been reduced from about 2s. in this country to about 2d. an hour per patient; and by the Bang lamp, which can be connected with any electric light installation, the first cost of the apparatus, if the accounts can be substantiated, has been reduced from £100 to £3. With the London Hospital lamp it has been found that by using electrodes made of copper and an alloy instead of carbon the time of sitting may be still further reduced to seven minutes and, as a matter of fact, experiments are being made with the object of fitting the new lamps that are in process of construction with metal electrodes. If the lamp of Dr. Bang reaches up to the expectations held out it will be practicable not only for every hospital but even for every medical practitioner to possess one, or even for one to be used at home by a private person. Whether his lamp approaches as near as may be at the present time to the ideal or not or whether it will prove a commercial success or not, it is at any rate, in the opinion of Professor Finsen, a move in the right direction. And it is not improbable that the final verdict as to what the principles enunciated by Professor Finsen are capable of, in their new and perhaps still undiscovered applications, is not yet possible.

THE REPORT OF MR. BRODRICK'S COMMITTEE.

By ROBERT FARQUHARSON, M.D.,
M.P. for West Aberdeenshire.

I.

I AM not a thick-and-thin supporter of Mr. Brodrick's scheme, nor do I damn it with or without faint praise, because the more I look at it the more I am convinced that in its conception and its somewhat confusing details it is fundamentally and radically wrong.

Far better results might have been attained by a wide development of the *status quo ante*, including better pay, position, and authority for the Director-General, and more liberal remuneration for the medical officer, with increased numbers and facilities for private and professional leave, and, if possible, some betterment of his relations to his social environment. Out of these simple materials I believe that a Warrant might have been constructed, which would have inspired confidence instead of suspicion, and, by maintaining the traditions of the service, would have rendered unnecessary the drastic changes which disturb the sentiment of many old-fashioned people like myself.

Coming now to details, I entirely agree with those critics who point out that under the new dispensation a very serious blow will be struck at the prestige and power of the Director-General. It is true that he is now to be a member of the Army Board, and that is a distinct gain; and Paragraph 18 of the Committee's report would seem to show that in some administrative respects he is to be supreme. But in spite of this, it will be difficult to convince the military medical mind that he is to be anything more than the mere head of an Advisory Board, whose opinion he must take, and whose consent he must obtain before he can say or do anything definite. In the days of his supreme and undivided authority, when his word was law and there was practically no appeal from his decision, all his best qualities were brought out, and a really strong man was usually found to be equal to the occasion. But now his responsibility is to be weakened and diluted, the very points on which immediate advice or decision are most urgently needed must now be talked over with his advisers, who only meet once a fortnight; and not only will he be regarded as merely the mouth-piece of others, but I can foresee a copious crop of delays and worries, and friction from the deliberations of the body over which he is to preside.

Here let me say quite definitely and decidedly that I entirely fail to see the necessity for the infusion of the civilian element into our future military medical deliberations. Their counsel and advice may be of the highest occasional value, and the surgical skill of the surgeons who went out to South Africa was highly appreciated by the army doctors and their patients; but to make them supreme over military arrangements, of which they can practically know nothing, to let them supersede old and experienced officers in hospital inspection, and, above all, to enable them to interfere in any

way with the treatment of the sick, is to place a strain upon ordinary human nature which assuredly it cannot bear. If it is really necessary to have such a Board, would it not be better to compose it solely of experienced army surgeons, who have served or are serving, so as to give the Director-General a body of advisers something like what he has now on a smaller scale, or more elaborately after the pattern of the India Council, on whose advice the Secretary of State partly relies?

But it is claimed for the Advisory Board that it is representative, and yet it is quite clear that it is not representative enough. Sir W. Thomson has very properly demanded more seats for the various corporations and medical schools of the United Kingdom, and other protests will soon follow. And if this were granted what would be the inevitable result? A huge unwieldy body representing varied and occasionally conflicting interests, where Irish grievances will jostle Scottish rights, and where the predominant partner, England, may expect to have an occasional look in; where Guy's will contend with Bart's, where promotion may be hoped for by canvassing and international interest, and where at least so much debating facility may be attained as to make this newly-constituted body a serious rival as a variety entertainment to the House of Commons or the General Medical Council.

