

MADRAS RECORD OFFICE.

Government of Madras.

Collector of Kurnool
of Madras

Public DEPARTMENT.

G.O. No.

554

Press

Mis.

Dated

14-5-1870

Not to be folded or roughly handled

(1)

*Proceedings of the Madras Government, Public Department,
4th May 1870.*

M No. 10. Read the following Proceedings of Government in the Revenue Department, dated 12th April 1870, No. 513.

Read the following Proceedings of the Board of Revenue, dated 27th April 1869, No. 2831.

Read the following letters:—

From the Collector of Ganjam,	dated 10th December 1867, No. 3742.
„ the Acting Collector of Vizagapatam,	„ 19th September „ „ 713.
„ the Collector of Godavery,	„ 27th November „ „ 336.
„ the do. of Kistna,	„ 20th September.
„ the Acting Collector of Nellore,	„ 20th April 1868, „ 1102.
„ the Acting do. of Cuddapah,	„ 24th August „ „ 177.
„ the Collector of Kurnool,	„ 30th January „ „ 39.
„ the do. of Madras,	„ 16th „ „ „ 15.
„ the do. of North Arcot,	„ 9th August 1867, „ 212.
„ the do. of do.	„ 10th September „ „ 254.
„ the do. of South Arcot,	„ 30th April 1868, „ 103.
„ the do. of Tanjore,	„ 4th January „ „ 2.
„ the do. of Trichinopoly,	„ 19th September „ „ 176.
„ the do. of Madura,	„ 12th February „ „ 32.
„ the do. of Tinnevely,	„ 31st August 1867, „ 460.
„ the do. of Coimbatore,	„ 22nd September 1868, „ 248.
„ the do. of Salem,	„ 28th February „ „ 59.
„ the do. of South Canara,	„ 11th January „ „ 33.
„ the do. of Malabar,	„ 2nd February 1869, „ 39.

In his report to Government on the condition of the Salem and North Arcot Districts, the Hon. Mr. R. S. Ellis mentioned the prevalence of cholera, and stated that when that disease “was most severe in the North Arcot District, there was no organization for affording medical advice or relief in any towns except the Civil Stations, where there are Dispensaries.”

2. The Government instructed the Board to impress upon Collectors that the responsibility of providing medical relief rests with them, and that though the services of Medical Officers can only be afforded, medicines can always be had on application, and should always be supplied with the necessary instructions at the outbreak of epidemics. Thereafter they were further desired to communicate with the Principal Inspector-General of the Medical Department, and issue explicit instructions on the subject.

It would be Board accordingly placed themselves in communication with the Inspector-General, who replied that “the wide tracts of country involved the almost constant presence of cholera, and the very insignificant establishment of the Medical Department” precluded any systematic organization for affording medical aid during epidemics. Dr. Mackenzie requested that, *in limine*, it should be ascertained whether Government desired or contemplated that medical aid should be afforded.

under direction of the Government Medical Establishment, to the entire population of the country, or that the efforts of the Medical Establishment should be mainly directed, in the future as in the past, to providing aid for the Military and Civil Establishments, and finding subordinates for duty in the Civil Dispensaries already or hereafter to be established. Dr. Mackenzie pointed out that while Great Britain with a population of twenty-eight millions was believed to possess 20,000 educated and legally-qualified medical practitioners, the Madras Medical Establishment numbers only 736 of all ranks to a population of twenty-four millions, and even of these 736, a considerable number of the "Hospital-Assistant" class are not fitted by experience or training to practise. The establishment, moreover, has to provide officers and subordinates for Mysore, Coorg, Travancore, Hyderabad, a portion of the Central Provinces, Burmah, and the Straits, the population of which are not included in the above calculation. Dr. Mackenzie proceeded that to place medical aid within reach of the people so as to be of any practical use, it would be necessary to employ to some extent the indigenous practitioners of the country, instructing them in the most approved method of treating cholera, fevers, &c., and to adopt measures for training up a class of medical men competent to afford to the native population throughout the country, the aid which the existing Government Establishment from the paucity of its numbers was unable to give. Dr. Mackenzie also suggested, for the decision of Government, "how far it may be practicable and advisable to legislate for the issue of licenses to such native doctors as may hereafter pass a test of minimum qualification regarding the nature and the uses of drugs, and of the treatment of the more common forms of disease."

4. The Government replied that they had not contemplated such extensive measures, but would be glad to have Dr. Mackenzie's views on the general question.

5. Dr. Mackenzie accordingly stated his views in his letter of the 24th April 1867, No. 147. Premising that the practice of medicine in India is in the hands of a special class; that the possession is, so to speak, hereditary, its traditions being handed down from father to son; that the native physicians usually receive no other special education; that though some of them may be able to study the ancient Hindoo books on medicine, and to derive information from translations of more modern works, the great majority of the class 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." Dr. Mackenzie considered it of great importance to utilise the services and influence of the class, and suggested that, as it would be difficult to deal with those actually practising, their sons and relatives might be brought under training to fit them for their future duties, and hoped that, in this way, a provision might be laid for the permanent improvement of the medical profession.

6. As the expense to Government of such a scheme, if generally carried out, would be very considerable, Dr. Mackenzie suggested that inquiries should be made with a view to ascertain whether the people would consent to tax themselves for the purpose. In some districts of the Punjab the people had consented to pay a tax of one and one-and-a-half anna per house, with the proceeds of which Dispensaries were established; medicines supplied gratis; native doctors entertained, and

scholarships founded to enable deserving young men to go through the curriculum of training at some recognised Medical School under English instruction.

7. The scheme commended itself to Government as appearing to "contain many elements of success, and to promise very great advantage to the people if it can be carried out," and the Board were instructed to call upon all Collectors to ascertain whether the people generally would adopt the Punjab scheme, and contribute a voluntary cess to meet the expense of carrying it out.

8. The letters noted at the head of the draft are the replies to this requisition.

9. The Collectors of Ganjam, Trichinopoly, and Tinnevely report that the people of these districts evince no willingness to contribute voluntarily for the purpose in view.

10. The Acting Collector of Vizagapatam, Mr. J. H. Master, states that he consulted some of the most wealthy Zemindars and land-owners of the district, and they all agreed that "the people would not pay a single fraction voluntarily; and that if any thing is required, it would have to be realized by a legislative enactment." The Maharajah of Vizianagram, with his usual liberality, has made a proposition well worthy of acceptance which will be notice hereafter. Mr. Mackie, the agent of Messrs. Arbuthnot and Co., who rent the Government Taluqs of Palcondah and Hunjeram, reports that the people there are willing to subscribe. In the Godavery the scheme is reported to be approved by the people, many of whom have already promised subscriptions. There are thirteen chief stations and about 400,000 houses in the district.

