

Printed obituary notices of Sir Thomas and Lady Longmore

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FUNERAL OF THE LATE SIR THOMAS LONGMORE.

Notwithstanding the fact that no invitations were issued to attend the funeral of the late Surgeon-General Sir Thomas Longmore, K.C.B., a number of those who had been associated with him during his long distinguished career in the Army Medical Staff, together with numerous friends, gathered together at Hamble, on Thursday afternoon, to pay a last tribute of respect to the memory of the deceased officer. The morning was boisterous with heavy showers of rain, but the rain passed off and the afternoon was very fine, albeit there was a strong wind. To be buried at Hamble was the wish of the deceased, who had formerly resided near there, and in the churchyard there assembled those who had come to show their respect. Among those present were Sir W. A. Mackintosh (Director-General Army Medical School), the Principal Medical Officer (Surgeon-Major-General C. Hervé Girard), Deputy Surgeon-General H. Cayley, Brigade-Surgeon-Lieut-Col. Neat, Brigade-Surgeon-Lieut-Col. W. F. Stevenson, Brigade-Surgeon-Lieut-Col. E. J. Fairland, Surgeon-Lieut-Col. Mackay, Professor A. E. Wright, M.D., Surgeon-Major Dick, Surgeon-Major Jencken, Surgeon-Major R. H. Firth, Surgeon-Captain East, Surgeon-Capt. Neat, Major F. W. J. Athre, R.E. Captain Hirst, the Rev. G. W. Mims, G. Forbes Steves, F. Davidson, R. Pearce, and G. D. Ray, Col. G. A. Grimston, J.P., Col. F. W. Dogmore, J.P., Col. J. T. Bucknill, Major W. A. Ward, Major W. H. Chapman, Captain Freeman, Drs. H. F. Ward and Seaton, Messrs. John Purley (South Kensington), J. Melvyn and A. H. Canning (churchwardens of St. Mark's Church, Woolston, where deceased attended), J. Martin and Brook (addressed), Constables J. R. Buxton (West End), A. W. Reals (Southampton), Thorneycroft, Surgeon-General Dr. W. C. Maclean, C.B., was unable to be present through indisposition, but Mrs. W. C. Maclean and Miss Macpherson attended to pay a last mark of respect. At 3 o'clock the time fixed for the funeral, the widow (Lady Longmore), three sons, the Rev. Canon C. Mansfield Owen and Mrs. Owen (son-in-law and daughter), Surgeon-Capt. Gore Graham, Lieut-Col. and Mrs. Moorson, Mrs. J. M. Longmore and Surgeon-Major Dr. Elaine Grove to the entrance to the churchyard and were proceeded into the church by the Rev. J. J. Curling (vicar of Hamble), and the Rev. T. L. O. Davies (vicar of Jesus Chapel, Pear Tree Green), and the employed choir. The coffin, with the body of the deceased, was brought from Swanage on the afternoon of the previous day, being met at Southampton West station by a class-pulled car, and conveyed to Hamble by road. At the entrance to the churchyard it was met by the Rev. J. J. Curling, who read the opening sentences of the Church of England service. The coffin, which was covered with handsome floral tributes, reposed in the church till Thursday afternoon, when the remainder of the service was gone through. After the lesson the hymn "Jesus, lover of my soul," was sung, and as the mournful procession was leaving the church, the choir sang the song of Simon, "Lord, now lettest Thou Thy servant depart in peace," and afterwards Mrs. Curling, who officiated at the organ, played "The Dead March" in *And.*

The grave was on the north of the church, alongside the resting-place of Admiral of the Fleet, Sir C. Elliot, and the following acted as bearers from the church to the side of the grave:—Brigade-Surgeon-Lieut-Col. Stevenson and Fairland, Surgeon-Lieut-Col. Stokes, Surgeon-Col. Cayley, Surgeon-Majors Dick, Jencken, Whitehead and Moore. The remains of the deceased were enclosed in an outer coffin of massive oak unpolished, with brass furniture, on the breast plate being the inscription, handsomely illuminated:—

Surgeon-General
Sir THOMAS LONGMORE, K.C.B.,
O.H.S. A.,
Born Oct. 10th, 1838,
Died Sept. 20th, 1905.

In addition to floral tributes from the widow and family were others inscribed as follows:—In loving memory, from Nellie; "From Baby, the little grandson"; "With Admiral and Mrs. John Fullerton's love and deep sympathy"; "Mr. Montague, Colonel"; "In affectionate remembrance, Mr. and Mrs. Henry Cayley, the Towers, Woolston"; "With Mr. William Garton's deepest sympathy"; "In kind remembrance from Mrs. Walton, Harsted"; "From Louisa to sorrowful remembrance"; "In loving remembrance, Miss Westlake, Silvermere, Woolston"; "Mr. H. Nicholson, with sincere sympathy"; "Mr. Robert Collins Fitzgerald, with sincere sympathy"; "With Dr. and Mrs. Kottler's love and deep sympathy, Westcote, Woolston"; "With much sympathy from Mr. and Mrs. William Garton"; "With affectionate love from Major-General C. J. Moxon and Mrs. Moorson"; "With Lieut-Colonel and Mrs. Frederick Dogmore's love, in affectionate remembrance"; "From Colonel and Mrs. A. Grimston, Misses Sanders, and Miss Pauline Grimston"; "In loving remembrance of a dear friend, from Surgeon-General and Mrs. William C. Maclean"; "Mr. and Mrs. L. H. and Miss J. M. C. Moorson, with affectionate love"; "With sincere sympathy from Miss Haskel"; "From Lieut-Colonel and Mrs. Barrington"; "With kind sympathy from Col. Henry G. L. Crickson and Lady Emma Crickson, Netley Camp"; "With sincere sympathy from Lieut-Colonel and Mrs. J. T. Bucknill"; "Sincere love and sympathy from Mrs. F. de Chammond and family"; "In very affectionate remembrance from Pear Tree Vicarage"; "Mrs. Fairland, with greatest regret and deepest sympathy"; "In loving memory Surgeon-Colonel and Mrs. W. F. Stevenson"; "With Mrs. Maudie Pyle-Smith's, Mollie, Dolly, and Marjorie's love, Ingledale, Shore"; "In memoriam from Rev. and Mrs. Francis Davidson, and in grateful remembrance of continual acts of kindness to parishioners of St. John's in the especial diseases of the eye for a long course of years. The arrangements for the last and its were most efficiently carried out by Messrs. E. Mayne and Son, of the High-street, Southampton.

THE LATE SIR THOMAS LONGMORE.

To the Editor of the Hampshire Advertiser.
Sir,—Allow me to supplement the obituary notice of the late Sir Thomas Longmore you published in your last issue, with some particulars of his life and work. Passing over the details of his early career, he served in the 10th Regiment in the Light Division of the Eastern Army from its first taking the field, through-out the campaign of 1864-65 until the termination of the siege of Sebastopol. Was not absent for one day from duty during the campaign. Present at the battle of Balaklava, battles of Alma and Inkerman, capture of Balaclava, a result of the "Redan" 18th June and 18th of September. For the service medals and three clasps, Turkish medal and Knight of the Legion of Honour. Served with the same regiment in Soudan in 1877-78 during the Berozy Matry. Promoted to Lieutenant-General of Hospitals. In 1880 appointed by Lord Herbert, then Minister of War, Professor of Military Surgery in the Army Medical School. In 1884 represented the British Government at the International Congress at Geneva. It was at this Congress that the International Treaty, since known as the Convention of Geneva 1864, was formally adopted. Sir Thomas was a member of the sub-committee that arranged the articles of Convention. On ten other occasions Sir Thomas Longmore represented either War Office or British Government in the various International Congresses appointed to deal with international arrangements pertaining the treatment and arrangements for dealing with sick and wounded in war. It was a paper of his read at the annual meeting of the Order of St. John of Jerusalem that was the starting point of the St. John's ambulance classes all over the kingdom. With a select committee of medical and military officers, he assisted in organizing the bearer companies and most of the existing field hospital establishments of the Army.

Your space will not permit me to give even a summary of the professional work and papers by this distinguished military surgeon. It would suffice to say the list covers four closely printed pages. His honours were The Compendium of the Most Honourable Order of the Bath, Military Division; Knighthood, Honorary Surgeon to the Queen; promoted by decree of the President of the French Republic to the grade of "officer" in the Order of the Legion of Honour, and by Royal Decree permitted to wear the insignia of the same. In addition to the above he was elected a member of most of the scientific societies of France. It is not too much to say that the merits and services to his country were to the full as much appreciated abroad as by his own Government and the State he served so well.

Faithfully yours,
W. C. MACLEAN,
21, Curlew-place, Southampton.

Sancer
Oct. 12

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RETIRED ARMY MEDICAL OFFICERS.

DEATH has been busy of late in the retired ranks of the Army Medical Department. Surgeon-General J. Irvine, Honorary Physician to the Queen, an officer who had seen much service during the Indian Mutiny, passed away on the 21st ult. at his residence at South Kensington, at the age of sixty-seven, just before the occasion of the commemoration of the thirty-eighth anniversary of the relief of Lucknow, in which he took part. Surgeon-General H. H. Massy, C.B., who died at Bournemouth on the 27th ult., at the age of seventy-five, had served in the Sutlej campaign, in the Crimean war, at the battles of the Alma, Balaclava, Inkerman, and Tchernaya, and other actions, and subsequently in the Indian Mutiny; and last in the list, but by no means least, Surgeon-General Sir Thomas Longmore, C.B., an obituary notice of whom will be found on another page, died on the 1st inst. at the age of seventy-nine. He served throughout the Crimean campaign, from its commencement until the termination of the siege of Sebastopol, without being absent from duty a single day, and subsequently in Bengal during the Mutiny. The services of these three medical officers make up altogether a very distinguished record.

central canal and apparently derived from the cells lining the canal. The changes in the white matter were similar in kind but of much less intensity, and these changes extended throughout the whole length of the cord. From the study of this case—a case observed pathologically at an extremely interesting period, viz., after the intensely acute processes had subsided and before the cicatricial condition was established—Dr. Trevelyan is inclined to support the view identified chiefly with the names of Siemerling and Goldscheider, that this disease is of vascular and interstitial origin—i.e., that the changes in the ganglion cells are secondary to the changes in the vessels and interstitial tissue. As regards the ultimate origin of this disease, although no proof has yet been offered, there are strong reasons for supposing it to be infective.

