The *Garden Life Pocket Diary*, issued by the periodical of that name, shows a week in an opening, and gives monthly gardening notes and hints upon such subjects as the growing of chrysanthemums and roses and various other matters interesting to gardeners, professional or amateur.

ANNUALS.

*Whitaker's Almanack for 1910*⁹ has been revised to November 20th, and was "published at sunrise on December 9th," on which day we find, on reference to this year's issue, the sun rose at 7.55 a.m. There are indeed few of those sudden disconcerting questions, which every schoolboy ought to be able to answer, that cannot be answered from this miniature encyclopaedia. The number of pages has not been increased, but space has been found for an enlarged list of secondary schools, and a more detailed account of Parliamentary procedure, and the principal events of the year. The volume contains, as usual, a number of articles written for this issue on such subjects as the Report of the Royal Commission on the Poor Laws, the Children's Charter (the Children's Act, 1908), old-age pensions, aeronautics, and the navy and army. In the article on the army in 1909 we read:

In the Army Medical Corps, recent improvements in the pay, status, and educational facilities of officers are bearing excellent fruit. Probably no other army is as well equipped in this branch, and the nation at large has to thank the corps for researches resulting in the practical extermination of more than one deadly disease.

With regard to the Regular Army Reserve, it is stated that there is only a slight deficit in the Royal Army Medical Corps, but it is added:

Gaps in the R.A.M.C. reserve are being filled by the dubious expedient of transferring infantry reservists, and giving them a brief special instruction.

A note prefixed to the new edition for 1910 of *Who's Who*¹⁰ impresses upon the reader that he ought also to provide himself with *Who's Who Year Book*,¹¹ a smaller volume which is described as a key to the larger. The *Year Book* consists of tables which were, in fact, the original nucleus of *Who's Who* when it was first published in 1849. The book developed into the biographical annual which most people know, and became so stout that it was thought better to detach the tabular matter. The tables range over a wide field, from the dates of race meetings to lists of university staffs and learned societies. *Who's Who* itself remains as before—an extraordinarily complete guide to people of the day, men and women about whose career or occupations, for one reason or another, information may often be desired.

Another volume of the same series of handbooks is *The Writers' and Artists' Year Book*.¹² It contains tables of journals, magazines, and publishers—English, Canadian, and American (we take leave to alter the order in the table of contents)—who are open to receive contributions, with some particulars as to the class of contributions invited. In the preface the editor gives the excellent advice, "Whenever it is possible, have the manuscript type-written; if not, very clearly written, with plenty of space. Pack your manuscript flat, not rolled or folded." An American editor some time ago published a piece of advice to contributors in the following terms: "Send your manuscript flat, if you can; folded, if you can't; but shoot yourself before you roll it."

The Englishwoman's Year Book and Directory,¹³ which may also be counted as belonging to this series, is now in its twenty-ninth year of issue, and we may feel pretty sure that the demand for it is increasing as the unmarried daughter looks about herself to find employment for her leisure or her needs. There is a section on medicine, pharmacy, and dentistry. In an introductory paragraph on general prospects the opinion of the British Medical Association, "that the principle that no distinction be made on the ground of sex as regards the amount of the emoluments to be paid lady practitioners be affirmed," is quoted. It seems well, however, to reproduce also the terms of the

recommendation of the Association with regard to prospects and remuneration:

Regard must be had to the fact that the time spent in the work of medical inspection of school children can, in the majority of cases, lead to no future in this special department; that the majority of those engaged must ultimately revert to other departments of medical practice, and that the time spent in the medical inspection of school children will afford very little useful experience for future practice.

Consequently practitioners who at the commencement of their career undertake this whole-time work will be justified in requiring a higher rate of remuneration than that they would receive in posts affording valuable experience, such as those of assistants to general practitioners or of house-surgeons, and the minimum whole-time salary should be from £250 to £300 per annum.

The account of the way in which a medical training can be obtained is very condensed, but accurate so far as it goes. There is a special section on medical women in India, but not on medical missions; we suggest that in a future issue this omission should be supplied, as there is a certain risk of women taking up medical missionary work without fully understanding the nature of the work, the amount of remuneration, and the cost of living.

MEDICINAL AND DIETETIC PREPARATIONS.

Turkish Sour Milk.

