

subscriptions showed an increase of £1,160, and the bequests an increase of no less than £18,593, the figures being £27,048, against £8,455 last year, consequently the board of management have been enabled to reinstate the sum of £5,000, invested in Consols sold out to meet the expenses of last year, and also to repay a banker's loan of £1,500. In the course of the year 860 persons have shared the benefits of the institution, viz.—220 inmates and 640 pensioners. With regard to the latter it may be mentioned that, on the first day of each month, 600 cheques for £1 13s. 4d. are dispatched to pensioners resident in London and elsewhere.

An attractive series of entertainments has just been given in aid of the new wing of the Rotunda Hospital, Dublin; and it is believed a large sum has been realized.

The Administrative Council of the Pasteur Institute proposes to make an International appeal for subscriptions towards the erection of a monument to Pasteur.

A crematorium and chapel attached have been recently opened at Glasgow. The building, which has cost about £3,000, has the chapel on the high level and the incinerating chamber on the basement.

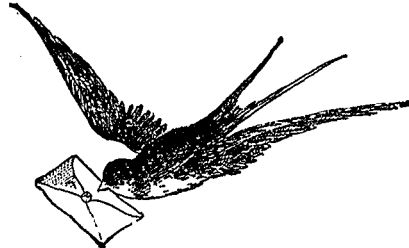
The *British Medical Journal* comments somewhat severely on what appears to be the custom of most of the London Hospitals, the custom of supplying the names and addresses of members of their medical staff, to applicants desirous of privately consulting one or other of them. Recent events at one or two of our leading Hospitals where to some extent "touting" for private practice has been going on in "out-patient" rooms, no doubt has prompted what the *British Medical Journal* calls "this method of notoriety, *via* the hall porter."

Sir H. Acland, late Regius Professor of Medicine in Oxford University, was yesterday presented with the testimonial raised in commemoration of his services to the University and to medical science. The ceremony took place in the hall of All Souls College, and the testimonial consisted of a bust, to be placed in the University Museum, a cheque for over £3,000, to be devoted to the Sarah Acland Home for Nurses, and an illuminated address. The presentation was made by the Vice-Chancellor of the University, and acknowledged by Sir Henry Acland.

In response to a special appeal, issued a short time ago, for funds to enable the managers of St. Thomas' Hospital to open the five wards which have for many years been closed owing to want of funds, donations amounting to £28,000 have been received. Although this sum falls woefully short of the £100,000 asked for, the managers have decided, as an experiment, to open two of the wards early next year, and they hope that the public will accord sufficient support to enable them to maintain these wards, and also to open the remaining three, the accommodation in which is urgently needed.

A Sessional Meeting of the Institute will be held at the Parkes Museum, on Wednesday, December 11th, at 8 p.m. Sir Douglas Galton, K.C.B., D.C.L., LL.D., F.R.S. (Vice-President), will open a discussion on "The Lessons to be Learned from the Experimental Investigations by the State Board of Health of Massachusetts upon the Purification of Sewage." The chair will be taken by Sir Benjamin Baker, K.C.M.G., Pres. Inst. C.E., LL.D., F.R.S.

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Our Foreign Letter.

IN AN ITALIAN HOSPITAL.

(PAGES FROM AN ENGLISHWOMAN'S DIARY.)

(Continued from page 378.)

May 4th.—Arzolina was far weaker to-day, she could hardly speak, and has taken nothing of food. I gave the hypodermics morning and afternoon, and they dulled the pain for some hours anyhow. I do not think it can last long. Her brother and sister and some friends were there, so I did not stay. I asked the Professor this evening about giving more morphia; he said it often produced vomiting, delirium and almost greater suffering if given in excess. I said it must be a great temptation to people in pain like that poor woman to get some relation or friend to inject double what the doctor allowed, and he said many did it and died more quickly. But *so far* doctors did not anaesthetise even the worst cases, though he expected it would ultimately be allowed. Chloroform, laudanum, &c., might keep them entirely unconscious till death, but no one did it yet. He said patients generally had illusions, and believed the doctor's assurances of coming betterment; but I am not sure that he is right, for some of the women here *have* known they were going, and have longed for the hour of release. Still, it is undoubtedly a fact that a large proportion of the dying possess an extraordinary power of hope of recovery, and we agreed that it was good, as it made it far easier for doctors and Nurses. But we who *know* about incurable disease—we doctors and Nurses could not be deceived by others, nor deceive ourselves. Surely suicide must be the logical outcome if we did not believe it forbidden by God.

I asked the Professor if he did not think that the only deterrent from suicide for *non-credenti* was unwillingness to pain relations and friends. He answered, "And beyond a certain point, even that would not deter; we should feel our pain was more intolerable than theirs would be." And I remembered the chapter in Epictetus, "The open door," where he begins with the calm beauty of "My friends, wait upon God, when He Himself shall give the signal, and release you from one service, then are ye released unto Him;" and "If God give the signal for retreat, we must obey Him as our Commander," but continues, "Depart not *without a reason*," which surely is authorising *voluntary* departure, more explicitly counselled by the phrase, "Does it smoke in the chamber? if it is not much I will stay, if too much I will go out; for remember this always, and hold fast to it, that the door is open. . . ." Certainly Epictetus counsels terminating life, so that one does it "not unreasonably nor cowardly, nor making every common chance an excuse; but to escape from agonis-

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