11. In the Kistna District the scheme was received with favour generally, and especially so in the Western Taluqs where low fevers are very prevalent. The Deputy Collector, a native officer of great experience, however, fears "that a voluntary cess is impracticable, but thinks that, if the majority of the people should express their readiness to pay the cess, it should be collected under authority of a legislative enactment like the Education Act." The Acting Collector, Mr. W. Wilson, concurs in this view. "I have had," he writes, "too much experience of the worthlessness of promises made of voluntary contributions by the people of this district to objects of public benefit like Civil Dispensaries to trust to any made in a scheme like that now proposed, and can only express my conviction that, if a voluntary cess only is contemplated, it will be much better to do nothing, for failure on the voluntary principle is simple certainty."

12. The Acting Collector of Nellore, Mr. Boswell, reports that "the people generally * * * have responded very heartily to the call. They fully appreciate the advantages of the European practice of medicines and surgery, and would be glad to have these advantages brought more within their reach. Accordingly, in every taluq agreements have been numerous signed by the people for the collection of an annual cess at the rate of one anna per house. They everywhere express themselves perfectly willing to pay this, but they have one request, and that is, that the amount may be entered in their puttahs. They urge that, if the sum be regarded as a voluntary subscription, they are unable to organize any means for its collection, and if the heads of villages are left to collect it, it will

be made a handle of extortion, and larger sums collected under this name which will go into the officials' pockets; they will pay the one anna per house cheerfully, they all say, only enter it in our puttahs, if we have puttahs." There is a Civil Dispensary in Nellore which the Zemindar of Vencatagherry liberally maintains at a cost of £300 per annum. The institution has also a small endowment which is being annually increased by subscriptions and donations. There is also a Branch Dispensary in the town, with an endowment of Rupees 4000, where a Sub-Assistant Surgeon prescribes for out-patients. In 1867, 290 in-patients and 9998 out-patients were treated at those institutions. The chief of the native doctors of the town has been in daily attendance at the Civil Dispensary, and it is understood that five or six others are willing to attend in like manner. At Ongole the dresser of the Police Hospital prescribes for out-patients. There are 132,000 houses in the district, and a rate of one anna on each would yield Rupees 8266 per annum. It is proposed to establish three Dispensaries, viz., at Vencatagherry in the south, Oodiagherry in the west, and Ongole in the north.

13. The late Collector of Cuddapah, Mr. Molony, reported that the people, while fully appreciating European science, "have the greatest dislike to a voluntary cess for this or any other object. Were the payment of a cess for the object proposed as a legal obligation, they would pay it without a murmur; but a voluntary cess they will not pay, at least at present, in this district." The Acting Zillah Surgeon, M. Iyasawmy, also thinks it not "quite politic to invite the people, in the beginning, to contribute, by a voluntary cess, for carrying out the proposed plan." He suggests that "the expense of training the sons of native doctors for others who are willing to be taught might, in the first instance, be undertaken by Government, and that when the people begin to perceive and appreciate the advantages and usefulness of these practitioners, they may then, perhaps, be induced to tax themselves voluntarily for the maintenance of their own native physician, and also the cost of medicines be supplied to them."

14. The Collector of Kurnool states that the inhabitants of four taluqs are "generally willing to make a *donation* towards the scheme. The people of the other taluqs are not disposed to pay any thing on this account * * *. The people express themselves as unwilling to pay voluntary taxes, since so many new taxes, such as License-tax, Road-Cess, &c., have been levied and after such unfavourable seasons—which have raised all articles of consumption to such an extreme price, as to convert several articles which were formerly necessary into luxuries."

15. The Collector of Madras approves of the scheme, but believes "the time has not yet arrived for its introduction, especially, if the cost of so doing is to be defrayed by a tax upon houses, small though that tax be." The Sub-Collector, Mr. Burnell, saw "no chance whatever of raising subscriptions to supply medical aid to the people." They "complain most bitterly of the taxes already levied, and especially of the Municipal taxes," and they dislike the European system of treatment. The Deputy Collector, V. Rungasawmy Iyer, on the other hand, thinks the people will readily pay a light cess. In North Arcot the Collector and his subordinates concurred in thinking that the state of feeling of the native community rendered any appeal to them highly inexpedient.

16. In South Arcot, the Sub-Collector gives as the result of his inquiries that "though it would not be possible to carry out any such scheme generally throughout a district or a taluq, yet in simple towns it might succeed very well, especially in connexion with a Dispensary." He states that Chellumbrum is the only town where it could be tried; that the people are well-disposed towards it, and that a rate of 1½ anna per house would yield Rupees 234 annually. The Acting Head Assistant thinks a rate of this amount would be very generally contributed. He adds, however, that the people "are not peculiarly anxious to pay for a prospective advantage, but that if one of these trained men were sent to the taluq, the money for the training of another would be immediately forthcoming."

17. The Collector of Tanjore states that the inhabitants of six taluqs are reported willing to contribute, but those of the other three divisions "have not exhibited any particular interest in the matter, but, if any thing, a repugnance towards paying for any such project as that proposed." The dissentients, he adds, live in towns which are now subject to the payment of Municipal taxes, and have hospitals established in their neighbourhood.

18. The Acting Collector of Trichinopoly reports that the people appear generally to recognise the importance of the scheme; that the four cesses already imposed, and their contributions to the Civil Dispensary, render them averse to any further taxation at present.

19. In Madura the Sub-Collector considers the scheme too elaborate to be summarily introduced amongst the people "who are uneducated, prejudiced and, above all, unwilling to part with their money for the contingent and, to them, obscure chance of future personal benefit. The collection of even the small sum of money proposed in the scheme must be attended with a certain amount of pressure, and the people would consider that it was a new tax being exacted from them by Government under the pretext that it was a voluntary contribution. "He proposes as a commencement the sale of European drugs to the native doctors at cost price, and the issue to the purchasers of licenses to prescribe them." The Head Assistant states that a few respectable inhabitants are willing to contribute, but the mass of the people "rather view with disfavour the instruction of Vyttheans, and especially the voluntary contribution of a cess for the purpose." The Collector concurs in these views, and states that his Zemindars have offered to pay the expenses of four young men during their stay at the Madura Dispensary for a year.

20. The Collector of Tinnevely doubts the possibility of persuading the people to tax themselves for the purpose.

21. In Coimbatore, the people of five taluqs are said to be unwilling and those of five others willing to contribute. The Collector does not take a sanguine view of the matter, and recommends a trial in one taluq where there is already a Dispensary.