I can quite understand the necessity for some very definite alteration in our present system, if it can be shown that it has worked badly in the past, and given rise to confusion and failure at home and abroad. But although I have heard and read most of the severe criticisms on the medical conduct of the war, I have seen no successful attempt to disparage the services of the late Director-General. He has been most unfairly pitched overboard, to help the labouring Government ship over the waves of popular clamour; but it is on record that he pointed out early and often the dangerous undermanning of his department, and predicted disaster from it, and his dispositions and arrangements for the medical campaign have never, so far as I know, been called in question. Nor have I ever heard that any of his predecessors have failed in the successful discharge of their duty; and therefore I think I am entitled to say that no real case has been made out for the absolute break-up of a system which, considering some remediable limitations, has worked so well and smoothly in the past.

Now this new Warrant, for I suppose we shall some day see it appear in official form, is the bait by which the best and most finished article turned out of our medical schools is to be caught. Let us be under no illusions on this point. The men who take most advantage of their training, pass high on the honours list, and hold resident appointments, naturally have professional ambitions, and will look out for opportunities of gratifying them. They wish to become hospital physicians and surgeons, or to conduct general practices in the country where they can enjoy a good social position and vary the responsibility of practice by sport or other kinds of outdoor enjoyment, or they may get Colonial appointments or go into a public health career, where a fair income is the reward of interesting and responsible work.

Now what has an army life to offer in competition for this? An assured income undoubtedly, or at least partially assured, for dotted along nearly the entire course of his professional career grim ordeals stand in his way which he must face or retire into private life, and let intending candidates specially note that instead of the old and unrestricted right to retire on £1 a day after twenty years, the attainment of this period of service is marked by the stern necessity of passing a qualifying examination for promotion in ten different subjects, including law, history, and a bewildering mass of details which will rack the brains of the examinee, and test the ingenuity of the crammer, to whom he will necessarily fly for relief. Never forget the wise words of Dr. Clifford Allbutt, who, speaking out of the fulness of experience, tells us that the sponge-like faculty of rapidly saturating the brain with miscellaneous knowledge, to be squeezed out at examination times, is not possessed equally by all, and is lessened or even lost as time goes on. After twenty years' hard service in all parts of the world, where few, if any, facilities are provided for professional improvement, the military medical officer is to be called on to submit to a test

which might make a professor of hygiene shiver in his shoes; and failure to satisfy the cravings of a possibly capricious or priggish examiner means the wreck of his career, for he is without delay bundled out of the service, stamped with the brand of failure, and with an insufficient lump sum to solace his declining years.

But, if he struggles through all these tight places, I hardly think that his prospects are specially bright. As a rule, he will have very little professional work to do, and it will require long periods of study leave—which, by the way, are barely, if at all, defined in the report—to rub off the rust which, in spite of all his best efforts, must gradually accumulate. Even the moderate amount of medicine and surgery which comes in his way is to be rigorously and perhaps not too sympathetically criticised by a mixed Board, partly composed of smart young civilians, who will sit in judgment on what may be called his old-fashioned treatment, and perhaps a black mark placed against his name, under that detestable system of un-English espionage known as a confidential report. And even when he has attained the goal of his ambition and been promoted to administrative rank, the Advisory Board will again stand in his way, and will, if I read the report aright, take from him the responsible duty on which his position and authority depend, and reduce him to act as a head clerk, registering with official monotony the decisions of his superiors.

As an offset to all these worries and anxieties we can no longer place the social advantages formerly enjoyed by the army doctor. The regimental system was out of gear with the conditions of modern warfare and had to go, but with it went the pleasant family life, enjoyed by doctor and his purely military colleagues alike, and it is unhappily too evident that there is friction and bad feeling between these two branches of the service which used to work harmoniously together. The poor doctor has now no assured position at mess or elsewhere, he is persistently blackballed at the military clubs, and his future increase of pay and the definite rank so unanimously granted will only, I fear, make matters worse, and for these there is, unfortunately, no official remedy.

But there is a brighter side to the picture. A fixed income with definite duties and a liberal retirement, opportunities of seeing the world apart from the anxieties and responsibilities of private practice, coupled with the possible chance of decoration and distinction, should attract fairly good men short of the very best; and here let me say that the alleged need for these changes has not arisen from the necessity of getting a much higher stamp of men than those who are now serving and have served. All really competent military critics have praised in the highest terms the skill, devotion, and bravery of the medical staff in South Africa; and I do not think that we can ever expect their professional attainments to be higher than those of the general practitioners, who so justly enjoy the confidence of their patients, who are prepared to treat practically and successfully the ordinary class of cases met with in professional life, and who know when it is necessary to summon specially trained skill to aid them in the higher emergencies.

