

On the mode of selecting and remunerating medical men for professional attendance on the poor of a parish or district: read before the Hunterian Society / [Thomas Hodgkin].

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ON THE
MODE OF SELECTING AND REMUNERATING

MEDICAL MEN

FOR

PROFESSIONAL ATTENDANCE

ON THE

POOR OF A PARISH OR DISTRICT:

READ BEFORE THE

HUNTERIAN SOCIETY:

BY

THOMAS HODGKIN, M. D.

SUBMITTED TO THE SERIOUS CONSIDERATION OF ALL WHO TAKE
AN INTEREST IN THE WELL BEING OF THEIR
POORER NEIGHBOURS.

LINDFIELD:

PRINTED BY W. EADE, AT THE SCHOOLS OF INDUSTRY.

MDCCCXXXVI.



ON THE
MODE OF SELECTING, &c. &c.

The mode of selecting and remunerating medical men for professional attention to the poor of a parish or district, is a subject of much more importance both to the public and to the medical profession, than it appears to be generally regarded.

When articles for food, clothing, or the like, are required to a large extent, the method of obtaining the supply by tender is doubtless the fairest and most advantageous which can be employed, since if suitable persons are entrusted to select the contractor, and to see his bargain duly executed, the public may have the assurance, that their money is laid out in the most advantageous manner, and the unsuccessful candidates for the contract will feel that they were only rejected, because another could execute, as well as offer, better terms than they had tendered.

With respect to medical attendance the public has at present no adequate means of testing the comparative value of advice offered, or of the amount of service rendered. The plan, therefore, of giving medical appointments to those who offer to attend the greatest number of patients, or to visit over the largest district for the smallest sum, will not, as in the case of corn, soap, or coals, insure the most profitable return for the amount paid. In making a medical appointment, there is another difficulty, besides that of estimating the value of the professional assistance given in return for the money paid. It is believed, both in and out of the profession, that the medical man who attends a parish or district, receives in return an indirect benefit in the form of reputation and connexion. The value of this indirect reward is of necessity absolutely uncertain, and it is almost always over-rated. The natural consequence of this is, that medical men in competing with each other, often pay little or no regard to the salary, the only really appreciable return for their services; and they may be, and often are out of pocket, if they secure their election, and gain the appointment. If the medical man so appointed faithfully discharge his duty, he is bearing an onerous burden without remuneration; and it is no more reasonable to expect this more than gratuitous, this expensive service from the medical man, than it would be to expect from the butcher a regular supply of haunches of mutton for no other return than the hope that he may be able to sell the remainder of the sheep. It is too much to expect, that every medical man, who accepts a parish

appointment, will be satisfied to make so great a sacrifice for the good of the public. It is only reasonable to suppose, that there must be a strong inducement on his part, as soon as his eyes are opened to the injurious bargain which he has made, to reduce, as nearly as possible, to the minimum, the amount of time and medicine bestowed; and every one whether in the medical profession or not, who is at all acquainted with the nature of medical advice, must be well aware of the impossibility of finding any definite line, by which the justifiable minimum of attention and medicine can be marked out.

For the non-professional public to be fully aware of the evils of this mode of obtaining parish medical advice, it may be well to illustrate the subject by a few examples. The first example which I shall cite, is one in which both the medical man, and the public employing him, may perceive the least room to object. A medical man in large practice and high reputation, continues to attend a parish for a trifling sum, partly because he does not wish a rival to obtain an office, which he may conceive may render him more formidable, but principally to give practice to young men, with whom he may have received good apprentice fees. He may reconcile this to his conscience by thinking that if he keep the young men attentive to their duty, his poor fellow parishioners will be at least as well attended to as the poor of many other parishes, and that they may have the advantage of his own superior advice whenever a serious or difficult case occurs. The public however is not properly served, since in most cases the contractor himself is only nominally concerned, and the custom of allowing apprentices to practise upon the poor of the parish, seems too much like making the *Experimentum in corpore vili*. There can be no doubt, that serious evils may arise from this practice. Symptoms may be misunderstood, and coming danger may not be perceived. When at last it is recognised, and the ostensible medical man is ultimately called in, it may be too late to administer relief. The public suffers in another way from this premature practice of apprentices, who until they have attended some medical school, can scarcely be said to have commenced their professional education. These young men are in great danger of becoming entangled in the trammels of routine or empirical practice, which will interfere with their future studies, and from which their future acquirements may not always extricate them. The public is therefore injured through this influence, exerted on the rising members of the medical profession. Sometimes the contractor does not delegate his duty to young and unexperienced hands, but finding his parish duties more extensive and oppressive than is consistent with the small sum he receives, and probably feeling bound to pay the greater attention to his private practice, on which depends his subsistence, he endeavours to reduce his parish labours to the smallest amount. The condition of patients, especially if they have been seen already, is frequently judged of by reports, and these reports

