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M.R.O. 1-38,000-16-10-20

MADRAS RECORD OFFICE.

Government of Madras.

Public DEPARTMENT.

G.O. No.	336	Press Mis.
Dated	21-3-1918	

Not to be folded or roughly handled

Proceedings of the Madras Government, Public Department,

21st March 1868.

No. 142. Read the following letter from the Collector of Madura, to the Chief Secretary to Government, Fort Saint George; dated Oosilamputti, 12th February 1868, No. 321.

I have the honor to submit a draft notice from the Zemindar of Saptur, offering a reward of Rupees 500 for the best Treatise on the European method of treatment of diseases, &c., and to request you will be good enough to obtain the sanction of Government for its publication gratis in five issues of the *Fort Saint George Gazette*.

2. I beg also to report, with reference to the Order of Government noted in the margin, that the Zemindars of Saptur and Elumalai have undertaken to pay the salary of four Native Practitioners who may consent to undergo a course of training in the Dispensary for one year in the approved methods of prevention and treatment of the common diseases of the country.

10th June 1867, No. 1307, Revenue Department.

NOTICE.

A reward of 500 Rupees is offered by the Saptur Zemindar for a Medical work in the Tamil language.

2. The object of the work is to communicate to Native Medical Practitioners, in as simple and concise a form as possible, an elementary knowledge of the means of diagnosing and treating the most common of the medical and surgical affections that are met with in India.

3. It will be necessary to include in the work a brief outline of human Physiology, or, in other words, an account of the functions and uses of the different organs of the body.

4. A chapter must also be devoted to the description of the mode of conducting a natural case of labor, mentioning briefly the irregularities most liable to occur, and the mode of dealing with them.

5. A list of the most common medicines used by English Practitioners should be added, describing the character, mode of action, and dose of each drug.

6. All technical expressions, which cannot be translated into Tamil, should be as much as possible avoided.

7. A Committee will be held at Madura to decide as to the merits of the various works that may be sent in. Each Candidate must send his work to M. R. Ry. Davasikamany Pillay, within four months from the date of this Advertisement, with a motto attached, but without his name.

8. The successful author must present the Saptur Zemindar with fifty copies of his work.

(Signed) D. ARBUTHNOT,

Collector of Madura.

No. 143. ORDER THEREON, 21st March 1868, No. 366.

The Government are much pleased to find that the Zemindar of Saptur is inclined practically to aid in the diffusion of sound medical information, and direct the publication of the advertisement free of charge in five issues of the *Gazette*.

2. They also accept with much satisfaction the offer made by the Zemindars of Saptur and Elumalai to pay the stipends of four Native Practitioners while under instruction.

Proceedings of the Madras Government, Public Department,

21st March 1868.

3. The Inspector General, Indian Medical Department, is requested to place himself in communication with the Collector, and concert with him and the Civil Surgeon the means for utilizing the period allowed to the best advantage.

4. These Proceedings will be communicated to all Collectors.

(True Extract).

R. S. ELLIS,
Chief Secretary.

To the Collector of

„ Inspector General, Indian Medical Department.

Proceedings of the Madras Government, Revenue Department,
10th June 1867.

No. 142. Read the following letter from the Inspector General, Medical Department, to the Secretary to Government, Revenue Department, dated Fort Saint George, 24th April 1867, No. 147 :—

1. I have the honour to acknowledge receipt of Proceedings of Government No. 54 of 9th January 1867. as per margin, and, with reference thereto, will now proceed to give my views as to the practicable means of instructing the native practitioners of India in the approved methods of prevention and treatment of the more common epidemic diseases of the country.

2. Government are doubtless aware that, as a general rule, the practice of medicine in India is in the hands of a special class, and that the profession is, so to speak, hereditary, its traditions being handed down from father to son. The native physicians, so far as I am aware, receive no other special education than this. Some no doubt are able to study the ancient Hindu books which relate to the practice of medicine, or to derive information from translations of more modern Medical works; but it may be said of the great majority of the class of “Hakeems” and “Vytians” that they are destitute of that practical training in the recognition of the symptoms of disease, and of its appropriate treatment, which the State has a right to enforce of all who, as a means of livelihood, seek to follow the profession of medicine.

