAL or any *Transactions* which may be published. The payment is due in advance on the 1st of January in each year.

The business of the Association, other than the scientific papers and discussions, is under the management of a Council and of a Committee of Council; and the officers consist of a President of the whole Association, a President-elect, Vice-Presidents, a President of the Council, a Treasurer, an Editor of the JOURNAL, and a Secretary.

The constitution and laws of the Association are of the most liberal, I might almost say democratic kind.

Members are admitted by a vote in their favour of three-fourths of those present in the Council or Branch Council in which they are proposed, and they are also liable to expulsion for misconduct (on due cause shown we shall suppose) by an adverse vote of the like number of their fellow-members.

The General Council of the Association consists of members chosen by the members of the several Branches, in the proportion of one councillor for every twenty members; and these, along with an honorary secretary of each Branch, form the representatives of the several Branches in the entire Council. Along with these are associated in the Council, the President, the President-elect, the Vice-Presidents, the President of the Council, the Treasurer, the Readers of Addresses (who have been nominated), and the Presidents of Sections.

The President of the whole Association is annually elected by the Association; while the President of the Council holds office for three years, and is elected by the votes of the Council.

The Council holds its regular meetings at the annual meetings of the Association, and at such other times as may be appointed; and prepares a Report of the general state and proceedings of the Association for the past year to be presented at the annual meeting. But the affairs of the Association are mainly conducted by means of the Committee of Council, consisting of twenty members elected by the Council, together with the President, President-elect, Vice-Presidents and Treasurer, and the Honorary Branch Secretaries for the time being.

This Committee meets not less than four times in each year, and has the management of all the ordinary business, nominates the readers of addresses, determines the division of sections, and names their presidents, directs the publication of the JOURNAL, and reports to the Council on the financial state of the Association, and in general regulates the order and conduct of business, and acts in all emergencies arising during the year.

Lastly, I may mention, as affecting the proceedings of our present meeting, that a Branch of the Association may be constituted by any local set of members, not less than twenty in number, provided it is recognised by the Committee of Council. The Branch governs itself under its own by-laws, which are approved by the Committee of Council as being consistent with the general laws of the Association. Each Branch is independent of the others, elects its own officers and Council,

pays its own expenses, and cannot act for or incur any obligation on behalf of the Association.

It can scarcely be supposed that meetings such as those which take place under the auspices of the Association, in which large bodies of the most able and well-informed men of a learned profession are brought together for the consideration and discussion, not merely of scientific and practical medicine and surgery, but of all subjects concerning the business, character, life, and honour of the profession at large and its individual members, could be held without the eduction of very important results.

The information collected and published from the various general and Branch meetings has often been of a very valuable description. The introductory addresses of the President, and the appointed addresses on the progress of medicine, surgery, midwifery, physiology, and sanitary science in the several sections, usually by men of the highest eminence, have been of a most interesting and valuable kind, and have influenced perceptibly the advance of knowledge and progress of inquiry in the several departments; while the agency of the Association in the discussion of many of the general and particular topics affecting the welfare and regulating the conduct of the profession, has had a strong and wide-spread influence in forming and guiding the opinions of many members, and has operated largely and powerfully on the views of the legislature and general public.

It would be vain for me to attempt to refer to or even to mention the more important subjects which have from time to time engaged the attention of the Association. Leaving entirely out of view the many interesting scientific questions and valuable collections of information which have been brought under review at the various meetings, it is enough for me here to mention, as a few of the more interesting general questions which have at various times occupied the Association, the following subjects, to show how active and various has been their regard for all the interests of the profession.

The subject of Medical Reform had occupied the Provincial Medical Association for a considerable time before 1853, when the Metropolitan Counties Branch was first established. At that time, a Committee of the Branch was formed to watch the progress of the Reform question, etc., and from that time onwards, during several years, great activity prevailed in the Metropolitan Counties Branch and in the parent Association for the promotion of a measure of reform, in which the representative principle should receive full recognition. For this purpose, in 1854, a Bill was prepared for the Association, and amended by their Committee; and in 1855 this Bill was introduced into Parliament by Mr. Headlam, and again in 1856.

In 1858, the Medical Act founded on Mr. Cowper's Bill, was passed. And although this did not provide for the direct representation of the medical profession to the extent desired by the Association, yet I believe the exertions of their Committee had, in the earlier periods of the reform movement, a salutary effect in directing legislation on this subject into a proper channel, more especially as regards the reciprocity of practice in all parts of the country, and in drawing attention to the importance of improving the preliminary as well as the professional education of candidates for licences.

