sease is beyond the scope of the present communication. The rapidity of growth of true carcinomata and the early involvement of the glands place them in an entirely different category to rodent ulcer, in which the disease is very slow, local in its manifestations, and without infection of the glands.

I must here acknowledge the assistance afforded me by Drs. Bulloch and Hunter in the pathological investigations, and by Mr. Harnack, radiographer to the London Hospital, for the photographs, and for help in carrying out the practical work.

Note.—Since the cases described above were first shown I have learned that the treatment has been also used in this country by Messrs. Barnard, Startin and Dr. Harrison Low.

REFERENCES.

- ¹ Finsen, *Hospitalstidende*, No. 3, 1900. ² Stenbeck, *Mittheilungen aus d. Greuzgebiete d. Med. u. Chir.*, Bd. vi, No. 3.

AN ADDRESS

ON THE

NEED OF BACTERIOLOGICAL AND PATHOLOGICAL
LABORATORIES IN DUBLIN.*

BY SIR GEORGE DUFFEY, M.D.DUB.,

Past President Royal College of Physicians in Ireland; Professor of Materia Medica, Royal College of Surgeons in Ireland; Physician Royal City of Dublin Hospital, etc.; President of the Branch.

In thanking you for the honour you have done me by electing me your President for the ensuing year, I am bound, in the first instance, to express my appreciation of the compliment paid me by the Council of the Branch in having nominated me for the office of President-elect at the last annual meeting. That nomination, and my subsequent election by the Branch, was, I know, somewhat unusual; but it was therefore the greater compliment, as I had not previously been a member of the Branch Council. To those members of it who, as I was informed, waived their claims to office in my favour, my acknowledgments are consequently especially due.

The gratification I naturally feel in being in such a complimentary manner elected to preside over a Branch which twenty-four years ago I took a part in organising is considerably marred by the duty that falls upon me of having, according to precedent, to address you upon the present occasion. I am aware of my incompetence to do so with either the ability or special knowledge that have characterised the addresses of those who have preceded me. Looking back at those addresses—at the delivery of all of which I have been present—and bearing in mind those who have delivered them, the choice of a suitable subject upon which to speak to you to-day is to me most difficult. We have had no burning questions of medical politics before us during the past year. And the subject of public hygiene was so fully brought before you in his address at the last annual meeting by Sir Charles Cameron, our outgoing President, that it would be out of place were I to occupy your time with any views of mine on such a topic.

PAST PRESIDENTS AT THE FRONT.

Among the events that have stirred the minds of everyone during the last twelve months, the first place must be taken by the deplorable war in South Africa. In that campaign, in which many of our fellow countrymen have played so heroic a part, two former Presidents of this Branch took a distinguished share. While we have welcomed home with open arms our fellow member and past President Sir William Thomson and his staff, and while we feel proud of the work that, as universally acknowledged, was so splendidly done by the Irish Hospital, we do not forget that another distinguished Irish surgeon has unfortunately not returned. Sir William Stokes took an active part in the formation of this Branch. He was a past President of it, and always interested himself in its proceedings. His professional services in South Africa

received well-merited recognition from the highest authorities. Dying as he did in the services of his Queen and country in a distant land, he has left a reputation worthy of Irish surgery and of the famous name he bore.

THE MEDICAL SERVICE IN THE WAR.

As members of the same profession, we cannot but feel pride at the manner in which the Royal Army Medical Corps, assisted by the civilian surgeons, performed their duties during the war under exceptionally hard and difficult circumstances. "No men in the campaign served their country more truly than the officers and men of the medical service." And while paying this tribute to those of our own sex, we must not forget the bravery and unselfishness of those praiseworthy nursing sisters who, as a well-known writer from his personal observation has declared, "set the men around them a higher standard of devotion to duty." It is gratifying to know that a considerable number of these nurses were from this city, and had received their professional training in its hospitals.

AN INSTITUTE OF PREVENTIVE MEDICINE FOR DUBLIN.

Two matters have recently been brought under the notice of the profession in Dublin which I trust will receive the attention and support of this Branch. Both of these subjects are intimately connected not only with the advancement of the science of medicine, but also—and as a necessary consequence of any scientific progress—are calculated to benefit the public at large. I refer in the first place to the proposal made by Sir Christopher Nixon to establish in Dublin an institute similar to that of the Jenner Institute of Preventive Medicine of London, which our munificent fellow-citizen Lord Iveagh endowed with the splendid gift of a quarter of a million sterling. It is to the study of bacteriology in relation to medicine, pathology, and to hygiene that we must look for more light in the treatment of disease and in our efforts for its prevention. In Dublin, and in Ireland generally, opportunities for such study are extremely restricted.

