

## CORRESPONDENCE.

## THE VICTORIA UNIVERSITY.

SIR,—I read the letter of "Quoits" upon the "Victoria University" with very great regret. I was one of the first to sign the protest against the establishment of another licensing body. It was against the addition of a twentieth licensing power, and not against the Manchester school, that the protest was directed. I object to the terms in which the writer has thought proper to stigmatise the distinguished men who signed the protest, and which protest was signed by a large portion of the leaders of the profession all over the kingdom. The Liverpool men can afford to ignore the attack thus made upon them; but I feel that it is unjust, and ought not to have been made anonymously. I ask, therefore, for the insertion of this reply.

Allow me one word regarding the University of London. It used to be considered the Medical University. I am sorry to find that, to some extent, it is abdicating its functions; and, by striving to be beyond the reach of the many, is driving Englishmen across the borders and over the Irish seas for a degree. I would not have it supposed that I wish to lessen the *prestige* of my own University; but I feel that it is not the liberal University that it ought to be; and that, by making the examination for a degree in medicine unattainable except by the few, the Senate are falling into a serious mistake. The degree in medicine of the University of London ought to be sought for by the majority of English medical students.

There is something wrong in this which requires consideration and amendment. It cannot be a fair reason why a new University should be required for the purpose of granting degrees in medicine, when the University of London exists, which can grant degrees to men who are educated in Manchester or elsewhere.

Perhaps some of our associates will ventilate this question, and inform us why men go to Edinburgh, Aberdeen, Dublin, and other Universities out of the kingdom, instead of taking the London degree.—I am, sir, your obedient servant,

ALFRED CARPENTER, M.D.Lond.

Croydon, September 22nd, 1879.

SIR,—It is much to be regretted that your correspondent "Quoits" does not divulge his name, and—what is all-important in a controversy like the present—the place from whence he writes. If he, as he implies, has not before heard of the Liverpool School of Medicine, the sooner he pays it a visit, and makes himself acquainted with its varied resources and extensive teaching power, the better. Far be it from my intention to underrate the splendid roll of Professors attached to the Owens College; but I for one have yet to learn that such enviable and brilliant distinctions, as those enumerated in your correspondent's letter, are altogether essential to good teaching capacity and success in a school of medicine.

My object in writing, however, is to say that our opposition to the granting of medical degrees to the new Northern University was chiefly due to the absence of any generous recognition of our school amongst others on the part of the promoters of the scheme. The proposal contained in the draft charter has, I think, never appeared in the *JOURNAL* in its entirety: viz., that, for the new degree in medicine, attendance upon lectures and hospital practice at other schools of medicine approved by the University, should be recognised, *provided that candidates should have studied Arts and Sciences in a College affiliated to the University*. Now, as no other College, so far as I know—not excepting our own flourishing Yorkshire College—is likely to be able to comply with the terms of affiliation for at least some years to come, this simply meant that students who intended to take the new degree *must* go to Owens for certain classes. The effect this would have had must be obvious. Most men who wished for the degree would naturally drift to the University itself (whether they would otherwise have selected it as a medical school or not), simply because it was a *sine quâ non* that certain *elementary* studies should be undertaken there.

As to whether an English popular degree in medicine is or is not desirable is a point I do not intend to discuss, now that the Privy Council has decided against it. The facility with which the Liverpool petition was got up, at such short notice, proved how wide-spread was the feeling against the granting of such an additional degree, at all events at the present time. We believed that the efforts of those who favoured the scheme were at least peculiarly ill-timed, pending possible legislation; and while a Select Committee of the House of Commons was considering the question of medical degrees generally, at the very time the application on behalf of the Victoria University was made.

Whether, sir, under the above circumstances, our motives and course of action have merited the remarks which have been lavished upon them in the *JOURNAL*, we may leave for others to judge. We feel that, for many years, our school, like others in the North, has done good honest work—long, in fact, before Owens College itself was founded or thought of—and we felt that we had, therefore, a right to expect to be placed, so far as was practicable, upon an equal footing with our more wealthy and fortunate neighbour, whose claims, however, seem not so paramount as to entitle it to the monopoly it sought to obtain,

I am, sir, yours obediently,  
CHARLES J. WRIGHT,  
Registrar and Lecturer on Physiology,  
Leeds School of Medicine.

