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The Section Of The Navy, Army, And Ambulance

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of affairs should no longer exist. There ought to be—and in the public interest this must be insisted on—a health officer for the Clyde, whose exclusive duty it shall be to deal with the shipping. In the meantime the medical officers of health doing duty on shore along the Clyde banks have to inspect the shipping, while some firms engage private medical practitioners to look after the health of their ships in the river. This is not sufficient; and so urgent do we consider this matter that we hope before a week is over to see the omission remedied, and to learn that a medical officer of health has been appointed to deal with the Clyde shipping, not merely during the present emergency, but permanently. He will have plenty of work, and the gain to the shipping community on the Clyde and to the country at large will amply repay the few hundred pounds expended upon so necessary an officer.

THE SECTION OF THE NAVY, ARMY, AND AMBULANCE.

THE wide scope of this new Section is well shown in the proceedings which we publish in full in this week's issue of the BRITISH MEDICAL JOURNAL. The papers read chiefly related to the army medical services, but the navy came in for a share of attention, while under the head of ambulance were included problems connected with the sick and injured in civil life, especially in our great towns.

It is hardly possible to urge too strongly on the attention of the War Office the importance of the papers concerning the regular and auxiliary medical services, contributed as they are by officers of ripe experience and judgment, and discussed by others possessing the same qualifications. The discussions can hardly fail to be of considerable assistance to those who may have to deal with the serious problem of the future reorganisation of these services, which, we trust, will be taken in hand immediately after the termination of the Boer war. We hope the scheme foreshadowed in the resolution following Mr. Cantlie's paper will be worked out without undue delay, and placed in the hands of the Minister for War.

Brigade-Surgeon-Lieutenant-Colonel J. E. Squire grappled with the difficult problem how best to augment medical *personnel* in the field, which of course hinges on the question of reserves. He condemned the hand-to-mouth system of mixing up untrained civil surgeons and ambulance men with the regular establishments on the eve of a war; and insisted that all reserves of officers and nurses, male and female, should be taught in peace something of army organisation and methods, and especially should learn the meaning of discipline. He expressed a strong suspicion that inattention to these essentials in *personnel* has had much to do with the grounds on which the alleged failures and scandals in the South African military hospitals have been based. Civil units in their proper place may be of great service, but should not be recklessly mixed up with the regular army units.

Brigade-Surgeon-Lieutenant-Colonel Peter Giles expressed similar views in his scheme for the organisation of volunteer medical units. He urged that a volunteer medical officer of sufficient rank should be attached to the office of the Director-General, and under him should inspect and supervise the volunteer medical services.

In the discussion which followed this paper, Mr. Frederick Treves, as the outcome of his experience during the war, advocated that field hospitals should be larger units, say 300 instead of 100 (so-called) beds; this would certainly facilitate their subdivision into more efficient sections when necessary. He mentioned that the military and civil surgeons at the theatre of war, worked together in great harmony, owing largely to the liberal and unselfish way in which the former treated the latter; this testimony is all the more welcome, considering there have been attempts by the enemies of the medical service to sow discord between them. The question of orderlies Mr. Treves declared to be surrounded with almost incredible difficulty, inasmuch as their duties do not only lie in nursing but in pitching and striking tents, digging water trenches, and in every way handling the impedimenta of the hospital; he declared that female nurses—whose services otherwise are deeply appreciated—cannot take the place of the male orderly in the field hospitals. This will appear to be common sense to all who have any experience of military life or of war. He recognised that the formation of a reserve of medical officers is full of difficulty; they must necessarily be young men, for it is useless to expect medical men in settled practice to hold themselves available for war services.

Mr. Cantlie's paper on how to link the regular and auxiliary forces deserves special attention, as coming from a man who is always thoroughly practical in his suggestions. He would organise the militia and volunteer medical services on lines, if not identical, at all events parallel with those of the regular forces; and would link the three branches of the service together, just as the several battalions of them are already linked in the *Army List*. His views are likely to be largely embodied in the scheme which is being prepared for submission to the War Office.

