mated at 70,000 to 100,000. Great difficulty has been found by large employers of labour in keeping their Chinese workmen from going to their villages. To conciliate these workmen as far as possible, certain concessions have been made whereby one or two large companies can treat their own men (under proper medical supervision) in isolated quarters near their own premises, instead of having all cases removed to Kennedy Town Hospital, as formerly. The hot season is now at its height, and the returns of cases during the last three weeks show a definite fall:

Week ended—	Cases.	Deaths.
1st June ...	213 ...	207
8th ,, ...	161 ...	155
15th ,, ...	151 ...	151

In 1894 the number of cases to 21st June was 2,007. During the last few days the cases per day average 20.

The number of cases of small-pox reported from the beginning of the year to the week ending May 25th has been 83, while the deaths have numbered 52.

INDIA.

Ethnographic Survey of India.—The Malaria Commission in India.—The F.R.S. for two Indian Medical Service Officers.—The Kausali Institute.—Hot Weather: Decrease of Plague.

MUCH satisfaction is felt at the decision of the Government of India to carry out a complete ethnographic survey of India under the direction of Mr. Risley, the Census Commissioner, whose great interest in the subject is witnessed by his well-known book on *The Tribes and Castes of Bengal*, and by various papers in the *Proceedings* of the Asiatic Society, which is also rich in fragmentary work by various writers on this subject; the hill tribes of Assam, for instance, having been recently dealt with by Lieutenant-Colonel Waddell of the Indian Medical Service. However, a great many very interesting tribes, especially of Central India, have never been adequately dealt with, and those of Chotta Nagpur have by no means been exhausted by Colonel Dalton's work on them. Owing largely to the strictness with which marriages between different tribes and castes is prohibited in India, racial characteristics have been preserved unchanged for many centuries to an extraordinary degree, so that the results of a full inquiry, with measurements, cannot fail to be of the greatest interest. The inquiry is expected to last about five years, during which information will be collected from all who have studied it locally. The weakest point of the scheme is that the head of it is expected to do the whole of the vast labour which it will involve in addition to his ordinary duties, while only one native assistant surgeon is placed on duty for the purpose of making all the required measurements. This is an example of the false economy which so often in this country robs such investigations of half their value. Possibly, as the work proceeds, the necessity of adding to the staff will force itself on the attention of the Government, while in the meantime Lord Curzon may be congratulated on the initiation of so important a piece of work.

Drs. Stephens and Christophers, of the Malaria Commission of the Royal Society, have arrived in Calcutta to continue their investigations in India, where they may rely on every possible help being given them. Although the present season is that of the minimal prevalence of malaria, yet there is no lack of cases, which will soon be increasing again shortly after the onset of the rains. Much work has been done during the last year or two on the distribution of mosquitos and malaria in India, while two Indian Medical Service officers have succeeded in producing malaria by means of the bites of previously infected *Anopheles*. An illustrated paper by one of them has appeared in the recently-issued number of the Scientific Memoirs by medical officers of the army of India, which, by the way, is an unusually interesting one, reflecting the great revival of research work in India as a result of increased attention given to tropical diseases.

The fact that out of the fifteen scientists nominated for the Fellowship of the Royal Society this year no fewer than two are members of the Indian Medical Service ought to act as a further stimulus to those who are working under undoubted difficulties of climate and multifarious duties. Major Ross's work needs no bush, but owing to the very technical nature of that of Major Alcock, it is necessarily less well known. He was for several years naturalist to the Marine Survey of India, and since 1894 has held the post of Professor of Zoology and Superintendent of the Museum at Calcutta, where he has done a vast amount of work in organising the zoological portion of the museum, and in working out and classifying many of the deep-sea fauna, especially the crustaceæ, his work on which is well known to European scientists.

The Kausali Institute is doing very good work, an average of about one case a day for the prevention of hydrophobia being treated. Many of the patients are natives. The results up to date compare favourably with those obtained in Europe. Many thousands of rupees have already been saved to the Government, owing to its being no longer necessary to send soldiers to Paris to be inoculated, while many who could not afford such a journey are being saved from a frightful death. Antivenene will also be made at the institute, a supply of which near at hand will be of the utmost value.

The usual decline in the prevalence of plague during the hot weather months has been as marked as ever this year, the number of deaths returned for the whole of India having declined from 11,606 during the first week in April to only 1,066 in the last week of May, the fall being a general one affecting all parts of the country. Still the present numbers are just twice as large as at the same period of last year, so that there is no evidence whatever as yet of any tendency for the disease to die out, while, on the contrary, it has during the present season taken a much firmer hold of the North-west Provinces than before. It has become much more widespread in the Punjab, the strenuous efforts to confine it to the first infected districts having failed owing to the fatalistic obstruction of the ignorant villagers, who by means of rioting have forced the Government to abandon the more effective measures of evacuation of the villages. Fortunately the maximum seasonal prevalence of plague in India only lasts some three months of the year, while during the remaining months the mortality is small and the disease sporadic, so that before long it will probably be regarded as an endemic disease with epidemic periods like cholera and malaria, only causing but a tithe of the victims claimed yearly by the latter affections.