THE HEALTH OF CORNWALL.

A CORRESPONDENT has lately directed attention to some very obvious sanitary defects in the north part of Cornwall. We have pleasure in acknowledging the publicity which has been given by our local contemporaries to his criticisms and sincerely wish that they may be the starting-point of more attention to questions of sanitation in this interesting county. The report of the Sanitary Committee of the

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SURGEON-GENERAL SIR THOMAS LONGMORE, C.B., of Southampton, who was on a visit to Swanage, died there suddenly yesterday morning. He was born in London on October 10, 1816, and was the son of the late Mr. Thomas Longmore, surgeon in the Royal Navy, by Maria, daughter of Mr. John Elcum. He was educated at Merchant Taylors' School and at Guy's Hospital, becoming a Fellow of the Royal College of Surgeons, England, in 1856. He entered the Medical Department of the Army in 1843, became surgeon in 1854, deputy-inspector-general in 1858, and inspector-general in 1872. He served throughout the Crimean campaign in 1854-5, and in Bengal 1857-9 during the Sepoy Mutiny. He was professor of military surgery at the Army Medical School, Netley, from 1860 to 1891, when he resigned. He had been honorary surgeon to the Queen since 1868; was made a Knight of the Legion of Honour in 1857, and promoted to the rank of Officer in 1879. He retired on half-pay in 1877. In 1867 he was made a Military Companion of the Bath, and was knighted in 1886. He was the author of a number of works, among them being "An Optical Manual," "A Treatise on the Transport of Sick and Wounded Troops," "Gunshot Injuries: their History, Features, and Treatment," "Sanitary Contrasts of the Crimean War," and a "Life of R. Wiseman, Surgeon to Charles II." Sir Thomas Longmore was instrumental in establishing a standard of vision for officers and men in the military service, and was for many years the recognized chief referee of the Army upon all questions of this kind. His "Optical Manual" has passed through several editions, and is the standard work in connexion with the eyesight of soldiers. He married, in 1862, Mary Rosalie Helen, daughter of the late Captain W. S. Moorsom, of the 52nd Regiment.

able this year to make any sugar at all. The general opinion seems to be that the insurgents will enforce their orders as to not allowing the cane to be milled, and certainly a few men scattered over the country can create enormous damage, however vigilant the authorities may be. Most of the planters are quite prepared to pay money to the chiefs of the insurrection for permission to work in peace, but, of course, the Government would stop such a proceeding where it was known. The situation will soon be replete with difficulty from every point of view, unless Marshal Campos by a most vigorous campaign pushes all the insurgents out of the principal sugar-cane districts. I asked the opinion of a Spanish planter as to what solution he thought possible for the present trouble; his answer was, "Complete self-government for the island." The longer I stay in Cuba, and the more I see of the Cubans, the stronger becomes my conviction that a large measure of autonomy is necessary if Spain wishes to preserve Cuba in a peaceful state. Whether the administration will or will not show marked improvement in Cuban hands is a riddle I am not prepared to answer; but the whole feeling of the people is against a continuance of the existing system, and the mother country must, therefore, look the situation in the face, and grant radical reforms.

A somewhat important action took place on August 31 at a place known as Sao del Indio, half-way between Santiago and Guantánamo. Colonel Canellas, with a force of 850 men, attacked the camp of José Maceo, where the latter had been stationed with about 2,000 insurgents for the night.

OBITUARY.

SURGEON-GENERAL SIR THOMAS LONGMORE, C.B.,

Honorary Physician to the Queen.

We have been favoured with the following from Surgeon-General W. C. Maclean, C.B.

Long before this record of the life and work of the above-named distinguished military surgeon is in the hand of your readers, the fact that his life and work are ended will be widely known at home and abroad. For many years past his life was in constant peril from cardiac failure. As time went on the attacks became more frequent and alarming, and the suffering always attending them more intense. It was a marvel to himself, his family, and professional friends, that the end, so often expected, was deferred so long.

On Sunday, September 29th, he was in the full enjoyment of the fine air of Swanage, the place above all others most congenial to him. He attended church at evening service with his wife, and slept that night with more than usual restfulness until 6.40 A.M. on the 30th, when he awoke and complained of his usual "breast pang." His brother-in-law, Colonel Moorson, hastened to call in medical aid. A few minutes before his doctor, armed with nitrite of amyl, arrived he expressed himself a little "easier." Suddenly, before there was time to use that remedy, he became cyanotic, and expired. All was over a few minutes after 7 A.M.

Thomas Longmore was born in London on October 10th, 1816. His father was a surgeon in the Royal Navy. He was educated at Merchant Taylors School. In due course became a student at Guy's Hospital. He was dresser to Mr. Bransby Cooper, assisted that surgeon in his private practice and in writing the life of Sir Astley Cooper. He arranged and catalogued the museum of that great surgeon, afterwards purchased by the Royal College of Surgeons of England. He became M.R.C.S. Eng. 1841, and F.R.C.S. 1856, and Fellow of the Royal Medical and Chirurgical Society. He was gazetted Assistant Surgeon 19th Regiment February 3rd, 1843; served with that regiment in the Ionian Islands, the West Indies, and Canada, returning to England in 1851. He was gazetted Surgeon of his regiment in March, 1854, and served as Surgeon of the 19th Regiment in the Light Division of the Eastern Army from its first taking the field throughout the campaign of 1854-55, until the termination of the siege of Sebastopol; he was not absent from duty one day during the campaign. He was

present at the affair of Bulganac, battles of Alma and Inkerman, capture of Balaclava, assaults on the Redan June 18th and September 8th; and received the medal and three clasps, and the Turkish medal, and was named a Knight of the Legion of Honour. He served with the 19th Regiment in the Sepoy Mutiny war until promoted Deputy Inspector-General of Hospitals in 1858. On his return to England he was appointed P.M.O. at Colchester. In 1860 he was appointed by Lord Herbert, then War Minister, Professor of Military Surgery at the new Army Medical School, and delivered the opening address in the presence of that Minister, the General Commanding the District, and other officers of distinction.

In 1864 he represented the British Government at the

International Congress at Geneva. At this Congress the International Treaty, since known as the Convention of Geneva of August 22nd, 1864, was formally adopted, and he was a member of the Committee that settled the terms of the Convention. In 1867 he took part, by order of the Secretary for War, in the international conferences of the societies for aid to wounded soldiers in time of war. In 1867 he was nominated a Companion of the Military Division of the Most Honourable Order of the Bath, and in the following year he was gazetted Honorary Surgeon to Her Majesty the Queen. In 1866 the Société Impériale de Chirurgie de Paris elected him Correspondant Etranger. In 1869 he again represented his Government at a Conference in Berlin on Aid to Sick and Wounded in War. In 1872, and again in 1873 and 1876, Surgeon-General Longmore represented the British Government at Vienna and Brussels for the settlement of international agreements relating to sick and wounded in war, and took, in a mixed committee of military and medical officers, an active part in establishing the bearer companies, and most of the

existing field hospital arrangements of the British Army. On five other occasions he represented his Government at foreign congresses, and was elected an Associé Etranger of the French Academy of Medicine and other scientific societies. In 1879 he was promoted by decree of the President of the French Republic to the rank of Officer in the Legion of Honour, the insignia of which, by Royal licence, he was permitted to wear. In 1886 he was knighted by the Queen at Osborne, and in the following year the Military Medical Services presented the fine portrait of Surgeon-General Longmore to the Army Medical Department, by George Reid, R.S.A., of Edinburgh, which adorns the anteroom of the mess-room at Netley.



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direction not worth following, possibly for the same reason as that named by Dr. Chester, whose argument is that because a comparatively small number of cleanly persons get typhoid fever uncleanness cannot have anything to do with producing susceptibility in the cleanly, irrespective of dose. This kind of reasoning ignores the condition of health at the time of exposure as influencing the question of effectual or ineffectual phagocytosis; for we may safely assume that the many get the germs of disease into them, while only the few develop the disease. The statement that typhoid fever was "practically unknown" twenty or thirty years ago only means that less attention was paid to it, unless, indeed, it be the one new thing under the sun. If Dr. Chester will specify the "factors" in the case, which, he says, were non-existent twenty or thirty years ago, he will be doing a public service.—I am, etc.,

Sheffield, Sept. 30th.

F. A. DAVY, M.D.,

Surgeon-Lieutenant-Colonel, A.M.S., Retired Pay.

SIR,—In reply to the letter of Surgeon-Lieutenant-Colonel Chester in the BRITISH MEDICAL JOURNAL, September 23th, allow me to say that although it may be a fact that the term enteric fever was practically unknown two or three decades ago, yet it is impossible to admit that the disease, at present so called, did not then prevail among British soldiers and sailors in hot climates.

In Europe, typhoid fever was unheard of until the time of Louis, but all the evidence is against the supposition that the disease arose for the first time at the beginning of this century. Similarly, although enteric fever first appeared in the statistical returns for India in 1831, I have never heard it suggested before that the disease did not previously exist in that country. As a matter of fact, there is evidence that a fever with enteric symptoms has been a fatal disease in fleets and armies from remote times.

With regard to the increased prevalence of enteric fever in India, which has been recorded since 1870, I accept the explanation of Professor Notter,¹ that it is owing to a difference in nomenclature and to the greater number of young and recently-arrived soldiers serving in the country—and of these young and recently-arrived soldiers it may with pre-eminence be said: "They know not the manner of the God of the land."—I am, etc.,

Aberdeen, Oct. 1st.