Leeds, Sept. 22nd, 1879.

## DR. CRAWFORD AND COMPETITIVE ARMY MEDICAL EXAMINATION.

SIR,—Dr. Crawford seems to think he has shown that competitive examinations for the Army Medical Service are wrong, because there are no such examinations for civil hospital appointments. If, he asks, open competitive examinations are good for military medical services, why are they not equally so for civil hospital, etc., appointments? But the fact of there being no similar examinations for civil hospital appointments can by no kind of logic be converted into a proof that they are not good for military services. The reverse of the proposition, viz., that there ought to be examinations for civil hospital appointments because there are such tests for military services (for anything Dr. Crawford shows to the contrary), follows equally as well from his premises. But the truth is, his inference is plainly fallacious. Candidates for civil hospital appointments are, in fact, subjected to severe public competitive examination. Let me ask Dr. Crawford, is it not a fact (nowadays, at all events) that men elected to hospital appointments in this metropolis are men who have *proved* their capacity for the work they undertake? The tests by which they have been tried were not by pen and paper at Burlington House, nor by bedside reviewings. Nevertheless, they were to all intents and purposes a severe competitive examination. I do not think Dr. Crawford will, on consideration, deny this. He knows well the sort of men who fill hospital appointments, and that their antecedents justify their election.

The exact views, however, which Dr. Crawford holds as to military competitive examination are only obscurely indicated. He clearly regards them as obstructions in his way. He objects to that which is, but does not say what it should be. He "concurrs" in the opinion (I suppose of his department) that it "deters competent men from offering themselves as candidates for the army". But here I may fairly ask, How was such opinion arrived at? It assumes that Dr. Crawford knows, antecedent to examination, what a competent man is; or, that he has examined and found competent rejected candidates, or medical men who have not had courage to face the competitive examination. Now, I venture to think that Dr. Crawford should have told us what he proposes to substitute for the present system of examination; what is his standard of a competent man; and should also have told us how he comes to know that competent men have been rejected, or dared not face the examiners. Dr. Crawford refers to the words of Dr. Parkes, that the examination in question surpasses all others in severity, except that of the University of London. But surely Dr. Parkes said this to show that thereby competent men were obtained; he never meant them to be used by Dr. Crawford as a proof of the examinations being wrong because too severe. Of course Dr. Crawford does not mean this either; but some readers may suppose, from the way the words are placed, that Dr. Parkes thought on this point as Dr. Crawford does.

But then, again, as it seems to me, Dr. Crawford contradicts himself. He says: "I do not think the present high standard of professional qualification required from those who desire to enter the public services should be lowered." But how, without lowering it in some directions, can you remove those stumbling-blocks, which, as he says, "deter competent candidates"? Dr. Crawford can only explain this apparent contradiction by telling us plainly what those stumbling-blocks are, and what he means—the "*quid novi rectius illis*"—when he says: "I think there is a method other than public competition as now conducted by which this undesirable result" (lowering the standard) "may be avoided." To this I say, "*candidus imperti*". And, until he does this, I think your readers will conclude with me that his "method" *must* be a lowering of the standard; and probably will also believe that the lowering is desired, not because it is really too high, but because candidates are too few. Dr. Parkes knew well what he was about in demanding a high degree of knowledge from army medical officers. On them fall duties and responsibilities which do not come to civil medical men. In civil life, medical men have medical neighbours to

help and back them. They may decline responsibilities and burthens which they feel too heavy for them. But it is not so with our army medical officers. We throw on their unaided hands and heads hundreds of most valuable lives. And they must act one way or the other—kill or cure; in the Khyber Pass, in Zululand, all over the world. What is the plain inference? Why, that our army should be supplied with medical officers who can stand the test of the severest examination—with young medical men not below, but above, the average of those who pass into civil life.