Brigade-Surgeon-Lieutenant-Colonel G. S. Elliston, in his remarks on volunteer brigade companies, gave some interesting reminiscences of how the floating volunteer regimental medical atoms began to be drawn together into some sort of combination. It is liable to be forgotten that their first cohesion was in the Volunteer Ambulance Association, which some two-and-twenty years ago originated in the enterprise of Major Maclure of the London Scottish, who enlisted the aid and sympathies of such well-known officers in the War Office as Surgeon-Generals Munro and Mackinnon, and their two assistants Surgeon-Majors Don and McNalty.

The papers on how to adapt bearer companies and field hospitals so as to act with cavalry or other mounted troops by Surgeon-Major J. F. S. Caverhill, of the Lothian Yeomanry, and Surgeon-Major V. Matthews, V.M.S.C., as well as that by Surgeon-Major F. L. Stephenson, V.M.S.C., on the use of the cycle in rendering first aid, grapple with subjects of no little difficulty. To enable the hospital service to keep up with rapidly-moving cavalry means that it must itself have powers of rapid locomotion; it must be mounted or equipped with light carts; on the whole the latter mode seems to commend itself most.

Surgeon-General J. B. Hamilton dealt trenchantly with the condition of the Royal Army Medical Corps, and we commend his outspoken criticisms to the earnest attention of those on whom will fall the work of reform.

The other papers read in the Section are well worth

study. Those relating to Infectious Diseases on Board Ship by Staff-Surgeon W. J. Colborne, R.N.; on Small-bore Rifle Wounds, by Mr. Clinton Dent; and on Sanitation in Camps, by Major James, R.A.M.C., all relate to the services. Those on First Aid and Transport of Sick and Wounded in Civil Life in Large Towns, by Surgeon-Major G. A. Hutton (retired); and on First Aid in Civil Life, by Surgeon-Major J. J. de Zouche Marshall, are also of importance, and indicate how wide an area of medical work is embraced in the Section.

THE PRESIDENT OF THE BRITISH ASSOCIATION.

THE medical profession has reason to be proud of the fact that two of its members have in successive years occupied the distinguished position of President of the British Association for the Advancement of Science. The Association is also to be congratulated on having chosen two such representatives of medical science to preside over its meetings as Sir Michael Foster and Sir William Turner. Sir William Turner was born at Lancaster in 1832, and received his medical education at St. Bartholomew's Hospital, London, where he had a distinguished career as a student. He became a member of the Royal College of Surgeons of England in 1853, and four years later he took the degree of M.B. in the University of London. At the age of 22, he was appointed Demonstrator of Anatomy in the University of Edinburgh, and on the death of Professor John Goodsir in 1867 he succeeded to the chair. Sir William Turner's work as an anatomist has placed him in the front rank of workers in that branch of science. The *Transactions* of various learned societies contain many communications from him, and he was also a contributor to the reports of H.M.S. *Challenger*. He is one of the founders and editors of the *Journal of Anatomy and Physiology*. He has been Dean of the Faculty of Medicine in the University of Edinburgh, and President of the Royal College of Surgeons of Edinburgh. In 1889 he was President of the Anthropological Section of the British Association. In 1898 he was elected to the Presidency of the General Council of Medical Education, on which he had for many years previously represented the University of Edinburgh. He was a member of the Royal Commission appointed in 1881 to inquire into the working of the Acts affecting the medical profession. Honours have been showered upon him from many and diverse quarters. The Neill medal of the Royal Society of Edinburgh was awarded him for his contributions to Scottish natural history. The Royal Irish Academy has conferred its honorary membership upon him, and amongst other bodies which have bestowed a like distinction are the Anthropological Societies of Berlin, Rome, and Paris, the Royal Medical and Chirurgical Society of London, the Royal Academy of Science of Berlin, the Literary and Philosophical Society of Manchester and the Obstetrical Societies of London and Edinburgh. The Universities of Oxford, Glasgow, Dublin, Montreal, Toronto, and Durham have conferred upon him honorary degrees, and he has been elected a member of the Athenæum Club under the rule allowing the Committee to elect men who have attained eminence in science, literature, the arts, or public service. In December, 1898, on the occasion of the celebration of the Jubilee of the St. Petersburg Academy of Medicine, Sir William Turner was made an honorary member of the Academy. The honour of knighthood was conferred upon him in 1886. Sir William Turner is a Deputy-Lieutenant of the City and County of Edinburgh. He has also shown a keen interest in the Volunteer movement. He joined the force at its institution in 1859,