GILBERT KIRKER, M.D.,
Staff-Surgeon, R.N.

THE TITLE OF PHYSICIAN.

SIR,—If a man who holds a licence to practise from a College of Physicians is not a physician, what is he? It is difficult to see on what grounds he can call himself a surgeon or an apothecary, titles which would appear to be properly reserved for those who have satisfied the examining board of a College of Surgeons or a Society of Apothecaries. And if the title of Physician is the special property of those who have passed the higher examination of the College of Physicians, surely those who have passed the higher examination of the College of Surgeons, the Fellowship, have an equally good claim to monopolise the title of Surgeon. Under these circumstances, as it has already been held by the High Court that the prefix of "Dr." is legally the prerogative of those who hold a degree in medicine, it would be a great kindness if somebody would invent a designation at once clear and inoffensive, which might be used without fear of pains and penalties by the unfortunate possessors of the M.R.C.S. and L.R.C.P., to inform the public that they are still members of the medical profession.—I am, etc.,

October 1st.

M.D., B.S.LOND.

SIR,—It seems to me that one thing at any rate still "accentuates the distinction" between the pure physician and the general practitioner, and that is the restrictions which the rules of most hospitals still impose on the professional liberty of their physicians. It appears still to be laid down in the majority of cases that the physicians are not to practise surgery, pharmacy, or midwifery in private. The surgeons, on the contrary, are allowed in their private practice an absolutely free hand in which to hold as large a bundle of

surgical and medical specialities as they can clutch. For the general practitioner of the present day, at any rate in provincial towns, appears to not infrequently endeavour to pose rather as the universal specialist, who is, moreover, prepared to perform general surgical operations, or to give opinions in consultation on medical cases as opportunity offers. He is, in addition, in some cases not by any means behindhand in emphasising the hospital rule in question when it happens to suit his purpose.

If, as you suggest, the distinction between the pure physician and the general practitioner "should no longer be accentuated as heretofore," is it unreasonable to suppose that it should follow that the old-fashioned restriction concerning the professional conduct of provincial hospital physicians should be withdrawn?

The present state of things seems to be unfair, and it is difficult to see why, at the present time, one-half of a hospital staff should be restricted and the other half left free in the performance of their private practice. I have ventured to raise this point because it seems to me to be really a practical one. As to who may "call himself a physician," or as to who is entitled to the "title of Dr.," it seems unprofitable to consider in the face of unchecked French liberty, and the occasional hardness of the present day professional conscience.—I am, etc.,

October 2nd.

ANON.

SEWER VENTILATION.

SIR,—I should like to make one or two observations in reply to the letter of Dr. Sidney Davies in your issue of September 14th. I quoted Mr. Baldwin Latham's dictum with approval, but not exactly in the sense implied by Dr. Davies in his letter.

If a sewer be not ventilated with due regard to the conditions existing within the same, then the vent or ventilation of many sewers would increase, instead of diminish the nuisance arising therefrom at certain points. Large volumes of air pass through certain sewers, and this occurs principally through those in which there is a rapid stream of sewage because the force (that is, the flow of sewage) which moves the air is continuous, and also pretty constant in its operation. In order to illustrate my points, take the following example of a supposed sewer 1,000 yards in length, and, say, 2 feet in diameter. Suppose this sewer for the first 800 yards has a great fall, and for the remaining 200 yards the gradient is much less. At the change of gradient is a manhole A, and the stream of sewage is 6 inches deep. Under such conditions sewer air will flow towards A much more quickly than it will move beyond that point, hence more sewer air will be brought to A than will be carried further down the sewer, and the excess in the amount brought down will flow out of that manhole and those immediately above it. Now suppose the manhole covers were closed, and bent pipes connected with the sewer; a similar thing will happen. The pipes in the neighbourhood of A will convey air out of the sewer, while those higher up will not act, or if they do they will probably serve as inlets of fresh air. Sectional ventilation, as suggested in my paper, in arresting the flow of sewer air will diminish the amount of fresh air gaining access to the sewer. Fresh air, in passing through a short section of sewer only, cannot, I think, be so offensive as when it flows in contact with sewage for 600 yards or 800 yards or more.

I do not assume that ventilation will render sewer air innocuous, for that possibly can only be done by burning it, but I think diluting it with air as suggested above will render it somewhat less harmless, and discharging it high up in the air will further dilute and diminish the nuisance arising therefrom. With regard to the idea of vent *versus* ventilation, I incline to the opinion that under some conditions the former might be the more useful, while under others the latter would be better suited to the purpose. Every sewer should be dealt with upon its merits, and that method applied which is best calculated to effect the purpose in view.—I am, etc.,

Tyldesley, Sept. 21st.

JAS. T. NEECH.

DR. PERCY SHARPE, Public Vaccinator, Brant Broughton District of the Newark Union, has been awarded the grant for efficient vaccination.

¹ Transactions of the International Congress of Hygiene and Demography.

I may not ask for space to give an exhaustive catalogue of his printed professional works and papers. Their mere titles take up four closely printed pages of letterpress. It must suffice to mention his *Synopsis of Cases of Heat Apoplexy*; his essay on Gunshot Wounds in Holmes's *System of Surgery*—this essay was reprinted in the United States, and formed the textbook of the surgeons of both armies in the American civil war; *Report on the Whitworth Projectiles in War*; *The Medical Officer's Ophthalmic Manual*; *Treatise on the Transport of Sick and Wounded in War*. His observations on the preliminary care necessary for accidental injuries, read at the annual assembly of St. John of Jerusalem, 1874, was the starting point of the St. John ambulance classes throughout the kingdom. He was also the author of *Antiseptic Surgery on Battle Fields*; *Life of Wiseman*, and an immense number of lectures, reports, and papers on every subject relating to military surgery.

The above will convey to the service and profession he adorned a perhaps not inadequate conception of his public life and work. Of Longmore in private life, his loyalty as a colleague, his unselfish and generous appreciation of the work of others, the noble simplicity of his character, without egotism or finesse, the warmth of his friendship, the tenderness of his heart, his sympathy with those in trouble, sorrow, need, sickness, or any other adversity, I dare not speak. While I, the last of his first colleagues in the school in which we both served, pen this poor tribute to his memory, his brother officers are committing to the narrow house all that is mortal of my late friend and colleague. I can only, from the room to which I am this day restricted, with a sad heart say, *Vale!*

A second edition of his most important work on *Gunshot Injuries* was reviewed in the BRITISH MEDICAL JOURNAL of October 5th. It was entirely rewritten, and, as was pointed out by the reviewer, was practically a new book.

Mr. Ernest Hart writes: I cannot omit to add my personal and official testimony to the high character, unusual ability and great services which Sir Thomas Longmore through a long and useful life rendered to his country and his department. It is unnecessary for me to speak of his high intelligence and painstaking capacity in the fulfilment of his important functions in the field, the camp, and in the lecture-room at Netley. As a teacher Longmore possessed qualities of an unusual kind; he separated clearly the essential from the accessory facts of his department of surgery, and he spared no pains to analyse all the evidence for or against the conclusions at which he arrived, and the doctrine which he taught. To the last he remained thoroughly in touch with the whole progress of military surgery, and numerous experts from foreign armies who have spoken to me of his attainments and teaching both prior to their visits to Netley and on their return, never failed to do justice to his unusual ability and great usefulness as a teacher and trainer of men. I wish in this brief note especially to emphasise one side of his work which is but little known. For the last twenty-five years Longmore has been the trusted, energetic, and public-spirited friend not only of all Netley men, but of the whole of his department. I should have felt myself much weakened and frequently perplexed in the long battle which I have waged during the whole of that time for the improved organisation and the enlarged privileges of the Army Medical Department without his constant advice, large experience, and sound judgment in the solution of all the difficulties encountered as they arose, and in the fair discussion and thorough investigation of all the grounds of opposition to the numerous reforms which we have been enabled to aid or to carry through in spite of steady official opposition. For Longmore was essentially a moderate and a fair-minded man, cognisant of all that was in the official mind and well acquainted with office difficulties and with the reluctance of military as well as high medical authorities to enter upon changes such as those which we have succeeded in bringing about, but of which some have still yet to be made.

Longmore was from first to last always young in spirit, progressive in thought, and sympathetic with reformers. A very large proportion of the articles, memoranda, and notes which appeared in the BRITISH MEDICAL JOURNAL, and much of the substance of the reports which I have submitted to the Parlia-

mentary Bills Committee on army medical matters, were either due to his pen or underwent revision at his hands. In the conduct of the military department of this JOURNAL and in all that related to the questions of military surgery and administration, the sound judgment and unblinded criticism and fearless independence of Sir Thomas Longmore have been of constant advantage, and it would not be right that his name should pass into oblivion, or that the grave should close over him without this tribute to the helpful kindness, the unvarying sympathy, and the great ability with which he has for many years assisted in the fight for those changes in the administration of the Army Medical Department which have led, and will yet lead, to its constantly increasing efficiency and its public utility.

The profession and the public owe to Sir Thomas Longmore far more than they are ever likely to realise. Of course during his official career he was precluded by official rule from formally signing any of his contributions to our pages, but he was a man who had the courage of his opinions, and the services which he rendered to us were well known throughout the department, although not perhaps always viewed with favour by his immediate official chiefs.

SURGEON GENERAL HAMPDEN HUGH MASSY, C.B.

