

THURSDAY, OCTOBER 9, 1884

*THE CHOLERA POISON*

THE reporter of the French Commission appointed to investigate the mode of action of the cholera poison and its method of propagation, as judged of from the behaviour of the disease during the epidemic in the southern provinces of France, has made public the conclusions which have been arrived at. It will be remembered that the French Commission which studied the same subject in Egypt last summer differed from the German one in regarding the blood as containing the specific organism of the disease, a contention which found no support in this country when the medical societies had had an opportunity of examining microscopically the preparations which were supposed to afford proof of it. Dr. Koch, chief of the German Commission, on the contrary, declared that the French statement was due to an error of observation, and maintained that the comma bacillus which he had discovered in the coats and contents of the intestines formed the specific germ of the disease. The French Commission of 1884 now return to the subject by still maintaining that the blood contains the poison, and that the initial lesion of cholera takes place in the blood. In proof of this they describe the changes which the blood cells undergo during the process of cholera; they regard certain modifications, such as result from the entire loss of elasticity of the globules, as one of the most certain signs of the patient's impending death; they maintain that by the hourly examination of the blood of cholera patients the progress of the malady can be mathematically followed; they assert that cholera, as such, is transmissible to the rabbit as the result of the injection into its veins of the blood of a cholera patient at the algid period; and lastly, they maintain that the microbe specially described by Dr. Koch has no such specific properties as have been claimed for it.

So far the two sets of observations are diametrically opposed to each other, and neither of them finds much support from the investigations of Drs. Lewis and Cunningham in India. The French contention that cholera is transmissible to one of the lower animals is at variance with all previous trustworthy experiments, and until the details of the method of operating and of the symptoms induced are made public, it would be premature to accept the conclusion at which the Commission have arrived at as in any way proven. But, on the other hand, time is not lending support to the contention of the German Commission, and it is asserted that the early labours of Dr. Klein in Calcutta have confirmed the view which he has all along held, that the announcement of the discovery of a specific cholera organism in the comma microbe is, at least, premature. Fortunately, many observers are now at work in the field of cholera micro-pathology, and the opportunities which have been, and still are, afforded for such work both in Europe and in India are exceptionally favourable. The interests of science will be best observed by waiting for the results of the labours now in progress, and by the exercise of caution in accepting any views which are based on any isolated series of experiments. But whatever be the result, Dr. Koch and the German

VOL. XXX.—NO. 780

Commission must be regarded as having given fresh life to a scientific question the interest in which had for some time past been flagging, and to them must be given the credit of having secured in Dr. Klein's work at Calcutta the establishment of an English laboratory for the elucidation of a subject which this country should always regard as peculiarly its own, in view of the fact that among its possessions is the country which has always been regarded as the home of cholera.

*THE SANITARY INSTITUTE AT DUBLIN*

THE Sanitary Institute of Great Britain succeeds, by its annual migrations from town to town, in securing a widely-diffused interest in matters relating to public health, and there are but few large towns in the United Kingdom that stand in greater need of some such stimulus than Dublin, where, under the presidency of the veteran sanitary engineer, Sir Robert Rawlinson, C.B., the Institute has met this autumn. Within the past twelve years we have made great strides in organising a sanitary administration in this country, every portion of which is subject to the control of a sanitary authority having at least two executive officers—the medical officer of health, who is intended to be a skilled adviser as to the principles which should be held in view in action taken for the promotion of health; and an inspector of nuisances, whose functions relate in the main to the periodic inspection of his district with a view of the removal of such conditions as are likely to cause injury to health, or nuisance. In Ireland a somewhat similar organisation has also been established, and, as in this country, the working of the system is subject to the control of a central body known as the Local Government Board. But to judge from a paper read before the Institute by Dr. Edgar Finn, there is a wide difference between the efficiency of the two systems, and it is certain that, whether judged by the progress that has actually been made or by the amount of money that has been raised by way of loan for the execution of sanitary works in England and in Ireland, the latter country must be regarded as comparing very unfavourably with the former.

According to Dr. Edgar Finn, this is partly due to the fact that the Irish Local Government Board is in itself unmindful of using the ordinary means at its disposal for enforcing the proper carrying out of the provisions of the Act under which it is constituted, partly to the circumstance that in the large mass of the sanitary districts the Boards of Guardians who have been constituted the sanitary authorities take but little interest in their sanitary duties, but mainly to the faults inherent to the system under which the medical officers of health are appointed in the rural districts. In Ireland the dispensary or poor-law medical officers are appointed to act as rural medical officers of health, and Dr. Finn points out that the miserable addition of from 10*l.* to 15*l.* to their other salaries does little more than suffice to induce them to hold their tongues, and to take no official notice of the conditions of dirt and unwholesomeness with which they come into contact. And not only so, but it is alleged that such officers cannot possibly be unfettered and independent in their action, for they are generally the medical attendants of the Guardians whom they serve, and who

B B