

BOARDS OF HEALTH.

In an excellent paper, entitled "Suggestions for the Reorganization of the Sanitary Service," read before the Society of Medical Officers of Health, of Great Britain, by Dr. E. F. Willoughby, the proper constitution of a Board of Health, is thus laid down:—A Vice-President (subordinate only to the President of the Local Government Board, or Minister of Health), always a physician chosen for his special knowledge and administrative ability, and six other members, three medical men, two engineers, and one chemist. The suggestion is undoubtedly a good one; and it is with pleasure we have heard of the possible addition to our Provincial Board, of Prof. John Galbraith. The further addition of a competent and able chemist, would approximate our Ontario Board to Dr. Willoughby's ideal. In this connection we would like to direct the attention of our contemporary, the *Canada Lancet*, to the fact that association in such matters with non-professional persons is quite *comme il faut*, as the deliberations of such Boards in no sense constitute a medical consultation. Our contemporary is guilty, therefore, of an egregious *non sequitur* when he endeavors either to derive countenance for consultation with homœopaths from the presence of a homœopathic practitioner on our Provincial Board of Health, or to discredit that Board, with the profession of the Province, by reiterated allusions to the fact. If a disciple of Hahnemann, or any other unprofessional man, can bring any light to bear upon the problems of sanitation which await solution, let him speak, and the true disciples of Hippocrates will be the last to scorn his information, or refuse him audience. They will not readily desert, however, the substance for the shadow.

We are much obliged to Dr. Talbot Jones, of St. Paul, for copies of the *Daily Pioneer Press* of that city, containing reports of the last meeting of the American Medical Association; and only regret that pressure on our space prevents us making as much use of them as we would desire.

Von Langenbeck has resigned in Berlin.

DEATHS UNDER ANÆSTHETICS.

Two deaths from anæsthetics occurred in Guy's Hospital in one week during the month of April. The first was caused by chloroform, which was administered to a woman *æt.* 38, while a fracture of the leg was being reduced. The heart had been examined, and no sign of disease discovered. *Post mortem* examinations showed lungs healthy, heart surrounded by adipose tissue, which intruded into muscular substance in places, liver very fatty, kidneys slightly fatty, brain wasted, and membranes thickened (as often found in chronic alcoholism.)

The second death was caused by ether, which was administered to a young man about to be operated on for empyema. When under its influence he was rolled on sound side, when breathing became difficult, pus began to well out of mouth, and he rapidly died apparently from accumulation of pus in air passages. At *post mortem* examination, in addition to pus in pleura, numerous fistulous communications were found between the bronchi and the pleural cavity. The *British Medical Journal* says the case appears to furnish a warning in relation to the use of ether during operations for empyema. Ether exerts its lethal action first on respiration, and causes greatly increased accumulation of mucus in the throat. Both of these conditions must operate unfavourably on a patient already deprived of all use of one lung; and, when such a patient is turned on the healthy side, not only is the action of the lung on that side still further embarrassed, but there is a great probability that pus will find its way by fistulous openings into the trachea, as occurred in this case; and there, partly by mechanical action, and partly by producing spasm of the glottis, determine a fatal asphyxia.

PERSONALS.

Dr. Boyce takes Dr. Halliday's place in Grafton.

Dr. McConnell is leaving Thornhill, Dr. Nelles taking his place.

Drs. W. T. Aikins and Covernton, of Toronto, have gone to England for a trip.