We regret to have to announce the death of Surgeon-General Hampden Hugh Massy, C.B., who died at Northwood Lodge, Bournemouth, on September 27th, at the age of 75. Surgeon-General Massy entered the service in November, 1844, and took part as assistant-surgeon with the 31st Regiment in the Suttlej campaign. He was promoted surgeon and posted to the 17th Lancers, with which regiment he served in the Crimean War, taking part in the battles of Alma, Balaclava, Inkerman and Tchernaya, the affairs of Bulganak and M'Kenzie's Farm, and the siege of Sebastopol. He received the Crimean medal with four clasps, the Turkish medal, and the Medjidie (5th class), and was recommended for promotion by Sir William Codrington and for the Legion of Honour by Lord Cardigan. He then served with the 2nd Dragoon Guards during the Indian Mutiny, was present at the siege and capture of Lucknow, the actions of Koorse-Transgegra and Burgaon, and also acted as principal medical officer to Brigadier-General Barker's column in the Oadh campaign. He received the Indian medal with clasp, was made a Companion of the Bath on June 2nd, 1869, and retired as Surgeon-General on April 1st, 1880, with the grant of the good-service pension for meritorious service.

JOHN CHARLES LANGMORE, M.B.LOND., F.R.C.S.ENG.

The death of Dr. Langmore has removed from the ranks one of the patriarchs of the profession. He was the second son of William Langmore, M.D., who formerly practised in Finsbury Square, London, and he was born in February, 1814. After his general education at St. Paul's School, he commenced his medical education at the London Hospital, and became L.S.A. in 1834 and M.S.A. in 1836. He travelled abroad, chiefly in Italy, for months as medical attendant to a young man, and subsequently studied for a time at the Paris medical schools, but was recalled by his father to take a general practice in Upper George Street, Portman Square, in 1838. He graduated as M.B.Lond. in 1842, and became F.R.C.S.Eng. in 1853. He had in the previous year (1852) removed to Oxford Terrace, Hyde Park, where he remained (with the exception of seven years, during which he resided at Sussex Gardens, Hyde Park) until 1889, when his son, John Wreford Langmore, M.D. Lond., who had joined him in partnership, died. He then retired to Shepherd's Bush Green, where he died, September 20th, 1895. He had practically retired a couple of years previously, on account of ill health. He suffered in 1889 most seriously from embolism, but afterwards recovered to some extent. Of late years he had had repeated attacks of influenza; the last, which began on September 11th, eventually proved fatal, notwithstanding the careful attention of Dr. Campbell Pope and Mr. Swinford Edwards. Dr. Langmore was President of the Harveian Society of London in 1865; and when the Paddington Medical Book Society was founded in 1838, he was elected the first Honorary Secretary, and continued to hold the post until 1889, a period of fifty-one years.

He was even then the sole survivor of the twelve original members. He was endowed both by nature and education for success in practice; he was a gentleman of refined and cultured tastes; and he earned the respect and affection of a wide circle of patients and friends. Although many of these predeceased him, others remain to whom his death has caused deep and sincere sorrow.

W. H. BELLOT, F.R.C.S., M.D.

W. H. BELLOT died at Leamington on September 24th, aged 84. He was born at Manchester in 1811, and educated at the Grammar School. Afterwards he was apprenticed to and became the pupil of his uncle, Dr. Joseph Bellot of Stockport. He attended the Manchester Infirmary, and then went to London and Paris to pursue his studies. On returning to this country he became a partner with his uncle, whom he ultimately succeeded at Stockport. In 1852 he was elected an honorary Fellow of the Royal College of Surgeons of England, and in 1860 took the degree of M.D. at Erlangen. He published an essay on Nélaton's lecture on Mr. Joseph Jordan's autoplasmic treatment of ununited fracture. He retired from practice in 1864, and since then has resided at Leamington.

His elder brother, Mr. Thomas Bellot, F.R.C.S., translated a part of Galen, and also wrote a treatise on the *Sanskrit Derivation of English Words*, and he was one of the earlier workers in the domain of scientific philology. Whilst in the East he made a valuable collection of Chinese books and ancient bronzes. These he directed should become the property of the Manchester Free Library at the death of his brother, but many of the books were transferred at once, and now constitute the "Bellot Collection."

FRANK H. HODGES, M.R.C.S. ENG., F.R.C.S. EDIN.

THE late Mr. Frank Hodges, of Leicester, was a student first at the London Hospital, and subsequently at Edinburgh, where he was appointed eventually Resident Physician at the Royal Infirmary. He afterwards held the office of Resident Surgeon to the Birmingham and Midland Eye Hospital, and early determined to devote himself to ophthalmic practice. Before settling down to this speciality he wisely sought to obtain a wider experience in general surgery, and held in succession the offices of House-Surgeon to the York County Hospital and to the Leicester Infirmary. He was finally elected Ophthalmic Surgeon to the infirmary, and obtained a reputation in that department, which was well earned by the ardour and diligence which he brought to its study. He was an excellent operator, and was untiring in his devotion not only to private practice, but also to his hospital duties.

An intimate friend writes of him: "His character was truly noble and unselfish. He had a stern up-hill fight, and was beset by many private troubles; but he was uniformly sincere to his high professional ideal, and all who knew him are familiar with his quiet courage in facing difficulties, and with his entire devotion to the conscientious discharge of all his duties. Among his many excellent characteristics was a manly love of cricket, in which he used to excel; but a noteworthy trait in his character was his passion—an hereditary one—for music of a high class. His moral and intellectual nature was in harmony with these tastes."

It is sad to record that a career of so much promise should have been terminated in so sad a manner. He broke down under the strain of overwork, and his condition became critical last June. An attack of the nature of sun apoplexy was followed by great prostration, for which he sought repose first at Filey and afterwards in Lincolnshire. He returned to work, but was seized with a return of symptoms which indicated cerebral disorder, and he ended his life by his own act on September 7th.

The esteem in which he was held by his professional brethren was shown by the large attendance at his funeral.

WE regret to announce the death of Dr. EDWARD THOMAS TYLECOTE, which occurred on September 16th, at Great Haywood, after a trying illness. Dr. Tylecote was born at Great Haywood, graduated at Aberdeen in 1860, and then returned to Great Haywood where he succeeded to his father's practice and passed the whole of his life. Dr. Tylecote took

an active interest in all local matters of the district. For many years he acted as people's warden of the parish church of Great Haywood and took a special interest in the management of the schools, and he was elected a member of the first parish council for his parish. Dr. Tylecote leaves a widow and one daughter.

The sudden death is reported of Dr. R. B. MORLEY, of Chapel-Allerton, near Leeds, on October 3rd. He had gone on a bicycle to visit a patient, and whilst in the act of examining fell back and expired in a few moments. The patient died the next day, her death, it is believed, having been accelerated by the shock. Dr. Morley, who was 43 years of age, was educated at the Yorkshire College, Leeds; he was a member of the British Medical Association and of the Yorkshire Branch.

The death is announced of Dr. LARREY, member of the Institute and of the Academy of Medicine, Paris. Born in Paris in 1808, Baron Felix Hippolyte Larrey was the son of the famous surgeon of Napoleon I. He first entered the sanitary service of the army. He obtained the doctor's degree in Paris in 1832, after which he entered the Northern Division of the army, and was present as a high official in the Ambulance Corps at the siege of Antwerp, and then was appointed Chevalier of the Order of Leopold. In 1841 he became Professor of Pathological Surgery at the Val-de-Grâce Hospital. He was appointed in 1858 Inspector of the Army Sanitary Service, and received the title of *Chirurgien Ordinaire du Chef de l'Etat*. As Surgeon in Chief in the army of Italy in 1859, he distinguished himself in that campaign by his devotion and courage. At Solferino his horse was killed under him. Dr. Larrey became Chevalier of the Legion of Honour in 1843, Officer in 1851, Commander in 1859, and, upon his retirement in 1871, Grand Officer. In 1876 he tried for a seat at the Chamber but he was not successful, although in the following year he was elected at Bagnères by 12,000 votes. He did not again offer himself, however, in 1881. Baron Larrey published a great number of works on military surgery.

By the death of Dr. FRANCESCO VALLARDI, of Milan, Italy has lost its principal medical publisher. He was himself a member of the medical profession, having taken his degree in 1833. He was the son of a publisher, and was born at Milan in 1809, and after a short experience of medical practice he determined to go into the publishing business. To his liberality and enterprise are largely due the development of rational medicine and the diffusion of the scientific spirit in Italy during the last thirty years. He gave his countrymen the best work of other countries in the form of translations of the writings of Niemeyer, Erichsen, Holmes, Leissl, Hebra, and others; and he encouraged and helped Italian investigators to give their work to the world. In a recent number of the *Gazetta degli Ospedali*, Professor Bizzozzero of Turin bears eloquent witness to the enlightened spirit in which Vallardi conducted his business and to the integrity and elevation of his character.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently passed away are: Dr. Slawczynski, a well-known practitioner of Berlin, aged 74; Dr. Valentini, a distinguished medical officer of the German army, and since 1834 President of the Italian Society of Berlin, aged 88; Dr. Gustav Amburger of St. Petersburg, author of numerous contributions to medical literature, aged 55; Dr. Marcus Hohlbeck, Chief Physician of the Michael Hospital at Tiflis, aged 57; Dr. A. Tebaldi, Chief of the Psychiatric Clinic of the University of Padua; Dr. J. F. de Macedo Pinto, Emeritus Professor in the Medical Faculty of the University of Coimbra, aged 80; Dr. A. de Carvalho, Professor of Anatomy in the Medical Faculty of Bahia; Dr. Jambon, Chief Surgeon to the Hospital of Macon; Dr. W. Bode, to whom the development of Nauheim as a health resort was largely due; Dr. Hertwig, who took a leading part in organising the municipal abattoir of Berlin; and Dr. F. Berghammer, Surgeon-Dentist to the King of Bavaria, formerly a medical officer in the Bavarian army. He had seen much service in the field during the American civil war and in the campaign of 1866.

Obituary.

SURGEON-GENERAL SIR THOMAS LONGMORE, KNT.,
C.B., F.R.C.S. ENG.

IN our last issue we only had time to make a brief announcement of the sudden death of Sir Thomas Longmore, the news of which reached us last week. It is now our task—painful yet full of interest—to lay before our readers the information which we have been able to gather concerning his life and work.