We have not at present any properly-equipped recognised laboratories available for the application of bacteriology, for public health purposes, to the diagnosis or to the prevention of communicable diseases. In Dublin, if a dispensary medical officer, or any other practitioner, desires, in a doubtful or suspected case of infectious disease, to have definite knowledge of the real nature of the case from a bacteriological examination, he must either put himself under an obligation to a member of the staff of some of the medical schools, or else pay a fee to a specialist, for an examination and report. In some of the large cities in England and in Scotland—particularly in London, Liverpool, and Edinburgh—the municipal authorities either support a bacteriological laboratory or subsidise one. In Germany, in France and, I believe, in Italy, bacteriological laboratories are assisted by the Governments of these nations; and State bacteriological institutes have been recently established in various parts of Russia, including one at Merv, in Central Asia.

In Belfast the municipal authorities have an arrangement with Dr. Lorain Smith, the able lecturer on pathology in the Queen's College, to make bacteriological examinations in suspected cases of typhoid fever and of diphtheria, for each of which examinations he is paid a fee by the corporation. And it also grants an annual sum to the Council of the College for expenses, the examinations being conducted in the College laboratory. Special arrangements are made for other larger investigations; and at present an important investigation as to the value of bacteria beds in the treatment of sewage is being proceeded with there. Why should not some similar arrangement be made for Dublin?

The results that have been shown to follow the investigations in such laboratories have been most valuable, and, in many cases, have undoubtedly prevented epidemics from spreading. As was said in a recent issue of the *BRITISH MEDICAL JOURNAL*,¹ in an annotation referring to the value of the work done in the laboratory of the Borough Council of Lambeth, "When we consider what an enormous expense to a community may be saved by the early 'scotching' of an epidemic; how the outlay of a few pounds may prevent the

* Delivered at the annual meeting of the Dublin Branch of the British Medical Association, January 31st, 1901.

expenditure of thousands, apart from the misery and death due to an epidemic, that Public Health Body which does not avail itself of bacteriological assistance is surely not doing its duty by its electors."

The Irish Government has indeed to some extent recognised the importance of the information a competent bacteriologist can give, by the appointment of Professor E. McWeeney as Bacteriologist to the Local Government Board for Ireland. But his official duties as such are limited in their scope; and he has to conduct his investigations in a small private laboratory which he himself, I believe, would be the first to acknowledge is inadequate, both in size and in its equipment, for his work.

It would seem most reasonable therefore that as neither the Corporation of Dublin, being the sanitary authorities for the City, nor the Urban or Rural District County Councils of the County of Dublin, have as yet provided any means of giving any bacteriological assistance to their respective medical officers of health in the diagnosis and prevention of infectious and epidemic diseases, these bodies should, with the aid of Government, take action for the establishment and maintenance of a conjoint bacteriological laboratory under the control of a highly-qualified bacteriologist. In such a laboratory arrangements might also well be made for technical instruction in bacteriology, for post-graduate classes, and for making original research.

In the endeavour to arouse renewed attention to the importance of establishing such a laboratory in Dublin, I am entirely in accord with Sir Christopher Nixon's original proposal of forming one on the lines of the Jenner Institute of London. As President of the Royal Veterinary College of Ireland, Sir Christopher suggested that it would be a suitable place upon which to graft such an institute. This seems an admirable proposal and one which would presumably commend itself to the favourable consideration of the Corporation and other local sanitary authorities concerned.

I trust this meeting will adopt the resolution to be submitted to it on the subject, and that the Government will give its assistance and pecuniary support.

A PATHOLOGICAL LABORATORY FOR IRISH ASYLUMS.

