

which many thousands of applicants have been freely supplied, visited the poor in their huts, restored many to health, comforted the dying—all this in connection with other missionary work, and all through those years was flattering himself with the thought that thereby he was only giving a practical exposition of Christianity, seeking to fulfil the Master's commission—nothing more.

But let us look still further for the facts to prove or disprove your position. Let us examine the records of the Medical Missionaries throughout Southern Asia, who have been prominent during the last half century, from Dr. Parker of Canton who had a larger surgical practice than any other living man down to the most obscure provincial practitioner. Ask the people, Heathen, Mahomedan and Christian, who know these men and are familiar with their work, still further, ask the men who, as you represent have had theology crammed down their throats against their will—ask them if in their eyes religion has been debased by these men, then ask the secular medical men of these countries, many of whom have toiled side by side with Medical Missionaries, if in their opinion medicine has been enslaved by these operations. For one, I have not a doubt as to what that testimony would be, and the facts thus elicited would show clearly whether your position is correct or not.

Finally, let me ask by what authority you condemn "healing the sick" "nursing" and "teaching" to a class of secondary agencies improper to be employed in propagating Christianity? These are primary agencies, *i.e.*, if Christ be regarded as authority. Deprive Christianity of these, its practical manifestations, and it ceases to be itself. It becomes another thing entirely, as powerless to elevate and bless mankind as Buddhism or only other heathen religion.

O. R. BACHELOR, M.D.,

*Medical Missionary, Midnapore.*

[We print the foregoing letter with much pleasure. We have nothing to say against medical missionaries, as missionaries of medicine, and cordially concede all that our correspondent has to say in praise of the great and good men who have laboured to extend the benefit of the rational practice of medicine and surgery to those who would otherwise be left to the superstitious delusions and religious mummeries which the savage and unenlightened resort to for the restoration of health. Neither have we anything to say against the missionaries of religion as such, and as long as they confine themselves to what we consider their legitimate sphere and manner of work, namely, the exposition of the principles and doctrines of their faith. But we do most seriously and radically object to medicine being practised for any other purpose than the cure of the sick, and we consider its ostensible or actual practice with the ulterior object of religious conversion to be immoral; and we repeat that such a system "at once discredits and debases religion and enslaves medicine." Times have changed since the era of Christ's ministry and an imitation of his proceedings in this 19th century would, in the altered circumstances of men and manners, be simply impossible, or, if possible, absolutely ridiculous. An argument of this sort has no value whatever. The preaching of Christianity now-a-days must consist in the application of Christian principles, which are eternal, to the radically altered conditions of men and society. To represent or act so that it may be believed that rational medicine owes ought of its efficacy or power to a profession of Christianity is, not to mince the matter, to proclaim or practice a deception unworthy of these days; and to use medicine as an instrument whereby people may be induced to accept a particular religious faith, is, we affirm, to under-value the power of commending that faith by preaching and teaching—that is, to discredit and debase it, and to use medical knowledge for a purpose foreign to its real and true end and object—that is, to enslave it.

Our correspondent's argument about "secondary agencies" is simply Jesuitism. A prejudice exists among mankind against jesuit emissaries who adopt the disguise of the courtier, the soldier, or the author for the ulterior object of conversion to Romanism. This prejudice we most fully share, and, doing so, we object to missionaries assuming the disguise of schoolmasters, doctors, or nurses, not for the purpose of teaching, healing, or soothing the sick bed, but for the purpose of propagandism.

Dr. Bachelor should have correctly cited and completed his quotation from the gospel of St. Matthew. It runs thus:—"Preach saying the kingdom of heaven is at hand, heal the sick, cleanse the lepers, raise the dead, cast out devils." It is a perversion of argument to apply this commission, which plainly included the bestowal of miraculous power, to the practice of a profession or

art which owes not a jot of its development, acquisition or success to Christianity or its apostleship.

We very much mistake the precepts of Christ and the spirit of Christianity if it justifies the procurement or purchase of conversions by indirect methods or "secondary agencies."—ED., *I.M.G.*]

#### DISINFECTANT TREATMENT OF CHOLERA.

TO THE EDITOR OF THE "INDIAN MEDICAL GAZETTE."

SIR,—With reference to the letter from the Civil Surgeon, dated Oude, September 20th last, published in your issue of the current month, I would submit that I believe chlorine, combined or uncombined, is beneficial in cholera. In the case under notice the black oxide of manganese was not used, therefore the gas obtained, I should have mentioned, was hydrochloric acid and not chlorine. Had black oxide of manganese been available at the time, it would have been employed, for the element in an uncombined form would be more potent than in a combined form. The carbonate of soda was added with a view to neutralise a portion of the acid, and to supply the loss of the alkali in blood which takes place in cholera. The object then, will be obvious, was to prepare a mixture containing the alkali with free acid. This might have been accomplished by employing the hydrochloric acid itself, but the latter at hand was in a limited quantity, and in a remote place like Mustat there were no ready means of procuring more, hence the expedient adopted to suit the circumstance. The quantity of carbonate of soda used was gr. xx to the ʒi: in my letter under reference it was marked one scruple—thus, ʒi—which appears to have been mistaken for ʒi by the printer.

The Civil Surgeon merits thanks for eliciting this explanation.

I am, Sir,  
Yours faithfully,  
G. D'ROZARIO.

*Honorary Surgeon, Med. charge Vingorla.*

VINGORLA, 20th November 1875.

#### CHLORIDE OF AMMONIUM IN HEPATIC ABSCESS.

TO THE EDITOR OF THE "INDIAN MEDICAL GAZETTE."

SIR,—Will you, or any of your readers, kindly inform me what general opinion has been formed regarding the use of chloride of ammonium in hepatic abscess? Is it believed that this salt will cause absorption of an abscess in the liver, and if so, what becomes of the pus?

It will be recollected that, a few years ago, the treatment of hepatic abscess by chloride of ammonium was thoroughly advocated by Surgeon-Major Stewart of the 21st Fusiliers.

Yours truly,  
UNINFORMED.

#### A. DIAGNOSIS.

TO THE EDITOR OF THE "INDIAN MEDICAL GAZETTE."

SIR,—With reference to the interesting case communicated by Surgeon Moriarty, 3rd Regiment, N. I. in the July number of the *Indian Medical Gazette*, which I had an opportunity of seeing only now, I beg to refer him for the diagnosis and pathology to Jaccond's works "Les paraplegies et l'ataxie du mouvement" when he will find them fully entered into. Leyden in "Klinik der kircken marks krankheiten" and Grainger Stewart also give similar cases.

I am, Sir,  
Yours obedient Servant,  
S. BRERETON.

*Surgeon, Officiating Erinpura Force.*

ERINPURA, RAJPOOTANA, 3rd November 1875.

**Influence of Quinine in Ulceration.**—In the 5th volume of *St Thomas's Hospital Reports*, Mr. Croft speaks to the value of quinine in serpigineus and phagedenic ulceration. In one case, which had resisted every treatment, quinine in 8-grain doses, combined with scruple doses of iodide of potassium, induced a rapid cure. The quinine caused a ringing in the ears about a week after the patient had commenced to take it, but the drug was not discontinued on this account. Details are given of two remarkable cases of phagedenic ulceration, one of which was syphilitic and the other non-syphilitic, in which quinine was of great service.—*Edinburgh Medical Journal.*