22. The inhabitants of the Sub-division of Salem are reported to be unanimously in favour of the scheme, those of the southern part of the district are equally well-disposed, but the Deputy Collector considers that the cess must be compulsory. The inhabitants of the rest of the district are opposed to any further taxation.

23. The Acting Collector of South Canara states that his officers "have obtained a seeming acquiescence from the inhabitants, but beyond this none have advanced; none have been able to call out any voluntary exhibition of anxiety for the introduction of the proposed measure such as would tend to show that it was really appreciated and desired." Mr. Thomas considers that a good opening for trying the experiment exists at Moolky where a German Missionary has practised gratuitously, and acquired much influence.

24. The Collector of Malabar "can hold out no hope that any purely voluntary system will have general success in Malabar," but sees no reason why a law, like the Educational Act, should not be introduced.

25. The Collector of Bellary has not yet replied.

26. The Collectors' replies show that great diversity of opinion exists among the native community. The Board are constrained to say that they place little reliance on promises of contributions. In the Godavery District, where these promises have been most general and liberal, the experience already gained in the case of the village schools of the Sub-division inspires caution. These schools were believed to be peculiarly acceptable to the people, and the subscriptions by which they were supported were reported to be purely voluntary, but the departure of the officer who initiated them at once led to the collapse of the scheme. The Board cannot but apprehend similar disappointment in the case of the present project. They question very much whether the people generally have any clear conception of the scheme. There are 45,790 villages in the Presidency, and it would obviously be impracticable, for many years to come, to bring medical aid within reasonably facile reach of each, or to train up a body of moderately competent practitioners to meet the wants of a population of twenty-six millions. As year after year passes, and the mass of the people see no immediate return for their outlay, it is but reasonable to suppose that they will be disappointed, and cease to subscribe. One significant symptom of the uncertainty of these promises of assistance is the declaration—made chiefly by native gentlemen—that any cess for the purpose must be made compulsory by law.

Exclusive of 32,994 hamlets.

27. In some towns and localities the scheme may answer, but any thing like the general success reported in the Punjab is not, in the Board's opinion, to be hoped for at present. The people do not generally appreciate the movement, and they have, within the last four years, been subjected to additional taxation for purposes previously met from the revenues of the State. As the crow flies Lahore is as far from Madras as London is from Rome, and such diversity of sentiments is not extraordinary. To the compulsory imposition of a cess by law, the Board are altogether opposed. The Government could never fulfil, and therefore should not undertake, the obligations which such a measure would entail, and the measure would be most unacceptable to the people.

28. But while thus doubtful of the project in its entirety, the Board think that there are certain measures which the Government can, and ought, to adopt to meet this great want.

29. In the first place the Government should, in their opinion, afford the means of obtaining a suitable medical education.

30. The Medical College at Madras cannot be said to do this. The education is entirely in English, the standard is extremely high, and employment by the State is the aim of all who enter it. The few who devote themselves to private practice expect (and with justice, considering their attainments) a far higher rate of remuneration than the people can afford to give. But even were it otherwise, the Board would submit that a single Medical School is insufficient for a country larger than Great Britain and a population of twenty-six millions. The Board would suggest that Government should establish, as an experiment, four Medical Schools in the Provinces, the instruction to be in the Vernacular only, and the standard of attainments to be limited to what is necessary in ordinary native practice. There are doubtless several Native Surgeons and East-Indian Apothecaries on the establishment perfectly competent from knowledge of the languages, &c., to undertake this duty. Each school should have a President, who might be one of the resident European Medical Officers of the station, and three Professors. They would attach a few scholarships, in no case exceeding what is sufficient for the decent maintenance of men whose future sphere is to be practising in the towns and villages of the country, (for they think it most essential not to foster extravagant expectations,) and they would encourage Zemindars and the residents of towns and villages to send up their representatives, providing as they think fit for their maintenance while receiving instruction. The Board believe many Zemindars would be willing to found scholarships, or to maintain scholars at such institutions. On completion of the course of instruction, those students who have attained the prescribed standard should receive a diploma, and be set up with a small case of instruments, and a few medicines, to make their own way.

31. It seems to the Board that the experiment is at least worth trying. It is a blot on our administration that we should, out of the taxes paid by the people, maintain an establishment almost exclusively for our own purposes, and practically deny them even the means of acquiring a knowledge of so important and beneficial an art.

Secondly.—They would propose that, wherever there is a Medical Officer competent to give instruction in the vernacular, a number of pupils to be fixed by the Principal Inspector-General should be admitted for a certain amount of primary and simple instruction. It is, in their opinion, of the first importance that no incompetent persons should be sent out with a certificate of having received instruction; for any ill-success in their treatment will only confirm the prejudice which exists in parts of the country against the European system. They would not, therefore, permit every Medical Officer to receive pupils, and they would not sanction such loose systems of gaining instruction as "watching the mode of treatment," &c. It will be necessary to allow the Medical Officer a moderate fee for his trouble, and this, at the outset, might be made from public funds. The pupils should either support themselves, or be supported by the villagers under arrangements with which Government need not meddle.

Thirdly.—They would advocate great liberality in the way of establishing Dispensaries, and would open one (as far as competent medical subordinates are available) wherever the people raise a capital sum the interest of which will cover

one-fourth of the annual expense, the arrangement to hold good for three years, when a further proportion of the expense might be required, until ultimately the institution should be wholly supported by those benefitting from it.

Fourthly.—They would establish a Midwifery class in every hospital where the Principal Inspector-General considers that proper instruction can be afforded. The loss of life owing to the ignorance of the present class of midwives is believed to be painfully large.

Fifthly.—They would encourage the translation of such works of English medicine as the Principal Inspector-General may recommend, by the offer of liberal prizes. They understand that he is himself bringing out some. The matter is important, and merits liberal support.

32. The scheme roughly sketched above holds out, the Board think, reasonable hopes of being eventually successful. It in no way precludes the people who are reported to be willing to subscribe from so doing. They can either send pupils to the proposed schools, or have a Dispensary opened in their neighbourhood. It will involve some expense on the State, but an annual grant of a lac of rupees would suffice for several years to come. A measure of this nature must be initiated by Government, and must be fostered with a wise liberality. The Board cannot but think such a grant extremely moderate. A revenue of six millions sterling is raised from the people, and an annual grant for a purpose of such a beneficent character can hardly be grudged. It is impossible to estimate the number of lives annually lost, and the amount of suffering caused where death does not ensue by want of skilful medical treatment. Humanity and justice demand that the State should lend a willing, liberal, and persistent helping-hand.