Sir Thomas Longmore was born at Southwark, in London, on Oct. 10th, 1816, so that at the time of his death he was within a few days of completing his seventy-ninth year. He was the eldest son of Mr. Thomas Longmore, a surgeon in the Royal Navy, who on retirement was appointed to the medical charge of Rockingham House, and of Maria, a daughter of Mr. John Elcum. He received his education at the Merchant Taylors' School and at Guy's Hospital,

and in 1841 he was duly enrolled as a Member of the Royal College of Surgeons of England. At his hospital he soon made himself felt as an industrious student; he acted there as dresser to Mr. Bransby Cooper, and afterwards assisted him in his private practice and in writing Sir Astley Cooper's life. He also spent considerable time in arranging and cataloguing after the great surgeon's death the collection of specimens made by Sir Astley Cooper before the museum was purchased by the Royal College of Surgeons of England. On Feb. 3rd, 1843, he was gazetted to an assistant surgeoncy in the 19th Regiment of Foot. He joined the dépôt at Dover, afterwards moving with it to Jersey and to Ireland. Early in 1845 he proceeded to the headquarters of the regiment in the Ionian Islands, and served with it there, in the West Indies, and in North America until its return to England in 1851. March 3rd, 1854, saw him gazetted as a

regimental surgeon. He subsequently served with his regiment in the Light Division of the Eastern Army, and he was on duty from the date of its first taking the field, throughout the Crimean campaign of 1854-55, until the termination of the siege of Sebastopol, without being absent from his post for a single day. He, however, suffered not a little from the effects of frostbite during those never-to-be-forgotten winters, and to the day of his death carried the memory of hardships heroically and patiently borne, the results of which were, moreover, observable in his gait. He was present at the affair of Buljanac on Sept. 19th, at the battles of Alma and Inkerman, the battle of Balaklava, at the famous sortie on Oct. 26th, and at the assaults of the Redan on June 18th and Sept. 8th. For his services he received the medal with three clasps, the Turkish medal, and was made a Knight of the Fourth Class of the Legion of Honour. On the declaration of peace Mr. Longmore returned to England. He then very wisely improved his professional position by passing the examination for the diploma of the Fellowship of the Royal College of Surgeons of England. But he was not long allowed to remain in this country, for on the outbreak

of the Sepoy Mutiny he was ordered with a detachment of his regiment to India, and during the years 1857, 1858, and 1859 served with the army in Bengal, at first as a regimental officer, but afterwards as Deputy-Inspector of Hospitals, the promotion to which rank, on Dec. 31st, 1858, was a further reward for his active services in the East. He thus attained administrative rank in less than sixteen years from the day on which he obtained his first commission. In January, 1859, he received the appointment of Sanitary Officer to the British Forces in Bengal, but in the following July, on the reduction of the establishment, he was ordered home and posted as Principal Medical Officer of the camp at Colchester.

During the Crimean War his skill as an operator had attracted considerable attention, and when, in 1860, Sidney Herbert founded the Medical School, for the better instruction of the medical officers of the army, the professorship of Military Surgery was offered to him and accepted on the advice and at the express desire of Dr. Alexander, the then Director-General. Endowed with excellent qualifications for the post, he filled it with much usefulness, dignity, and honour, and continued to hold it for nearly

thirty-one years, until the termination of the summer session of 1891, when it became clear to him that he must seek the quiet and repose which age demands. After occupying the chair of Military Surgery for twelve years, on Oct. 19th, 1872, he was promoted to the rank of Inspector-(Surgeon) General, and in the same year he was appointed to be a member of the Committee on Field Hospital Equipment. Fourteen years later, on Oct. 10th, 1876, he was placed on the retired list, with permission to hold his chair of Military Surgery. On eight occasions he was called on to deliver the introductory addresses at the commencements of sessions of the School, and it fell to his lot to inaugurate the first sessions both at Chatham in October, 1860, and at Netley in May, 1863. In October, 1873, he took for his subject that of Hospital Arrangements in the Field, and the most effective means of affording surgical help to wounded

soldiers on battlefields in European warfare. On a similar occasion, in April, 1878, he delivered an oration on the Existing State of our Naval, Indian, and Army Medical Services. In October, 1880, he dealt with the Antiseptic Treatment of Wounds in Military Practice in the Field, and at the opening of the winter session of 1886 he chose for the subject of his address Gentleness in Surgical Practice. His position as the acknowledged chief of the military surgeons of this country, at a time when the working of the Army Medical School and the organisation of our Medical Service were being studied by the chief Continental Governments, naturally brought his name frequently into great prominence and added not a few well-earned honours to the laurels which he had already won. Thus, from the date of his election in 1866, onward for many years he was "correspondant étranger" of the Société Impériale de Chirurgie de Paris; in 1877 he was elected "membre associé étranger" of the Société de Chirurgie de Paris; in 1884 he was made a corresponding member of the Academy of Medicine of France; and on March 27th, 1888, he was elected "associé étranger" of that institution. We have already mentioned that in 1857 he was made a Knight



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tooth from one person to another. In his experiments he appeals to Professor Scheff, who extracted teeth of dogs under anaesthetics and with antiseptic precautions, the teeth being placed in a solution of sublimate. The wound was then disinfected, the bleeding was arrested, the coagulum was removed from the alveolus, and the tooth which was to be replanted was pressed into the cavity. After two days a reddish border was to be seen, and the tooth could be moved backwards and forwards, but after two weeks it was securely fixed. According to Dr. Benedikt the indications for the above operation are loosening of the teeth, caries, and inflammation of the periosteum surrounding the root. A tooth which has been removed from its socket by mistake on the part of the dentist or by violence should be replanted. In the case of toothache from caries where it is impossible to apply any remedy to the painful place the tooth may be extracted, filled with stopping after removal, and then replaced. Dr. Benedikt proposes that the tooth should be carefully extracted, avoiding injury to the socket or the surrounding gum, for a fracture of the alveolus would render subsequent union impossible. The root is then to be trimmed as far as it is rough and eroded, and the tooth is to be replaced after the removal of the pulp and the disinfection of both tooth and alveolus with sublimate. The operation is followed by no great pain and by only a trifling inflammation of the gums.

A Plea for Venesection.

Venesection is not in favour in Austria. Practitioners of the modern school have never seen it performed during their student years, and there are only a few old surgeons who regard it as a powerful means of combating all feverish processes. It must, therefore, appear strange that one of the most eminent Austrian physicians, Professor Jaksch, advocated the use of venesection at a meeting of the Medical Society of Prague, pointing out that its great therapeutical value consists in the immediate decrease of the blood pressure and in the diminution of the number of substances which carry oxygen. It may be employed in pneumonia, but only as a last resource, when the system is overcharged with carbonic acid. From 200 c.c. to 300 c.c. of blood may be withdrawn, and then a sterilised solution of common salt such as is used in physiological experiments is to be injected subcutaneously. The success of this treatment is manifested by the disappearance of cyanosis. Phlebotomy may also be resorted to in uræmia, provided that the patient's blood is normal as regards red corpuscles. Capping may be employed to relieve the symptoms of carbonic acid poisoning and the pain of pneumonia, being less injurious than narcotics. It will sometimes calm the severe pain of pleurisy, and has also been known to effect improvement in cases of cyanosis and dyspnoea caused by emphysema and heart disease.

Cholera in Galicia.

During the week between Sept. 24th and 30th 18 cases of cholera and 12 deaths have been reported, making a total of 94 cases with 57 deaths (60.6 per cent.) since the commencement of the outbreak.

NEW YORK.

(FROM OUR OWN CORRESPONDENT.)

Cholera among the Hawaiians.

THE present epidemic of cholera in the Sandwich Islands is traced to a vessel from Kobe, Japan. Five hundred and thirty-eight Chinese were landed on Quarantine Islet on Aug. 9th from the steamer *Belgie*. They were from Hong-Kong, but the vessel had taken freight at Kobe and Yokohama, the former being a place where much cholera existed. Three deaths occurred on the passage, the alleged causes being pneumonia and heart disease. After landing there were 4 cases resembling cholera, and 3 were fatal. Thorough disinfection and isolation were used, and, no more cases occurring, in due time the 535 Chinese were transported to their destination on country plantations. Meantime, the disease had appeared in aggravated form on shore. It has now been gradually increasing for more than two weeks, but solely among natives. It is stated that the probable reason is that, while others have

been protected by the thorough disinfecting and general sanitation employed, the natives have, perhaps in every case, been infected by eating raw fish, crabs, or sea-moss from the harbour and shoals adjacent—food which other people dislike, but which Hawaiians crave for. In several cases the victims were known shortly before being attacked to have eaten heartily of raw fish. The first cases on shore appeared after a native feast where the above-named foods were supplied. It is quite probable that the crabs had penetrated graves of Chinese cholera victims in quarantine who has been buried in the shallow sands, and had afterwards crossed a half-mile of shoal water and been captured by fishing women and eaten raw. It is evident that the disease crossed that strait in some way to the nearest land. A majority of the victims are stricken down with great suddenness and live from three to eighteen hours. Seven-eighths of the cases are fatal. Up to Sept. 5th there have been 34 cases and 29 deaths in a population of about 5000 natives and 15,000 of other races within city limits. Why is the fatality of the attacks so extreme? In general, it may be replied, the Hawaiian dies easily. He has weak resisting power against disease; he succumbs where most men would recover. This is characteristic of the race, as abundant missionary and medical experience testifies. It is largely due to lack of mental courage; pain and violent sickness terrify him; he readily becomes hopeless and gives up; his friends and his medicine-man tell him that an evil god has grappled with his vitals; he feels the demon at work within him, and he yields to terror and dies. This is the history of a large proportion of deaths among the Hawaiians. Another reason for the great mortality of this disease is that in most of the cases no proper medical aid is received until too late. The natives will not report a case of cholera until the patient is beyond relief. Since a cholera hospital was opened and patients removed to it an absolute aversion has seized upon them. The majority of the natives have always been afraid to go to the Queen's Hospital, for they wholly distrust the white "doctor," because they have been taught belief in, and fear of, the minor gods and demons, and licensed medicine-men have held classes for instruction in incantations and demon lore. The fees of these medicine-men being at stake the sick have been taught to have nothing to do with the white "doctor." It is a popular belief that the medical men give poison to their patients in the hospital. Many are received into the hospital when it is too late to help them, and some are already dead before they are reached by the medical man.