3. I would submit that it is highly important that the services of this class of subjects should be turned to useful account in the great sanitary and hygienic reforms which require to be undertaken for the benefit of the people. They are often men of considerable influence in their own spheres, and require only to be guided in right principles of action to become useful to the people.

4. In practice there would be found considerable difficulty in dealing with the class of Native Doctors who are the present Medical practitioners of the country. The sons and relatives, however, might be brought under training to fit them for their future duties, and in this way a foundation might be laid for the permanent improvement of the Medical profession in India.

5. This is not the first occasion that the important question of seeking to improve the position and *status* of Native Doctors and Midwives has been mooted. In the year 1862, the Madras Government remarked in Proceedings, as per margin, that “the Governor in Council Judicial Department, No. 1,051 of 4th July 1862. “will be prepared to give all possible encouragement to any well-digested plan

“for imparting a knowledge of European Medical science to the Native Medical practitioners and Midwives in the Provinces, and he requests that the Principal Inspector General will, in communication with the Principal of the Medical College, the Officer in charge of the Lying-in-Hospital at Madras, and any other Medical Officers whom he may think it advisable to consult, submit a detailed scheme for carrying out the object proposed, with an estimate of its cost.”

6. In connection with this subject I find that the views of the Principal of the Medical College and of the Superintendent of the Lying-in-Hospital were obtained by Mr. Cole, but owing, I believe, to the unfavourable report of the latter on a

class of native women trained as Midwives, no detailed scheme or estimate for carrying out the suggestion was submitted by the Head of the Medical Department.

7. Of late years, however, considerable encouragement has been given to the training of Midwives, both in Madras and in the Provinces. In Madras upwards of eighty-five European and East Indian women have obtained certificates of competency from the Lying-in-Hospital; and at Cuddalore, Manargoody, and Cuddapah, native women have been taught with a fair amount of success to practise Midwifery. In many of the Civil Dispensaries Lying-in-wards have been established, which hereafter, as the people become acquainted with them, will serve as practical schools for the training of Midwives.

8. In only one of the Civil Hospitals or Dispensaries, however, has any beginning been made in the training of young men, unconnected with the Government Medical Establishments, for the Medical profession. At Madura the Committee of Management resolved in 1864, that some youths should be entertained as pupils, and the subject is referred to in the Dispensary Report of that year. Dr. Joseph's Report on the youth now under training is attached. It is, I think, quite as encouraging as could be expected.

No. 16 of 8th February 1867.

9. The unfavourable seasons of the last two years have probably interfered with this movement, for nearly all the Dispensary funds have had heavy calls upon them, and have had to restrict expenditure, the people being too poor to contribute donations or subscriptions for merely medical charities.

10. It may be of interest to notice here, that this question of medical relief to the people has been attracting attention in the Punjab, and that in two or three districts, measures have been introduced by which the people voluntarily subject themselves to a tax to provide the salaries of "Hakeems," cost of medicines, &c., and to send the sons of Hakeems to the Lahore Medical School. The subject is favourably referred to in the Administration Report of the Punjab for 1864-65 (paragraph 403), and 1865-66 (paragraph 369)—see extracts appended.

11. In my predecessor's letter, No. 110 of June 6th, 1862, it is pointed out that the Medical establishments at the head-quarters of each Collectorate afford suitable means of practically teaching medicine and surgery on the European systems. Government, in Order thereon

No. 1,051, Judicial Department.

of 4th July, was of opinion that the experiment might be begun by selecting two or three districts, where, "as in Cuddapah, the local officers, both Civil and Medical, have shewn a practical interest in the matter." Except in the Madura Dispensary, where one pupil is at present employed, nothing seems as yet to have been done in reference to the Order above quoted.

12. Wherever the plan of training the sons of Native Doctors is attempted, it will be necessary to employ a Medical Officer as Civil Surgeon, who would take a real interest in teaching, and provide an intelligent Native Surgeon or Sub-Assistant Surgeon, conversant with the vernacular language of the district, to specially superintend the Medical studies of the young men. It would be necessary, to secure the proper attendance of the pupils upon the Hospital course, to give monthly

stipends, and to guarantee public employment in the District to those who reached a fixed standard of qualification.