33. The Maharajah of Vizianagram has contributed a valuable paper on the subject, and has, in the most liberal manner, offered to establish an educational branch in connexion with his Dispensary at Vizianagram. He proposes to undertake the payment of a Native Sub-Assistant Surgeon as well as to provide such allowance as may be necessary to remunerate the Regimental Surgeon for supervising the affairs of the Dispensary in general, and especially the studies of the students. The Board recommend that this munificent offer be thankfully accepted.

34. The Board communicated the views set forth in the foregoing paragraphs to the Principal Inspector-General, Dr. Mackenzie, and discussed the subject fully with him. Dr. Mackenzie concurred generally with the Board, and obligingly furnished them with the accompanying Memorandum on the question. It will be seen that he proposes to place the Medical Schools under the Civil Surgeon, giving him a special allowance of Rupees 250 per mensem. The Board contemplated assigning the Civil Surgeon the position rather of a salaried visitor and general Director, as they apprehended that it might be difficult to procure and to retain the services of an officer thoroughly competent to teach medicine in the Vernacular. They do not hesitate, however, to accept Dr. Mackenzie's modification, but they would stipulate for a thorough knowledge of the Vernacular *before* appointment.

35. As to the places where schools should in the first place be established, the Board concur with Dr. Mackenzie as to Vizagapatam, but would prefer Bellary,

Trichinopoly, and Cannanore to Madura, Palamcottah, Nellore, and Cochin. The selection of the four places named by the Board would afford a school for the Teloogoo, the Canarese, the Tamil, and the Malayalum populations; they are geographically well situated, there are bodies of troops at them, whose hospitals would supply good opportunities for instruction, and there are several Medical Officers who would doubtless take an interest in the scheme, and some of whom might be able to afford assistance in case of the illness or brief absence of the Principal.

(A true Extract.)

(Signed) A. MACGREGOR,
Acting Secretary.

No. 10-A. Proceedings of the Board of Revenue, dated 25th May 1869, No. 3697.
Read the following letter from the Collector of Bellary, to the Acting Secretary to the Board of Revenue, dated 13th May 1869, No. 102 :—

I beg to apologize to the Board for not having ere this replied to their Proceedings, No. 4425, dated 15th July 1867, having reference to the provision by voluntary contributions from the people, of instruction in European medical science for the sons of native medical practitioners on the system which has been attended with such marked success in the Punjaub. Sometime after taking charge of the district last year, I noticed that these Proceedings were entered in the list of unanswered communications, and on making inquiry as to what had been done in the matter, I found that my predecessor had published a long notice in the *District Gazette* explaining the object in view and its advantages, and at the same time calling upon the Tahsildars of the district to ascertain the views of the people, and whether they would be willing to contribute towards it. Up to the time when I discovered that the Proceedings referred to were still unanswered, which was about the middle of last year, not a single Tahsildar has replied to the Collector's requisition. Fresh orders were at once issued, and the replies have been slowly coming in.

2. In nearly all the taluqs it is reported that the people are willing to subscribe; but as the Board are aware, they will promise to support any thing which is proposed by Government. The promises are voluntary enough, but I do not think that much would be realized under the same system. Looking over the Proceedings of the Bellary Dispensary Committee a short time ago, I read a proposal of the Vice-President, a native gentleman, which was unanimously adopted by the Meeting, that Government should be applied to, in the Legislative Department, to pass an enactment to *compel* the supporters of the institution to pay their *voluntary* contributions.

3. There can be no doubt of the vast advantages which would be conferred on the people at large, if such a scheme could be successfully carried out, and I am not at all prepared to say that the people would not come forward to support it if they had once tasted its benefits; but the measure must, I think, be initiated at the expense of the State.

(10)
*Proceedings of the Madras Government, Public Department,
 4th May 1870.*

Submitted to Government, in continuation of Board's Proceedings, 27th April 1869, No. 2831.

(A true Copy and Extract.)

(Signed) J. GROSE,
Sub-Secretary.

No. 10-B. *Order, 12th April 1870, No. 513.*

The establishment of Medical Schools in the Provinces has received the attention of Government in the Public Department, and the consideration of the reports of the Inspector-General of the Indian Medical Department and of the Public Order, 3rd March 1870, No. 260, special Committee appointed under G. O., No. 1059, dated 30th July 1869, on the subject, has been deferred until the provisions of the Local Fund and 'Towns' Improvement Bills shall have been discussed and passed into law. The communications from the Board above recorded will, therefore, be transferred to the Public Department to be considered hereafter with the other communications on the subject.

(True Extract.)

(Signed) R. A. DALYELL,
Actg. Secy. to Govt., Rev. Dept.

No. 11. *ORDER THEREON, 4th May 1870, No. 554.*

To be recorded.

(True Extract.)

R. S. ELLIS,
Chief Secretary.

11

No. 4,125.

PROCEEDINGS OF THE BOARD OF REVENUE, dated 15th July 1867.

Read the following Proceedings of the Madras Government, dated 10th June 1867, No. 1,307, Revenue Department:—

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 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 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.

Vol. of 1870 Madras.

PUBLIC.

Dated May, 4th.

Recd.

Est.

G. O., 4th May 1870, No. 554.

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Nos. 10-11.

Recording Proceedings of Government, Revenue Department, communicating papers respecting the establishment of Medical Schools in the Provinces.

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 headquarters of each Collectorate afford suitable means of practically teaching Medicine and Surgery on the European systems. Government, in Order thereon 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 shown 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.

No. 1,051, Judicial Department.

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 inquiry, 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, in letter appended, states

No. 219 of 22nd February 1867.

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 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, 18th 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 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 Yunani 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 Sanscrit 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 recognised 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 Committee man, who pays it into the Bank.

Committees.—The Committees are appointed by the District Officer, one Committee for each tahsil subdivision, 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 subdivision 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 Yunani 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 showing 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.

<i>Income.</i>		RS.
Tax at an Anna and a half per house per annum on 180,203 houses ...		16,894
<i>Expenditure.</i>		
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 taluks 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 taluks 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.

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

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 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 taluk, 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 inquiry, 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. Insp. Genl. of Hospls. Ceded Dists.
(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 inquiries 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 taluk 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 recognise 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.

Communicated to all Collectors for information and guidance.

(True Extracts.)

(Signed) J. R. CCKERELL,
Acting Secretary.

(True Copy.)

(Signed) J. T. MAYNE,
Acting First Assistant.