Moreover, Dr. Crawford must permit me to say that he has left a great blank in his argument. He has put forward competitive examination as if it were the cause of a deficiency in candidates; but has made no allusion to the burning questions, and the very different reasons which your pages have so often given, touching this deficiency of candidates. Until, however, he has reasoned these other causes down, he must not be surprised if the profession refuse to accept his explanation. Dr. Crawford refers to the London University; but he knows that, despite its searching examinations, there are abundant candidates for the honour of passing them. And I certainly must have good proof before I can believe that young medical men shun the army competitive examination because it is too severe.—Yours obediently,  
London, September 23rd, 1879. W. O. MARKHAM, M.D.

#### THE ARMY MEDICAL SERVICE: OPEN COMPETITION.

SIR,—I think that Surgeon-General Crawford's letter ought not to be passed over without remark. I do not think he has at all answered the objections to the comparison between civil institutions in this country and the Army Medical Department, as regards mode of entry. It is impossible to compare them, as they have so little in common, either with that department, or even with each other. Some are purely private benefactions, and their government and administration vary greatly. At the same time, if it were the practice in this country to have a *concours* for such appointments, I do not believe that even the best men would feel themselves humiliated thereby. But such a comparison rather tends to draw away attention from the real question at issue; for it is obvious that, to apply the principle of public competition to civil hospitals, as they are constituted in this country, so as to be in any way fair, such changes would be necessary in their government and arrangement as would almost amount to a revolution.

The two points to be considered with reference to the Army Medical Department are these:

1. What is best for the service?
2. What is fairest for the medical profession?

As regards the first, I do not desire to uphold competitive examination as a perfect system, nor do I wish to say that good men did not come in under nomination; but I do not, on the other hand, think there is a shadow of proof that *better* men came in under that system than have entered since under the competitive system. If, then, the system of nomination have no claim to better results than competition, the question comes to be decided with reference to the rights of the profession. It may fairly be claimed that every qualified practitioner has a right to get into the public service, if he can, on equal terms with his brethren. I see no grounds on which any prescriptive claim can be based, or indeed any ground except superior efficiency. Dr. Crawford complains that the present system does not secure that; and specifies general education as a qualification essential for a good military medical officer, but one which the competitive examination does not profess to touch. There I am perfectly at one with him; and we have had only too much experience of this at Netley, where we have often had to lament (less often, I think, as years have gone on) serious deficiencies shown by successful candidates in their preliminary education. But I do not draw the same conclusions as Dr. Crawford. The old system of nomination provided the service with men quite as deficient—indeed I might almost say more so—without furnishing a guarantee (as the competitive system does) that, at least in professional qualifications, the candidate is fairly well-grounded. Of course, we may presume that the last point will be attended to in the proposed new system of nomination. But, so far from admitting Dr. Crawford's objection as telling against competition, I should make it a reason for extending the powers of the Examiners, so as to include general education—at least so long as the civil colleges permit men to pass who cannot write intelligible English, or even spell their own language. As to the question of good men being deterred by competitive examination, I have never known a particle of proof of their being so ever brought forward, much as it has been talked about. It is idle to expect that the *very best* men will enter the public service, as a rule; and nomination in that respect will be no more successful than competition, nor do I believe that the offer of commissions without examination would, for many years back, have induced any better men to

enter the service than have already done so during that period. But it will always be in the power of the Government to secure *good* men, and plenty of them, if the inducements held out are sufficient—the number of competitors for the Indian Medical Service is proof enough of that. The argument, that competition has failed to obtain men enough for the service, is surely as transparent a fallacy as ever was put forward. The failure has been, not in the principle of competition, but in the fact that the thing to be gained by competition was apparently not considered by the profession as worth the trouble of competing for. Fifteen years ago, a similarly fallacious view was put forward with reference to the Indian Medical Service. After 1860, no appointments were offered for competition for several years; and in 1864, Sir Charles Wood announced to the House of Commons that the competitive system had entirely failed, and proposed to revert to the system of nomination. The House did not view it in the same light; and it certainly seemed a curious argument that, because no appointments had been offered and no opportunity for competing had been afforded, *therefore* competition had been a failure! The proposed abolition was negatived, and, in 1865, the system of competition for the Indian Medical Service was recommenced; and it has been continued to the present day with the most marked success, both as to the numbers and the quality of the men competing.