THE facilities for obtaining supplies of milk soured by the action of the Bulgarian lactic bacillus are rapidly increasing, and persons wishing to take it regularly or occasionally can either prepare it at home by means of some of the cultures of bacteria, on which we have previously reported, or can obtain it ready for consumption from several sources. We have received a sample of the preparation, stated to be "the true Turkish curdled milk," supplied under the name "Yaourte" by Mrs. Marsh (Overshot Mill, Colne Engaine, Essex). We are informed that the cows from which the milk used is obtained have all passed the tuberculin test, and that the milk is sterilized for some hours before adding the lactic ferments and incubating in the jars, previously sterilized, in which it is sent out. The jars are closed with an air-tight cover, and it is claimed that the contents will keep in perfect condition for any length of time. Our determination of the acidity of the sample submitted showed it to correspond to 1.02 per cent. of lactic acid, which is practically the maximum obtainable; the taste was free from bitterness, and decidedly agreeable, the pleasant flavour being ascribed to the compounds produced by the two yeasts included among the ferments employed, which are stated to be *Streptobacillus lebenis*, *Streptococcus lebenis*, *Saccharomyces lebenis*, *Mycoderma lebenis*, and *Bacillus lebenis*.

THE RELATIONS OF THE LAITY AND THE MEDICAL PROFESSION.

By MRS. HODGKINSON,

Editor of the *British Health Review*.

(Concluded from page 1682.)

THE question of fees is a sore subject both to the profession and the public. I approach it with trembling, but in these Jacobin days nothing is sacrosanct, not even that mythical but pleasing coin—the guinea of the consulting room. We are well aware that our advisers must live. What we beg to remind them is that we also must live, and in a double sense where they are concerned. Frankly, we think surgical fees are too high. Let me not be reminded of Whistler's rejoinder to that much pilloried Q.C.: "Sir, I did not charge for an hour's work; I charged for the experience of a lifetime." I know some one will cite this if I do not anticipate him, but let me point out the difference. You need not buy a Whistler; you may not even want to do so. Some persons might crassly prefer that "Battersea Bridge" should be in no nearer neighbourhood to them than the Tate Gallery. But when confronted with the need for operation, and you are given the choice of your money or your life, you are unable to stand upon the order of your bargaining however lean your purse may be. I positively decline to waste space in eulogizing the charity of many medical men. It needs no praise, for it is known and respected. But suppose we imitate the unemployed, and say, "Curse your charity; what we want is a lower and more definite scale of fees." Might there not be some reason in that claim? The right-minded patient hates pleading poverty, and is dreadfully harassed by the different standards obtaining. Sir

⁹ *Whitaker's Almanack, 1910*. London: J. Whitaker and Sons, Limited. (Cr. 8vo, pp. 988; 2s. 6d.)

¹⁰ *Who's Who, 1910*. London: A. and C. Black. (Cr. 8vo, pp. 2162. 10s.)

¹¹ *Who's Who Year Book, 1910*. London: A. and C. Black. (Cr. 8vo, pp. 170. 1s.)

¹² *The Writers' and Artists' Year Book. A Directory for Writers, Artists, and Photographers, 1910*. London: A. and C. Black. (Cr. 8vo, pp. 136. 1s.)

¹³ *The Englishwoman's Year Book and Directory, 1910*. London: A. and C. Black. (Cr. 8vo, pp. 408. 2s. 6d.)

Pompey Partington may demand £150 for a snip which Mr. Cutler Walpole may willingly perform for half the money. It is a solemn truth that the patient entering the consulting-room has not the remotest glimmer of reason to guide his expectations as to the drain on his resources, and this, at a time anxious enough in itself, adds another dread to the black flock already preying upon his vitals. How timidly he puts the question: "And may I ask, Sir Pompey, what—ahem—your fee is?" And in what trembling he waits the crisp and clear-cut reply: "My fee in such cases is invariably——" Goodness knows what, but something that in no sense necessarily represents its actual though it may its market value.

If (unless patients arrive in ermine, diamonds, or Daimlers) "an arrangement could be come to" (to quote Mrs. Nickleby) whereby the fee could be paid in instalments to cover a stated period, and if this were a recognized and usual arrangement, the blessing to the £500 a year man would be untold. For he too must live, and he naturally, and for the sake of a struggling family, desires to be treated by what he, rightly or wrongly, believes to be the best skill attainable. But he does not like to plead poverty and beg for delay. He suffers. I might amplify this theme, but space is limited. The surgical fee must be paid too quickly. That of the general practitioner is paid too slowly. To many families that dragging half-yearly or yearly bill, slowly lengthening pill-box by pill-box, visit (of frequently unknown cost) by visit, is a really dreadful incubus which casts a shadow on the Christmas festivities and darkens the merry midsummer.

"If only the doctor would send in his account monthly and have done with it, then there would be some hope of checking the thing and paying it off," is the *cri du cœur* of many a hard-pressed householder.

"I have set aside £25 for the doctor's bill," I heard a jaded-looking man say not long ago. "But it may be over £30, and it may be only £22—Lord knows which. You can't account for all the visits." There were still four months to live through before that anxious point could be settled with its unnecessary suspense. The thrifty public would certainly prefer bills more frequent, and, above all, more detailed. Honestly, would not the profession prefer them also? And if not, why not?

