

Jullunder. Dr. Kenny received me as a friend and brother, invited me to dinner at The Melbourne Club, where I met many leading men connected with the various hospitals; he spoke delightfully of his Indian experiences, and paid a very high tribute to the work being done by I. M. S. men in India. At this dinner I met among others Drs. A. Norman McArthur and McAdam, the former is Gynæcologist to In-patients at St. Vincent's Hospital, the latter a leading practitioner whose kindness and hospitality much increased the pleasure of my visit.

Dr. McArthur most generously invited me to accompany him on his hospital rounds, and to be present at his operations, I look back with pleasure to many hours profitably spent watching his numerous and varied operations so skilfully and rapidly carried out.

Melbourne is well equipped with hospitals, the chief ones being:—

1. The Melbourne Hospital.
2. The St. Vincent's Hospital.
3. The Women's Hospital.
4. The Children's Hospital.

The Melbourne Hospital is the largest, and leading general Hospital in Victoria, with at present 309 beds, its in-door practice and outdoor clinics give ample material for the clinical training of students. During the year of my visit 5,544 in-patients and 21,606 out-patients were attended, the daily average of in-patients being 322 (extra accommodation being made). Thanks to the courtesy of Colonel C. Ryan, I was able to see something of the working of this institution, and be present at operations. The magnitude and usefulness of the work done here impressed me greatly. The buildings are old, and the wards and operation rooms are not up to present day standards, but all this is now being remedied as the Committee of Management have about £150,000 in hand. This sum is to be spent on re-building on the present site, and they have wisely insisted on their Architect spending six months in visiting the leading European and American hospitals, so that they will be able to utilize all the latest and best methods in the arrangement and construction of their hospital. This sum does not include Architect's fees, furnishing, fittings, or instruments and equipment for the four new operating rooms.

When complete, the new Melbourne Hospital should be an institution of which all Australians might well be proud.

The St. Vincent's Hospital—is managed by the Sisters of Charity, and is certainly one of the finest up-to-date institutions I have seen. The buildings,—which when rounded off and completed will be an architectural credit to Melbourne—include all modern improvements in hospital construction, and all known facilities for rendering the treatment of patients efficient and successful. The bright and cheerful wards provide that environment so necessary to the renewal of health and vigour, and its service is

placed at the disposal of sufferers of whatever creed or colour.

The various clinics deal with a yearly out-patient total of over 13,000, and 1,700 patients are annually treated in the wards. The operation list totals 1,477 for the year in which my visit was made, with a death percentage of 1.15. During my stay I was—by the courtesy of Mr. T. P. Dunhill, one of the Surgeons of this hospital—enabled to see him remove under local anaesthesia some Thyroids for the treatment of Exophthalmic Goitre, an operation which he pioneered in Australia, and which has been so markedly successful in his hands.

Lack of space prohibits me from writing fully of the Women's and Children's Hospitals, but the work being done in them is of a very high order, and any medical traveller staying in Melbourne should certainly not fail to visit them.

If this brief note should induce any brother officer to take a trip to Australia, I shall be glad to give any additional information, and judging by my own experience he will never regret making the journey. In conclusion I can only hope I may have the opportunity of returning to any Australian travelling in India some of the hospitality extended to me while a visitor to their Homeland.

B. H. DEARE, M.R.C.P.,
MAJOR, I.M.S.

Correspondence.

A MEDICO-LEGAL QUERY.

To the Editor of "THE INDIAN MEDICAL GAZETTE."

SIR,—I should be much obliged by your kindly replying to the following queries in the columns of your esteemed periodical:—

1. A causes grievous hurt to B either wilfully or accidentally. The latter does not want to report the matter to the police although the offence committed by A is cognisable. B calls his doctor, who may or may not be a private practitioner to be treated and ask him not to divulge the incident. Is the medical attendant right in complying with his patient's request?

2. A attempts to murder B who sustains either simple or serious injuries. The police are not informed. B's doctor is called to treat him and is perhaps the only witness of the offence committed. Is it the duty of the medical man to inform the police whether or not the patient or his friends want the matter to be known by the police?

3. A after receiving grievous hurt in a fight with B comes to hospital to be treated without the knowledge of the police. Is it the duty of the medical officer in charge of the hospital to inform the police whether or not A is anxious to have the matter reported?

MEDICO-LEGAL.

CONTENTS OF A HERNIAL SAC.

To the Editor of "THE INDIAN MEDICAL GAZETTE."

SIR,—I read with interest Colonel Jennings' note in the contents of a hernia.

On 24th September I did a radical cure in a left strangulated inguinal hernia in a Chinese boy about 18 months old.

The hernia contained the cæcum and is very long vermiform appendix. The case did well.

Yours faithfully,
A. FENTON,
MAJOR, I.M.S.

MANDALAY. }
November, 1910. }