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Medical War News

Source: *The British Medical Journal*, Vol. 2, No. 1959 (Jul. 16, 1898), pp. 187-188

Published by: [BMJ](#)

Stable URL: <http://www.jstor.org/stable/20255280>

Accessed: 07/02/2015 12:17

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Thence by steamer down the Tay to Dundee. The members will be entertained at luncheon at Perth by Dr. Urquhart and in the afternoon by the Perth and Dundee Branches.

(f) *Melrose and Scott Country*.—By rail to Melrose and thence by carriage to Abbotsford, Dryburgh, etc. The members are invited to afternoon tea at Melrose Hydro-pathic.

(g) *Stirling and District*.—Visiting the famous Howietoun Fish Ponds and thence driving through Stirling, where the members will be entertained to luncheon by the Stirling, Kinross, and Clackmannan Branch, to Bridge of Allan, where a garden party will be given by the directors of the Mineral Wells Company.

(h) *St. Mary's Loch*.—By rail to Selkirk and thence driving by the celebrated St. Mary's Loch to Innerleithen and the Tweed.

(i) *The Trossachs*.—By rail to Callander and thence through the Trossachs.

#### LONGER TOURS IN SCOTLAND.

After the meeting tours of several days or a week or more may be conveniently undertaken. A number of suitable tours of varying length and cost will be suggested and arranged by Messrs. J. and H. Lindsay, tourist agents to the meeting, 7, Waterloo Place, Edinburgh, or at the Reception Room.

#### INTERNATIONAL GOLF MATCH.

It is proposed to hold a golf match on the afternoon of Friday, July 29th, over Muirfield and Archerfield Links, between resident Scottish and other members of the Association.

In order to facilitate arrangements, Secretaries have been appointed as follows: Dr. Colcott Fox, 14, Harley Street, London, W., for the South of England and Wales; Dr. Richardson, 19, Saville Row, Newcastle-on-Tyne, for the North of England and Ireland; and Dr. Blaikie, 42, Minto Street, Edinburgh, for Scotland.

Members wishing to play in the match are requested to communicate with one or other of these gentlemen not later than July 20th, naming their club and stating club handicap in strokes.

#### NOTICES OF MOTION.

Dr. LOVELL DRAGE gives notice that he will move:

That the Council be requested to take the necessary steps for bringing to the notice of the Government the necessity for an inquiry by Royal Commission into the constitution of the various medical corporations and the General Medical Council, and into the grievances of the medical profession.

Dr. J. BRASSEY BRIERLEY gives notice that he will move:

1. That in By-law 8, page 15, the words from "each" on line 4 to "Association" on line 7 be deleted.
2. That in By-law 10 every word after "Council" on line 3 be deleted.
3. By-law 22, on first line, to substitute "six" for "four," and add to end, "and the travelling and hotel expenses of councillors and members of the Parliamentary Bills Committee shall be paid by the Treasurer out of the funds of the Association."

#### ADDITIONAL BY-LAW.

A Parliamentary Committee shall be elected annually, and shall consist of one representative nominated by each Branch having over 400 members, four members elected by the Council of the Association at its first sitting, and three members elected by and present at the annual meeting, but none of these latter shall be already a member of the Central Council.

The Parliamentary Committee shall meet at least six times a year, and a sum not exceeding £2,000 a year shall be placed at its disposal.

Dr. JAMES A. MYRTLE gives notice that he will move:

That whereas long delay has taken place in giving effect to and carrying out certain resolutions passed at general meetings of the Association, this meeting calls upon the Council to at once take the necessary steps to apply to the High Court to legalise the new Articles and Memorandum of Association, and, upon this being granted, to forthwith undertake the medical defence of members of the Association.

Dr. J. HADDON gives notice that he will move:

That the Scientific Grants Committee be discontinued.