and for thirty years he held a commission in the Queen's Rifle Volunteer Brigade (Royal Scots), retiring in 1889 with the rank of Lieutenant-Colonel. His presidential address delivered this week at Bradford, an abstract of which appears at p. 690, was worthy of the man and of the occasion.

THE UNIVERSITY OF LONDON.

THE first meeting of the reconstituted Senate of the University is fixed for October 24th, and the last day for sending in nominations to the Clerk of Convocation of candidates for the sixteen seats to be filled by election from that body is the 17th of this month. It is anticipated that the election of the new Senate will be completed by October 12th, but two more meetings of the old Senate will not improbably be summoned early next month to transact formal business. There appears to be every prospect of a keen competition for the Convocation seats on the new Senate. Two rival organisations are engaged in pressing the claims of their nominees. The Association of University of London Graduates, which was first in the field with a complete list of candidates in every faculty, with the exception of that of music, is now confronted by the Union of University of London Graduates, which during the past week has put forward candidates in Law and Medicine. Thus, Mr. Joseph Walton, Q.C., is to be opposed by Sir H. H. Cozens-Hardy, who preceded Mr. Walton as Chairman of the General Council of the Bar and was before his elevation to the Bench the representative of North Norfolk in the Liberal and Radical interest. Sir H. H. Cozens-Hardy was also the active chairman of the committee of graduates who supported legislation in general accordance with the report of the Gresham Commission. In medicine Dr. Ringer, F.R.S., and Mr. A. Q. Silcock, F.R.C.S., are to be opposed on behalf of the Union by Dr. J. F. Payne, B.Sc.Lond., M.D.Oxon., a member of the present Senate, and Dr. T. Barlow, B.S., B.Sc. Dr. Barlow's candidature is interesting because he was a member of the Statutory Commission which framed the new statutes for the government of the University. Considerable discussion has already arisen, and is likely to increase as the election approaches, in reference to the proposal of the Commissioners to "concentrate" the preliminary and intermediate teaching, hitherto carried on at each medical school. In their final report the Commissioners stated that they had "come to the conclusion that some kind of concentration is desirable," and they only hesitated to frame a statute themselves for the immediate consummation of the end they so devoutly desired out of respect to the absence of "such consensus of opinion in regard to the mode in which concentration should be carried out" as would enable them to do it. Representations made to the Commissioners on behalf of the metropolitan medical schools were sufficient to indicate that there are strong objections to such wholesale "concentration" as is foreshadowed by the Commissioners; and graduates, especially those connected with the teaching staffs of the London hospitals, will do well to study this question attentively. In the musical faculty it is possible that a harmonious arrangement may be arrived at, and the handful of musical graduates may be spared the rancour of a contested election. Mr. J. W. Sidebotham, we understand, commands the confidence of a majority of the musical graduates, and as he regards the external work of the University as of vital importance, and accepts the formula of the Association as to keeping open to all comers on terms of equality and impartiality all the degrees and distinctions of the University, he is pretty sure of election.

THE PLAGUE IN GLASGOW.

OUR Glasgow correspondent, telegraphing on September 6th, says: "Plague situation improving. No new cases in Glasgow or Govan. Patients in hospital doing well. Of