to be explained in the same way as a love of assafoetida and other stinks" (p. 175).

The analogy obviously does not hold, for the love of such substances as assafoetida is not transitory.

The last essay, on "The Origin of [Disease," calls for no special remark.

Those of our readers who take an interest in rare and remarkable cases will find an abundant stock of them in this volume, which, if not very profound, affords plenty of information on the topics of which it treats, and is written in an easy, agreeable style.

Medicine, Disease, and Death.¹—Some two years ago Dr. Elam published in the 'Lancet' two papers, in which he endeavoured to prove three very startling propositions, namely—"1. That the average death-rate is slowly but constantly increasing. 2. That men die now at an earlier age than they did thirty years back. 3. That even those diseases which are best understood are increasing progressively in annual mortality unchecked by any resources of art."

Such heretical conclusions were not acceptable, and consequently two articles were elaborated to crush them. In this volume we have the original papers, the criticisms of the 'Lancet,' the rejoinder, and two other chapters, entitled respectively "The Aims of Modern Medicine" and "Eclectic Medicine." The three propositions we have quoted are based on an analysis of the death-returns from the beginning of the government registration up to the year 1866. By a peculiar grouping of the years, Dr. Elam shows that there has been an increased death-rate of about 1 in the 1000. There can be no doubt that the returns of the first few years are more or less inaccurate. The results of the registration in Scotland tend to prove this, and the Irish returns show it in a very marked degree. We think, therefore, that the returns for the first few years should have been omitted from the calculation. This plan has been adopted by the Registrar-General in his decennial returns, which commence with 1841, or three years after the beginning of a systematic registration. The mortality showed no sensible variation on the two decennials 1841 to 1850, 1851 to 1860; indeed, instead of the increase contended for by Dr. Elam, there was, if anything, a decrease in the registered mortality.

Conclusions which depend on the comparison of long period of the ten years are, at all events, less liable to be disturbed by accidental causes than those which rest on the comparison of much shorter periods, *e.g.* the mortality of 1863 to 1866, as selected by the author. Surely the results obtained by this kind of statistical conjuring

¹ *Medicine, Disease, and Death; being an Enquiry into the Progress of Medicine as a Practical Art.* By CHARLES ELAM, M.D., Author of 'A Physician's Problems,' &c. London, 1870.

afford no basis for the serious charge that the power of art over disease is diminished. That the death-rate has not grown less we quite admit, and possibly this may be considered by some to support Dr. Elam's view. In spite of all our efforts at sanitation, the mortality is as great now as it was thirty years ago; this is, no doubt, very disappointing, but is explicable on grounds other than those advanced by the writer. The enormous increase in the population of our great towns has taken place during the period that registration has been in force. In the thirty years 1831 to 1861 the population of eight only of our largest towns increased from two and a half millions to more than four and a half millions, while there was little or no increase in the country districts. Density of population, it must be admitted, does not conduce to health, and it must equally be allowed that it does favour immensely the spread of infectious diseases. Thus, we find the mortality of our urban population some 4 per 1000 more than that of the country generally, and nearly 7 per 1000 in excess of that of the country districts. The more reasonable hypothesis suggested by these figures, viz. that we have more disease to deal with, from the excessive growth of our town population, must, at all events, be disposed of before the degeneracy of physic can be admitted.

In Sweden, where registration has been in force for nearly a century longer than in England, the returns give us some reassuring facts. In that country, from 1755 to 1760, the deaths of infants under one year were 21 to 23 per cent. of all deaths, a century later they were only 16 per cent. In the second year of life the deaths were, 1755 to 1760, 6 to 7 per cent. of all deaths, a century later only 4 per cent. Surely these figures form as good a ground for asserting that medicine has increased her power over disease as Dr. Elam's do for affirming the contrary.

A very large proportion of the deaths in this country are deaths of children under five years of age, and it is to a lessening of these deaths that we must mainly look for a diminution in the death-rate. In the large town districts nearly one half the deaths are those of children under five years. Now, what figures have we to show that these deaths are due to the inefficacy of medicine? None. On the contrary, there are figures which show that the infantile mortality in our great centres of population is almost wholly independent of medical treatment. Not long ago a painstaking physician found out that, of 384 poor children brought to a children's hospital, nearly 200 had been previously without any medical aid whatever, and that on more than 150, druggists alone had tried their 'prentice hands. The results of such a state of things can scarcely be referred to the diminished power of medicine over disease!