#### FRENCH ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE.

The next Congress of the French Association for the Advancement of Science will be held at Nantes from August 4th to 11th. In the Section of Medical Science, of which Professor Lépine of Lyons is President, the following question is proposed for discussion: On Diabetes in general, and particularly on the progressive increase in the prevalence of that disease in the principal towns of France.

## MEDICAL WAR NEWS.

### OUTBREAK OF YELLOW FEVER IN THE AMERICAN ARMY IN CUBA.

It is officially admitted by the Washington authorities that yellow fever has broken out in the American force besieging Santiago. The correspondent of the *Times* telegraphing on July 13th says that, while there are 14 admitted cases of yellow fever, the whole number open to suspicion is nearly 100. Surgeons and experts considered competent have been on the spot since the army landed, but no decisive measures were adopted till General Miles landed. Isolated hospitals have now been established, and all the prescribed steps have been taken to prevent the spread of the disease, but grave anxiety is confessed. General Shafter telegraphs that the refugees from Santiago are starving at El Caney. The number given is 18,000, who depend on such rations as can be spared from the none too ample army stores. Some are dead and others dying, and the condition of the whole is precarious in the extreme. Yet these starving wretches from a fever-stricken city were for days allowed to mingle with the American troops and wander about the camps. Yellow fever was alleged to exist in Santiago before they left. Now a cordon is drawn about El Caney after the mischief is done.

Immediately on landing in Cuba General Miles ordered Siboney to be burnt for sanitary reasons. It is stated that yellow fever stations will be established on some of the quays off Florida to which a special vessel will convey fever patients direct from Santiago.

### THE SICK AND WOUNDED AT SANTIAGO.

Telegraphing to the American Secretary for War on July 8th General Shafter said: "The men are in good spirits and are making themselves more secure every hour. The wounds are much less dangerous than similar wounds with the calibre 45. Among the large number of wounded are few amputations, perhaps ten. General health of command is good. One hundred and fifty cases of fever, which runs its course in four or five days, but not serious."

An unofficial account states that the reports of the surgeons on the injuries inflicted during the recent fighting show that the small calibre bullets almost invariably proved fatal in cases of penetration of the abdomen, their action being explosive. Otherwise they were humane enough, the deaths being fewer than if the wounds had been inflicted by larger projectiles. A greater proportion of the bullets lodged in the body than could have been expected, possibly on account of the poor quality of the powder, or through the reduction of the initial velocity by the surrounding thickets.

The hospital arrangements for the American army are said to be steadily improving. Forty ambulances are now in service, and there are many empty tents. As the wounded are nearly all at Juragua, the headquarters hospital has been cleared in expectation of the next assault. The sick list is increasing rapidly, and the officers are hoping for a speedy termination of the siege before the troops begin to suffer seriously from the ravages of the climate.

The hospital ship *Relief*, with a large corps of surgeons and nurses and ample medical stores, has arrived at Playa del Este. Mrs. Porter, the wife of President McKinley's secretary, is one of the nurses.

### THE "MUTILATION" CAUSED BY THE MAUSER RIFLES.

Admiral Sampson announced after the fight at Guantanamo that the bodies of the marines killed there had been "horribly mutilated by the enemy." Naturally this statement caused great indignation in the United States, but it was received with reserve by Europeans, who knew that Spaniards, whatever may be their shortcomings, are not savages. This scepticism has been fully justified by the report of Surgeon Van Reyepen that "the appearance of mutilation was due to the character of the bullets in the Mauser rifles used by the Spanish," and by a subsequent report of the Admiral himself, in which he admits "that a careful investigation has been made, and it is reported to me that apparent mutilation was probably due to the effect of short ranges, and I withdraw the charge of mutilation." But in the inflammable state of the American mind, the Admiral's withdrawal will probably not avail to nullify the effect of the unfounded charge, and we heartily agree with Dr. Frank Donaldson, the special war cor-

respondent of the *Philadelphia Medical Journal*, that the "careful investigation" referred to in Admiral Sampson's later message should have been made before, and not after, the original accusation.

