The Anatomy of the Nerves of the Uterus. By ROBERT LEE, M.D. Physician to the British Lying-in Hospital, &c. With two Plates. London: Baillière. 1841.

AMONGST the practitioners who have devoted themselves exclusively to the obstetric art, Dr. Robert Lee is the most industrious. A year seldom passes over without the production of some useful or important contribution to obstetric medicine from his prolific pen. In the present work Dr. Lee furnishes us with the results of his researches on the anatomical disposition of the nerves distributed to the unimpregnated and gravid uterus. Dr. William Hunter was the first anatomist who examined the nerves of the gravid uterus, and who suspected that they enlarge during utero-gestation, like the arteries and veins; but he left no preparations of the nerves of the uterus, and has given no representation of them in his engravings.

Professor Tiedemann, however, has published an accurate, though concise, description of the nerves of this organ, and illustrated his description with two engravings. He adds, that they enlarge after puberty, and become slender in old age; and that they increase both in size and number during pregnancy, as Dr. Hunter had previously suspected.

These particulars are mentioned in the first chapter of Dr. Lee's work, in which we find a complete historical sketch of the state of our knowledge respecting the nerves of the uterus. In the second chapter, Dr. Lee gives a detailed account of ten dissections which were made for the purpose of elucidating this obscure point of anatomy. One refers to the uterine nerves in the man; two to the nerves of the unimpregnated uterus; the remainder to the nerves of the gravid uterus, in the third, fourth, sixth, seventh, and ninth months. The descriptive anatomy is illustrated by two plates, in Perry's best style; one exhibiting the nerves of the gravid uterus at the sixth month; the other, at the end of the ninth month of utero-gestation. In a future number we shall give an abstract of Dr. Lee's description of the uterine nerves.

Nuces Philosophicæ; or the Philosophy of Things as derived from the Study of the Philosophy of Words. By EDWARD JOHNSON, Esq. London: Simpkin & Co. 1841.

ALTHOUGH this work is not strictly devoted to a medical subject, we cannot abstain from recommending it to those of our readers who, from education or habits of thinking, are inclined to bestow a leisure hour on the production of an elegant writer and an accomplished scholar.

The subject of Mr. Johnson's work may be readily conceived from its title: the objects are twofold;—to "supply a light, yet useful and philosophical, reading for those who have not time for much continuous study; and to teach the unthinking how to think—the unreasoning how to reason—how to distinguish between the *reality of things* and the nothingness of those 'insignificant noises,' *words without meaning.*"

Part II. of the work will be published on the first of February, at a moderate price. We have no doubt that it will receive the same share of public attention which Mr. Johnson's letters on "Life, Health, and Disease," have already commanded.

OBSERVATIONS ON MEDICAL REFORM.

BY J. KIDD, M.D.

Regius Professor of Medicine in the University of Oxford.

IN this pamphlet, which extends to twenty-four pages, Dr. Kidd has published his opinions on a few points connected with the now-urgent question of Medical Reform. The first portion of Dr. Kidd's pamphlet contains a sketch of "the history of the College of Physicians, and of the long-existing disputes between the fellows and licentiates." The absurdity of the existence "of *nineteen sources of examination* for licenses or degrees in medicine" is next pointed out, and it is shown, that "scarcely one of these nineteen institutions can afford legal protection to its members." In the second portion of the pamphlet we find the following observations, which we cite textually and without condensation; any hints or opinions emanating from the Regius Professor of Oxford being worthy of serious attention.

"The question of Medical Reform, like all other questions which involve the contemplation of changes in existing customs and institutions, requires very calm consideration, as well with reference to its original expediency as to its requisite extent.

If the united voice of nearly all the individuals who constitute the medical profession may be admitted as a just indication of the necessity for reform, nothing more need be said in proof of the existence of that necessity; for that united voice is already raised in favour of the measure. But there still remain to be discovered the best means of effecting such salutary changes as may with the least inconvenience remedy the several evils which require correction.

It happens, almost necessarily, from the insulated position of the medical profession, that the conflicting interests of its several branches, and the unequal demands of its chartered institutions with reference to the professional qualifications of its members, are but very imperfectly known, and cannot therefore be duly estimated by any one out of the profession. And this circumstance affords perhaps the best apology for any one within the pale of the profession, who, as in the present instance, proposes to offer his observations on the subject of Medical Reform: for thus other individuals, and more especially those from whom alone any national legislative measure can proceed, may probably be induced to examine the question more accurately, and be enabled to elicit more appropriate and important information. In the mean time, I would respectfully solicit all those whose interests are directly implicated in the proposed measure, to exercise that mutual good-will and forbearance which ought to mark the proceedings of the members of a liberal profession; in order that on the one hand may be manifested the single desire of a salutary reform, and on the other, a similar desire to acquiesce in such changes as not only the general interests of the profession, but of the public also, may require.

It is equally as noble in communities, as in individuals, to acknowledge and amend an error, as it is ignoble to persist in it: and it must be admitted by every unprejudiced inquirer that, had all the existing institutions of the medical profession always adhered to the spirit of their original foundations, many of the present evils would have been prevented. In contemplating and feeling the effects of those evils, we may all perhaps be disposed to say, as representatives of our respective institutions,

'Quisque suos patimur manes,'

and the best and most unobjectionable wish that can be expressed on the occasion is this: that should new life be infused into us by the projected measure of reform, we may preserve for ages to come whatever healthy vigour may be imparted to us by the regulations of that reform.

