

that the collection of evidence, the formulation of the charges to be met, and the conduct of the case at the hearing should be left entirely to the authority, and that the Board should act in the matter in a purely judicial capacity. On receipt of this suggestion the Board decided to communicate with the local supervising authorities of England and Wales, stating the proposals made, and inquiring whether the authorities were in favour of amending Rule D accordingly. The replies received showed that 21 authorities were in favour of the alteration of procedure, and 66 against it, while 5 favoured the establishment of a circuit system whereby provincial courts for groups of counties might be held at certain appointed centres.

The number of cases of ophthalmia neonatorum coming to the notice of the Board in the course of its penal administration made it apparent that strong efforts should be made to combat the ignorance and carelessness which so frequently lead to the total destruction of the infant's eyesight. The rules had accordingly been strengthened by substituting "must" for "should" in the rule dealing with the cleansing of the child's eyelids, and by placing on the midwife the obligation of advising medical help in case of a purulent discharge in a woman who is pregnant or in labour.

It is satisfactory to observe that the reports of the medical officers of health show in many cases a continued improvement in the old type of midwife still practising under their supervision, in respect of cleanliness, carefulness, and observance of the rules.

THE OUTBREAK OF CHOLERA IN MADEIRA.

WE have received from our special correspondent, since our previous communication from him,¹ two interesting accounts of the cholera at Madeira, and the story as told does not redound to the credit of the central authorities at Lisbon, although it shows that the way in which the epidemic was tackled by the local authorities has been, as far as their means lay, practical and efficacious, while proving great resolution to meet the difficulties of the situation. The English population, it may be added, has escaped the attack. It will be remembered that the last note from our special correspondent on the matter indicated that the original infection took place about the middle of October. The cases which then occurred were in the lowest strata of the population and escaped notice for some time, while the epidemic progressed slowly, so that in the first five or six weeks only some 60 cases occurred, with 20 deaths.

With regard to the origin of the epidemic and its spread during the past month, our special correspondent writes as follows:—"Cholera seems to have been introduced into Madeira by emigrants from a passing steamer, probably Russians or Italians, on their voyage to South America. These people, unless epidemic sickness is recognised on board, roam about the least-frequented parts of Funchal whilst their steamer is coaling, and exchange their clothing and whatever else is marketable for drink and local produce. On the present occasion some time elapsed before the disease was identified, cases having occurred far and wide before the authorities realised what was happening, but as soon as the true nature of the invasion was demonstrated nothing could exceed the energy displayed by His Excellency the Civil Governor and all serving with him in measures of disinfection, isolation, water-supply, and house-to-house inspection. The protection of the people and the restraint of the epidemic were enthusiastically undertaken. A lazaretto has been opened east of Funchal for the reception of patients, and isolation hospitals are established in outlying districts. The direction of the principal hospital has been entrusted to Dr. João Lomelino, who has gained experience at Lourenço Marques, and who, with the official Lisbon delegate, Dr. Carlos Monteiro, has rendered excellent service. The statistics issued early in December showed that 542 persons had been attacked, and that 183 of them had died—a death percentage of about 33. But we knew that it would be necessary to add to these numbers a great many unreported cases, and if the issue here was favourable the percentage of deaths would be reduced. By Dec. 12th the

attack had been well got under in Funchal, and most of the cases since reported have come from squalid and distant settlements. The Government at Lisbon have sent out to us a distinguished bacteriologist who has worked zealously and efficiently, but they have otherwise done little in the present calamity to earn the gratitude of their fellow citizens of Funchal or create confidence in the authority of the new régime in Portugal."

On Dec. 23rd we received a letter from our special correspondent which had been delayed in transit and did not reach this office until we had gone to press last week. In this letter he complains of the difficulties of communication making it impossible for regular correspondence, save by cablegram, to be transmitted. He adds: "Five or six cases are reported daily in Funchal and its suburbs, where the disease is well under control and fast subsiding; but the villages on the south side still contribute on a larger scale. In these localities the authorities have been thwarted by the ignorance and impatience of the people, who resent all restrictions and precautions, and who attribute the immunity of their social superiors to some sinister influence exerted by the Government. About 900 people have been attacked, and the deaths have been 280. The epidemic is still limited to the lower strata of the population. We are practically isolated, and we are bewildered to think why the Cape outward-bound boats refuse to drop our weekly mail."

From these communications the magnitude of the disaster which has fallen upon Madeira can be estimated. The epidemic, which appears to be now coming under complete control, was a moderately severe one, the spread of the disease during the end of November being rapid, so that from 900 to 1000 persons have suffered in a population of under 150,000. No English person has been attacked, and the cases amongst the Portuguese have been absolutely confined to the least sanitary, poorest, and most ignorant sections of the population. We must all of us sympathise deeply with the island, particularly with those to whom a good season in Madeira is of the first importance. It would seem that the Central Government at Lisbon has hardly realised the responsibilities attaching to office.

VITAL STATISTICS.

HEALTH OF ENGLISH TOWNS.

IN 77 of the largest English towns 7619 births and 4946 deaths were registered during the week ending Dec. 17th. The annual rate of mortality in these towns, which had been equal to 18.1 and 16.8 per 1000 in the two preceding weeks, further declined to 15.2 in the week under notice. During the first 11 weeks of the current quarter the death-rate in these towns averaged 14.8 per 1000. In London during the same period the death-rate, calculated on a probably over-estimated population, was equal to 15.5 per 1000. The annual death-rates in the 77 towns in the week under notice ranged from 5.7 in East Ham, 6.5 in Handsworth, 7.2 in Smethwick, and 7.4 in Hornsey, all being suburban districts, to 21.1 in Swansea, 21.2 in Newcastle-upon-Tyne, 21.3 in Warrington, 22.2 in Tynemouth, and 23.3 in Burnley. The 4946 deaths from all causes in the 77 towns in the week under notice showed a further decline of 499 from the high numbers in the two preceding weeks, and included 397 which were referred to the principal epidemic diseases, against 420, 416, and 332 in the three preceding weeks; of these 397 deaths, 169 resulted from measles, 61 from whooping-cough, 61 from diarrhoea, 52 from diphtheria, 28 from scarlet fever, and 26 from enteric fever, but not one from small-pox. The mean annual rate of mortality from these epidemic diseases in the 77 towns was equal to 1.2 per 1000, against 1.3 and 1.0 in the two previous weeks. No death from any of these epidemic diseases was registered in the week under notice in East Ham, Halifax, Stockport, Hornsey, St. Helens, Huddersfield, or in 10 other smaller towns; the annual death-rates therefrom ranged upwards, however, to 3.7 in Devonport and in Tynemouth, 3.9 in Rotherham, and 4.2 in Grimsby. The fatal cases of measles in the 77 towns, which had been 231 and 143 in the two previous weeks, rose again to 169 in the week under notice; the highest annual rates from this disease in the week were 1.6 in Rotherham, 1.8 in Oldham, 2.1 in Grimsby, and 2.8 in Tynemouth. The 61 deaths from whooping-cough were within one of the

¹ See THE LANCET, Dec. 10th, p. 1716.