To all Collectors.

Exd. J. Wright..

From D. F. CARMICHAEL, Esq., Collector of Ganjam, to the Secretary to the Board of Revenue,
dated Chetterpore, 10th December 1867, No. 3,742.

With reference to the Board's Proceedings of the 15th July last, No. 4,425, communicating the
Orders of Government, dated the 10th June, No. 1,307, I regret to state I am unable to report
that the people of this district are willing to tax themselves, for the purpose of meeting the
expenses of working the scheme therein mentioned.

Exd. J. Wright.

1867.

Department.

No.

PROCEEDINGS OF THE BOARD OF REVENUE.
To all Collectors.

Dated 15th July 1867.
Received

No. 4,425.

Communicating to all Collectors, Proceedings
of Government, requesting Board to call upon
Collectors to institute careful inquiries to ascer-
tain whether the people generally are in favour
of instructing native practitioners in the approved
methods of prevention and treatment of the more
common epidemic diseases of the country.

18

From J. H. MASTER, Esq., Acting Collector of Vizagapatam, to the Secretary to the Board of Revenue, dated 19th September 1867, No. 713.

1. I have the honour to acknowledge the receipt of the Board's Proceedings, dated 15th July last, No. 4,425, inquiring whether the people generally are in favour of instructing Native Practitioners in the approved methods of prevention and treatment of the more common epidemic diseases of the country; and also whether they would willingly contribute an annual sum of $1\frac{1}{2}$ anna per house towards defraying the expenses of instruction.

2. I have been in communication with some of the most wealthy Zemindars and Land-owners of this district on the subject. While appreciating generally the proposed initiation into the art of European medical science of Native Practitioners and other individuals, all agree in saying that the people would not pay a single fraction voluntarily; and that if anything is required, it would have to be realized by a Legislative enactment.

3. In these views I concur. The Native mind, with very few exceptions, is not so imbued with the advantages of the European method of treatment of diseases, as to prefer it to their own native nostrums.

4. In cases of Surgical operation alone, I believe, they give us the preference, and readily avail themselves of our assistance.

5. I shall now proceed to notice briefly the letters of the several Zemindars and Proprietors, &c., who have responded to the call for their opinion.

6. THE MAHARAJAH OF VIZIANAGRAM, K.C.S.I.—The Maharajah in this, as in all other cases of the kind, laudably comes forward and expresses his readiness to assist the Government in making the collections, whenever they may choose to order such to be made. Apart from this project, the Maharajah intimates, the establishment by himself of a Dispensary at Vizianagram. After its development, he proposes to open out one or two more in other parts of his Zemindary.

7. Arrangements for opening a Lying-in Hospital are also being made by the Maharajah.

8. In his 8th and 9th paragraphs the Maharajah fully sets forth what he wishes, viz: (1), a Native Sub-Assistant Surgeon to be nominated at once to the charge of his Dispensary at Vizianagram; (2), a class of Native stipendiary students to be entertained and instructed by the Sub-Assistant Surgeon; (3), for the present, to open out such a class in connection with the Civil Dispensary at Vizagapatam, the additional cost to be borne by him; (4), should the Government prefer it, the superintendence of the Dispensary might be entrusted to the European Medical man attached to the Native corps usually stationed at Vizianagram.

9. In reference to the third proposition, Doctor Adam, the Civil Surgeon at Vizagapatam, has signified his consent to do whatever is required. And as the Maharajah is willing to pay the charges likely to be incurred, I would recommend that the Inspector General, Medical Department, be moved to frame rules for the formation and instruction of such classes.

10. AGENTS OF RENTERS OF PALCONDA.—This is one of our own talooks on rent to Messrs. Arbuthnot and Co., whose Agents Messrs. Minchin and Mackie's letters are enclosed. It will be seen that the people there generally have agreed to subscribe at the proposed rate of one anna and a half per house. This, I am afraid, is the only instance, but it proves that Mr. Mackie has influence for good.

11. SRI GODE JANAKAIYA GARU, *Proprietrix of Anakapalli*.—This lady writes a very sensible letter. Living in the town of Vizagapatam, where she hears and sees everything and every one, she, with every member of her family, is entirely for the European mode of treatment, which, I believe, they only use. We may calculate upon her ready co-operation in any ulterior measures adopted.

12. THE RAJAH OF JETPORE.—This Zemindar deprecates any collection from the mass of the people, but proposes that the richer portion be taxed to the extent of four or five hundred Rupees, and offers his services to collect the amount on our account. I have not answered his letter.

13. THE RAJAH OF BOBBILI.—This Zemindar, it will be observed, is quite opposed to the introduction of any change, and declares that the people will not pay any thing. He styles them uncivilized, but yet will not offer any thing himself. His father was more liberal-minded, and when alive used to maintain a Dispensary in his own town, and had a Pensioned Apothecary to superintend it.

14. I beg also to submit a letter, in original, from the Senior Assistant Collector on the above subject.

ENCLOSURE No. 1.

From the Maharajah of Vizianagram, to the Agent to the Governor, Vizagapatam, dated 15th August 1867, No. 34.

1. I have perused with increasing interest the Proceedings (herewith returned) of the Madras Government, of the 10th June last, No. 1,307, received with your Telugu letter of the 3rd instant, and having given the subject my best attention and consideration, I have the honour to express my views.

2. In the first place there cannot be two opinions with regard to the interesting importance of the question involved, namely, to reform the indigenous medical profession of the country, and to enable the Practitioners to be guided by the light which western research has thrown on the science of medicine.

3. In the second paragraph of his letter to Government the Medical Inspector General says, that, "as a 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." It appears to me, at least so far as our own district is concerned, that the practice of medicine is not confined to one special class of people. There are Native Practitioners of every class. We always find a Brahmin Physician, a Vaisya Physician, and Sudra Physician. Nor is the profession hereditary. A father who is by profession a Physician, does not generally bring up his sons to the same profession. The selection of profession is generally left to the sons who can, without any objection, become professors of anything else if not of nothing. The extract quoted from the Punjab Administration Report for 1865 and 1866, shows that the Hindu system of medicine, supposed to be the source from which Yunani school derived all its knowledge, disregards Anatomy; but the ancient Hindu works on medicine, such as the Susruta, contain a chapter on the Saririka Tatva or Anatomy; and there is ample evidence to show that our ancestors practised Surgery also.