OBITUARY.

JOHN EDWIN SCOWCROFT, M.D., J.P.,

Bolton.

THE MAYOR OF BOLTON, Alderman JOHN EDWIN SCOWCROFT, M.D., J.P., died suddenly on July 10th of apoplexy. He was only 56 years of age at the time of his death, and had fulfilled his professional and municipal engagements on the previous day, when he appeared to be quite well, although his general health had been unsatisfactory for the greater part of the year.

Dr. Scowcroft, who was the son of the late Mr. John Seddon Scowcroft, received his early education at the Bolton Grammar School. His medical education he obtained in Manchester and Liverpool, and in the Manchester school he was for a time Prosector in Anatomy. He qualified in 1868, and immediately thereafter commenced practice in Bolton. Among other qualifications, he held the St. Andrews M.D. degree, the F.R.C.S. of Edinburgh, and the F.F.P.S. of Glasgow. For thirty-three years he continuously practised his profession in Bolton, and a few years ago he was joined in partnership by his son, who had gone out to South Africa as civil surgeon a few weeks only before his father's death. In addition to many other appointments, Dr. Scowcroft was Honorary Surgeon to the Bolton Infirmary, and Honorary Medical Officer to the Bolton Rescue Home. He had also been for some years one of the medical inspectors under the Factory Acts.

He was placed on the Commission of the Peace for the Borough in 1881, and he was Surgeon-Captain in the Local Infantry Corps. He took a great interest in Sunday School and other religious work.

But it is probably in connection with the municipal affairs of Bolton that his greatest reputation was won. He worked in connection with its Town Council for 21 years, 13 years as councillor and 8 as alderman, and he had been Mayor of the town for about two years at the time of his death. He took particular interest, as was to have been expected, in all

matters relating to the sanitary condition of the borough and the health of its inhabitants. It was recognised that he had rendered special service in helping to carry out improvements in regard to unhealthy areas, for the abatement of smoke and other nuisances, for the provision of public baths, and most especially for the provision of infectious diseases hospitals. It has been said that the town of Bolton will suffer greatly and be much the poorer for his loss. And by his patients and acquaintances it is felt that a skilful, kindly, and good man has gone from them. Deep sympathy is felt with his widow and family in their bereavement. Dr. Scowcroft was a member of the Lancashire and Cheshire Branch of the British Medical Association.

ROBERT BLACK, M.D.,

Assistant Surgeon to the Sussex County Hospital, Brighton.

THE recent accident on the Matterhorn, in which Dr. Black lost his life, closes a useful and distinguished career.

His father was a solicitor at Brighton, and here Robert Black was born, and passed his school days; here he began his professsional education as a pupil at the Sussex County Hospital, and then he passed on to the London Hospital. He took his M.B. (with honours) at the London University in 1881, and returned to Brighton, being appointed Assistant House-Surgeon and then House-Surgeon at the County Hospital. He became M.D. in 1882, and eventually commenced private practice as partner with Mr. N. P. Blaker, with whom he was associated at the time of his death. He was soon appointed Assistant Surgeon at the County Hospital, and succeeded to a post on the Senior Staff a few years ago.

One of his colleagues writes as follows: "He was widely known socially and in his profession; his early death, and especially the tragedy of it, will be deeply regretted. It is not possible for anyone to be more truly mourned. Intellectual, cultivated, and artistic, a good musician, a lover of Nature, and full of philosophic speculation, he was an excellent companion. A keen sense of humour, combined with a pessimism largely assumed, hid very thinly the real kindness of his heart. Generally goodhumoured and equable, he was roused by anything not quite just and honest. First rate in knowledge, purposeful, and painstaking, he gained much success. It will easily be seen how good a colleague is lost, and how charming a friend."

THE LONDON COUNTY COUNCIL AND THE PUBLIC HEALTH.

AT the last meeting of the London County Council a report was received from the Public Health Committee dealing with a variety of interesting questions.

Regent's Canal.—Dr. Cooper, the chairman, stated that attention was being directed to the condition of the Regent's Canal with a view to prevent nuisance arising therefrom, as was the case last year during the summer drought.