are so far from being made in a professional manner, that they are even conveyed through children and ignorant persons. The medicines are consequently prescribed almost at random; yet as this means of saving time and trouble, may often be found successful, there is great danger of lapsing into a habit from which the greatest evils may result. Incipient pleurisies and other inflammatory disorders, for want of being arrested at the outset, become increasingly severe, and either terminate fatally, or leave the patient the victim of a chronic disease, which incapacitates him for work, which he might have otherwise performed. In these cases we not only have defective medical advice founded on imperfect data, and inert or inefficient treatment employed, because active measures would not be prescribed, and as far as bleeding, cupping, and the like are concerned, would be out of the question, but much is left to be performed at the suggestions of ignorant but well meaning neighbours, or of presumptuous quacks. Again the parish stipend, reduced by the injurious mode of competition just described, precludes the possibility of employing means of an expensive character, even when the necessary time and attention have been bestowed, and the necessity of their employment has been clearly ascertained. For example, leeches, however necessary, are either wholly withheld or inadequately employed. The same may be said of Quinine, Sarsaparilla, and other invaluable remedies, for which we have no equivalent substitute. Although it would be certainly undesirable to encourage the employment of very expensive means, when there are others far less costly and equally efficacious, yet that system must be confessedly bad which ties up the hands of the practitioner from having recourse to all the resources of his art, and prevents him from employing the means of relief which he is accustomed to administer. I believe that volumes might be filled with the evils arising from the present system, operating in the different modes, which have now been pointed out. There are other evils, which, not bearing directly on the poor, are foreign to the present object. I allude to the jealousy and ill will, which this vicious system is calculated to excite among medical men; and to the abundant opportunities for scandal, which it supplies.

Before I proceed to notice the principles, on which depend the formation and operation of self-supporting dispensaries, which, with many other advantages, afford the best corrective to the evils complained of, I am disposed to make a few remarks respecting the election of medical officers to public situations generally. In the first place, the pecuniary consideration should be wholly excluded from the ground of competition; a fair and adequate sum, adapted both to the expenses to be incurred, and to the pecuniary resources of the remunerating body, should be fixed and stated. Those medical men only, will offer themselves, to whom the terms may be acceptable, and the most suitable of these would not have his rejec-

tion placed at the mercy of an inferior individual who may think fit to offer inadequate terms. Nor should the election depend on votes obtained upon the strength of recommendation and connexion. A suitable person *may* be chosen by such a process, but this is not necessarily the case. In many cases those most prominent in recommending and canvassing for the competitors, speak from imperfect knowledge of their individual merits, and with less of their comparative merits as contrasted with their rivals. The election of medical officers, even where the competition on this principle is the most open, is attended with the various evils of loss of time, of waste of money, of party-spirit, and of the uncertainty of appointing the most suitable man, evils against which cannot be placed even the chance of raising the standard or reputation of the medical profession. The choice at an election of a medical officer ought solely to depend on superiority of medical or professional ability, made evident by various and efficient tests. A mere oral examination would unquestionably be insufficient. Moral character, which certainly ought always to be kept in view, cannot, with propriety, be made the subject of competition: and individuals unsuitable in this respect, might be excluded by ballot from the list of competitors.

If the employment of the ballot in this case be objected to, as establishing a sort of secret tribunal, which might stain a man's reputation, without his having the opportunity of defending himself, and as consequently liable to become a means of grievous oppression, another plan might be adopted. I have proposed the ballot with the view of saving the candidate's feelings, since his rejection might depend on a variety of circumstances, some of which might not injure his general reputation; whilst others would decidedly have that effect.