4. But I am not to be supposed as in the least countenancing the Hindu system of Medicine. I only mention facts which have fallen within my own experience. I am fully aware of the enormous extent of mischief and misery which the so-called Hindu Medical Practitioners inflict on the deluded people. I also fully appreciate the benefit of the European Medical Science, and have not only at any time not submitted either myself, or any member of my family, to the treatment of a Native Doctor, but have also not lost a single opportunity of impressing upon the people's minds the high advantages to be derived from the European mode of treatment.

5. The plan proposed, namely, of collecting from one anna to one-and-a-half anna upon every house has worked very well in a populous district such as Syalkote, in the Punjab. It will no doubt work as well in any other thickly populated and comparatively rich district; but in a district like this, sparsely populated, and comparatively poor, the income will necessarily be small, and unless largely augmented by private individuals of rank and position and by the Government itself, the plan cannot be successfully developed. But we may try it, and if Government are pleased to sanction the experiment to be made in this district, it will be my most agreeable and pleasing duty to co-operate with the Government and afford them every assistance in my power. With regard to the collection of money, I am perfectly willing to undertake that this duty be satisfactorily

performed by the Samastanam Native Officers. I shall immediately send Circulars to all the Amins, &c., in my talooks, desiring them to explain to the people the benevolent views of the Government, and to exert themselves by every means in their power to carry them out. I shall also call up public meetings, and myself explain to the people the advantages of the proposed plan; and in this way I hope success may be ensured; but I must at the same time say that the contribution, trifling as it is, will be looked upon by the majority of the people in the light of a new tax; and unless—as in the case of the Madras Educational Cess, the Municipal Institution, and the Road Cess—we have legislative sanction, it will in many cases be very difficult to realize the money. If the collection of this contribution is to be entrusted to my Amins, &c., I do not see how they can be able to enforce payment without a permissive legislative enactment.

6. I need not say that it will always be my first duty to carry out the views of the Government in every scheme for the amelioration of the people's condition.

7. In the meantime, and apart from the above plan, I have established a Dispensary at Vizianagram—although the Staff and some preliminaries are not as yet completed, and after a sufficient experience of the working of this institution is gained, I propose to myself to open one or more Branch Dispensaries at some well-selected centres in my estates. The arrangement for the immediate opening of a Lying-in-Hospital are rapidly progressing.

8. It is, however, my intention to employ such a Staff for this Dispensary, as in addition to their proper duties the Officers employed may have a class of Native stipendary students to learn the general principles of every branch of the Medical Science and Midwifery. A few women of good character may be made to learn Midwifery. As the students will have subsistence money during their studentship, I believe there will be no want of inducement to people who may like to adopt the profession. We may by this means congregate the present Hindu Practitioners in this district, and when they go out again well-grounded in all principles of Medical science, their influence and example will no doubt be very highly beneficial. This plan may also be tried in my Dispensary at Vizagapatam on a moderate scale; and I shall be very glad to bear the additional outlay myself. The outturn of expert from these will in due time suffice for the wants of this district; and the people being gradually accustomed to the English system, will readily appreciate and adopt it.

9. With such object in view I request that you will be pleased to assist me with your advice as to the best means of achieving them. The station of Vizianagram always garrisoned by one or two Regiments has necessarily an European Surgeon, and if Government be kind enough to order him, with a moderate allowance from the Samastanam, to attend the Dispensary here, its efficiency will be very much increased. As the institution is chiefly for the benefit of the Natives of the district, I should prefer having a Native Sub-Assistant Surgeon, entirely paid by the Samastanam, for taking immediate charge of it; and he will be assisted by a first Dresser whom the Government have already been pleased to attach to the heretofore existing out-door patient Samastanam Dispensary at this place. As, however, the services of a Native Sub-Assistant Surgeon are urgently required, I request that you will be pleased to lay this my proposition before Government with the view of their being pleased to accord their sanction to it. With regard to the allowance to be paid to the European Surgeon, who being in charge of the Regiment here will be required to look after the Dispensary affairs in general, and especially to superintend the studies of the students, I leave its settlement entirely to yourself and to Government.

10. Lastly, I may be allowed to state that this is exactly the arrangement, excepting the instruction branch which is now in existence in regard to my Dispensary at Benares.

ENCLOSURE No. 2.

From C. MINCHIN, Esq., Agent for the Renters, to the Acting Collector of Vizagapatam, dated Bimlipatam, 4th September 1867.

1. Referring to your letter of the 5th ultimo on the subject of the Board's Proceedings, No. 4,425, * relative to the instruction of Native Practitioners in the approved method of prevention and treatment of the common epidemic diseases of the country, I have the honour to annex, for your information, extract from a

* Returned.

letter from Mr. Mackie, the resident Manager of the Palcondah and Hanzeram Estates, to whom I wrote requesting him to use his best endeavours to bring the subject favourably before the inhabitants.

2. You will be pleased to see that there is every prospect of the plan being very favourably received and warmly supported. From his personal residence on the spot, he is best able to suggest the arrangements most likely to commend themselves to the Natives, and I, therefore support the suggestions he has made, and submit them to your approval.

Extract from a letter received from Mr. D. MACKIE, Palcondah, dated 27th August 1867.

"I have made inquiries both in the Palcondah and Hanzeram Estates, and find the principal Ryots and inhabitants willing to subscribe towards the object in view.

"I beg to give my views on the subject as follows:—

"First.—A Dispensary to be established in the town of Palcondah which is central for Palcondah and Hanzeram.

"Second.—An Apothecary to be appointed by Government with orders to instruct six Native Doctors in the approved methods, with a view that eventually each of the six divisions of the two Estates will have a Native Doctor of its own, but to be always under the control of the Medical Officer in charge of the Palcondah Dispensary.

"Third.—To meet the expenses of the above establishment, I suggest a tax of two annas on every house in the two Estates which I calculate would amount to about Rupees 2,500 per year, and I have every reason to believe that besides the tax of two annas, many people would subscribe something more and be very thankful to Government for establishing such an institution."

(True Copy.)

(Signed) C. MINCHIN,
Agent for the Renters.

ENCLOSURE No. 3.

From SRI GODE JANAKAIYA GARU, Proprietrix of Anakapalli, to the Acting Collector of Vizagapatam, dated Vizagapatam, 19th August 1867.

1. I have the honour to acknowledge receipt of your letter of 6th instant, in reference to training up people as Medical Practitioners and Midwives, and in pursuance thereof, a meeting of all the principal inhabitants of this place, as well as the respectable portion of my tenants and Inamdars, was convened. The attendance was large.