Small-pox.—The medical officer had, the Committee reported, called attention to the fact that 32 cases of illness certified to be small-pox had been notified in London during the present year. Nine of these cases had, however, been returned from the hospitals of the Metropolitan Asylums Board as not suffering from small-pox. Of the remaining 23 actual cases 17 have been notified since the first week in June. The 23 cases are distributed among ten metropolitan boroughs, namely: Paddington, Kensington, Hammersmith, Fulham, Marylebone, Islington, Hackney, Bethnal Green, Stepney and Walworth.

Tuberculous Cows.—The Committee further reported with reference to tuberculous cows in London, that unless and until Professor Koch's latest views are generally accepted, it would be unwise to disregard this source of infection. The Committee's attention had been directed to two cows certified by the Council's veterinary inspector to be suffering from tuberculous disease of the udder. In the first case the cow was slaughtered, and its carcass, being found to be badly affected with tuberculosis and unfit for food, was destroyed. In the other case notice of the condition of the cow was given to the occupier of the cowshed premises, and he was cautioned against selling or using the milk from this animal. It was subsequently ascertained that the cow had been sold by auction at Romford market with several others, and the purchaser had not been traced. This case, in the Committee's opinion, illustrated the need for power to seize and slaughter cows affected with tuberculous disease of the udder. The Council on June 18th instructed the Parliamentary Committee to seek legislation in this direction. A further report of the Committee recommending that Dr. Klein should undertake the bacteriological examination of milk at a cost of £215 5s. per 100 samples was after debate referred back to the Committee for further consideration.

Plague.—In view of the possible importation of plague, the Committee was authorised to act for the Council during the approaching recess.

MEDICAL NOTES IN PARLIAMENT.

[FROM OUR LOBBY CORRESPONDENTS.]

Lead Poisoning.—Mr. Coghill last week called the attention of the Home Secretary to the fact that out of 64 cases of lead poisoning reported during June, only 8 were in the china and earthenware trades, and asked why under those circumstances new special rules were necessary for a trade in which relatively few cases occurred. Mr. Ritchie said the figures were correct, but the 8 cases in the china and earthenware trade included 2 of the 4 fatal cases reported in the month. The remaining 56 cases were spread in small numbers over many trades. There was only one trade, the manufacture of white lead, in which the number of cases was larger than in the china and earthenware trades, and for that trade new rules had recently been made. The reasons for proposing new rules for the china and earthenware trade had been fully given in the published reports.

Hospital Beds for Wounded Officers.—General Laurie made an inquiry on this subject last week, and Mr. Brodrick replied that at Netley 16 beds were available, and that in all 75 officers had been treated there. At Herbert Hospital 2 beds were available, but none had applied to be treated there. More officers might have availed themselves of the accommodation provided in these hospitals. As regards private accommodation it was provided in some cases free of expense, owing to the generosity of private organisations. The question of providing for private medical attendance at the public expense was under consideration.

The Army Estimates.—Thursday in last week was devoted to the Army Estimates, and the medical vote was put down after the salary of the Secretary of State, in order to get a discussion on the R.A.M.C. Unfortunately the expectation was not realised, and so this year there will now be no chance of discussing medical matters. This was much regretted, but the debate on the Dawkins report on the organisation of the War Office and other questions occupied the whole evening, and the debate on Mr. Brodrick's salary was not concluded when the House rose. In the course of the evening Dr. Farquharson managed very cleverly to get in some remarks on the Committee now sitting on the R.A.M.C., and he criticised the composition of it as not quite broadly representative of the principal medical schools. He complained of the undermanning of the Army Medical Department, and claimed for the position of Director-General greater power and consideration. He especially referred to the premature retirement of, and the insufficient reward given to, the late Director-General after a brilliant career. He pointed out that any reforms which relied on civil doctors for home duties, while the army doctors were used for foreign service, would not popularise the service, and would lead to a breakdown in war time. He regarded the appointment of Sir F. Treves on the Committee as very valuable, but there ought to have been also appointed some army medical officer of long standing and experience. He specially urged that the recommendations formulated by the British Medical Association should be carefully and specially considered by the Committee of Experts before they arrived at any decision.

Typhoid among the Troops in South Africa.—In answer to Sir Walter Foster, the Secretary of State for War said that the figures were forwarded in weekly returns, and could not, therefore, be calculated for any one exact month. From returns received since June 25th, the deaths for the four weeks ended April 26th were now given as 194. For the five weeks ended May 31st the admissions were 2,300, and the deaths 326.

Dr. Tebb's Appointment.—Mr. Corrie Grant asked the President of the Local Government Board last Monday whether he was aware that Dr. Tebb was elected Medical Officer for Penge after open competition in response to public advertisement; why the Local Government Board refused to sanction his appointment; whether a profession of belief in vaccination was required from medical officers of health;