13. As regards the nature and extent of the teaching, I should not be inclined to exact too much, in the first instance.

If this class of men could be taught how to do a minimum amount of harm with the greatest amount of good, and if they understood the uses and doses of the more common medicines of the country, and were capable of distinguishing the more ordinary forms of disease, and common injuries, and of treating the same correctly, I should not be inclined to insist upon anything more recondite. The systematic teaching of Anatomy and Physiology, of Chemistry, and Materia Medica, would follow in ordinary course, as the service of Government become sought after, and the supply of candidates enable the standard of teaching to be raised.

14. The expense to Government of such a scheme, if generally carried out, would be very considerable, but it is a question whether for such a purpose the people might not be expected to help themselves. From an interesting paper appended, it will be seen that, in some districts in the Punjab, the people themselves have voluntarily submitted to a tax of one and a half anna per annum on each house, in order that Hakeems might be provided, and medicines, &c., supplied to them in sickness. The details of this scheme are so interesting as regards the financial aspect of the question, that I deem it advisable to request that the Government may be pleased to direct Collectors of Districts to report whether anything similar to the Punjab plan is feasible in their districts; for if the scheme can by any possibility be made self-supporting, there is much greater probability of its being carried out on a scale likely to be of permanent use in the country.

I will defer, therefore, the submission of any estimate of cost pending the result of the enquiry, which I trust may soon be made.

15. I need not say that the Punjab scheme is capable of several modifications, and the details need not be followed implicitly here. The main subject on which I should like information is, whether the inhabitants of the several districts are desirous of assisting in this work by making some trifling pecuniary sacrifice.

Mr. Wedderburn, Collector of Bellary,

No. 249 of 22nd February 1867.

in letter appended, states that during the late epidemic of fever in that district, the better classes of people purchased Quinine pills at the rate of 6 Pie per pill, and that gentleman seems to think that an extension of the system would do good. Regarding this subject, I can only say that there can be no objection to the preparation and sale of large quantities of useful medicines, if the people are prepared to purchase them. The money recovered can be again applied to the purchase of drugs, and, without any actual cost to Government, an immense amount of useful assistance might be afforded to meet the frequently recurring epidemics of fever and cholera.

From J. M. JOSEPH, Esq., L. L. D., Acting Zillah Surgeon, Madura, to the Secretary to the Principal Inspector General, Medical Department, Fort Saint George, dated Madura, 13th February 1867, No. 16.

1. With reference to your Memorandum No. 591, dated the 14th instant, I have the honour to report that there is only one pupil who is locally entertained at the Public Civil Dispensary; he commenced his studies on the 1st of November 1865. I have carefully examined him. I find that he

possesses a very fair knowledge of drugs and their uses; he is quite competent to compound medicines, and to prescribe for cases of cholera and ordinary cases of affections of the bowels, intermittent fever, &c.; he is also well acquainted with vaccination, tooth-drawing, dressing, and bandaging.

2. I am of opinion that it would be desirable that he should continue his studies at the Dispensary for six months longer before he is sent out as a Native Doctor.

Extract from the Administration Report of the Punjab Territories for the year 1864-65.

Paragraph 403. "The employment of native *Hakeems* for the distribution of European medicines and treatment of the sick under the control of Medical Officers, a measure briefly adverted to in the last Administration Report, has been attended with success in some districts. In the district of Ambala a class of students has been formed from among the sons of these native practitioners, two of whom have proceeded to the Lahore Medical School to qualify as Native Doctors. It is hoped that the system may now be gradually extended, that thus the services and influence of these persons, who already possess the confidence of the native community, may be utilized in overcoming existing prejudices against the use of European remedies."

Extract from the Administration Report of the Punjab Territories for the year 1865-66.