2. They at first seemed to object to the introduction of English Medical science among them, as affecting their caste and prejudices, as it is always the case with them in reference to any innovation proposed. Some opposed it on the grounds that the English in making up doses had recourse to water, which interfered a great degree with their caste principles; some went the length to say that the Native treatment was more adapted to their constitutions than European treatment, which is more suited to their European habits, customs, and constitutions. Others again held out that the Native treatment was much milder and attended with less danger.

3. However, Mr. G. L. Narsing Row made a long speech, showing the degeneracy of Hindu Medical Science, and how it was abused; he challenged them to show instances, whether their Medical men had any knowledge of the science, and whether they could analyze the drugs administered by them. He further went on to convince them that the doctors whom they employed now were mere Quacks, causing more real harm than good; and adduced instances of deaths caused by mercury and other poisonous stuffs administered by them. By way of removing the fear entertained by them for Blisters and Enemas, two bugbears held out by their Native hakeems to frighten them, he dwelt a great deal on the subject and drew a comparison between the Spanish flies, of the English Pharmacopœia, and the Native Marknut, the former affecting the surface of the skin only, while the latter going deeper even to the very bones, occasionally having serious effects; as also between the Enemas

ENCLOSURE No. 5.

From the Zemindar of Bobbili, to the Acting Collector of Vizagapatam.

I have received your letter of the 3rd August last, and understood its contents. I have, through respectable persons, acquainted the people of my Bobbili Samasthanam with the benefits which would arise from Native Doctors and Midwives being caused to be instructed by English Surgeons. These people being uncivilized, and having a taste for, and reliance on, the treatment of Native Doctors and Midwives, which has been in vogue from the time of their ancestors, have not consented to pay, as in the Punjab and other countries, at one anna and a half or one anna for a house, or at any other rate. I am sorry to have to bring this to your notice.

6th September 1867, corresponding with Friday the 8th increasing moon, month Bhadrpadam of the year Prabhava.

(Signed) In Telugu.

(True Copy of a translation.)

(Signed) J. H. MASTER,
Acting Collector.

ENCLOSURE No. 6.

From Major H. L. GROVE, Senior Assistant Collector, to the Acting Collector of Vizagapatam, dated 24th August 1867, No. 244.

1. I have the honour to return the Proceedings of the Board of Revenue, on the subject of voluntary Dispensaries, which I have read with great interest.

2. I cannot but think that this proposition, so fraught with good, is one that must commend itself to the common sense and good will of the people at large; but I do not expect that it can be successful everywhere at the outset. I would suggest that the experiment be made only in those talooks where, from the presence of influential natives, willing and able Civil Surgeons or other circumstances, there are reasonable grounds for hope of success.

3. For instance, were such a Dispensary started in the town of Vizianagram, I feel sure the influence of the Maharajah and the Makhassadars of that part of the Zemindary lying within this division of the district is such as to make success almost certain. This Dispensary need in no way interfere with the one established by the Maharajah.

4. Again, in Palcondah we have Mr. Mackie, the intelligent Manager, on account of Messrs. Arbuthnott and Co., the farmers of that Talook. I feel sure he could and would do much; and at Parvatipur, I believe success might be looked for. It is a large Talook, with many resident Zemindars, and there is already an Apothecary attached to the Police Hospital of the town.

5. The first step to be taken must be to secure the good will and co-operation of the Zemindars and the village authorities. Once that has been done, I have no doubt about the future.

6. I cannot but believe that after they see the immense benefit of having a Dispensary in their midst, the inhabitants of adjoining Talooks, who at first held back, will in time voluntarily come forward and ask to be allowed to have a similar institution in their Talooks.

7. It is possible that in some places a depôt for the sale of medicines might prepare the way for a Dispensary. I do not think that one anna per house would be a sufficient rate to secure an efficient establishment. The population is so sparse as to lead me to think that two annas must be the charge.

8. The Maharajah of Vizianagram is inclined to be of opinion that Legislation is absolutely necessary, but for my part I would deprecate such a step, at least at the commencement. After the lapse of time, it might become expedient to enact a law, as was the case with the voluntary schools in the Delta of the Godavery; but at present it would be preferable to give the voluntary system a fair trial.

and Croton-seed; he showed them that the Enema was used to relax the system where constipation existed to a degree that medicine administered in the usual way could not have effect, and that Croton-seed given in ordinary cases was attended with disastrous results.

4. I am glad they now enter fully into his views and see the facility under the new system of acquiring medical assistance, with results far better at so small a cost. They admit that they are robbed by their Doctors, quite unawares to them, and that when a patient is in a stage where recovery is despaired of, or magnified by them to be worse than the case actually is, they make their own terms, that is, that unless a large sum be paid towards their fee, that they will give up their patient, and that the friends of the patient are obliged to come out liberally in hopes of saving him.

5. Now they begin to see that accidents occurring during childbirth, which are not a few, are more attributable to starving the women during their confinement, and hot stuffs administered to them, such as Long Pepper, Assafoetida, and sometimes Brandy when it can be afforded; but they object a great deal to have Pariahs for their Doctors, or Hindus of no caste, and object to sending patients to a particular depot for treatment, as it interferes with their caste. They are for having Doctors under the new system to treat them at their homes, as also for training up the sons of their present Doctors. As to subscribing one or one-and-a-half anna a family, they are quite willing to do it.

6. I myself think it is not a bad plan to give in a little to their prejudices at the commencement, and work the system upon their own scheme. When they once see the benefits, I dare say they may very likely submit to any suggestions upon a better plan. I should be most happy to collect the fees, but cannot calculate upon them unless there be an Act passed by the Legislative Council making the payment compulsory.

7. If it is not presumptuous in my part, I think that the Hindu Medical Students should be made to pass a certain standard in their science before practicing, which will reduce the present system of quackery.

ENCLOSURE No. 4.

From the Zemindar of Jeypore, to the Acting Agent to the Governor, Vizagapatam.

1. I have understood the contents of your letter dated 13th instant, No. 684, in which it was stated that the Native Doctors do not generally learn any art other than that coming from their ancestors; that as great majority of them have not studied, though a few might have, it is the cause for not knowing the nature of the disease and the proper treatment; that it is dangerous, as Midwives do not study the profession required; that it is therefore intended to get them educated by English Surgeons and taught in the preparation of Medicines and to treat all the people without charge; that, therefore, all persons should subscribe at one anna or one anna and a half per year for a house, and utilize the money in the above said charitable deed; and that I should, therefore, instruct the people in my Zemindary to subscribe as in Punjab and other places at one anna or one anna and a half and write you whether it would be convenient to collect the money through me, as the Road Cess, or through Sub-Magistrates.