The reactivation of Medical Reform, in connection with an expected amendment of the Medical Act, in the year 1868, again brought the Association into activity on the subject of the representation of the profession in the Medical Council; but as yet nothing has been done in that direction. As a member of the General Medical Council, I should wish to avoid expressing any decided opinion on this subject; but, perhaps, I may be allowed to say that, so long as the Council was made the arena for the contention of privilege among several sets of the licensing bodies, as it was during a considerable number of the earlier years of its existence, I felt some sympathy with the views which were favoured by Mr. Headlam's Bill and by the Association. Since these contentions have ceased, and the Council has been permitted more loyally and steadily to apply itself to the business of improving medical education and examination, I think it may be felt that the question of more direct representation of the profession has lost some of its importance, and it may be hoped that the several licensing bodies and the Government will so exercise their patronage in the choice of their nominees to the Council, as to make the profession in general feel that their opinions are in reality effectively represented in that body, and that thus legislation on the subject may be rendered unnecessary.

Among the more important of the other subjects which have at different times engaged the attention of the Association, may be mentioned the wide and deeply interesting one of Sanitary Organisation and Reform, and more recently the special qualification to be granted in State Medicine or Medical Police; and it is well known that we owe much in connection with the Public Health Act to the exertions of the

Association, though much remains still to be accomplished in this department.

In representations made at various times to the Army and Navy Boards, with respect to the unfavourable position in which the rules of these services place the medical officers; in suggestions as to the compulsory Vaccination Bill, the Artisans' Dwellings Bill, the possible provisions for the Care of Habitual Drunkards, for Provident Dispensaries and the medical relief of the sick poor, and for the social and moral improvement of the medical profession at large, we have only to look at the annual records of the transactions, as published in the JOURNAL, to become aware of the earnest desire of the Association to accomplish measures which have for their object at once the good of the profession and the service of the public.

It is right also to allude to two other matters connected with the Association. One of these is the appropriation of a portion of its funds annually to the granting of sums of money in encouragement of scientific inquiries in connection with medicine, for which £165 was dispensed during the past year. The other is the Benevolent Fund, raised by voluntary subscription, for the temporary relief of distressed medical men, their widows and orphans, and the management of which has, since 1835, been a part of the business of the Association. The relief is confined to the cases of regularly educated medical men of irreproachable character, who are in actual distress. The income of the fund, which was for some time small, rose in 1853 to £655, and has been fully maintained since that time.

It could scarcely be expected that on such subjects as fall to be described at various times in the Association entire unanimity of opinion would be held, and occasionally, therefore, keen enough disputes have occurred. But if we consider the exciting nature of some of the topics, and the various locality and condition of those engaged in the contests, I think the proceedings of the Association may be regarded as having been on the whole conducted with a degree of harmony which could scarcely have been anticipated.

But while we are disposed to give full credit to the Association for its exertions in promoting the advance of scientific and practical medicine, and the attainment of useful and important objects connected with the social and political status of the profession, it can scarcely be doubted that the greatest of its advantages have been, and are to be, derived from its ethical or moral effects directly upon those attending its meetings, and, through them and the records of the JOURNAL, upon other members of the profession. It will, indeed, be freely admitted that a great stimulus to exertion must be given to the younger members by the example of the more advanced and able men who deliver the addresses and contribute to the scientific business of the meetings; and all who have joined in these meetings acknowledge with lively satisfaction the pleasant effects of the rational and kindly intercourse which they produce, tending to excite emulation, to lessen differences of opinion, to remove prejudices, and to create harmony and friendship among men of congenial pursuits.

Such, gentlemen, being the nature and progress of the British Medical Association, and it having been determined to found a Branch for Glasgow and the western counties of Scotland, I purpose to direct your attention to the capabilities which our district presents for this Association of its medical practitioners. On a consideration of these and other circumstances, we shall have to determine how far we can sympathise and approve of the objects of the Association, and in what manner and to what extent we are disposed and able to forward them; and we may be expected also to inquire what benefits we may hope to reap from the combined action of the medical profession which is contemplated.