Paragraph 369. "To this general disinclination to contribute to the cost of Dispensaries, there was a noticeable exception in the case of the Syalkote district. In that district the people have agreed to the imposition of a cess of one anna per house per annum for the purpose of providing funds for the establishment of a Dispensary at each tahsil or fiscal sub-division of the district. The cess is collected by the *Zaildars*, or superior village headmen, without the interference of Government officials, and the expenditure controlled by local Committees elected by the people, subject to the general control of a District Committee, composed of four members, one for each tahsil, presided over by the Deputy Commissioner. The income of the current year is estimated at Rupees 10,000, and out of the proceeds four Dispensaries, with suitable establishments, have been opened, one in each tahsil; and with the surplus funds seven young men, most of them sons of native practitioners, have been sent to the Government Medical School at Lahore for education."

A scheme for making useful the services of the native *Hakeem*, has been introduced with success into some districts of the Punjab. It may perhaps be made available, *mutatis mutandis*, for other districts and remote parts of India.

There are two Schools of Medicine known amongst the natives of the Punjab, the Yūnani or Greek School; and the Misrani or Egyptian School, otherwise known as the Hindee School. The books of the former are in the Arabic or Persian language, and some science may be found in it. The latter is almost entirely empirical, and undeserving of support; its text books are in Sanskrit or Hindee. Both equally disregard Anatomy, and the Professors of neither pay any attention to Surgery, leaving this to barbers.

The problems for solution are two—

First.—How to bring into useful action that knowledge which now exists amongst native *Hakeems*.

Second.—How to supplant their erroneous system by the higher knowledge and more correct practise of modern European Medical science.

The scheme laid before the readers of this Memorandum was originally introduced, it is believed, into the Syalkote district by the Deputy Commissioner, Major T. W. Mercer, and has since been extended into other districts. Briefly it is this: To raise a voluntary tax from the people themselves, and spend it in (1) supply of medicines gratis; (2) pay of native *Hakeems*; (3) Scholarships given to deserving young men, which shall enable them to go through the curriculum of training at some recognized Medical School under English instruction.

Income.—The details are as follows in one district into which it has been lately introduced:—The plan being explained to the people at meetings called for the purpose, their consent has been willingly obtained to the collection of one anna and a half per annum per house. Taking an average of four souls to a family, the incidence of this is a fraction over a half-penny

a head per annum, which can hardly be said to be above the means of the poorest. However, if any be exempted by the Committees to be presently described, it is expected that the charitable members of those Committees will make up the deficiency. A donation of one Rupee a year procures the exemption of nearly eleven poor families, no hardship is likely to accrue.

List of houses in every village are handed by the Patwarrees to the member of the local Committee, in whose circle they reside. The collections are made half-yearly or yearly by the headman of the village or choudhri of the town or quarter, and paid either direct into a native Bank, or to the Committeeman, who pays it into the Bank.

Committees.—The Committees are appointed by the District Officer, one Committee for each tahsil sub-division, or one for the whole district, as may appear most expedient. The President must not be a Government Officer, but a Sirdar or other non-official person, honoured and trusted by the community. The Committees appoint each their own banker. These precautions prevent the risk of any suspicion that the Government is collecting a tax for its own purposes. The Committees, likewise, appoint each their own druggist, whose wares they are at liberty to inspect, and are responsible that in case of fraud or adulteration, prosecutions are instituted against the offenders. The Committees should contain a representative of every class; and should be allowed to propose additions to their number up to a certain limit. Probably six or seven members for each tahsil sub-division will ordinarily be found a convenient number. The Tahsildar is a member, but not the President. The heads of the several local Committees unite under a General President to form the District Committee.

Hakeems.—The native Physicians are chosen entirely by the local Committees by examination, with a due regard to the wishes of the people among whom they are to work. Strangers should never be introduced against the good-will of the inhabitants, as it stands to reason that they will never be employed. Three or four *Hakeems* are appointed to every Police station circle: with due regard to local necessities, density of population, facilities for travelling, &c. Each *Hakeem* lives as near the centre of his circle as possible, and each has a compounder or apprentice attached to him, who may eventually succeed him, or take a scholarship.

Scholarships.—As many youths as the local funds will allow, go to the nearest Medical school of European science. The fee at the Lahore Medical School for each pupil is 12 Rupees per mensem, of which the charges for tuition, dissections, books, &c., amount to one-third, the remaining 8 Rupees being paid over to the pupil. On the completion of the course the pupils return to their own neighbourhood to supplant the unskilled native practitioner, or obtain employment wherever they can find a practice as in England.