I am, your obedient servant,

F. DE CHAUMONT.

## MEDICAL NEWS.

### MEDICAL VACANCIES.

*Particulars of those marked with an asterisk will be found in the advertisement columns.*

The following vacancies are announced:—

- ARDWICK AND ANCOATS DISPENSARY AND HOSPITAL, Manchester—Junior House-Surgeon. Salary, £100 to £120, with apartments and attendance. Duties commence January 1st, 1880.
- \*BELGRAVE HOSPITAL FOR CHILDREN, Pimlico—Resident House-Surgeons. Board and lodging. No salary. Applications to the Honorary Secretary at the Hospital on or before October 4th.
- \*BROMPTON HOSPITAL FOR CONSUMPTION—Resident Medical Officer. Salary, £200 per annum, with board and residence. Applications on or before October 8th.
- \*GENERAL LYING-IN HOSPITAL, York Road, Lambeth—House-Physician. Applications on or before October 15th.
- HARTLEPOOL FRIENDLY SOCIETIES' MEDICAL INSTITUTION—Two Resident Medical Officers. Salary, £150 per annum, a proportion of accouchement fees, free residence, coal, and gas; rates and taxes (except income-tax) paid by institution. Applications not later than October 7th.
- \*HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST—Resident Clinical Assistants. Applications, with testimonials, on or before October 11th.
- \*LEICESTER INFIRMARY AND FEVER HOUSE—Honorary Physician. Applications on or before October 4th.
- RADCLIFFE INFIRMARY, Oxford—House-Surgeon. Salary, £105 per annum, with board, lodging, and washing. Double qualification and registration as a medical practitioner requisite. Application on printed form, to be obtained of Secretary, to be returned, with testimonials, on or before October 4th.
- \*TIVERTON INFIRMARY AND DISPENSARY—House-Surgeon and Dispenser. Salary, £100 per annum, with furnished apartments, coals, gas, and attendance.
- TRURO UNION, District of St. Agnes—Medical Officer and Public Vaccinator. Salary, £45 per annum, and £16 as Medical Officer of Health. Applications by October 14th.
- \*WEST SUSSEX, EAST HANTS, and CHICHESTER INFIRMARY AND DISPENSARY—House-Surgeon. Salary, £80 per annum, with board, lodgings, and washing. Applications on or before the 25th instant.

### BIRTHS, MARRIAGES, AND DEATHS.

*The charge for inserting announcements of Births, Marriages, and Deaths, is 3s. 6d., which should be forwarded in stamps with the announcements.*

#### BIRTH.

- \*STARTIN.—On September 30th, the wife of James Startin, M.R.C.S., of 17, Sackville Street, Piccadilly, of a son.

#### MARRIAGES.

- HAYWARD—BURDEN.—On June 26th, at St. Mary's Caulfield, Victoria, William Thornborough Hayward, M.R.C.S., Riverton, South Australia, to Florence, youngest daughter of the late P. H. Burden, Esq., of Adelaide, South Australia.
- HORNSBY—FOWLER.—On September 25th, at the Parish Church, Edgbaston, by the Rev. T. Roper, Vicar of Trinity Church, Smethwick, assisted by the Rev. H. Aldham, Vicar of Stoke Prior, George H. Hornsby, Esq., M.R.C.S., of Bromsgrove, to Ellen, eldest daughter of Edmund Fowler, Abberley, Edgbaston.—No cards.

GUY'S HOSPITAL.—An open Scholarship in Arts for a prize of one hundred and twenty-five guineas was competed for last week, and gained by Mr. George E. Halstead of Newark.—The open Scholarship of one hundred and twenty-five guineas in Science was gained at the same time by Mr. W. Fowler of London.