#### THE X RAYS IN NAVAL SURGERY.

On board the hospital ship *Relief* (a description of which was given in the *BRITISH MEDICAL JOURNAL* of June 18th, p. 1620), there are two x ray installations. There is also a dark room for photographic work. This department is under the charge of Dr. William M. Gray, the photographic expert of the Surgeon-General's Library at Washington. It is his intention to take a photograph of the entrance and exit of the bullet in all cases of bullet injuries, as well as a skiagraph, and to preserve a complete series of plates for future study. Dr. Gray has also in his laboratory an electric drill and saw, and small lamps for the illumination of cavities, etc., as well as microscopes and other necessary instruments for the study of blood, bacteria, etc.

#### THE DANGER OF YELLOW FEVER IN CUBA.

Surgeon-General Sternberg has written as follows to the *Army and Navy Journal* regarding the danger of yellow fever in Cuba:

In your issue of April 23rd, p. 642, the statement is made that General Sternberg "expresses confidence in the excellent sanitary provisions of the military service, and does not fear that yellow fever will prove more harmful to the troops than diseases which are common in the northern latitudes, etc." I have not expressed any such optimistic opinion, and regret to say that it is not justified either by my studies relating to yellow fever, or by my personal experience. History teaches that when a considerable number of unprotected persons are exposed in a yellow fever-infected locality during the months when the disease is most prevalent (May 1st to November 1st in the latitude of Havana) an epidemic most infallibly results. In the last week of April of last year there were 17 deaths and 70 new cases of yellow fever in the city of Havana. Now, suppose that we had a similar number of cases at the same season in New Orleans, and that 20,000 strangers from the north should go there to spend the summer, what would be the result? All past experience supports the belief that a majority of them would have yellow fever, and that from 20 to 40 per cent. of those taken sick would die. This is what I anticipate would happen if we should send an army to occupy Havana, or any other infected seaport on the coast of Cuba during the summer months. If, however, these troops could be camped upon high land in the interior, and circumstances were such as to enable them to comply with all of the extractions of modern sanitary science, I am of opinion that our loss from yellow fever would not be serious. But in time of war military commanders are expected to take their troops to the points occupied by the enemy, and a picnic in the interior with frequent changes of camp, etc., is, perhaps, not exactly what we may expect. I am not an alarmist, but I believe in looking facts clearly in the face, and cannot allow your statement of my opinion to have currency at such an important moment in our country's history without a protest.

#### MILITARY HOSPITALS OF CUBA.

At the meeting of the International Congress of Hygiene and Demography, held in Madrid last Easter, Dr. A. de Larra Cerezo read a paper on the Military Hospitals of the Island of Cuba, and particularly of the Hospital Alphonso XIII, in Havana during the war, which has since been republished in book form. In February, 1895, when the insurrection broke out, there were only 2,500 beds. Hospitals have since been built in every province of the island, and in January, 1898, there was accommodation for 45,655 patients. There are eleven hospitals containing more than 1,000 beds each. The larger ones are the Royal, with 5,000 beds; Alfonso XIII, with 3,000; Manzanillo, with 3,000; Beneficienza, with 2,100; Santiago, with 2,000; Sancti Spiritus, with 2,000; Ciego, with 1,700; Cienfuegos, with 1,450; Remedios, with 1,400; Holguin, with 1,300; Madera, with 1,100. All these are said to be well supplied with instruments and medical necessities of every description, and each has also a perfectly equipped laboratory. In addition to the ordinary sanitary ambulance corps, a service of carriages is provided for the rapid conveyance of the wounded to the base hospitals in Havana, Santiago, Matanzas, Santa Clara, Manzanillo, Sagua la Grande, Trinidad and Cienfuegos.