Medicines.—An annual grant is made for medicines, each Yūnani *Hakeem* being allowed to spend up to 10 Rupees per mensem; and each Misrani practitioner up to 6 Rupees per mensem; the medicines used by these latter being less costly than those used by the Greek School. A grant of 500 Rupees a year is made for English medicines. As the plan becomes developed, by the return of properly instructed men from College, these proportions will naturally alter.

Dispensaries.—In every tahsil a branch Dispensary is established with a resident Native Doctor and staff duly trained in English practice. A case of sufficiently useful and good Surgical instruments may be procured from London for 20 £. Grants for these instruments, and also for building the Dispensaries, are made either from the Medical Fund now described, or from the District Nuzzool or Ferry Funds, as may be most convenient. The Native Doctor is expected to treat all Surgical and Medical cases brought to his notice, and to exercise a control over all the *Hakeems* in that tahsil. The Civil Surgeon of the district, in the same way, superintends the general working of the whole system, and is its professional head; while administrative details are managed by the Committees, under the general supervision of the Civil authorities. The remuneration of the Civil Surgeon is fixed at 50 Rupees per mensem; he pays his own travelling expenses.

Finance.—The *Hakeems* are paid by Cheques drawn on the banker by the President of the Local Committee. The allowance for medicines may, in like manner, be paid to the *Hakeems* in cash, by the banker on the President's Cheques, or paid to the Druggist on his producing before

the President a bill countersigned by the Hakeem, and supported by vouchers shewing medicines supplied to sick persons on the Hakeem's prescriptions. *No money transactions are allowed with the Tahsildar or any Government treasury.*

Specimen Balance Sheet.—The district, of which the details are now given, is a populous one, and hence the fund is large; but much may be done even in smaller districts, particularly if the population be dense.

Income.		Rs.
Tax at an Anna and a half per house per annum on 180,203 houses	...	16,894
Expenditure.		Rs.
Annual grant for Native medicines	...	4,000
Do. do. English medicines	...	500
8 Scholarships, at 12 Rupees per mensem each — 12 by 12 by 8	...	1,152
6 Hakeems, at 25 Rupees each per mensem	...	1,800
1 Hakeem, at 20 Rupees per mensem	...	240
1 Do. at 17 Rupees per mensem	...	204
14 Do. at 15 Rupees each per mensem	...	2,510
19 Do. at 12 Rupees do.	...	2,736
1 Deputy do. at 10 Rupees do.	...	120
2 Native Doctors and Compounders, 32 Rupees each per mensem	...	768
Civil Surgeon	...	600
41 Apprentices to Hakeems, at 4 Rupees each per mensem	...	1,968
3 Writers, at 8 Rupees each per mensem	...	288
Total...		16,886
Balance available for Contingencies...		8
		16,894

Miscellaneous.—The Hakeems are not allowed to demand fees, or to refuse to attend any one, on pain of dismissal. It is not to be expected or desired that they should never accept fees from wealthy or grateful patients, but their attendance is to be considered strictly gratuitous. The quality of their work may not be very good at first, and indeed much of it may probably be almost nugatory; but in course of time, it is to be hoped that prejudice will be so far overcome that English science will have free scope for action, and many valuable lives may be preserved.

In addition to this, it may be remarked that this will prove a most valuable agency for the discovery of female infanticide, which still goes on in many parts of India, and has baffled our most industrious and intelligent officers. Vaccination and conservancy will also be greatly advanced, and some of the most difficult social problems of the day may be satisfactorily solved.

From the Collector of Bellary, to the Deputy Inspector General of Hospitals, Ceded Districts, dated Bellary, 22nd February 1867, No. 249.

1. Owing to the prevalence of fever of a severe type in several talooks of this district, which was further reported to have proved fatal in many instances, I applied to you for a supply of fever pills,* which I forwarded to the talooks where the disease was said to be most prevalent, with directions as to their use, and orders to the Tahsildars to distribute the same, and to report the effects. I have only had a report from the Tahsildar of Tadpatri, to whom 1,400 pills were sent. He reports favourably of the effects of the pills, and of the demand for them.

