**DENGO**

The eruptive fever so designated still prevails in and around Calcutta. We have addressed a circular to the medical practitioners of Calcutta soliciting information on the subject, and have the pleasure of drawing attention to several communications with which we have been favoured, and which we now publish. More have been promised. We believe that the Chairman of the Municipality has called upon the Health Officer to prepare a report on this disease.

**RELIGION, SCIENCE, AND MEDICINE.**

The _Friend of India_ "objects strongly to part" of our article (published in the last number of this journal) on Religion, Science, and Medicine, because "it seems to take the turn that scientific study, if daring and loyal to conviction, has somewhat of the complexion of sin." Our object in writing the article in question was to draw attention to a closer study of the theory known as the "physical basis of life," but we warned our readers to avoid speculating too freely on the subject, because scientific men are by no means infallible, and the views they entertain to-day may possibly change in the course of time. Nevertheless, let science lead us where it will, we are fearlessly though cautiously to follow. We may not, nor indeed should we endanger to make our religious belief tally with science, the former depending on the evidences of Christianity, and the responsibilities of our consciences, and utterly independent, therefore, of science.

**CHOLERA.**

This disease has been very prevalent in the district around Calcutta during the last six weeks, appearing suddenly in a village, carrying off several of its inhabitants, and subsiding. Outbreaks have occurred in the suburbs, but on a limited scale. The city itself has remained comparatively free, with the exception of one remarkable outbreak in Russell Street, which is at present under investigation by a medical committee, and which we shall probably describe in a future number.

Cholera has also been reported from Dacca, Jessore, Rajshahye, Bhangaupore, Berhampore, Rupnagore, Purnmah, Gowaipara, Kamroop, Newgong, and Durrung.

Two corps of Nepalese coolies preceding to join the Cachar and Chittagong columns of the Loochhai expeditionary force were attacked by the disease. In each case the outbreak did not occur until the steamer conveying the coolies to Cachar and Chittagong had passed Golandah. The outbreak among the Cachar corps was more severe, and 200 men were carried off within 45 days. The number lost in the other corps was 34. In both cases the disease seems to have been "stamped out" by judicious measures promptly adopted on landing. We shall probably lay the detailed facts of these interesting outbreaks before our readers in a future number. Cholera has also been prevalent in Lucknow and in the district of Jumna during the last two months. A severe outbreak occurred at Delhi in November, of which we are enabled, through the kindness of the Inspector-General of Hospitals, to present a detailed history written by the Civil Surgeon, whose action in dealing with this outbreak is beyond praise. In matters of this kind men must act on the strongest evidence regarding causation available, and it won’t do to suspend effort until the true etiology of cholera has been indisputably demonstrated.

**MEDICO-LEGAL CASES.**

_Indian Public Opinion_ remarks that "a compilation of the many medico-legal cases to be found in the six volumes of the _Indian Medical Gazette_ now published would be of considerable service; in fact, we are almost inclined to attempt it ourselves." We sincerely hope this idea will be carried into effect; we thank the writer in _Indian Public Opinion_ for the review from which the above quotation is taken; we are only too glad to be enabled to see ourselves as others see us.

**FEVER IN BURDWAN.**

The district of Burdwan is being decimated by a severe type of malarious fever. Government has done its utmost to supply medical and food relief. Forty-three special dispensaries have been opened throughout the district, and numerous depots for the distribution of food organised. Funds are failing, and an appeal has been made to the public for aid, which we hope will meet with a most liberal response, for the state of disease and prostration of the population is fearful, and restoratives in the shape of food, stimulants and tonics must be freely doled out for some time to come. The same type of fever has been prevailing in portions of the Hooghly and Berhthoom districts adjacent to Burdwan. We shall return to this subject in our next issue.

**THE MEDICAL COLLEGE HOSPITAL.**

_The Hindoo Patriot_ remarks, with reference to our article on the sanitary condition of the Medical College, Calcutta, that "the doctors are themselves to blame for the peremptory order" issued by Mr. Campbell on the subject. "The best sanitarians and engineers of the day had been consulted when the present hospital was built, and who knows that the building now recommended might not be condemned twenty years hence?" There is much truth in this, but it is hard that the sick and wounded poor of Calcutta should suffer in consequence of existing defects in the hospital.

**ROYAL MEDICAL FUND SOCIETY OF IRELAND.**

We have received the twenty-ninth report of this useful Society, which continues to do its good work with undiminished vigour. The capital of the Society now amounts to £14,400. The income for the year was £1,538-16-2. £157-2 were distributed by anticipation, and £933-11-8 available for distribution at the annual meeting, making a whole of £2,090-13-8 dispensed in charitable grants according to the rules of the Society. The Indian subscriptions were:—Bombay, £70-9-6; Bengal, £51-2-4; and Madras, £35-4-8—total, £153-3-6.

The efforts of Surgeon J. A. Purefoy Colles and J. M. Bleckley, in organizing a branch in this presidency, are warmly acknowledged. The number of persons aided during the year was 243. There were 91 applicants—15 medical men, 72 widows, and 4 orphans,—and only 9 of these were disallowed. The central committee report that: "the agencies of the Society are multiplying and extending, that its means are slowly but gradually increasing, and that its usefulness is becoming proportionately great."

**HOW SCARLATINA IS IMPORTED INTO INDIA.**

This may be inferred from the following telegram:—"Bombay, December 27th. The Jumna has arrived here, but has been placed in temporary quarantine, owing to the prevalence of scarlatina and measles on board."