EDITORIAL NOTES AND NEWS.

Royal Honours. Of the six knighthoods bestowed by the King during his visit to Edinburgh two fell to the medical profession, and all old Edinburgh men will join in the congratulations to Sir Thomas Clouston and Sir James Affleck, and wish them long life and health to enjoy the honour so worthily won.

Colonel Warburton. On the occasion of their leaving Edinburgh Colonel and Mrs. Warburton were entertained to dinner by the Honorary Staff of the Infirmary and a number of other friends in the Caledonian Station Hotel on 14th July. Principal Sir William Turner occupied the chair, and proposed the only toast of the evening—the health of the guests—to which the Colonel cordially replied. As a memento of the occasion Mrs. Warburton was presented with an album containing the autographs of those present. This gathering formed a fitting close to Colonel Warburton’s official connection with the Royal Infirmary, and reflected the cordial relationship which has always existed between him and the members of the Honorary Staff.

The Board of Management of the Infirmary also marked the occasion of the Colonel’s retiral by presenting him with a silver bowl at their last meeting.

Graduation Day. The number of those who graduated on 28th July is worthy of attention. It is true that under new regulations a considerable number of students complete their course in December, but the July graduation still remains the principal medical one. The pessimists will bewail the fact that only ninety-two qualified for the Medical Register, while the optimists will note that those proceeding to the higher qualifications numbered no less than seventy, sixty-eight taking the M.D. and two the M.Ch. Further, of that seventy, five (one a Resident) were awarded gold medals for their theses, thirteen were highly commended, and nineteen more received the star of commendation. No bad record, and surely evidence that Edinburgh graduates all over the world are keeping up their work.
The Cameron Prize for the most useful contribution to practical therapeutics during the previous five years was awarded to Dr. Simon Flexner, of New York, for his work on cerebro-spinal meningitis, and especially for his preparation of an antidotal serum. Dr. Flexner is the first American to have his name placed on the roll of honour of holders of the Cameron Prize. It is expected that next session Dr. Flexner will visit Edinburgh, and give an address descriptive of his researches.

Professor James Walker delivered the address to the graduates, and discussed the difficulties in connection with the teaching of chemistry to medical students. One of these depends on the fact that the students of medicine no longer form the majority of the students in the chemistry class, and he suggested that the knot of that difficulty might be cut by the appointment of a teacher of chemistry for medical students only, a plan, by the way, which has already been adopted in connection with physics. He would have this teacher—why not professor?—deal not only with the elementary chemistry of the first year, but with the chemistry of all the succeeding years, that concerned in physiology, pathology, toxicology, and in clinical work. Therefore—and here, in our opinion, the chief difficulty arises—he must not only be a medical man, but he must keep himself abreast of all the work being done in each of those branches. Professor Walker says that with the best intentions to adapt the course in chemistry to the wants of medical students he and his assistants are hampered by their lack of knowledge of these (medically) more advanced subjects, and under existing circumstances have no leisure to get them up. We confess we are no great believers in the giving of a medical bias to the teaching of elementary chemistry, and are content that the first professional examination should be of such a nature that the work for it might be done, as it is for certain of the licensing bodies, in any approved institution—university, technical college, or secondary school; but with the rest of Professor Walker's suggestion we find ourselves heartily in accord. We have often referred to the deplorable lack of co-ordination between the work of different chairs, and we hope Professor Walker will weary the Faculty with advocacy of his suggestion that the chemistry of all these different subjects which he mentioned should be taught by one teacher and his assistants. That teacher would at least know how much the students had been taught and how much he was entitled to expect from them, and the adoption of the plan would do something to break up that water-tight compartment system which is far too prevalent in our Scottish universities.

In his peroration Professor Walker referred to two ways of attracting students to a university. "Either make the course of study obviously better (which will generally also mean more difficult) than
in other universities, or else make it obviously easier. . . . Students will be attracted in either case, but not the same class of student in both." Of course we agree, but we think stress should be laid on the fact that it is not severity of examination, but excellence of teaching and of the method of teaching which should be the aim of a university. That is what attracts good students.

The National Insurance Bill.