As a substitute for the ballot, the moral and physical character of the candidates might be classed by each of the judges separately with relation to these qualities only, and without reference to the professional test, which might subsequently be employed. The aggregate of these lists might be supposed fairly to place the candidates as far as their non-professional qualifications are concerned. Established inferiority in the moral or physical requisites might thus be brought to invalidate claims grounded on evidence of the highest professional attainments. In such a case the candidate who may establish his right to the second place for his acquirements, might be properly appointed, provided that in other respects he had a very high standing. The result of the appreciation of character ought of course not to be made known, until the competition for medical knowledge has been terminated. Oral examination, though not solely a fair means of testing medical acquirement, should be employed as one of the tests in conjunction with written answers to the queries proposed. Practical tests in Anatomy, Surgery, and Medicine, might

also be employed in the dissecting room, and at the bed side of the patient. This examination should be made in public. Such competitions would be a security against the appointment of men of defective ability; they would bring real merit into notice, and secure solid acquirement from being eclipsed by the superficial and illusive recommendation of manners and address, or by the adventitious circumstances of connexion and patronage, priority in canvass, and other similar influences. Substantial advantage would also be obtained as respects the unsuccessful candidates, since their professional acquirements would be made known; and he, who should place himself high on the list, though he may not attain to the first place, will nevertheless have raised his character on a sure basis, and recommended himself to the confidence of his neighbours. The candidates, instead of wasting their own time, and that of their friends, in a laborious canvass, would be diligently employed in keeping up and adding to their professional knowledge. The time so employed in preparation for the contest will have been advantageous to the unsuccessful candidates as well as to the successful one, and the public also will thus be indirectly benefitted.

A great advantage to be expected from these public competitions would be the general diffusion of correct ideas respecting the qualifications necessary to make up an accomplished medical man. Not only a serious blow would be given to the strong holds of professed quackery, but the public would attribute less than they do at present, to the pestle and mortar—to bottles of coloured water—to the gold-headed cane—to a solemn and ominous expression of countenance—to quaint and technical phraseology—or even to those kind and assiduous attentions, which, though justly commendable in themselves, and not to be dispensed with in the intercourse with the sick and their anxious relatives, are unavailing substitutes for sound knowledge and skill. This illumination of the non-professional public would not merely affect those medical men who might be engaged in a *concours*; its penetrating rays would discover real merit, although too modest to enter the lists; and they would expose ignorance, although too wary to make the public exposure of its deficiencies.

Although, in this country, competition, founded on the test of acquirements, has seldom if ever, been resorted to, for the purpose of conferring medical honours and appointments, yet we have before us satisfactory proof of its efficiency with respect to other departments of knowledge. We see its influence in the conferring of honours, fellowships and other prizes at Oxford and Cambridge. We may observe the vast extent of acquirement, which is necessary for the attainment of the highest honours, and the intense and continued application necessary to enable the candidates for these distinctions to compete with success or even with credit to themselves. Its influence must extend to all, scarcely even excepting those who might otherwise be satisfied with

merely breathing the air of the University. If we contrast the state of classical and mathematical education at these Universities, in which the system of competition has been long in operation, with that of the science of medicine, upon which no such influence has been exerted, we cannot fail to be struck at the great difference which exists. The result of the want of competition, and even of efficient public exercise without competition, may be seen in our most distinguished medical schools. The man who passes his examination in a manner most creditable to himself, remains on the same level with him, who has barely managed to escape rejection. The conferring of a degree in this manner degrades the one and elevates the other, and they start from the same point as candidates for public favour. Knowledge disproportioned to his commencing experience may give that cautious prudence to the one, which the public may mistake as the evidence of incompetency; whilst the other, blind to many of the difficulties before him, and exulting in his title, may proceed with a boldness, which prepossesses the public opinion in his favour. It must be confessed that the greater extent of acquirement of late exacted by the various licensing boards in this country, and the increased rigour of the examinations, and more especially that of the Apothecaries' Company, has tended materially to improve the professional education of those who design to attach themselves to any of the departments of our art. Nevertheless the root of the evil remains; the student is urged on by the danger of defeat behind him, rather than allured by the prospect of success before him. I believe that almost the only instances to which I can refer, in which, in this country, successful application to medical studies has been rewarded by competition, have been the prizes given in certain schools. The experiment, notwithstanding the small number of competitors, has been productive of manifest advantage.

