

and Orders have been pressed on the attention of the Local Government Board over and over again by them.

The younger Public Vaccinators' Association has yet much work before it.

But let public vaccinators and vaccination officers co-operate to make the best of this "tremendous experiment"; let it be given a fair trial. However convinced we may be that it will break down in practice, let no one be able to say that it was the fault of the agents employed. Let there be the same cordial co-operation between public vaccinators, medical officers of health, and private practitioners. If we can spend the five years in a policy as a profession of education in vaccination matters and co-operation in effort to stamp out small-pox, the time will not be lost.—I am, etc.,

October 25th.

PUBLIC VACCINATOR.

SIR,—By the new Vaccination Act I see that the remuneration of public vaccinators is left, subject to the minimum of 5s. per successful case, for arrangement between boards of guardians and the public vaccinators. I feel strongly that some steps should immediately be taken to ensure something like uniformity in the arrangements. If nothing is done by the profession in the way of looking after its interests the guardians for the most part will endeavour to compel their officers (public vaccinators) to accept the minimum amount of remuneration and will not give reasonable consideration to the almost certainly large number of useless (that is, unremunerated) visits that a public vaccinator will be called upon to make, or to the mileage in country districts with an outlying and sparsely scattered population.—I am, etc.,

Stourport, Oct. 25th.

W. MOORE.

MEDICAL MAGISTRATES AND THE CONSCIENTIOUS OBJECTOR.

SIR,—In reference to Dr. Thursfield's expressed determination to retire from the Bench whenever an application comes before him for a certificate of exemption from vaccination, I venture to express the opinion that this determination is not wise.

A magistrate, be he a medical man or not, has to consider the question judicially, whether or not the objector is speaking the truth when he says that he believes vaccination would be prejudicial to the health of his child. He may try to convince the objector that his arguments against vaccination are unsound; but if, notwithstanding this, the objector holds to his belief, it seems to me that the magistrate should certify, as he has to be satisfied, not that the belief is a rational one, but that it is truly the creed of the objector.

The responsibility for exemption from vaccination, through a belief which may not be rational, rests with the Legislature, not with the magistrate. So I think that a medical magistrate, fully persuaded of the value of vaccination, may properly perform his judicial functions in the case of the conscientious objector as well as in any other case.—I am, etc.,

FREDERICK P. WEAVER, M.D., M.R.C.P.,

Hampstead, Oct. 15th.

J.P. for the County of London.

EPSOM COLLEGE.

SIR,—The appeal recently made on behalf of the above institution will, I trust, meet the liberal response it deserves, especially from those amongst us who have hitherto omitted giving their support.

Feeling as I do that every member of the profession should, if possible, give something, I would suggest that a simultaneous collection by means of a subscription and donation card be made every year on a date to be agreed upon, and that local secretaries be appointed for the purpose. The day might be known as Epsom College Day.

I would further suggest that charitably-disposed patients might have the card placed before them so as to enlist their sympathy and support. The large sum collected for Guy's Hospital by Guy's men from their patients shows the practicability of the scheme.—I am, etc.,

Weymouth Street, W., Oct. 24th.

CHAS W. CHAPMAN.

SIR,—Under the above heading, in the BRITISH MEDICAL JOURNAL of October 22nd, appears the following: "An unfortunate misconception prevails, even in quarters where a better

knowledge of the facts might be looked for, that Epsom College is mainly a charity school, the benefits of which are confined to the families of members of the medical profession."

Is it not manifest that the title "Royal Medical Benevolent College," by which the Council delights to describe this excellent institution, is chiefly to blame for the misconception to which you allude, and which I have reason to know does exist? The general public regard Epsom College as a charitable institution, and look upon those who have received their education there as, *ipso facto*, objects of charity. Now it is a serious social disadvantage to be described as a late member of a charity school, and perhaps this is more keenly felt when such a designation is an improper one. As you further point out, other great public schools, for example, Eton, Winchester, and Charterhouse, have similar foundation scholars, yet these institutions do not label themselves "benevolent." Is it likely that those who have experienced the disadvantage to which I allude will send those in whom they may be interested to enjoy (*sic*) the same disadvantage? Surely the time has now come when Epsom College should be known as Epsom College, and then one would feel it a distinction to have been a member of such a school, instead of as now; for I regret to think that I have, on occasion, found it more to my interests to lose sight of that fact than to remember it, and I know other past members of the school whose experience is the same as mine.—I am, etc.,

October 23rd.

AN OLD EPSOMIAN.

ASEPTIC MIDWIFERY.

SIR,—I trust you will allow me space to reply to some of my recent critics. I shall confine myself to what I consider the most important points.

In the first place, allow me to remind some of the writers that misrepresentation is not criticism. It reminds one of the advice, "No case; abuse the plaintiff's attorney." I cannot take up all the misstatements which have been made, but there is one glaring one I cannot pass by. The word "scrubbing" has been introduced into the discussion, and one man goes as far as to say, "Suppose the scrubbing brush has been used, as in Glasgow." I absolutely deny that I made use of any such expression in reference to the patient. The only scrubbing I ever do is of my own hands.

Again, I am taken to task about objecting to the use of antiseptic vaseline. In my paper I do not object to it provided it is antiseptic; but I do most strongly object to the usual open pots of so-called antiseptic vaseline carried from patient to patient. A solution of lysol I find answers the purpose admirably, and does away with the necessity of anything else being carried.

The *ante-partum* cleansing of the external genitals seems to be objected to by most of the writers. In my last letter I dealt with this point. I wish to reiterate that after considerable experience in this practice I can say I have never known a woman object. I may add that inquiries among medical men who have adopted this method have elicited a similar reply. We speak from experience, while the objectors merely theorise. Why should there be any more objections raised to its being done then than after the third stage is completed?

Some admit that *ante-partum* cleansing is right, but maintain that it should be done by an obstetric nurse. When a properly trained nurse is present it may safely be left to her; in fact, she should know how to do it without being told; but the majority of working-class women have no nurse, and I hold that it is the medical man's or woman's duty to do it, to secure it being properly done. If the usual handy woman is told to do it, she will not cleanse her own hands properly, and she will probably use a septic sponge or piece of flannel. If she is told to do the cleaning after the third stage is over, it will be done in the same way. May I point out to Dr. Freeman that I do not believe or contend that the parts can be rendered absolutely aseptic, but that is no reason why one should not try to get them as clean as possible. He thinks cleansing may do some good, and says: "I would try to do this myself, and would give definite instructions to the nurse to do likewise." Why is it "a step from the sublime to the ridiculous" that I should instruct my nurses and students to do the same? He also trots out the scrubbing myth. If he will take the trouble to read over the list of contents of an