The situation with regard to the points at issue between the medical profession and the promoters of the Insurance Bill has not undergone any material change since we wrote last month. Such progress as has been made has been in the direction of meeting the requirements of the profession. The proposal to establish a class of "voluntary" beneficiaries under the Bill has virtually been dropped, but the proposition was from the first recognised to be so palpably unjust and indefensible that there was a suspicion in the minds of many that it was introduced merely that it might be withdrawn. The effect of this concession therefore was discounted in advance, and it has done little to smooth the passage of the Bill. Various amendments have been put down on behalf of the Government which meet to some extent the desires of the doctors, but on the points on which the profession lay most stress, the wage limit of £2 a week, and the control of the doctors by the approved societies, the Government do not see their way to compromise.

There is, we are glad to observe, no sign that the medical profession is inclined to withdraw from any of the demands it has consistently and unanimously made since the Bill was first introduced. Further consideration of the proposals of the Government and closer inquiry into the effects of these on the work and emoluments of medical men have strengthened the conviction that if the Bill becomes law it will revolutionise the practice of medicine in this country, and that the status of the profession will be lowered to such a degree that it will cease to attract men of the class from which it has hitherto been recruited.

As an earnest of its good faith the profession has already raised a substantial guarantee fund to be devoted to contesting the Bill and to providing compensation for members who suffer loss under its provisions should it pass in its present form. This movement deserves the generous support of the profession, and we earnestly commend it.

As we write the subject is receiving the serious consideration of the Representatives of the British Medical Association who on this matter command the allegiance of the profession, and who have already done yeoman service. Their decisions are not yet before us, but we sincerely trust that they will adhere to the position they have already taken up, and will be no parties to bartering and bargaining.

In a memorandum submitted to every member of Parliament by the
Royal College of Surgeons of Edinburgh the necessity for delay in proceeding with the Bill is emphasised. "Time has but strengthened the belief that this delay is not merely advisable but absolutely essential if grave injustice is not to be done to our profession as well as to those of the public for whose special benefit the Bill is designed." If such delay was afforded the College believes that "a better scheme might easily be evolved in consultation with the medical profession—a scheme which would meet the reasonable views of that profession, while providing a real and satisfactory public service for those who genuinely require it." . . . "It is therefore desirable that if the Bill as a whole cannot be delayed the Medical Benefit part should be withdrawn. A well matured scheme would then be produced next session after consultation with the profession which has the widest knowledge of the conditions of life among the poor during sickness."

In this proposal it seems to us there is a solution of the immediate difficulties, and one for which every member of the profession should use his influence with his representative in Parliament.

The Highland Doctors. In all the criticism which has been showered on the National Insurance Bill we have not observed any dealing with the exceptional position of the medical men in the Highlands and Islands of Scotland. It may be that those who are familiar with the conditions of practice in these remote districts recognise that no feasible amendments of the proposed Act would really touch their question. There are districts where no capitation grant which even in his most conciliatory mood the Chancellor could agree to would keep body and soul together, and the smallest wage limit which has been suggested would have no terrors for the ordinary crofter. He has no employer, and his employees are his own family. The whole contribution, then, would fall directly on him, and he has no sevenpences to spare. If there was ever a case for exceptional treatment the Highlands provide it. The districts are enormous, the population thin and very poor, and means of communication are few. The present conditions are terribly hard on those members of our profession, who do their best under great difficulties, and they are needlessly aggravated by the helpless relation of the medical men to the parish councils.

It is really astonishing that no steps are taken to give to these men the simple safeguard that every parish doctor in England has in an appeal to the Local Government Board. None of us wants to interfere with a parish which wishes to get rid of an undesirable, but the Board should stand between the doctor and the results of petty local squabbles, of which the doctor is often only the shuttlecock.

When conditions are exceptional, remedies must be exceptional too, and what these districts require is something on the lines of the Irish Dispensary system. We would not copy it as it is, but in framing
a scheme for the Highlands we might take the good and avoid the evils of the Irish system. The Highlands are due at least some share of the millions required to finance this scheme, and we hope full consideration will be given to their exceptional circumstances.

The Tuberculosis Commission.

