

much in the report which indicates some confusion of thought on the part of those who are responsible for it. They do not, for instance, appear to have appreciated the fact that the duties of county medical officers of health have not hitherto been prescribed by the Local Government Board. This and certain other points of doubtful meaning are probably due to the fact that very few medical officers of health were called to give evidence and that those medical inspectors of the Local Government Board whose reports have evidently much influenced the committee's decision were not apparently invited to attend. But all these details fade into insignificance before the fact that the committee has grasped to the full the importance of security of tenure and the improvement and independence of the annual reports of medical officers of health, and the fact is, no doubt, recognised that improvement of the reports is largely dependent upon security of tenure.

Pyorrhœa Alveolaris.

THE Erasmus Wilson lecture on Pyorrhœa Alveolaris recently delivered by Mr. KENNETH W. GOADBY is a valuable addition to the knowledge of that refractory disease of the teeth.¹ Although early loss of the teeth accompanied by an inflammatory condition of the gums has been recognised since the days of AMBROSE PARÉ, it is only within recent years that the disease has become so prevalent that the attention of the general body of medical practitioners has been drawn to its far-reaching and harmful effects. In the lecture Mr. GOADBY mainly devoted his attention to giving a *résumé* of the bacteriological researches which he has made during the last ten years and to drawing attention to the use of the vaccine treatment on the lines advocated by Sir A. E. WRIGHT. In all 90 cases of the disease were examined bacteriologically, in addition to the various conditions such as gingivitis, ulcerative stomatitis, and so on; from these investigations very little evidence was obtained of any one organism occurring with sufficient regularity to suggest its causal relationship with the disease. The chief fact brought out seems to be that a very large variety of organisms is found in the gums in ulcerative conditions and that the bacteria found in gingivitis and ulcerative stomatitis show a very curious similarity to those found in pyorrhœa. Mr. GOADBY gives a very detailed bacteriological analysis of 36 cases in which certain general symptoms were present and describes the cultural characters of the organisms isolated. In certain cases he isolated a lactose-fermenting bacillus and this organism would seem to have suggested to him that the infection in pyorrhœa alveolaris may come from contaminated milk. In referring to this point he remarks: "MCCONKEY has shown that these lactose-fermenting bacteria are primarily of fœcal origin and that they gained access to milk, from which they had been isolated by him in a large number of instances. In attempting, therefore, to discover the original source of infection in alveolar pyorrhœa the presence of these lactose fermenters naturally requires consideration. Further, cocci of both the staphylococcal varieties are often present in milk and may exhibit some degree of virulence. In the absence

of any other obvious source of infection it would seem highly probable that the organisms to which at any rate the general symptoms attendant upon suppuration along the alveolar margin and at the alveolar process itself are due may come from contaminated milk." Mr. GOADBY also refers to the points that pyorrhœa alveolaris is a frequent sequela of infectious disease during which the patient has for some time been upon a milk diet and that the disease frequently occurs in several members of the same family and would seem to consider these points evidence that milk may be the original source of infection. The idea is certainly a novel one but we must confess that his evidence hardly seems to justify his suggestion. In the treatment of the disease he seems to have had some measure of success with the injection of vaccine of the different organisms and he brings forward certain facts which are of more than passing interest. He states that in curetting of even two or three sockets of affected teeth an increase of constitutional symptoms often takes place, and he considers that delayed healing is common and frequent when multiple extraction has been performed in cases of general pyorrhœa and as a precaution thinks it is inadvisable to remove more than two or three teeth at a single sitting. Most practitioners would, we imagine, dissent from this view but it is remarkable how facts easily apparent are often overlooked and it is certainly a question well worthy of attention. With the current idea that removal of the affected teeth arrests the local tissue destruction and cures the disease he does not altogether agree, and he cites a case where even after the removal of the teeth the patient lost weight, the opsonic index at the time of extraction being 0·6 and 0·5 respectively to the staphylococcus aureus and the mouth staphylococcus albus. At the end of one year the opsonic index was the same but as the result of inoculation during six months she gained 2 stones in weight, the index rose to 1·1, and chronic rheumatism from which she had suffered almost entirely disappeared. It would certainly appear that vaccine treatment may prove of some value but much more evidence and experience are necessary before anything like a definite opinion can be given. In reading through the paper we cannot help feeling that valuable a contribution as it is to the bacteriology and treatment of advanced conditions of alveolar destruction it sheds but little light upon the more important question of etiology. Why is the disease so prevalent at the present day? What are its true causes? These are the questions to be settled. The solution will probably be found by investigations carried on along lines quite other than the bacteriological.