(To be continued.)

THE PREVENTION OF CONSUMPTION.

GERMAN SANATORIUM FOR CONSUMPTIVES OF LIMITED MEANS. The Nassau Sanatorium Association for Consumptives at Wiesbaden has in November last opened a new sanatorium at which the cost is such as not to exclude patients of limited means. The establishment is situated on the southern declivity of the Taunus, between Naurod and Niedernhausen, one mile from the railway station of Niedernhausen, and about four miles from Wiesbaden. The site is about 930 feet above sea level, amidst beautiful woods, with a wide view over the plains of the Rhine and Main, and sheltered by wooded heights on the north, west, and east. Patients of both sexes are admitted, and unsuitable cases are as far as possible excluded by a preliminary medical examination. The prices are from 4 to 5 marks a day, inclusive of medical advice, baths, douches, etc.; but medicine, wine, any special attendance, and washing must be separately paid for. A small charge is

likewise made on admission to cover the cost of thermometer, charts, disinfection of linen, sputum flask, and carriage between the sanatorium and railway station. There is, doubtless, a demand for more sanatorium accommodation for patients of very limited means, both on the Continent and in England, and the opening of the Naurod establishment is a step in the right direction.

PRINCE OF WALES'S HOSPITAL FUND FOR LONDON.

THE distribution meeting of the Council of the above Fund was held on December 21st, 1901, at York House; His Royal Highness the PRINCE OF WALES occupying the chair. Eighteen members were present.

Mr. J. G. CRAGGS, in the absence of Lord ROTHSCHILD, presented the financial statement, according to which the Fund had received during the year from all sources £53,026 9s. 11d., exclusive sums for the Coronation gift, and of certain reversionary legacies, not yet available, among which was one of £23,000 from the late Mr. B. C. Hirsch. The proposed awards to the hospitals would absorb all the sums collected this year without trenching on reserve.

Mr. H. C. SMITH presented the report of the Executive and the Hospitals Distribution Committees. The total receipts up to December 16th, 1901, had again shown an increase, amounting to about £3,000 over those of last year. For 1898 the receipts were £39,272; for 1899, £48,536; for 1900, £51,549; and for 1901, £52,769; including corresponding periods. The League of Mercy had this year contributed £7,000, being an increase of £1,000 on last year. The sum recommended for division among hospitals was £50,000, being £1,000 more than last year, together with £1,000 given by the London Parochial Charity for convalescent homes. The trustees of the Frank James Memorial Home have offered to the Fund the gift of the home at Cowes, supplemented by a most generous endowment by Mr. Arthur and Mr. William James of £10,000. The Visiting Committee had visited 85 hospitals and the Distribution Committee recommended awards to 79. Of the 6 left out, 1 is an excellent institution not in need of assistance this year; the other 5 required either reconstruction or rebuilding. The Committee recommend this year the reopening of 34 beds now closed for want of funds, making a total of 321 beds reopened and maintained by this Fund since its commencement in 1897. Last year the attention of the Committee was directed to the objections, hygienic and general, which apply to a requirement enforced by some hospitals whereby the in-patients have to provide certain articles for themselves, such as a supply of tea, sugar and butter, changes of personal linen, washing, etc. In cases in which the hospitals have seen their way to abolish these requirements in return for the comparatively small extra grants given by this Fund, the Committee have again recommended such grants to be given; but in view of the fact that very great objection has been raised in certain of the larger hospitals to the abolition of these requirements, further steps in this direction have not been recommended at present.

The PRINCE OF WALES, in responding to a vote of thanks for presiding, said that it was both a great honour and a great pleasure to him that the King should have nominated him his successor as President of his Fund for the hospitals of London, which was inaugurated by His Majesty, and which after January 1st would be known as King Edward's Hospital Fund for London. It was unnecessary for him to say that he should take and did take as keen and great an interest in the undertaking as His Majesty himself had done and still did.

WE regret to have to record the death of Mrs. Blackman, who acted as Secretary of the Ladies' Committee during the annual meeting of the Association at Portsmouth in 1899. She was the wife of Dr. J. G. Blackman, of Portsmouth.

THE SUPPRESSION OF QUACKERY IN NEW YORK.—The Medical Association of Greater New York recently appointed a Committee of five to submit a plan of action for the repression of quackery throughout the State. When the plan is ready it will be presented to the different medical societies.