Serum Treatment of Tuberculosis.

Mr. Paquin, Professor of Bacteriology in the Missouri State University, argues that as the horse is immune against tuberculosis, its blood serum ought to work beneficially in patients suffering from this disease. He has been using injections in fifty cases and thinks he has proved its value. He claims that the blood of the horse can be used direct, as it is naturally immune and needs no artificial immunisation. He injects the serum under the skin.

Enforcement of the American Sabbath.

The recent efforts of the police of New York to enforce the excise laws requiring the closing of liquor saloons on the Sabbath has aroused the opposition of the German population. New York has over 9000 licensed liquor saloons, and although the law requires that they shall not sell any intoxicating liquors on Sunday the police have been very lax in the enforcement of this provision. Under the reform administration the law has been rigidly enforced, followed by a great reduction of crime and an improvement in the public health. The agitation of the question of the justice of that feature of the excise law which closes the "poor man's club" on Sunday, as the advocates of the saloon call these low resorts, comes before a general election, and is, of course, eagerly seized upon by the politicians. The result of a popular vote can scarcely be doubted when the vast German and Irish voting population is considered, whose vote will be cast solidly for what they term "personal liberty." There is, however, a large reserved vote which rarely appears at popular elections, but which may be induced to come out to meet the emergency. The power that moves this conservative vote emanates from the pulpit and the religious press, both of which are entering into the canvass with unusual vigour, determined to preserve the "American Sabbath."

Sept. 29th.

of the Legion of Honour; in 1879, by the decree of the President of the Republic, he was promoted to the grade of "officer" of the Legion. On March 13th, 1867, he was nominated a Companion of the Military Division of the Order of the Bath, and on Sept. 16th of the following year was gazetted Honorary Surgeon to Her Majesty. On the death of Inspector-General Charles Whyte he was appointed (Jan. 3rd, 1881) to receive the "distinguished service reward" thereby rendered vacant. He received the honour of knighthood at Osborne in 1896. At the annual assembly of the Order of St. John of Jerusalem in 1874 he read a paper which was the starting-point of the St. John ambulance classes. He was among the earliest of those selected as associates of the Order, and he was a life member of the Ambulance Association, in the workings of which he ever took a lively interest. He was also a Fellow of the Royal Medical and Chirurgical Society and of other learned bodies, and was for many years consulting surgeon to the Southampton Free Eye and Ear Hospital.

Sir Thomas Longmore frequently had the honour of being sent as a representative of the British Government to foreign countries. As early as 1864 he was deputed to attend the Congress at Geneva since known as the "Geneva Convention of 1864." In 1867 he was sent to Paris to take part in the International Conferences of the Societies for Aid to Wounded Soldiers in time of War. In 1869 he was at Berlin, as the British Government delegate, to take part in an International Conference on Aid to Sick and Wounded in War. In 1873 he was sent by the War Secretary to Vienna to report on the field hospital equipment collected at the "Sanitäts-Pavillon" of the World-Exhibition in that city. In 1876, at Brussels, he was president of a committee ordered to report on the appliances for aid to sick and wounded in war exhibited in the Sanitary Exhibition there. At Paris, in 1878, he represented the Government in an International Congress to consider the Medical Arrangements of Armies in the Field. At the International Medical Congress held in London in 1881 he was President of the Section of Military Surgery and Medicine, and in his address gave a sketch of the existing arrangements for ensuring systematic help and skilled attention to the wounded in case of England becoming involved in war (published in the Transactions of the Congress and in THE LANCET of Aug. 6th, 1881). In September, 1884, he again represented the Government at Geneva at the Conference of the Societies for Aid to Sick and Wounded in War; and in the autumn of 1887 he was sent to Karlsruhe to be present at the International Red Cross meeting in that city. In the June of the latter year the annual meeting of the Southern Branch of the British Medical Association was held at Netley, and Sir Thomas Longmore, as the President, delivered the annual address. In 1888 he was invited to act at Antwerp as British representative and member of the international jury for assessing the prizes offered by the Empress Augusta of Germany for the best forms for a movable hut-hospital. His report on the exhibition and the proceedings of the jury are printed in Vol. XXVI. of the Army Medical Reports. In October, 1889, he was sent by the Secretary of State for War to Paris to take part in the fourth session of the French Surgical Congress; he was elected one of the vice-presidents, and subsequently (1890) published a report on the proceedings, with observations on the Military Medical Schools of France. Of these conferences his reports may be found in the Army Medical Department Reports and in the special Transactions of the Congresses. The work which he did so well in the Army Medical School is shadowed forth in his writings. Although not a brilliant or voluble lecturer, he was most painstaking, precise, and conscientious. Those who listened to his discourses during the many years in which he held his chair, carried away with them the impression of the thoroughness with which his lectures were prepared and of the pains and trouble he took to make even the smallest point intelligible to them. When delivering his last address on July 17th, 1891, after announcing his coming retirement in terms of characteristic modesty and expressing that high sense of public duty which marked his whole career, he epitomised the changes and vicissitudes incidental to a growing and developing Service. No man could speak on such a subject with greater authority, for his one aim in life was to be, as far as may be, and not merely to be considered, a perfect soldier-surgeon. Entering the army as a regimental officer, he saw the regimental system abolished, the germ of a new, separate, and independent medical depart-

ment planted in its stead, and he long and carefully watched its growth and development. We can echo the remark which Dr. R. Farquharson made (speaking of Sir Thomas Longmore's retirement, after distributing the prizes at the termination of the summer session of the Army Medical School, 1891), when addressing the young officers, that "they would know better some day than they did now that the progress of military surgery for the last thirty years was more intimately associated with the name of Longmore than with any other."

The career of Sir Thomas Longmore as a writer commenced about the year 1859, when he published a "Synopsis of Sixteen Cases of Heat Apoplexy" which occurred in Her Majesty's 19th Regiment at Barrackpore; it appeared in THE LANCET of March 26th of that year. He wrote a description of two additional cases in the sixth volume of the "Indian Annals of Medical Science." These papers were followed by a "Report on Gunshot and Sabre Wounds of Invalids sent to Fort Pitt during the years 1860 and 1861," which consisted of thirty pages and which he extracted from the Statistical, Sanitary, and Medical reports of the Army Medical Department; it was issued in the October of 1863. His first important literary work, however, was "The Illustrated Optical Manual," published in 1863, the earlier editions of which were intended exclusively for military practice. This manual reached a fourth edition in 1888, when it was issued as a text-book for civil as well as for military surgeons. Following these efforts there came from his pen these papers and books: "Remarks on the recently proposed American Plan of treating Gunshot Wounds of the Chest by Hermetically Sealing" (THE LANCET, Jan. 2nd, 1864); "A Note on some of the Injuries sustained by the late President of the United States" (President Lincoln) in THE LANCET of June 17th, 1865; a Catalogue of the Museum of Military Surgery at Netley (1867); a paper on "Amputation at the Knee-joint in Military Practice" (Brit. Med. Jour., Jan. 5th, 1867); "A Treatise on the Transport of Sick and Wounded Troops" (1869), which he dedicated to his esteemed colleagues at Netley, to whose affectionate care he was so greatly indebted for recovery from a severe illness, and which was rightly described at the time of publication as "the most careful and thorough work on the transport of sick and wounded troops which has been published in any country"—a second edition of this work was brought out in the year 1893, edited by Surgeon-Captain W. A. Morris; "Remarks on the Instruments designed for Exploring Gunshot Wounds with a view to detect bullets or other foreign bodies suspected to be lodged in them" (Brit. Med. Jour., Dec. 23rd and 30th, 1871); "Ambulances and Ambulance Service" (1875); "The Appliances for Aid to the Sick and Wounded in War, exhibited at Brussels in 1876"; "Instruction on the Examination of Recruits" (1882); "The Sanitary Contrasts of the British and French Armies during the Crimean War," published in 1883, in which he brought to notice the special circumstances which exercised so disastrous an influence on our army in the Crimea, and the measures which were adopted to restore its health; "On Field Dressings for Use in Time of War" (1887); an essay "On Gunshot Injuries" in the successive editions of "Holmes' System of Surgery"—in the third edition (1883) it extended to rather more than 100 pages (this essay had been previously reprinted both in the United and Confederate States, and was officially distributed during the Civil War); "The New Military Weapons and Explosives" (Brit. Med. Jour., March 5th, 1892), being some observations which he forwarded to Geneva in support of a proposal to consider, at the approaching International Congress of Red Cross Societies at Rome, whether any modifications of existing field hospital arrangements were required owing to the general adoption of the new weapons and explosives in armies; and a biographical study of Richard Wiseman, Sergeant-Surgeon to Charles II., published in 1891. His *magnus opus* was entitled "Gunshot Injuries: their History, Characteristic Features, Complications, and General Treatment," the first edition of which he produced in 1877. It is the book which, next to Parkes' "Manual of Hygiene," is best known to the officers of the military medical services. A second edition, necessitated by the changes in the firearms and projectiles of all the leading armies, has just been issued from the press. It consists of nearly 800 pages, and occupied his attention to within a few weeks of his death. Sir Thomas Longmore has in this new edition endeavoured to bring his work up to date; on it he laboured but too well and