It is to the Continent, and more especially to France, that we must look for the result of the system carried out to its full extent. Although, as I am well aware, objections have been made against some particular *concours*, the benefits to be derived from the system have been very apparent. Nearly all the public medical posts, from the lowest class of dresserships in the hospitals up to the highest medical professorships, are filled by those who have proved their superiority in their respective classes by more or less rigorous competition. Not only are the candidates numerous, but the occasions of competition are frequent; and as they do not merely lead to the empty distinction of possessing a medal, or some other badge of superiority, but to the attainment of some posts of more or less active, and in many instances lucrative employment, the men whom they bring forward to distinction, are not merely those whose memories are stored with knowledge obtained by dint of indefatigable labour in the retirement of the closet, but rather those, whose theory

is combined with practice, and who with respect to the higher offices at least, not only perform well the duty assigned to them, but by the force of their example exert a beneficial influence on those who hold inferior posts. The host of distinguished characters in the different departments of the medical profession, and the many important contributions which they have made to medical science during the last thirty years, strongly attest the advantages to be derived from this system.

Although there are very many medical offices in this country, to which appointment by competition could not be made compulsory by law without an interference with existing privileges in a manner and to a degree which I am not prepared to recommend, yet I conceive that the poor law commissioners have at the present moment, a most valuable opportunity in their power, which may enable them, by the introduction of this system into the disposal of parish medical appointments, to confer a lasting benefit on the profession, and to secure essential advantages for the poor, the great object of their labours. They would, by the same means, remove from themselves every ground of objection, now more abundantly than justly raised against them by those medical men, who feel the baneful and oppressive influence of that system of pecuniary competition, to the operation of which they have unfortunately, if not unprofessionally, lent themselves. If the appointment to parish medical offices were once placed on the footing now proposed, I am persuaded that the voluntary adoption of the same system would shortly follow with respect to many other medical appointments. The most important, because the most generally influential change of this kind, would be the application of this system of concours or competition to the appointment of medical students to the post of dressers, clinical clerks, and the like, in which their talents for employing as well as acquiring knowledge, are called into exercise during their pupilage. It would also have the advantage of acting upon the young, to whom such a change of system would prove less irksome than to those who may have been more engaged with practice than with study. It would indeed be unreasonable to expect our elder medical brethren to descend into the arena of these contests, seeing that they must long since have laid aside the harness, and been thrown out of that kind of training, which would be essential to those who would enter the lists with success. Yet we cannot dispense with their valuable experience and practical tact, and we must not allow their hard earned reputation to be depreciated. On this ground a certain number of this class should for the present be appointed to public service. In this manner the change of system would be gradually introduced without being oppressive to any. To the younger members of our profession, and to those who shall hereafter recruit its ranks, I see so many important benefits in store from the general adoption of the system of intellectual competition, that I am anxious

earnestly to recommend it to their favour and patronage. In the first place, they would be led to lay a firm foundation in a superior general education: in the next, every branch of rudimental professional knowledge would be studied with increased zeal and interest. The connexion between theory and practice would be more fully and generally understood. The student and the youthful candidate for the patronage of the public, by having their progress and acquirements tested at various stages of their course, would ascertain their points of weakness and deficiency on the one hand, and derive satisfaction and encouragement from their solid acquirements on the other. "In which methodical course," to use the words of our immortal Milton, "it is so supposed they must proceed by the steady pace of learning onward, as, at convenient times, for memory's sake, to retire back into the middle-ward, and sometimes into the rear of what they have been taught, until they have confirmed and solidly united the whole body of their perfected knowledge like the last embattling of a Roman legion."

I must not omit to mention that the credit of having, at least on one occasion, adopted this system in the appointment of a dresser, belongs to Bransby Cooper. I must likewise observe that in contemplating this plan which I have long since recommended, there would be no necessity for changing any of the existing arrangements connected with these appointments. A similar system of competition might also be adopted as a voluntary measure by all those institutions, whose medical officers are now appointed by a large body of electors, which at present occasions fatiguing, expensive, and useless exertions in canvassing. If these changes were effected, it is probable that the appointment of military and naval medical-officers for home and foreign service, would be placed on the same footing. There would moreover be brought forward a considerable number of well tried and proved individuals from amongst whom unexceptionable appointments might be made in cases in which public competition might appear objectionable.