Three of the best steamers of the Compania Transatlantica Española, the *Alicante*, the *Montserrat*, and the *San Ignacio Loyola*, were especially fitted up as hospital ships, and contain four large wards of 96 beds each, four small isolation wards, and surgical wards for operations. The ships are lighted all over with electricity. To insure a supply of fresh air the port-holes are kept open when weather permits, and there are as well a number of large air pumps. Each vessel carries a large quantity of drugs; baths are also provided, while for the con-

valescent there is a large and comfortably furnished saloon. On the three ships accommodation is found for 1,500 patients. During the first two years after the erection of the hospital of Alfonso XIII 80,000 patients were admitted into its wards, and more than a thousand operations were performed. In 1897, the third year of its existence, fewer patients were treated, and at the same time the rate of mortality decreased. This diminished death-rate is ascribed to increased hospital space for each patient, which is secured by the early removal of convalescents to the annexe and hospital ships. The number of sick from March to December, 1895, was 49,485, with 3,200 deaths. In 1896 the number of sick was 232,714, with 10,610 deaths; from January to June, 1897, there were 201,247, with 3,691 deaths. Yellow fever headed the list of diseases. The wounded admitted to hospitals during the period aforesaid numbered 11,912, distributed according to year as follows: 1895, 1,189; 1896, 7,270; 1897, 2,643. The number of deaths was 523. The total mortality, counting both sick and wounded, from March, 1895, to June, 1897, was 22,497.

The total number of deaths among medical officers in the hospital service of the army and navy since the beginning of the rebellion has been 50, of which number more than two-thirds have been the victims of yellow fever.

#### LITERARY NOTES.

WE are pleased to note that Dr. Beattie Crozier's Civil List pension of £50 has been increased to £100 in order to enable him to complete his great work, *The History of Intellectual Development on the Lines of Modern Evolution*, the first volume of which appeared in 1897.

In the July number of the *Phonographic Record* Sir Wm. Gowers has an interesting and valuable communication upon an obscure form of chorea; Dr. Fletcher Beach discourses ably upon mentally deficient children; while the troubles and trials of the assistant and the *locum tenens* have a sympathetic exponent in Dr. Lamming Burton.

Dr. G. Sims Woodhead's paper entitled *Experiments on Living Animals* (reprinted from the *Medical Magazine*) is written in a frank and manly spirit, and is one of the best replies to the antivivisectionists that we have read. He says that in the many experiments which he has seen performed he has "met at most only two experimenters who have not taken every possible precaution to minimise not pain merely but even discomfort to the animal under experiment." He adds that "it is deemed essential that an animal should be spared all unnecessary pain, not from fear of the legal consequences but on purely moral and ethical grounds." He gives some striking proofs of the much lower degree of sensitiveness to pain possessed by animals, even so high in the scale as the horse and dog, as compared with human beings. He gives the following remarkable illustration of the inconsistencies to which the antiscientific bias may lead its victims:

One well-known lady, who is supposed to hold strong views against "vivisection," is said to have remarked, or even written, that the sacrifice of many women for the sake of gratifying and developing the genius of one man like Byron was more than justifiable, and that women so sacrificed should feel honoured. Whatever one may think of such hysterical balderdash one is scarcely prepared to find the same lady arguing that man has no right to subject animals to pain or discomfort under any circumstances whatever.

According to a writer in a recent number of *Appleton's Popular Science Monthly*, the custom of trephining was much practised in prehistoric times, as the skulls of these remote periods show, and is still in vogue among some peoples. Among these are the people of the Berber stock in the Djebel Aurès and the Djebel Chechar of the edges of the Algerian plateau. The method of performing the operation is carefully described by Drs. H. Malbot and R. Verneau. The former was shown by a native doctor a skull with more than a dozen circular holes, two slits, and a large irregular orifice, all of which had been made when the man was alive. The skull was kept hidden, and was evidently used as an example by the local doctors. The natives have recourse to trepanning for blows or wounds on the head; and it does not matter how long before the blow may have been given if only the sick person can remember that he has had one. The operation is not severe. A woman, tired of her husband, is said to have called in the service of a trepanner in order to get a divorce from him by producing a piece of her skull and affirming that he had broken it in some of his cruel acts.