The New French Lunacy Bill.

DURING the past half century the lunacy laws of most countries have undergone great changes. Nevertheless, up to the present time the French have adhered to the Act which came into force so long ago as June, 1838. When we consider the date of its enactment it may undoubtedly be looked upon as a very enlightened piece of legislation. But great changes have taken place since then and in most civilised countries the tendency has been more

¹ THE LANCET, March 9th, 1907, p. 633.

and more to protect the liberty of the subject; consequently in lunacy matters the public have long ago decided that they should be adequately protected against the risk of wrongful detention in an asylum. Bills have from time to time been considered by the French Senate or the Chamber of Deputies but for some reason or other they have all been abandoned. The law as it now stands permits a person to be sent to a lunatic asylum in two ways, (a) that which is known as the "placement volontaire," in which case the patient is detained under the order of a relative or friend, supported by one medical certificate: and (b) the "placement d'office," which is chiefly used in the case of violent or dangerous lunatics and is carried out on an order of a police commissary, a mayor or magistrate, supported by one medical certificate. Most persons will agree that such requirements are insufficient to insure the patient against hasty, if not wrongful, detention. Especial objection must be taken to the method known as "placement volontaire," for assuming that the person making the order directly or indirectly derives any benefit from the removal of his relative or friend to an asylum the certificate of *one* medical man can scarcely be regarded as sufficient guarantee that the case has been thoroughly considered, for it is possible that the physician may have been misled by false or exaggerated statements as to the conduct of the patient. It is true that in England to-day urgent private cases may be removed to a mental hospital under the order of a relative and one medical certificate but here it must be borne in mind that such an order only remains in force for seven days from its date, during which time further statutory papers have to be obtained, otherwise the patient must be at once liberated. In this country the methods of procedure vary according to whether the patient belongs to the private or pauper class, and by a pauper is meant any person who is unable to pay for treatment in private care, licensed house, mental hospital, or special paying wards in a borough or county asylum. The private patient can only be detained upon a reception order signed by a judicial authority, which order is granted upon the presentation of a petition and a statement which are signed whenever possible by a near relative and supported by two medical certificates.

In the case of pauper lunatics one certificate only is required, a justice of the peace making an order for detention after seeing the patient and being satisfied as to his insanity. Therefore in this country no person can be detained as a person of unsound mind unless his case has been considered by a judicial authority, whereas in France under the "placement volontaire" no such official consent is necessary. It is true that the director of any lunatic asylum, whether public or private, has within 24 hours of the patient being admitted to the establishment to furnish a certificate which is transmitted to the prefect stating that the patient is really insane, and 15 days later another certificate has to be furnished. In England the medical officer has to furnish to the Commissioners in Lunacy a medical certificate regarding the mental and bodily health of the patient not less than two clear days and not more than seven clear days after admission. This certificate is followed by another at

the expiration of one calendar month, and further the reception order has to be continued by means of certificates which have to be furnished at periodical intervals throughout the patient's residence under care, even if this extends to 40 or 50 years. In addition to these precautions patients are periodically visited by members of the Lunacy Commission, and in the case of private licensed houses in the country visits are also paid by justices of the peace who are specially appointed to make such inspections. In France a monthly official visit is paid by a member of the tribunal who is evidently an official without any special training and therefore cannot be looked upon as a competent judge as to whether a patient should be detained or granted his freedom.