The only valid objection to public competition, namely that examination is not an adequate test of a man's powers and attainments, may, I believe, be wholly overcome by multiplying and varying the tests in the manner to which I have already alluded. He who cannot distinguish himself either by oral or by written examination, by the exhibition of anatomical knowledge or by practical dexterity, or by the perception or just appreciation of symptoms when placed before him, must be so deficient in knowledge or in the power of applying it, or he must be so exquisitely sensitive as to be altogether unfit for public service. Another practical difficulty presents itself in the appointment of judges to examine and decide upon the respective claims of the competitors. I am persuaded that this is not insurmountable, but the mode of overcoming it must be so varied according to the nature of the office contended for, and the

situation in which the competition is to take place, that it would be a vain attempt for me to enter upon the discussion of it on the present occasion.

I shall now proceed to the consideration of self-supporting dispensaries. They may justly be regarded as the best, and, at the same time, as the most economical means of supplying prompt and efficient medical assistance to the working classes. Their important advantages are not, however, confined to the administration of prompt and able succour to physical suffering. They have a strong tendency to maintain and elevate the moral character, since they are calculated to avert those calamities, which, commencing in sickness, end in the absolute degradation of families, once respectable in their poverty. Self-supporting dispensaries contribute powerfully to maintain independence, and encourage a spirit of prudent forethought amongst the poor and operative classes; and in proportion as these effects are produced, must they raise the character and diminish the burdens of the district in which they are in operation. Great praise is therefore due to H. Smith of Southam for the benevolence, zeal, and perseverance, which he has displayed in commencing and promoting these valuable institutions.

The self-supporting dispensary, as its name implies, is maintained by the contributions of those for whose benefit it exists. Individuals or families of this class who wish to participate in its benefits, are expected to attach themselves to it when in health, and to continue to support it by contributions paid in advance. The sum required to be annually paid by each member is very trifling, and the subscriber, in return for it, is enabled in the event of sickness to obtain advice and medicine without delay, and without either the dread of incurring a long and burdensome bill, or the annoyance and degradation of begging, perhaps with many unsuccessful efforts, a common dispensary ticket or admission to an hospital. I shall not at present consider the mode in which the rate of subscription may be fixed. A payment of about four shillings annually for adults, and considerably less for children, has been found sufficient where the plan has, as yet, been tried. That is to say the expense of medicines and compounding prescriptions, and the fees of the medical officers have been covered by it. There has been, however, another fund, auxiliary to that raised by the ordinary members, and produced by the subscriptions of those in richer circumstances. This fund has been required in the first instance to provide the necessary apartments, shop, furniture &c., and is afterwards employed to keep them up, and to supply various articles of comfort in aid of medicine and advice in the most urgent and necessitous cases occurring among the sick members.

Several medical men are attached to one dispensary, and it is left to the choice of the patients to seek the advice of whomsoever they may prefer. It may happen that all the medical men of the district

are attached to the dispensary, in which case the patient's choice of his medical attendant will be as free as that of any individual who becomes a private patient. Although this freedom of choice is left to the members of the dispensary, it is understood that the patients can only consult those medical men who are the accredited professional officers of the institution. It would not do for every one who may style himself a professional man, and who may live within the district, to see patients and send his prescriptions to the dispensary without any check.

The prescriptions are put up in the dispensing shop of the institution, and by an authorised person in its employ. The plan of allowing the prescriptions to be prepared and sent forth from the premises of medical men who may choose to call their surgeries self-supporting dispensaries, opens the door to great and serious abuses, and is therefore justly reprobated by the intelligent founder of *bona-fide self-supporting dispensaries*.

By a distinct registration and subscription, obstetric assistance is placed within the reach of subscribing females.

Sick persons who have not already subscribed to the dispensary, are allowed to take advantage of its benefits by the payment of half a-year's subscription in advance, provided two other individuals not requiring assistance, join at the same time, and also pay their subscriptions in advance. Benefit societies are allowed to avail themselves of the dispensary in order to provide medical assistance for their members by payment of a subscription proportioned to the number of members. The members of such societies are admitted on rather lower terms than individual subscribers, probably in part because the trouble and expense of collecting is diminished, and perhaps in part because of the fact that membership of one of these societies implies that the individual belongs to a class of which the average health is comparatively good.