On the subject of advertisement the laity has its own strongly-marked view. Doubtless there are some good reasons for the rule which forbids it, and a meticulous particularity in the size of a brass plate or the iniquity of a professional notice in a chemist's shop may have their point. But we do not feel there is that consistency in the matter which commands respect.

It may be a very derogatory action in a struggling general practitioner to post his address at the chemist's, though it would often be a great convenience to the public. But if it be so, is it more worthy that the medical attendants on some distinguished invalid should be "billed" on the newspaper placards, their opinions cited, and their name and fame trumpeted through the megaphone of the press until every Hoggeneimer in Mayfair feels that these only are the guides to whom can be entrusted disease so precious as his own? One has heard that these eminent persons sometimes deplore publicity, and, with Mr. Crummles, marvel how such things (and many other notices) get into the papers. Still they do, and must be a valuable asset. Yet another point. There appears to be an idea that any physician or surgeon who writes a book for the instruction of the public, and writes it in English and not in the language courteously accepted for professional purposes as a substitute, is walking very near the edge of the precipice of advertisement, and may, and often does, incontinently tumble over, and thereby incurs the censure and contempt of the medical authorities. We think this very injurious to ourselves. That the author thus distinguishes himself amongst his *confrères* appears to us a matter of no importance. He has every right to it if he can do so, and the others may (if they can) indemnify themselves by being equally successful. But what concerns *us* is that we should have the opportunity of being so instructed. It is we who are implicated, and to treat us as children who may not hear unpleasant details, and cannot understand their bearings, is to insult our understanding, and to attempt to continue a conspiracy of silence which

education is rendering more absurd and impossible every day. Far from joining in the condemnation of those who attempt to enlighten us, we fail to understand why it should not be a test of what is best and greatest in the profession to be a successful teacher of the laity in matters which concern them. This is one of the functions of the true physician, and one which the future will demand, and to stigmatize it as self-advertisement, while permitting indirect but more lucrative forms of advertisement, savours of injustice, which finds no response from us.

It is said that the laity are not qualified to comprehend such matters, and that it is in their interest that the prohibition exists. We cannot agree with this view of the case, since, with such knowledge as we possess, we must be the final judges when any definite surgical or medical treatment has to be decided for ourselves and our friends. I give a typical case: A patient sought advice from four successive specialists on a malady in which much of the happiness of her future life was involved. One advised no treatment at all and resignation to the inevitable; the second a costly and wearisome experiment, which might or might not succeed; the third suggested local and palliative measures; the fourth recommended change of air and scene. Finally, the patient and her sorely-puzzled friends pooled the advice and evolved a kind of hybrid treatment, which met with an astonishing and gratifying success.

But it was they—as it always is—who in the last resort had to judge the professional opinions, and I contend that, as no one can shift this responsibility and many others, people in this position need every sort of education possible, and that the man who has written a book which helps to create an intelligent and reasonable public, deserves well of that public and of his profession.

There is something to be said for the absolute freedom of action permitted to every medical man in America. The drawbacks are obvious, but I am by no means certain that the advantages, from the lay point of view, do not outweigh them. The ideal is, of course, State payment of the profession, and this is bound to come, so excellent has been the work done by the medical officer of health, and so clearly are indicated the opportunities for that thoroughly organized and systematic campaign against disease, so absolutely impossible under obtaining conditions.

But meanwhile, in the present state of cut-throat competition, the orthodox medical man is heavily handicapped, and this handicap reacts on the patient, who is courted far more than is good for him, and has not even the poor opportunity of judging between rival claims which is given by open advertisement.

A whole article might be devoted to an uneasy sense in the public mind that the last twenty years has seen a sensible *commercializing* of the medical world, and an increase of professional jealousy which not infrequently stifles talent, and thus reacts injuriously upon our interests.

We are dissatisfied, also, with the continuity of medical education, believing that the average medical man is unable or unwilling to keep step with the progress of modern science which affects his work more rapidly and profoundly than it perhaps does any other.

Compulsory post-graduate courses might do something to improve matters, but it is difficult to see how these could be adapted to the needs of the struggling general practitioner, whose battle with difficulties is already hard enough. Here, again, the organization of a State Medical Service would come to the aid of the public.

But I must close these discursive remarks, though there is much more I should like to say on things as they are and things as they might be. I have left much unsaid of the opinions and distrusts tending to loosen the bonds between the public and those who under many difficulties, personal as well as general, perform their duties towards us with such varying measures of success.

My belief is that those bonds may and must be strengthened if it be recognized that the future will differ from the past most materially in the fact that we shall not so much call on the physician to rescue us from the disastrous consequences of our own and others' ignorances and follies when the harm is done, as to instruct and safeguard us in the ways of health and right living. The possibilities here are infinite.