too continuously for his own welfare; we know that he spared neither time nor trouble on the endeavour, and we feel sure it will be widely appreciated. We have already briefly stated that Sir Thomas Longmore was a member of several learned societies. As a Fellow of the Royal Medical and Chirurgical Society he was a frequent attendant at the meetings, and read the following papers, which can be found in the Transactions: "Remarks on Two Cases of Kelis" (1863); "On the Classification and Tabulation of Injuries and Surgical Operations in Time of War" (1871); and "Remarks upon Osteo-myelitis consequent on Gunshot Wounds of the Upper and Lower Extremities, and especially upon the treatment of stumps affected with Osteo-myelitis after amputation necessitated by such injuries" (1865). To the Army Medical Department Reports he was also a frequent contributor. Among his papers may be mentioned "Remarks on some of the Prussian Arrangements for the Transport of Wounded in Time of War" (1870); the report of a case of "Transfixion of the Right Side of the Chest and Right Lung by a Lance, with Recovery" (1871); the Reports on Invalids admitted into the Royal Victoria Hospital, Netley, for wounds and injuries received in New Zealand and in Egypt during the campaigns of 1865 and 1882 (Army Medical Department Reports, 1866, 1883); a Description of a preparation of the upper part of a femur after gunshot fracture, sent to Netley for preservation in the Museum (1884); and a "Report on the Competitive Exhibition of Movable Hut-hospitals at Antwerp in September, 1885." In these reports also appeared the introductory address he delivered at Fort Pitt on the opening of the Army Medical School; a Lecture on the relations of the Army Medical Department and its officers to other departments of the army; Notes on the examination of visual fitness of recruits; a Summary of the numbers, classes, and results of the gunshot and sabre wounds inflicted during the Mutiny; Remarks on hand-wheel litters; and a description of the water-colour drawings executed by Sir Charles Bell illustrative of wounds received at Waterloo. Though his writings are thus shown to be almost exclusively confined to military and medical professional subjects, yet in his account of Wiseman he has given us a glimpse of his keen appreciation of the work of the historian and biographer, and allowed the outside world to know something of that inner nature, so well known to his friends, which was devoted to a wider literature.

On Feb. 11th, 1862, he married at East Claydon, Bucks, Mary Rosalie Helen, second daughter of the late Captain W. S. Moorsom, of the 52nd Regiment, by whom he had issue four sons and three daughters. It is not for us here to say much of his private life or of the charm of the home circle, of which he was ever the centre and figurehead: we have been writing of the man as we knew him in his official capacity. As, however, we have been admitted to see something of his home life, and have enjoyed the privilege of spending pleasant hours with him since his retirement, we may, perhaps, be permitted to touch on the singular charm of character and mind which he possessed and which endeared him to all hearts. Many of his younger friends were wont to wend their steps towards his home when in want of human sympathy and of the sound and ripe advice which were ever at their service. Passing from the environment of our age—of rush and callous cynicism—we have felt, when nearing the threshold of "The Paddock," as if we were breathing a purer air and entering an area of calm judgment and repose. Not a few of us have, we think, returned from visiting him braced with a better courage to fight life's battle, and some, when passing down the drive from his home, carried to higher realms of thought, have heard an echo of the late Laureate's lyre—

"A second voice was at mine ear,
A little whisper silver-clear,
A murmur, 'Be of better cheer.'"

In the drawing-room of this home, of which he was the light and life for over twenty-five years, hangs the replica of the portrait the original of which, painted by George Reid of Edinburgh and exhibited at the Royal Academy in 1887, now occupies an honourable position in the ante-room of the officers' mess at Netley. It was presented to the Army Medical Department by Sir Thomas Longmore's comrades of the Military Medical Departments as a testimonial in recognition of his great services. Both the portrait and the replica, which latter was presented to Lady Longmore, are excellent likenesses. He is represented, in undress uniform, in the act of delivering a lecture; and the artist has been singularly happy in catching that expression of earnest thoroughness

which was usual to him on such occasions. His death was terribly sudden, though to those who knew him well it did not come as a surprise, for during the last few years he had many times suffered from attacks of cardiac weakness associated with faintness and other warning signs. On the morning of Monday, Sept. 30th, he was apparently in his usual health, and at a quarter past seven o'clock said farewell to his son-in-law who had been staying with him; before 8 o'clock he was no more. Though his call came thus suddenly his friends well knew that he was ready, and that, inspired with a holier and sublimer faith than the great Roman orator possessed, he could with a more joyful anticipation exclaim: "O præclarum diem, cum ad illum divinum animarum concilium coetumque proficisci." From Swanage, Dorset, where, as had been his custom for many years, he had been spending a few weeks, his body, enclosed in a coffin of unpolished oak, was brought to Hamble, the village where he resided during his early Netley days, on the evening of Oct. 2nd, and at three o'clock on the following afternoon it was consigned to a grave on the north side of the churchyard, in the presence of his widow and family and a large gathering of friends. Among the latter were included the present staff of the Army Medical School and the military medical staff of the Royal Victoria Hospital, headed by Sir William Mackinnon, K.C.B., the Director-General. His old friend, the Rev. T. L. O. Davies, Vicar of Woolston, and the Rev. J. J. Curling, Vicar of Hamble, read the impressive service.

Our duty is all but finished; we have endeavoured to tell of the work of Sir Thomas Longmore, of the work of a man who ever trod strictly in the straight path, who did justice, and loved mercy. Of him we may truly say that no man rendered greater services to his Department, nor strove more in his generation to advance its interests, to promote scientific progress, and to raise to a high standard professional military education. In conclusion, we feel we cannot do better than quote the words which Sir William Mackinnon made use of at the meeting of the Senate of the Army Medical School, held in July, 1891, when giving expression to the unanimous feeling of regret felt on Sir Thomas Longmore's retirement from public life; he said that Sir Thomas Longmore "had not only raised the reputation of the Army Medical School as well as the Medical Service of the army generally by his great works on military surgery and ambulance transport and by his many admirable works and reports, but had achieved through the medium of these a reputation throughout Europe and America which reflected infinite credit upon the Service of which he was so bright an ornament."

WILLIAM HENRY BELLOT, M.D. ERLANGEN,
L.R.C.P. EDIN., F.R.C.S. ENG.

WE regret to have to record the decease of a venerable and highly respected member of our profession, Dr. Bellot of Leamington, who passed away on Sept. 24th at the advanced age of eighty-four years. He was the son of a Manchester surgeon and became a Licentiate of the Society of Apothecaries in 1833. In the following year the Royal College of Surgeons of England admitted him as a Member and conferred the Fellowship on him in 1852. For many years he practised in Stockport in association with his uncle, Mr. Bellot, and married the daughter of Mr. Killer, an old-established practitioner in the town. In addition to many other public appointments he was staff surgeon to the Cheshire militia and honorary surgeon to the Stockport Infirmary. In 1860 he took the diploma of L.R.C.P. Edin., and graduated as M.D. of the University of Erlangen in 1862. About thirty years ago Dr. Bellot took up his residence in Leamington, where he gave much of his attention to the affairs of the public institutions of the town, and up to the time of his death was on the committee of the Warneford Hospital. He has left a widow and family.

A MEETING of the South-Western Division of the Medico-Psychological Association will be held at Wonford House, Exeter, on Tuesday, Oct. 15th. Dr. Deas will provide light luncheon between 1.30 and 2.30 P.M. Wonford House is fifteen minutes' drive from Queen-street Station, and twenty minutes' from St. David's. Dr. Deas will open a discussion on the Uses and Limitation of Mechanical Restraint as a Means of Treatment; Dr. MacDonald will read a paper on Nursing; and Dr. Morton will read Notes on three cases of Spontaneous Gangrene.

NEWS SUMMARY

CALL TO BUSINESS MEN

To Local Service

Councillor R. N. Ruddle, regarding a Southampton Chamber of Commerce meeting on Tuesday...

PRETTY WEDDING

Ceremony at St. Mark's Church

For her wedding at St. Mark's Church, Southampton, on Saturday afternoon...

ROTARY ADDRESS

On Work of British Legion
Speaking at Southampton Rotary Club on the British Legion and its work...

AMBULANCE FUNDS

Southampton Ambulance and Marine Club has a white flag in the laundry...

DRAPERY STORE CHANGE

Mr. Justice Parker, in the Court House at Southampton...

PREDECESSOR CARLILE AT ST. ALBAN'S

Predecessor Carlile at St. Alban's
The service was held at St. Alban's Church, Southampton...

LEGION TREAT

Two hundred children from the South-Western Hotel...

CAMERA AS DETECTIVE

At Southampton Camera Club headquarters...

AWARD OF DAMAGES

With Poor Chance of Getting Them

Lambert Gardner and his wife of Southampton...

FOR ENGINEERS

Special Films of the Queen Mary

Members of the southern branch of the Institution of Mechanical Engineers...

SCOT'S FESTIVAL

Members of Southampton Scottish Association and their friends...

STREET CROSSINGS

Arrangements are being made for the widening of the roadway...

NEWTOWN COUNCILLOR

Councillor W. Lewis has been elected as councillor for the Newtown division...

BAKERY CLASSES

Organized recently under the auspices of the Southampton Women's Committee...

REASON FOR RETIRING

Mr. Geoffrey Hill, M.P., referred to his reasons for not becoming a Member of Parliament...

WOMEN INDEPENDENTS

Southampton Women's Independent Association held a meeting...

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BRITISH MEDICAL ASSOCIATION.
SUBSCRIPTIONS FOR 1886.

SUBSCRIPTIONS to the Association for 1886 became due on January 1st. Members of Branches are requested to pay the same to their respective Secretaries. Members of the Association not belonging to Branches, are requested to forward their remittances to the General Secretary, 161A, Strand, London. Post-Office orders should be made payable at the West Central District Office, High Holborn.

The British Medical Journal.

SATURDAY, JUNE 5th, 1886.

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**THE BRITISH ASSOCIATION FOR THE
ADVANCEMENT OF SCIENCE.**

In our last week's issue, we called the attention of our readers to the meeting of this Association, which is to be held at Birmingham in September next. Several of the sections under which the work of the Association is conducted, do not come under the scope of the medical profession; and hence, perhaps, many members of our profession, busily engaged in practice, may entertain the feeling towards this Association that its proceedings concern them little.