2. As the gratuitous supply of medicine to the population by Government can only be effected in a limited degree, and as numbers of sufferers from fever would find no difficulty in paying for the cost of the medicine, a charge of six Pies per pill was made, the proceeds of which

* Calomel gr. i.
Dover's powder gr. ii.
Quinae Sulph. gr. iii M. ft.
Pil 1—one three times a day in the absence of fever.

sales may be employed in still further extending the supply of useful and somewhat costly medicine so much wanted in this remote district.

3. Among the useful professions in this country, there is scarcely any capable of such an extent of good as that of medicine, and if by any way an educated staff of native practitioners could be organized, I have little doubt that they would find a remunerative practice among the wealthier classes in every talook, or in each cusbah town.

4. Until such time arrives, the sale of medicine at a rate, which enables it to be reached even by the labouring classes, will confer much good, and the funds raised thereby might be applied to extend the usefulness of Dispensaries.

5. I have pointed out to the people that the gratuitous distribution of such medicine as prophylactic of fever, &c., is as a great charity to the poor as the supply of food in enabling the sufferer to regain his health, and resume his work.

6. I annex a description of the fever, as ascertained from local enquiry, and must beg indulgence if it is unscientifically recorded.

Premonitory symptoms, sensation of extreme cold, shivering. Hot-stage, intense thirst, giddiness, delirium, bilious vomiting. Favourable symptoms, perspiration and coolness of body. A relapse after four days is not uncommon. The fever is difficult to be shaken off, and occasionally dropsical symptoms are developed.

No. 686.

Submitted for the information of the Principal Inspector General, Medical Department.

BELLARY,
25th February 1867.

(Signed) J. B. STEVENS,
For Dy. Inspr. Genl. of Hospls. Ceded Dist.

(True Copies.)

(Signed) W. MACKENZIE, M. D.,
Inspector General, Medical Department.

No. 143.

ORDER THEREON, 10th June 1867, No. 1,307.

Miscellaneous.

1. Ordered that the above letter be communicated to the Board of Revenue, with instructions to call upon all Collectors to institute at once careful enquiries to ascertain whether the people generally are in favour of the adoption of the proposed scheme, and willing to contribute a voluntary cess to meet the expense of carrying it out. It will be observed that in the Syalkote district in the Punjab a cess of one Anna per house yearly sufficed for the establishment of four Talook Dispensaries with suitable establishments, and to provide seven Scholarships for the sons of Native Medical practitioners at the Lahore Government Medical School. In another district a yearly cess of one and a half Anna per house produced an income sufficient to provide eight Scholarships, to secure the services of forty-two Hakeems, two Native Doctors and Compounders, to maintain forty-one Apprentices, and to make liberal grants for medicines, &c. The Collectors should use their best endeavours to secure the services of all the educated inhabitants of their districts in making the suggested scheme generally and correctly understood, and in obtaining accurate information as to the wishes of the people.

2. The scheme appears to Government to contain many elements of success, and to promise very great advantages to the people if it can be carried out, and the Government are greatly indebted to the Inspector General for placing it before them in so practical a form.

3. The Government are sure that the Collectors will recognize the great importance of the subject, and will do all in their power to bring the matter to a successful issue.

(True Extract.)

(Signed) W. HUDLESTON,
Secretary to Government.

Revenue 1867 Department
10th June 1867
Proceedings of Government
10th June 1867

Public Department

PROCEEDINGS of the MADRAS GOVERNMENT.

Read the following letter

from the
Collector of Madras.

Read letter 12th February 1868 No 328.

Order thereon 21 March 1868 No 366.

The Government are much pleased to find that the Zemindar of Sapatur is inclined practically to aid in the diffusion of sound medical information, and direct the publication of the advertisement free of charge in 5 issues of the Gazette.

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4. These proceedings
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all Collectors.

C. W.

To the Collectors of all Districts
— Inspr Genl Indian Med Dept
Notice for Gazette — 24/3

Pub 1868. Department.

No. 366.

PROCEEDINGS OF GOVERNMENT.

Dated 21 March 1868.

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