Neither wishing to lengthen these observations unnecessarily, nor desirous of entering too deeply into a question which requires a more comprehensive view than I feel myself capable of taking, I propose to offer only a few more remarks on the present subject; which, however, I offer with some confidence, because I know them to be in accordance with the views of several members of the profession, who, though among the warmest advocates for Medical Reform, are most desirous of respecting existing institutions to the utmost possible extent compatible with the alterations essentially requisite.

The most prominent and most general object of the advocates of Medical Reform appears to be a uniformity of qualification, to be tested by a public examination, in all the candidates for a license to practise medicine. The desire of this uniformity has naturally resulted from the consideration of the fact, that scarcely two of the numerous existing boards of examination exact the same kind or the same degree of qualification; and that each medical school determines, independently of all the rest, the character and the period of its annual courses of professional study, whether in the form of lectures or clinical observation. But it is here fair to state, that in almost every instance these annual courses are, with reference both to character and length, sufficient for the due instruction of the pupils; the average annual period of study being from six to eight months; the annual average number of lectures being from 110 to 140. It is also fair to state, that although not half the same number of professional lectures could be delivered in Oxford, consistently with the existing system of that university, and it may be presumed that no one would be desirous of unnecessarily disturbing that system, yet, as every candidate for even the earliest of the two degrees in medicine must first have resided four years in the university, for the purpose of studying the classics, &c., and must afterwards have passed three whole years in an accredited school of medicine, London being usually that school, Oxford may be considered as virtually upon a par with the other medical schools of this kingdom: and what has been affirmed of Oxford may, in every essential point, be applied to Cambridge.

It can hardly be denied that a change is desirable in that part of the existing system above described, which refers to the inequality of the standard of qualification expected by the different boards of examination for license to practise. But since such change would require the establishment of one national board of examination, which should alone have the power of granting license to practise, it is in the highest degree probable that to such a change every existing board would be at first disposed to object, as annihilative of its own power. And yet, if in the proposed new national board, each existing board were to be represented by one or more of its members, among others chosen from the profession at large; and if a certain proportion of the whole were in succession delegated to act as examiners in each session; the objection might probably be removed.

With respect to the future condition of existing institutions, there appears nothing in the least derogatory to their dignity; nor, which is of much more consequence, to their professional utility and efficiency, in considering them henceforth as independent scientific societies; which, retaining all their present members and internal laws, might henceforward admit new members by the same mode as new members are customarily admitted to the Royal, Linnean, and other scientific societies. Each of the existing institutions might still have its own library and museum, and its own lectures; each might have its own meetings, and publish its own transactions; and all, vying with each other in the spirit of a liberal emulation, might continue to benefit both individuals and the public, quite as effectually as under the present system.

And, on the same principle, the several universities which have the right of conferring medical degrees, might still exact a previous public examination of the candidates for those degrees.

To the demand that of every candidate for a medical license, such an examination should be required as might show a due qualification to practise either as a 'physician,' or a 'surgeon,' or as a 'general practitioner,' there does not seem any reasonable objection; nay, it is quite expedient that every candidate for a medical license should be so qualified. For, although it is true, as is observed in a very judicious and candid article on Medical Reform in the 'Quarterly Review' of December, 1840, that very few physicians practise surgery in this country; yet, as might have been justly added, had it occurred to the writer of that article, it is also true that every physician ought to be acquainted with the principles of surgical practice. And it is equally true, as is indeed implied in the same article, that, even in London, all surgeons must necessarily act as physicians in very many of the cases of their specific practice; while, out of London, except in the very largest provincial towns, no surgeon could gain a competence were he to confine himself to a practice purely surgical. Hence, therefore, it follows that every candidate should be qualified for all the three branches of medical practice; since this being granted in the case of the 'physician' and 'surgeon,' it must necessarily be granted in the case of the 'general practitioner,' inasmuch as he combines in his own practice the practice of the other two.

I know not whether I am correct in supposing that there are some among the advocates of Medical Reform who are desirous of making the proposed national board the source not only of medical licenses, but of medical titles also; nor do I know how such a regulation would be regarded by the members of the profession at large. The obvious objection to the measure is its apparent inutility: for, provided the board can give a license to practise in any and in all the three branches, into which the profession is actually and always must be divided, it would appear that the essential point is gained, as far as individuals are concerned: and, on the other hand, no corporate bodies or universities need be jealous that the power of granting titles or degrees should be extended to one additional source of such titles, further than from the motive of a consequent diminution of their pecuniary revenues—a motive, which at the present day can hardly be supposed to influence the members of a liberal institution in their collective capacity.

The preceding observations having been made with the desire of suggesting a few leading topics of inquiry to individuals not belonging to the medical profession, on the subject of Medical Reform, it is not intended to enter into the consideration of the various details of the proposed measure; information on which points will be more readily and more satisfactorily obtained from other sources.

It need only be added that, although these observations have been confined to England, they are applicable to similar alterations in Scotland and Ireland. Thus, for instance, there might be an appointment of one general board of examination in Edinburgh and Dublin, as well as in London; each board acting independently, but regulated by the same principles: by which means the great difficulty would be obviated of compelling the members of the Scotch and Irish boards to meet the members of the English board periodically in London; the palpable inconvenience of which plan, not to say the moral impossibility of putting it into execution, must be evident on a moment's consideration."

ON MEDICAL REFORM AND THE REMODELLING THE PROFESSION.

BY JAMES MACARTNEY, M.D. F.R.S., &c.

My attention has been long directed to the subject of Medical Reform, and being at present placed in a position in which I can have no other interest than the public good, and the respectability of the medical profession, I take the liberty of proposing (through the medium of your Journal) such measures as appear to me to be proper and necessary