The publication of the "Final Report of the Tuberculosis Commission" marks an epoch in investigation relating to the subject. The high standing of the Commissioners made it certain that their conclusions would carry great weight, and the thoroughness of their ten years' work is evidenced by the fact that the record of it fills twelve considerable volumes. Our readers are probably already familiar with the Commissioners' answers to the questions put to them. Briefly these are—Firstly, in man two types of tubercle bacilli occur, the human, to which ordinary cases of pulmonary consumption are chiefly due, and the bovine, which has alone been found in tuberculous cattle, and which occurs in a large proportion of mesenteric tuberculosis and cervical adenitis in children. Secondly, while many of the lower animals are insusceptible to the human strain, the bovine type is much more generally pathogenic, and it is specially significant that the chimpanzee is equally susceptible to both types; the Commissioners therefore conclude that mammals and man can be reciprocally infected, and as in many fatal human cases the bovine type is alone present, the possibility of infection from cattle cannot be denied. Thirdly, as the ingestion of single small doses of bacilli can originate tuberculosis in animals (observations on the ape being here again specially significant), a considerable amount of the disease in children is to be ascribed to tuberculous milk.

The impartiality of the Commission in reaching their conclusions is evidenced by the pains taken to investigate experimentally the sources of fallacy and by the rigorously critical attitude assumed towards the facts observed. It has been necessary to follow many lines of inquiry. Thus the third great type of bacillus, the avian, has been investigated, though this is unimportant from the human standpoint, and only plays a subsidiary part in spontaneous tuberculosis of the lower animals. Most interest attaches, perhaps, to the study of strains differing slightly from the three types, the most important being those isolated from lupus, which sometimes resemble the human, sometimes the bovine form. In considering the relations of these to the main types, the Commission find that by repeated inoculation into certain animals they tend to assume type characters. With regard to the question of whether the three main types are themselves transmutable, the one into the other, no evidence was forthcoming that this was possible, a conclusion which is of manifest importance in tracing the source of infection in any particular case. Of great significance also is the work which points to the possibility of bacilli
remaining latent and multiplying in the body of a relatively insusceptible animal without producing lesions.

The facts accumulated, falling in line as they do with the results of other observers, support the practical conclusion of the Commission that there must be no relaxation of the regulations as to milk inspection. It is clear that this must be national and not local in its application. Experience shows that rigorous local measures merely result in tuberculous milk being distributed to other centres where inspection is less efficient. It is only by the periodic examination of milk as it leaves the dairy that the evil is to be combated at its source.

While much has been done by the Commission, much remains to do. More information is required as to the proportions of the different strains of bacilli responsible for the different types of tubercular infection in man, and much light might be thrown on the pathology of tuberculosis in man by experiments on the higher apes. If any advance is to be made, however, ample financial resources must be at hand. It is stated that the cost of the present Commission does not fall far short of £75,000, and at this no surprise will be felt. For future developments a Mæcaenas is urgently required.

Appointments.

Dr. Gulland, the senior of the assistant physicians, has been appointed Physician to the Royal Infirmary in room of the late Dr. Bruce, and Dr. W. T. Ritchie has been chosen to fill the vacancy on the assistant staff.

The first award of the Dr. Jessie Macgregor Memorial Prize has just been made, the recipient being Agnes Ellen Porter, M.D.(Edin.). The prize has been awarded to Dr. Porter for work done in the last three years, mainly in the departments of bacteriology and physiology, and especially for her work on the precipitin reaction in tuberculosis.

The prize, which is in memory of the late Jessie Macclaren Macgregor, M.D.(Edin.), is to be awarded triennially for original work done in any branch of medical science during the three years preceding the award, and is of the value of £50. The award is in the hands of a body of trustees, consisting of the Dean of the Faculty of Medicine of Edinburgh University, the President of the Royal College of Physicians, Edinburgh, the Treasurer of the Royal College of Physicians, Edinburgh (to whom application has to be made), the President of the Royal College of Surgeons, Edinburgh, and three medical women, resident in Edinburgh, to be co-opted by the other four trustees. Applicants must have studied for at least one year at a school of medicine in Edinburgh, and must be either graduates of a Scottish University or holders of the Triple Qualification. On the present occasion there were three applicants for the prize.