The second matter that appears to me to be one in which the organisation the Branch possesses might be advantageously exerted is to assist in the endeavour to promote the study of the pathology of mental diseases in this country. A large amount of material afforded by the lunatic asylums in Ireland is practically wasted for scientific purposes. In the sister kingdom, the pathological investigations that have been systematically made by highly-qualified men in many of the asylums have produced important results. Monetary considerations unfortunately have hitherto prevented to a great extent the carrying out of similar scientific work in all the Irish asylums; but it is not unreasonable to hope that many if not all of them would join in some well-devised plan for the establishment and maintenance of at least one central laboratory in Ireland for the study of the pathology of nervous and mental disease. Such a laboratory was established in 1892 at Claybury by the London County Council for the seven asylums under its control; and, under the able direction of Dr. F. W. Mott, F.R.S., it has been the means of producing many valuable contributions to neural pathology. In the midland counties of England, the movement to unite different asylums in providing and maintaining a conjoint laboratory for pathological research has, I understand, met with much support. And in order to give legal authority to such a combination of asylums a clause was introduced into the English Lunacy Acts Amendment Bill before the last Parliament, extending the power of two or more local authorities to unite in providing and maintaining a district asylum, so as to include a power to agree to unite in providing and maintaining a laboratory for pathological research in connection with lunacy.

In 1896 the managers of seventeen of the Scottish asylums combined to establish a laboratory at Edinburgh, to which Dr. Ford Robertson was appointed pathologist. As the importance and value of the work done in the Claybury Laboratory may be estimated by the papers published in the *Archives of Neurology*, so the recent issue, under the auspices of the Executive Committee of the Scottish Asylums, of Dr.

Ford Robertson's splendid *Textbook of Pathology in Relation to Mental Diseases* demonstrates the benefit resulting to science and humanity from a well-organised plan of investigation and systematic work in the hands of a competent and skilled man who gives all his time to the subject.

That there is an urgent need for similar action in our country cannot fail to strike any one who considers for a moment the large number of insane there are in Ireland and the great increase that has taken place during the last twenty years in the total number of lunatics in the country. According to the last annual report of the Inspectors of Lunatics, there were in Ireland on January 1st, 1900, 20,863 insane persons in establishments, and 20,304 on January 1st, 1899, being an increase of 475 in the year. And there was an increase in the total number of lunatics from the year 1880 to 1899 of no fewer than 7,881. Surely these harrowing figures show that we have much to learn at our own doors concerning the etiology and intimate pathology of insanity. Should we not aid in the endeavour to awaken a more general interest in the study of the pathology of insanity in the asylums of Ireland, and help to assist those members of their medical staff who are anxious to carry out original researches in this department of medical science? It is rather humiliating that with such a field of observation as unfortunately exists in this country, and with no lack of men of intellectual ability competent to undertake the work, we should be mainly dependent for our knowledge of nervous pathology on the investigations and studies of English, Scotch, or foreign observers, and do little or nothing ourselves to advance scientific progress in this direction.

It is, I venture to think, the duty as well as the interest of the Irish Government and of the local authorities, to afford facilities for the prosecution of such studies as may be reasonably expected to lead to results which, by increasing our knowledge, may accomplish a diminution in the frequency of occurrence of one of the greatest calamities that affect mankind.

Sir Christopher Nixon, as already mentioned, originated the idea of forming a bacteriological laboratory in connection with the Royal Veterinary College of Ireland and with the Department of Agriculture and Technical Education. To another member of this Branch—Dr. William R. Dawson—is due the credit of proposing the establishment of a central pathological laboratory for the Irish asylums. (The latter proposal has already been approved by the Irish division of the Medico-Psychological Association of Great Britain and Ireland, by the Royal Academy of Medicine in Ireland, and by the lay and medical press. I trust that this Branch will give both proposals its support, and that the resolutions to be submitted to this meeting relative to each of the above movements will meet with your approval.

REFERENCE.

¹ January 12th, 1901, p. 107.

THE SURGICAL TREATMENT OF MIGRAINE.

By WALTER WHITEHEAD, F.R.C.S., F.R.S. EDIN.,
Consulting Surgeon, Manchester Royal Infirmary.

DURING the last five and twenty years I have never failed to treat successfully the most inveterate and severe cases of migraine by the introduction of an ordinary tape seton through the skin at the back of the neck. Some of the cases have exceeded in intensity any I have ever known recorded. All the cases have been previously under medical treatment without receiving any material benefit. One patient, in particular, came from America for the sole purpose of being cured. His attacks were so terrible, and of such long duration, that he came prepared to remain in England twelve months if necessary to get even partial relief. After the introduction of the seton his attacks promptly subsided, and for two years afterwards—the last I heard of him—he never had a single recurrence.

My last case, and the one which has induced me to make this communication, is that of a lady who has never for the last six years escaped many weeks without "a brain storm" of such severity that she has been completely prostrated with violent headache and sickness for periods extending from twelve to twenty-four hours. Since the intro-