It will occur to many that, while the want of such an union as that of the British Medical Association might be felt in remote provincial towns, destitute of medical organisation, as in the circumstances which led to its first foundation in the English provinces, there does not exist in Glasgow or its immediate vicinity, the centre of two public licensing bodies, of several important and long-established institutions both of a charitable and an educational character, any urgent necessity for new means of bringing together the body of medical practitioners, or stimulating them to united work for the good of the profession. And this is no doubt so far true. But the same remark would apply, and perhaps even more forcibly, to London, Edinburgh, and Dublin; and yet, in these places, the influence of the Association has been found to be beneficial, and the general meetings at all events have excited much interest, and have not only contributed in a marked manner to the furtherance of those general professional objects which the Association contemplates, but have also assisted and stimulated the labours of the existing institutions.

In the attempt to establish a Branch Association in this place, it will

of course be necessary, as is very properly suggested by the Committee's Report, to guard against its interference with the operations of any societies or institutions already existing. And I would, therefore, venture to suggest that, in the meantime, the operations of the Branch intended to be established here should be made subsidiary to those of the other existing institutions, and should rather be such as will pave the way for a greater degree of general union and co-operation among the members of the profession.

With a view to this object, I think we must look forward to obtain, at no very distant date, a general meeting of the British Medical Association in Glasgow. As a proof of the advantages of such a meeting, I need only refer to the brilliant success which attended that held at Edinburgh in the past year; and I feel assured that when the matter is viewed in its proper light, it will soon be felt that Glasgow and the west of Scotland must not lag behind in the endeavour to bring about such an union of the active intelligence of the profession, as may stimulate and invigorate the exertions of its members for their own improvement and for the increased utility of the profession to the public.

[To be continued.]

CLINICAL LECTURE

ON THE

TREATMENT OF COMPOUND DEPRESSED FRACTURES OF THE SKULL.

Delivered in Queen's Hospital, Birmingham.

BY SAMPSON GANGE, F.R.S. EDIN.,

Surgeon to the Hospital; President-elect of the Birmingham and Midland Counties Branch of the British Medical Association.

GENTLEMEN,—Is the trephine to be employed or not in compound fractures of the skull, with depression? No question more than this has engaged the attention of practical surgeons: it is still unsettled, and I shall endeavour to lead you to a correct understanding of its merits in commenting on three cases which I have to bring before you. In each case the scalp was divided, and the bones of the skull were broken and driven in, without, however, producing evidences of injury to the nervous centres. In none of the cases was the trephine employed; in all the result has been perfectly successful.

The man before you, Thomas Moran, a bricklayer's labourer, aged 55, was admitted to Ward 3 on September 15th. While he was at work just previously, a brick fell from a considerable height upon his head, making a Y-shaped scalp-wound about two inches and a half in length, and situated rather above the middle of the left parietal bone. The flap of the wound being turned back, a Y-shaped fracture became visible, with its centre depressed to one-third of an inch; the sides of the fracture sloping evenly towards the central and most depressed point. The man seemed little affected by the accident, and had no idea of its serious nature. The edges of the wound, admitting of easy approximation, were brought together and dressed with dry lint; and for the first fortnight the patient was kept perfectly quiet in bed, on milk diet, with an ice-bag on the head. No signs of constitutional disturbance appeared, and the man was discharged at the end of seven weeks, to use his own terms, "in as good health as ever he was in his life". The wound was then quite healed, and the area of the depressed bone measured one inch and a half longitudinally, seven-eighths of an inch transversely; its depth was three-eighths of an inch in the centre.

The next patient, Henry Hadden, a machinist, aged 25, was admitted into the Queen's Hospital at 11.20 P.M. on September 25th. A few minutes previously, in a street row, a brick had been thrown at his head, producing a wound an inch in length, over the left temporal ridge, in a line above and in front of the ear. The hæmorrhage was considerable. The probe passed into a very abruptly punctured fracture of the skull; the amount of depression being half an inch, and the edges on one side at least, being quite perpendicular. Mr. C. W. Keetley, our house-surgeon, to whom I am indebted for the notes of these cases, made a memorandum at the time, to the effect that, in Hadden's fracture, a small piece of bone appeared to have been driven right in. The man was quite sensible, though faint from loss of blood. He was put to bed, with an ice-bag on the head. At 8.30 next morning, a little headache was complained of; the pupils were even; temperature 101 deg. A magistrate took the depositions at the bed-side in the afternoon.