

THE CANADIAN MEDICAL TIMES.

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MEDICAL SCIENCE, NEWS, AND POLITICS.

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TO CORRESPONDENTS.

Communications and reports solicited. Correspondents must accompany letters, if intended to be printed anonymously, with their proper signature, as a guarantee of good faith.

TERMS OF PUBLICATION.

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The *Lancet* finds great fault with the General Medical Council relative to its recent session. It maintains that the work done has been exceedingly slight; the waste of time enormous; and that the demonstration of the Council's unfitness and incapacity to reconstruct the examining system of the country is complete. The fault, it says, is not in its individual members, but in its own organization, which must for ever ensure every question being looked at from *nineteen* points of view.

The appearance of cholera in Europe, and still more its ravages in Tennessee and the Southern portions of the United States, justify an alarm for the visitation of this scourge in Canada and other parts of Northern America. The duty is incumbent that all possible sanitary precautions should be taken against its invasion. We must set our cities, our towns and our houses in order. All such labours undertaken in promoting purity and cleanliness have, besides the avoidance of cholera, a compensation in the improvement of the public health generally. This has been abundantly proved on former occasions, when an alarm of cholera has aroused the authorities and people into activity; and such demonstration before the eyes of the public, one would think, should have led to a more systematic and general adoption of sanitary measures, irrespective of the prospect of cholera; but a lapse into apathy under security seems to be characteristic.

At this advanced season of the summer, the greatest dependence will have to be placed on the disinfection of noxious matters as excreta and filth. Practical experience has abundantly justified theoretical considerations in the choice of a disinfectant, that it should combine the qualities of volatility and action by contact. The solution of sulphate of iron to which crude carbolic acid has been added possesses these qualities along with the recommendation of cheapness. The formula of the New York Board of Health, which has been extensively used, and which is still recommended as the best disinfectant, is—sulphate of iron, ten pounds; water, five gallons; common carbolic acid, half a pint. Dilute solutions of sulphate of iron are also of great value; and the disinfectant properties of dry earth ought to be remembered and this abundant agent employed on a large scale.

It has often been remarked that the medical profession fails to be adequately represented in our representative and governmental systems.

Sir Dominic Corrigan, M.P., presiding recently at a distribution of prizes at St. Mary's Hospital, uttered this plaint. He regretted that, partly on account of the ignorance of legislators and partly on account of the apathy of medical men themselves, members of our profession are not a greater power in the State. In the House of Commons the profession is scantily represented, while in the Privy Council, where its varied knowledge, but particularly its special knowledge, would be a national gain, it has not one representative in the 250 members. This, he observed, is the more to be lamented, as the Privy Council is the high tribunal for all matters relating to sanitation and public health. We rejoice that Sir Dominic has brought this matter of the Privy Council being without a medical member into notice, and trust that it will soon cease to be a cause of mortification to the profession. There is a reason why very few medical men get into Parliament, but there is no reason why they should be excluded from honourable position in the Privy Council. In justice, it should be said that the tendency of legislation in England of late years has been more and more to recognize the utility of the special knowledge possessed by men. The Public Health Act of 1872 and the Adulteration Act, under which respectively medical inspectors and officers of health and public analysts are appointed, show that the State is anxious to profit by the services which the possessors of this special knowledge can render to the public.

A public meeting of practitioners has been held at Manchester, England, to discuss the subject of supplying medical attendance to the working-class. This is a matter concerning which very much has been done in the mother country by establishing sick clubs, benefit societies, and provident dispensaries, and the numerous charitable institutions have helped greatly to relieve the medical profession from unremunerative work, besides which the Poor Law provides for attendance upon the pauper class. Still, it is felt that very much more requires to be done, and the subject is receiving very earnest and close discussion. The Manchester meeting finally adopted by a slight majority the following resolution:—

"That this meeting believes that many persons now receiving medical relief at charitable institutions are perfectly able to pay for advice; and inasmuch as these institutions were established for the poor, are supported by endowments and public subscriptions, and are aided by the unpaid services of medical and surgical practitioners, any system by which the patients of such charities would be enabled to pay towards the maintenance of such institutions would bring them into unfair and unjust competition with the medical practitioners of this country; and instead of any such plan, which would increase the existing abuse, the boards of such institutions be requested to institute a real inquiry into the circumstances of their patients, and when they find any person able to pay for such medical or surgical relief, such person be excluded from the benefit of such charities, unless under very pressing

or special emergencies."

This resolution amounted simply to turning the question into one of the abuse of medical charities, and practically does not meet the end in view. Our object, however, in referring to the subject is to bring before our readers the fact that in relation to the matter of attending the poor and the working class the profession in England is very much in advance of our state in Canada; and to suggest that it is worth while for Canadian medical men to give attention to the progress that is making in England. It happens that in many parts of Ontario the whole burden of attending the sick poor and the cost of supplying them with medicines falls upon the medical profession. Here we have none or very few provident dispensaries, and the system of sick clubs has not attained one-tenth of the development reached in England. But as against this want, it must be said that our artisan class is perhaps better able and more willing than the corresponding class in England to pay the services of their medical attendant. Our pauper class, however, is almost entirely unprovided for. What is wanted in Canada, we think, is a system of out-patient attendance in connection with the general hospitals in the cities; the establishment of provident dispensaries, sick clubs, and benefit societies in the towns; and a more general application of the plan of appointing doctors for the poor in the townships and rural districts. No doubt, in spite of all means of this kind, doctors would still be called upon to do a great deal of purely gratuitous work, and would no doubt do it quite uncomplainingly; but when we find that the duties of the State and the obligations of the public in the matter of providing for the sick poor are almost altogether shifted on to the shoulders of medical men, it becomes a proper thing to set forth the unfairness of such a burden being imposed, and to ask that at least some means be adopted for alleviating it.

PRACTICAL MEDICINE.

SPINAL IRRITATION AS A CAUSE OF CATALEPSY.

By JAMES NEESH, M.D.

The rarity of catalepsy no less than the singularity of the disorder makes it interesting, though by reason of its rare occurrence its practical importance is no doubt greatly lessened. Sir Thomas Watson relates that he never saw an instance of perfect catalepsy, and mentions his regret at not having availed himself of an opportunity of seeing such a case, which once presented itself in the practice of a friend. All systematic writers treat of its rarity; indeed some have doubted its existence or its claims to rank as a distinct disease, such authors being disposed to regard it as one of the protean forms of hysteria; but its existence as a malady presenting definite characteristics is sufficiently established. Dr. Lee, of New York, has collected a number of cases.

Copland gives the following definition of catalepsy:—"A sudden deprivation of sense, intelligence, and voluntary motion, the patient retaining the same position, during the paroxysm, in which