The poor relieved by parishes, or by non-medical charitable institutions, have sometimes been permitted to participate in the advantages of the dispensary, by means of tickets of admission, which parishes, or the institutions alluded to, are allowed to purchase from the dispensary. At the same time a distinct line of demarcation is drawn between this last class of patients and the regular subscribers to the dispensary. Without this distinction to secure superior advantages to the subscribers, the important benefit to be derived from self-supporting dispensaries as the means of promoting a prudent fore-thought amongst the working class would be very much done away with.

There are other details of arrangement connected with the operation of self-supporting dispensaries, which it is needless for me to take up your time by particularizing. That which has been already advanced, is sufficient to shew on principle, that they are calculated to promote prudence and fore-thought amongst the class, who

derive many of their calamities from the want of these virtues ;—that they serve as a guarantee to the poor against the overwhelming pressure of heavy doctors' bills, incurred by protracted illness, privately attended, as well as against the evils of parish-medical assistance inefficiently administered ;—that they afford an equal guarantee to the medical practitioner against a long list of bad debts, and enable him with less expense to himself, and with better chance of success to establish his own reputation on proofs of benevolence and skill.

That these anticipated advantages are not merely imaginary, has been demonstrated by the experience of many self supporting dispensaries established in different parts of the country, and which have existed for a sufficient length of time to exhibit their practicability in a pecuniary as well as in a medical point of view. The plan of self-supporting dispensaries is completely in unison with the principles upon which the new poor laws have been framed, and is cordially approved by the commissioners and other officers entrusted with the charge of carrying them into effect. At the same time it is undesirable that these dispensaries should be established by any direct interference of theirs, since one of their most important objects, namely, that of raising the working class above the rank of paupers, would in degree be defeated by making their establishment a part of the duty of those employed in administering the poor laws. It would also be impolitic as respects the success of the institutions, since many of those for whom they are designed, would be more deterred from joining them by the idea that their object is to reduce the poor rates, than attracted to do so by assurances, that their main object is to supply the working class with the most effectual assistance in sickness, and to increase and maintain their prosperity in health. The establishment of a dispensary should originate with those who, in making these assurances, are removed from all suspicion ; who can be heard with confidence when they state the manifold advantages of the plan, and whose personal influence may give a bias in its favour, rather than against it. It should be clearly set forth that the self-supporting dispensary is as necessary and useful to the mechanic and the labourer, as assurance against fire is to the wealthy owner of houses and other valuable buildings ; and that the payment of a small sum is made the means of protection against heavy and ruinous loss. When with these views properly placed before them, the most industrious and meritorious of the working class in any district have established a self supporting dispensary, and have experienced its advantages, the time will be arrived at which the guardians of the poor may seek to obtain from the dispensary, medical assistance for any sick poor to whom it may be found expedient to afford some relief without admission to the poor-house. Such addition to the class to be relieved by the dispensary would probably require an

addition to the medical staff. Whatever may have been the mode in which the medical men first appointed were selected, those who may be subsequently appointed, whether as additional medical officers, as in the case just supposed, or as substitutes to fill vacancies occasioned by the death or retirement of any medical officer, ought to be selected by the method of *concours* recommended in another part of this essay.

It might be found expedient for various reasons to let the appointment of the medical officers be for the term of five years, and the reappointment of any medical officer for a second term should be discouraged, though it could not with propriety be wholly interdicted. A period of five years is perhaps as long as any medical man would be found willing zealously and completely to discharge the duties of the office in the mode in which they ought to be performed. For not only should the poor receive the requisite care, but certain statistical enquiries and records should be made, which would be of great value both to the public and to the profession. As private practice is unfavourable to the prosecution of such researches, it is the more desirable that the opportunities of a public description should not be neglected in any district. In five years the medical officer will probably not only become weary of his office, and consequently somewhat lax in the discharge of these accessory duties, but he will have reaped, on his own account, all the benefits which the circumstance of his connexion with the dispensary could afford him; and as not only the medical man but many of those who had been his dispensary patients, may in the interval have improved their pecuniary recourses, his secession would have the effect of removing from the dispensary those members, who ought to reward the medical man on a different and more liberal footing.