Turning from the poor to the classes able to obtain medical aid, what do we find? The mortality among the children of peers under

five years of age, as quoted by the Registrar-General, is at the rate of 20·69 per 1000. Among the Society of Friends, the children's death-rate is 27·87. The children of the clergy die at the rate of 30·27. In the country districts the death-rate under five years is 40·34, while in town districts it reached 80·13 per 1000. These figures, serious as are some of the considerations which they suggest, do not, at all events, evoke the painful sense of impotence against disease which Dr. Elam imputes.

The evidence in favour of the second count in Dr. Elam's indictment is a comparison of the number of deaths above 85 for the three years 1847, 1858 and 1860. There is so much inaccuracy in the record of the age at death generally, as shown by the relatively greater numbers that die at the several decades, *e.g.* 60—70, that we must confess to having little faith in the value of this evidence. It is, at all events, too meagre to carry conviction. The enormous increase in the registered deaths from certain diseases is another well-known fact which is used in support of the charge against medicine. The great increase in the number of deaths from bronchitis is especially noteworthy. Dr. Parsons called attention to this in the 'Edinburgh Medical Journal' some years back, and, as far as we can recollect, referred it to the habits and mode of dress of recent times, an explanation probably as true as Dr. Elam's. Difference in registration, no doubt, accounts for much of the increase in several instances, especially as it is most marked in certain forms of lung disease and in heart diseases, in which our powers of diagnosis have improved year by year since the beginning of registration. To say that in all these cases our treatment has retrograded while our absolute knowledge of the diseases has vastly increased, is a paradox, which few will be inclined to accept. The assumption of an increase in the prevalence of these diseases is, we think, a more reasonable hypothesis, and one which should be disproved before resorting to the explanation of the author.

For our own part, we consider that the sanitation of the last twenty years has done very little to diminish our death-rate, and that preventive medicine has by no means kept pace with the increasing requirements of our growing population. This accusation, which is surely grave enough, Dr. Elam might have backed by a large amount of evidence, and we think he would have done more good by advancing it than he has done in attacking his own profession with such doubtful weapons as are used in this book. His dissatisfaction with the present state of therapeutics has, however, led him to try and show by arguments based on statistics how unsatisfactory is the present position of the art of healing. We heartily sympathise with his intentions, although we cannot congratulate him on the evidence he has brought forward in support of his case. The last two chapters of the book form a manly and able criticism of modern methods of treatment. Under

the glittering pseudonym of scientific therapeutics we have no hesitation in saying there has been concealed a vast amount of bad practice. It is quite honest to rebel against this sham; and in denouncing the vanity of "restorative" medicine and "expectancy," and other high-sounding emptinesses, which have lulled men to rest in a sense of false security, Dr. Elam has done us all a service. In the present day there is much need of an earnest medical iconoclast, who will dare to destroy in honest fury the idols we still worship. They are few in number, perhaps, but many still cling to them with an affection strong in proportion to their fewness, and we ought to be grateful to one who tries to inspire us with courage enough to face the obscure and unknown without such fictitious aid. Dr. Elam has done this, and we thank him.

Verity on Subject and Object.¹—The author of this treatise proceeds from a realistic point of view; that is, regarding subject and object as independent entities, he seeks to reconcile his tenets with the anatomical structure of the cerebro-spinal system of man. He holds firmly the belief that "object" is a real something external to us, and that our own mental states or activities are present to a superior psychical condition called *consciousness*. An explanation of the precise way in which he supposes the physical machinery of the sentient being, and the objects of the external world to fit those beliefs, forms the subject matter of this work. If this statement of the main idea of the book be correct (and we cannot, in the present state of our knowledge, suppose any author to maintain that he has argued up from the anatomy of the nervous system to a metaphysical theory), the remark is almost superfluous that these chapters convey nothing to those who have arrived at the conclusions that *real* externality cannot be proved, and that, psychologically, we cannot be, or very rarely are, in two states at once; and such conclusions have been rather widely accepted. Further, to those who still consider themselves as treading the paths of inquiry, the assurances of one who "belongs to those who rest in truth, and not in doubt," must be accompanied with a demonstration how it is possible to reach his secure premisses before the deductions he draws from these premisses can be accepted. Such a demonstration might have to consist in a reference to the works of previous thinkers; it is, however, given in no form, and both inquirers and opponents are left in the dark. So much for the way that the writer has made towards the end he appears to set before himself—"a complete philosophy in divinity, metaphysics, phrenology," and "physiology."

In the first chapter, on the "Origin and Causation of Consciousness," the author travels along the vagus nerve in search of the spot where

¹ *Subject and Object, as connected with our Double Brain; and a New Theory of Causation.* By R. VERITY. London, 1870. Pp. 86.