The Biological and Anthropological Sections, however, are intimately connected with medicine; and, consequently, may fairly be considered of interest to the profession. Under the former are included, not only vegetable morphology and zoology generally, but human morphology and physiology. Indeed, at the last meeting of the Association, held at Aberdeen, it was found necessary to split up the Biological Section into three subsections: namely, Botany, Zoology, and Human Anatomy and Physiology, and in this last subsection many interesting and instructive communications were made. Till two meetings ago, Anthropology was a subsection of Biology, but its growing importance caused the Council of the Association to sanction its being constituted into a section by itself. An idea has been erroneously entertained by many, regarding this section, that the papers communicated in it are confined to descriptions of the skulls and other osteological characters of the various races of mankind, manners and customs, and archaeology. The range is, however, much more extensive, and includes subjects on which medical men are pre-eminently qualified to contribute. Anthropology embraces, essentially, seven branches of knowledge: namely, Human Anatomy, Physiology, Embryology, Psychology, Sociology, Pathology, and Teratology; accessory only to these are Ethnography, Archaeology, Language, and other kindred subjects which it also includes. It will be evident, therefore, that Anthropology proper can only be logically treated of by medical men and naturalists; its accessory branches, on the other hand, do not require the same kind of knowledge, and are chiefly pursued by persons not in our profession.

Questions which are engrossing the attention of the Collective Investigation Committee of the British Medical Association form an important section of the essential subjects included under the term Anthropology. The work of the Investigation Committee of our Association has been chiefly confined to investigating the prevalence of certain diseases in different parts of the country, and to questions of infection, heredity, etc.

It is possible, and also probable, that race peculiarities may exercise a considerable influence in determining the prevalence of certain diseases in certain places. The various races forming the population of the British Isles, though originally distinct, have now become very much blended together, so that it is a difficult task to ascertain what influence race exerts on disease. Still, it may be possible to do something to elucidate this important point; as we know that, in certain parts of the country, certain races have been more especially located, and the labours of Dr. Beddoe show that, in these places, the people still retain many of the physical characteristics peculiar to the race to which they belong.

If we extend our field of observation on the race-character of disease to other parts of the British Empire, the investigation will probably show more apparently that race does exercise an influence over disease. Medical men who have had experience in practice amongst the natives of various races under British rule, may be able to bring forward evidence as to whether this is the case or not, and so furnish important information on a subject which has been comparatively little studied; also the International Investigation Committee, appointed at the last meeting of the International Medical Congress, may be expected to take cognisance of, and materially extend our knowledge of, this aspect of disease.

As illustrative of the results of research in this department of Anthropology, we may incidentally refer to a paper, by Mr. Jacobs, published in the *Journal of the Anthropological Institute* last year, which contains many interesting observations on racial peculiarities of the Jews. In this paper, he points out that they do not enjoy immunity from certain diseases, notably phthisis and cholera, as is frequently stated, but, on the other hand, he found that there is some indication that they are more liable to diabetes, hæmorrhoids, insanity, blindness, and defects in special organs of sense.

The effects of consanguineous marriages in the production of diseases and teratological conditions, is another question on which medical men can, by recording their experience in practice, contribute greatly to the pathological and teratological aspects of anthropology.

It would be easy to mention many other subjects of medical anthropology upon which the Section would be glad to receive contributions from medical men, but we have already said enough to show how intimately this Section is connected with our own profession. The Secretaries of the Anthropological Section, Drs. Garson and Saundby, who are medical men well known to the profession, will be glad to give every information they can to those who contemplate making communications to the Section.

BIRTHDAY HONOURS TO MEDICAL MEN.

THE list of birthday promotions and dignities includes honours to more than one member of our profession; and, although circumstances connected with the bestowal of these dignities and promotions are complicated by correlative considerations of a somewhat sadly qualifying character, yet it will be generally felt by the profession that the impulse which has led to this bestowal of honours on medical men in the civil and military services deserves grateful acknowledgment, and has been well directed.

Dr. Sieveking and Professor Douglas MacLagan are veterans of honourable position and considerable literary and scientific achievement in the profession, whose life-long services have secured to them universal consideration and esteem, which it is

gratifying to see recognised by the public bestowal of distinctions from the Crown; and both will receive the hearty congratulations of their friends, and have the satisfaction of knowing that the gracious act which confers honour upon them is ratified by the approval of their fellows.

Mr. John Tomes has, throughout his successful career, held an unique position of scientific attainments and administrative capacity. To no man is dentistry in this country more indebted for the elevation of its professional status, nor has anyone taken a more important and useful part in promoting educational and legislative reforms which have, of late years, established the dental profession on its present high platform. Mr. Tomes has, for some years, retired from practice. The honour now conferred upon him will dignify his retirement. It marks justly the great service which he has rendered.

Surgeon-General Longmore, C.B., has long been a leading figure in the military medical department. From his earliest pupilage at Guy's Hospital, he was marked out by his personal qualities, his high intelligence, his admirable judgment, his unflinching courtesy and goodness of heart, his assiduous devotion to duty, and his gifts of eloquence, for a career of eminence. His record in the Crimea and in India was one of continuous and admirable achievement. As Professor of Military Surgery, his reputation is European, and his works are standard. But, above all, he has rendered never-to-be-forgotten services in connection with military education and organisation. Parkes, Longmore, Maclean, and Aitken are names indissolubly connected with the reconstitution of the Army Medical Service, and with the progress of that great educational establishment at Netley, and its connected hospital service, which are among the most notable institutions of the country. In their hands, they have become models of excellence and of efficiency. There is no man more beloved and more honoured, both in civil and in military life. It is universally felt that a more graceful and suitable honour would have been promotion from the grade of C.B. to that of K.C.B. The grudging parsimony with which an arbitrary and illogical limitation is maintained of the number of K.C.B.ships, which can be distributed in the Army Medical Department, is put forward as the reason for not conferring a promotion which is, we trust, only deferred. At the dinner of the Army Medical Department, held this week, this view was emphasised by the most enthusiastic expression of opinion. While heartily congratulating Sir Thomas Longmore, C.B., on the honour of knighthood, we must express the hope that it is not intended to take the place of that promotion in the Order of the Bath to which he is eminently entitled. To the honour of Civil Commandership of the Bath, conferred on Dr. Orange, we refer elsewhere; but it is saddened by the reflection that it is given to him on his resignation, owing to a failure of health, arising from injuries received in the public service. We have to conclude with a reference to the sad calamity which is coincident with the knighthood of Mr. White Cooper. That accomplished and amiable surgeon has not lived to receive the honour of which his friends heard with so much pleasure.

COMPARATIVE OBSTETRICS.

In all sciences and arts there exists a corner open to the seeker after the curious, the uncommon, and the extraordinary. No subject or pursuit, arid or even repulsive though it be, but can afford the material for an interesting sketch or series of sketches, to him who possesses the peculiar turn of mind necessary to this kind of research. To detect romance in the study of obstetrics will seem, to many people,

analogous to Samson's feat in resorting for honey to the decomposing carcass of a lion. This, nevertheless, is the task which an ingenious Frenchman has set himself, and which he has fulfilled in a very erudite little work on the various modes of conducting labour in different climes and races. It must be borne in mind that the ethical part of obstetrics is, in reality, less a branch of medicine than a heterogeneous collection of customs and traditions, handed down from generation to generation, among nations uncontaminated by our civilisation, and, consequently, innocent of any rational knowledge of obstetrics as a science. Imitating, to some extent, the arrangement of the ordinary text-books, Dr. Verrier commences by a little comparative anatomy of the pelvis, which he classifies into three general shapes: the Caucasian, the Asiatic or round pelvis, and the Oceanic pelvis, the characteristic feature of the latter being an unusual conjugate diameter. He is disposed, though possibly on insufficient grounds, to contribute the comparative ease of delivery in the females of savage races, to the more primitive shape of the pelvis. Further data are required to elucidate this point, which, in any case, is probably the result of several coincident causes.

Dr. Verrier has illustrated his book with a series of little drawings for the purpose of aiding the comprehension of the *modus operandi* of the different races, more especially in the matter of posture. He divides postural devices into five classes, comprising the method of delivery in the erect position, or on the knees, inclined forwards or backwards, seated on the ground, or in the arms or on the knees of an assistant; on the orthodox obstetrical chair; and, lastly, the classical horizontal position, which may be dorsal, as in France, lateral, as in England, or abdominal, as in some parts of Africa. The sketches illustrating these different positions are exceedingly curious, as may be imagined. In one we are treated to the picture of the robust husband, on whose knees the parturient woman is sitting encircled by his arms, supplying a rude additional expulsive force by means of a bear-like hug. In another, the recalcitrant fetus is urged to appear, by placing the female on the ground with the face downwards, and standing on her back. Various other manipulations are also resorted to, such as tossing the unhappy female in a blanket or other mode of the rough and tumble kind. Unfortunately, statistics are wanting as to the results of laborious confinements under these circumstances; but it is quite possible that, considering the favourable conditions of the environment, they might compare advantageously with the results in more civilised communities, where the benefit of enlightened treatment is not invariably to be obtained, and where the hygienic conditions are often adverse. On the whole, the most generally received is a crouching posture, similar to that adopted for the purpose of defecation. The volume terminates by two chapters devoted to subjects not commonly treated of in works on obstetrics, namely, ethical mutilations of infants and infanticide.

The subject is full of interest to the medical man in whom the exercise of a laborious profession has not stifled the capacity for enjoyment of what we may term technical curiosities. It will interest the physiologist by the information given on the question of the appearance of the menses under different climatic conditions, and the student of evolution from the author's remarks on the anomalies resulting from cross-breeding.

At the last meeting of the American Surgical Association, which was held in Washington on April 30th, Sir William MacCormac was elected an Honorary Fellow of the Society.