Where the parishes have the means of availing themselves of a self-supporting dispensary, for the purpose of relieving sick poor at their own homes, the duties of the medical man directly appointed by the parish would be confined to the poor-house. The demand on his exertions and time would be far less than has hitherto been the case, and consequently whilst but a small fee would be required, professional men of accomplishment and experience would not be unwilling to become candidates for the office.

I do not conceive it necessary that I should at present more minutely detail the means by which the selection and remuneration of medical men for parish service may be rendered much more satisfactory, both to the profession and to the public, than they can be by the operation of the present system.

I trust my brethren in the profession will pause before they condemn me as guilty of needlessly seeking to introduce innovation and change in what I have already advanced. The evils to which I have alluded, have been long perceived and lamented by many worthy and honourable members of our profession. In the transac-

tions of the associated apothecaries and surgeon-apothecaries of England and Wales there is an excellent article on this subject, drawn up by Dr. Kerrison, but doubtless expressing the sentiments of his associates. In that paper the justice of the complaints against the present system is substantiated by numerous facts. Dr. Wadlington of Monmouth has written some excellent observations on the attendance of the poor in sickness, and the editors of the London Medical Repository, who have quoted largely from that essay, have more than once recommended the state of the sick poor to the serious attention of the medical profession in this country. Dr. Yeloly, when under examination before the Committee of the house of Commons, was asked whether there was any information, which he wished to communicate to the Committee with reference to medical attendance on the poor in the country. "It would be exceedingly desirable," he replied, "that legislative measures could be adopted, which would enable the poor to have more efficient advice than they can have at present." The point to which he alluded, was the farming out the medical attendance on the poor to the lowest bidder. Some pertinent remarks on this subject are contained in a valuable pamphlet by J. F. Hulbert, which has come into my hands since the greater part of this essay was written. Nor are medical men unconscious of the baneful influence of this system as respects themselves. The subject was one of lively interest with many gentlemen whom I had the pleasure of meeting at the last Anniversary of the Provincial Medical Association; and although it was not taken up, as a part of the business of the meeting, it obtained considerable deliberation and discussion. Nevertheless it is greatly to be feared that medical men are not sufficiently aware of the extent to which they have unintentionally contributed to bring the evil upon themselves. Sometimes the anxiety of medical men to obtain public appointments has been so great, that they have disregarded the sacrifice which they were making, and acted like some stage-coach proprietors, who, in the heat of opposition, carry their passengers for nothing, and give them a dinner on the road. The natural consequence has been, that the public has greatly *over-rated* the importance of these appointments to medical men, and equally *under-rated* the value of their time and services.

The conjoined science and practice of medicine may justly be regarded amongst the most laudable and ennobling pursuits in which man can be engaged. Celsus tells us that medicine in its earliest ages formed a branch of philosophy. Cicero says: "*Homines ad deos nulla re propius accedunt quam salutem hominibus dando.*" The author of the book of Ecclesiasticus enjoins to "honour a physician with the honour due unto him, for the uses ye may have of him, for the Lord hath created him; for of the Most High cometh healing, and he shall receive honour of the king. The skill of the physician

shall lift up his head, and in the sight of great men he shall be in admiration."

The names of many, who have adorned our profession, might be mentioned as a proof that medical men have furnished some of the brightest examples both in science and philanthropy; and it may without fear of contradiction be asserted of the body at large at the present day, that there is no other set of men, whose gratuitous services and personal sacrifices in the cause of suffering humanity can stand in comparison with theirs. I do not make this statement out of arrogant attachment to our profession, or in disrespect of other professions, but in the conviction of its truth, I am jealous that our honour should be unstained.

I am aware that there are some members of our profession, who have experienced the evils of the present system, and who fear that the operations of the poor law commissioners will tend to confirm if not to aggravate the evil. If there be any ground for this suspicion, I believe it is to be found in the fact of some medical men having already lent themselves to that pecuniary competition, which I have described and condemned in the commencement of this paper. Its tendencies are seen and felt by ourselves; but they are unperceived by those who are not of the medical profession, who are therefore deceived by its specious appearance of fairness and by its promise of economy. From personal intercourse with the poor law commission, I am warranted in asserting, that they are anxious to adopt that plan which shall combine the greatest satisfaction to the medical profession, with the largest amount of advantage both to the suffering poor, and to the community in general.

Let us unite our efforts to devise and execute such a plan, and in so doing, co-operate with their patriotic labours.