If the new Bill which has recently passed the Chamber of Deputies becomes law the liberty of the subject will be more carefully protected. A judicial authority will have to be applied to before an order is made for detention in an asylum. The old medical certificate is replaced by a detailed medical report which has to be sent in to a magistrate, and this magistrate has the power of demanding an inquiry before the certificate takes effect. We think that it would be wiser both in the interests of the patient and the physician who certifies that in the case of private patients the law should require two medical certificates to be provided by independent medical men. This would insure the patient being seen by at least two physicians prior to his removal to an institution and in the event of any litigation for wrongful detention arising in the future there would be less likelihood of a verdict of negligence or malpraxis being found. The certificate to be sent in at the end of 24 hours by the director of the asylum will be a much more detailed one than is the case at present and copies of it will be sent to both the procurator of the Republic of the district in which the asylum is situated and also to the corresponding official of the district whence the patient came. Fifteen days later another certificate has to be sent in to the same persons. It is not clear that either of these persons is capable of deciding the question as to whether a person is insane and a proper subject for detention in an asylum, and in any case such an authority cannot compare with our Lunacy Commission for competency. Finally, confinement in the asylum is not definitely decided upon until the president of the tribunal has agreed to it, after having thoroughly studied the different certificates which have been sent in. Further, if *anybody* lodges the smallest objection the president of the tribunal cannot come to a decision except after consulting with his court and having heard expert opinion. We do not believe that any such clauses will ever become law. Surely all this red tape cannot be required to protect the liberty of the subject and we further venture to think that such a law would be most prejudicial to the interests of the patient both from the curative and from the social standpoint, when we realise what publicity such inquiries must entail. The making of lunacy laws is always difficult but the day is past when legislators should give way to ignorant agitators. By all means let the person and the property of the insane be protected but let it also be borne in mind that there is another point of infinite importance, the recovery of the patient from his malady.

Thus in the endeavour to protect the patient neither should laws be made the working of which is vexatious to those who have the care of the insane, nor should they be so cumbersome as to prevent the possibility of early treatment.

Annotations.

"Ne quid nimis."

THE DEATH OF M. BERTHELOT.

THE death of M. Berthelot, under painfully dramatic circumstances, following so closely upon that of M. Moissan creates a wide gap in the ranks of distinguished French chemists. The illness of his devoted wife had sorely affected the health of the great savant and the news of her sudden death proved to be such a shock to him that he never rallied and he entered the unknown practically in her company. M. and Madame Berthelot died in Paris on March 18th. Marcelin Pierre Eugène Berthelot was born in 1827 in Paris and was the son of a physician. His genius quickly showed itself in the early years of his education and his success in gaining a prize in an open competition on scientific subjects decided his career. At the age of 24 years he entered the Collège de France, in which he occupied the position of assistant to the lecturer on chemistry and thus his opportunities of gaining an insight into the teachings of chemical science widened. In spite of the number of great and fruitful investigations which he undertook with extraordinary energy and skill, he found time to serve the Government of his country. He was Minister of Public Instruction in 1885, four years after he had been elected a life senator, and in 1895 he was appointed Minister of Foreign Affairs. Berthelot's contributions to chemical science are known on account of their immense importance the wide world over. He attacked the great problems of the constitution of matter with extraordinary energy and success. He laid the foundations of organic synthesis and was practically the founder of thermo-chemistry. Our knowledge of the chemical constitution of glycerine and the fats is largely due to Berthelot's keen insight and analytical acumen. He showed that the fats were natural glycerine ethers of various fatty acids. The outcome of these researches was a stimulus to the industry of glycerine making and the manufacture of stearine candles. The results of his beautiful investigations on this subject were embodied in a work entitled "Sur les Combinaisons de la Glycérine avec les Acides," a masterpiece of research which gained for him the admiration of the whole scientific world. In the same masterly manner he produced his comprehensive work, "Chimie Organique fondée sur la Synthèse" in 1860. In 1879 he published the fruits of his attack on thermo-chemical problems ("Mécanique Chimique fondée sur la Thermo-chimie"). Lastly, chemical literature was considerably enriched by the publication of his classical work "Les Origines de l'Alchimie." France and the whole scientific world have indeed lost a giant of research in the death of M. Berthelot; he has left a magnificent record of fruitful labour, he has gone before as a splendid example to those who are engaged in the earnest pursuit of the same momentous problems, and for years and years to come the results of his genius must shine forth.

THE IRISH UNIVERSITY QUESTION.

THE Irish University question bristles with as many points of dispute as does a sea urchin with prickles, and it is almost impossible to discuss it without entering upon regions of controversy where the medical man is an intruder. But

it is not difficult to see that the scheme of the late Chief Secretary cannot commend itself to scientific teachers and students. The scheme, it is understood, provides that Trinity College, Dublin, which is the university of Dublin, should be abolished and that a new university bearing the old name should be founded, including Trinity College; Queen's College, Cork; Queen's College, Belfast; and a new college for Roman Catholics in Dublin. Maynooth; Queen's College, Galway; and Magee College, Londonderry, were to be affiliated institutions. The present Royal University was also to be done away with and all its existing graduates were to be attached by Act of Parliament to the University of Dublin. This scheme, like most schemes which try to please everyone, pleases no one, so that the consolidation of forces aimed at by the scheme could be only consolidation in appearance. Trinity College is naturally unwilling to lose its ancient prestige and to become a mere college of a university created by Act of Parliament. The senate of the Royal University does not receive a death warrant with pleasure, the leaders of Roman Catholic opinion, both clerical and lay, condemn the scheme, and Lord Justice FitzGibbon in his refusal to accept it may be taken to express the opinion of a large section of non-Roman Catholics. Moreover, all the heads of the various colleges concerned object in the main, though here and there support is forthcoming. There is another scheme which finds some support—namely, that the University of Dublin should in future consist of two Colleges, Trinity College as at present, and the hypothetical New Roman Catholic College. But to this scheme both parties concerned object. The Roman Catholic Hierarchy and many of the Roman Catholic laity are apparently willing to have their new College made an integral part of the existing Royal University. This is the scheme which was adopted in the minority report of the late Royal Commission and signed by Sir Edward Fry, Sir A. W. Rücker, and Mr. S. H. Butcher.

THE UNION OF THE LONDON MEDICAL SOCIETIES: THE POSITION OF THE MEDICAL SOCIETY OF LONDON.

As our readers know, the Medical Society of London has stood aloof from the combination of the London medical societies and reference was made to the matter by Mr. C. A. Ballance, the President of the Medical Society of London, in his speech at the recent festival dinner of the society. We regret that our necessarily brief note upon this dinner could not include fuller details of the speeches, but the following passage in Mr. Ballance's speech is of great interest at the present moment. "Perhaps it may be expected of me," said he, "that I should say something about the union of societies (of which many of us are members) which has recently taken place and which has been so much before us during the last two years. London is so vast that no one society and no union of societies can satisfy the whole wants of the profession. There must and ever will be many societies, but we the Medical Society of London wish the union of societies which has taken place a brilliant future and great prosperity. No one can doubt that union is a good thing and that it is better to pull together, rather than in isolation. I have already expressed the good wishes of the Medical Society to the union of societies. May I also express an earnest hope that we, the Medical Society of London, may be the recipients of the same kindly feelings, the same hearty sympathy, and the same friendly and generous acts from the union of societies as we have been accustomed to receive from each of the uniting societies before they became amalgamated into one great and powerful body. There are three societies of considerable antiquity in London which are all doing good work and whose membership is for the most part