2. In this Talook there live ryots from Gunipur to Malakanagiri who are poor and barbarous; some of them cultivate lands for some time without sist, taking grain and cattle from me as advance, and others are indebted to me a great deal of money, the sist not having been properly paid. In such a case, if the demand for one anna or for one anna and a half be made, they would not only run away from the country, but the money too cannot be collected. By your order, however, I would take measures to collect a tax of four or five hundred rupees from respectable and common people and others in this Zemindary from Gunipur, and the money would be paid in the Collector's office here. If the money be collected through Sub-Magistrates, it would be a great disturbance in the Talook. Therefore I request that orders may be issued to allow me to collect the tax as above, that is four or five hundred rupees a year, and pay it in the Collector's office here.

(True Copy of a translation.)

(Signed) In Oriya.

(Signed) J. H. MASTER,
Acting Collector.

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(Signed) In Oriya.

(Signed) J. H. MASTER,
Acting Collector.

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6th September 1867, corresponding with Friday the 8th increasing moon; month Bhadrabadam of the year Prabhava.

(Signed) In Telugu.

(True Copy of a translation.)

(Signed) J. H. MASTER,
Acting Collector.

ENCLOSURE No. 6.

From Major H. L. GROVE, Senior Assistant Collector, to the Acting Collector of Vizagapatam, dated 24th August 1867, No. 244.

1. I have the honour to return the Proceedings of the Board of Revenue, on the subject of voluntary Dispensaries, which I have read with great interest.

2. I cannot but think that this proposition, so fraught with good, is one that must commend itself to the common sense and good will of the people at large; but I do not expect that it can be successful everywhere at the outset. I would suggest that the experiment be made only in those talooks where, from the presence of influential natives, willing and able Civil Surgeons or other circumstances, there are reasonable grounds for hope of success.

3. For instance, were such a Dispensary started in the town of Vizianagram, I feel sure the influence of the Maharajah and the Mokhassadars of that part of the Zemindary lying within this division of the district is such as to make success almost certain. This Dispensary need in no way interfere with the one established by the Maharajah.

4. Again, in Palcondah we have Mr. Mackie, the intelligent Manager, on account of Messrs. Arbuthnot and Co., the farmers of that Talook. I feel sure he could and would do much; and at Parvatipur, I believe success might be looked for. It is a large Talook, with many resident Zemindars, and there is already an Apothecary attached to the Police Hospital of the town.

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8. The Maharajah of Vizianagram is inclined to be of opinion that Legislation is absolutely necessary, but for my part I would deprecate such a step, at least at the commencement. After the lapse of time, it might become expedient to enact a law, as was the case with the voluntary schools in the Delta of the Godavery; but at present it would be preferable to give the voluntary system a fair trial.

From J. FRASER, Esq., Collector of the Godavery District, to the Secretary to the Board of Revenue, dated Cocanada, 27th November 1867, No. 336.

1. As directed by Government in their Proceedings, dated 10th June 1867, No. 1,307, communicated with the Board's Proceedings of the 15th July 1867, No. 4,425, I have the honour to inform you that I have ascertained, by instituting careful inquiries, that the people of this District generally are in favour of the adoption of the scheme therein suggested; and willing to contribute a voluntary cess at one-and-a-half Annas for each family per annum. Many persons in respectable positions would willingly subscribe more than the above sum.

2. The advantages of the plan have been explained to the people by holding meetings in several places in each talook. I have received reports from all talooks that the scheme is well liked by the people, and that they understand the great usefulness of it, and the benefit which they would derive from it by incurring a very small outlay. The amount already voluntarily promised by the people present at meeting in each Talook and Division is specified in the margin.* I have

	Rs.
* 1. Amalapur talook	359
2. Ramchendrapur talook	636
3. Rajahmundry "	590
4. Peddapur "	409
5. Cocanada Division	98
6. Pittapur "	113
7. Tuni "	544
8. Coringa "	14
9. Tanuku talook	186

† 1. Narsapur talook.	
2. Undi "	
3. Ellore "	
4. Yernagudem talook.	

no doubt that, in the remaining talooks noted in the margin, † subscriptions will be promised in like manner. The number of houses in this district is 3,99,913, and the subscriptions at one-and-a-half Annas a house would amount to Rupees 37,492 per annum, and I trust that almost the whole amount would be collected without trouble. In case of poor people failing to pay anything, any deficiency in the above sum will be supplemented by larger amounts of subscriptions by some of the wealthier people. I hope that the subscriptions would suffice for maintaining the establishment required, and purchasing medicines.

3. Under the above circumstances, if the Government approve and sanction the adoption of the scheme, I request that they will, in communication with the Medical Department, be pleased to form rules for carrying out the plan.

4. The sons or other young relatives of the present Native Medical practitioners should be selected to be trained.

5. The collections of the subscription should be made through the heads of villages under the superintendence of Divisional Committees.

Edw. J. Wright.

13 / 40.000 (3)
29.000

From W. WILSON, Esq., Acting Collector of the Kistna District, to the Secretary to the Board of Revenue, dated Masulipatam, 20th September 1867.

Referring to Board's Proceedings, * No. 4,425, dated 5th July 1867, I have the honour to inform you that I have communicated with officers in charge of Divisions, Tahsildars, Sub-Magistrates, and the various Zemindars throughout the District, and on 31st August 1867 held a public meeting in Bander Town, which was well attended. In all cases the reports are favourable. In the western Talooks of the Guntoor side, where the people suffer much from low fevers, the proposal has been received with especial favour. The General Deputy Collector in charge of Vinukonda expresses the fear, which to myself is conviction, that a voluntary Cess is impracticable, but thinks that if the majority of the people should express their readiness to pay the cess, it should be collected under authority of a legislative enactment like the Education Act. I have had too much experience of the worthlessness of promises made of voluntary contributions by the people of this District to objects of public benefit like Civil Dispensaries to trust to any made in a scheme like that now proposed, and can only express my conviction that if a voluntary cess only is contemplated, it will be much better to do nothing, for failure on the voluntary principle is simple certainty. Should Government incline to adopt legislation, I shall be happy to submit proposals and estimates.

Exd. T. Cartledge.

From J. A. C. BOSWELL, Esq., Acting Collector of Nellore, to the Acting Secretary to the Board of Revenue, dated Camp Krishnapatnam, 20th April 1868, No. 1,102.

1. I have the honour to reply to the Board's Proceedings, dated 15th July 1867, No. 4,425, calling on me to ascertain whether the people generally are willing to contribute a Voluntary Cess to meet the expense of establishing Talook Dispensaries and educating Native Doctors.

2. There is a Civil Dispensary at Nellore, located in a well built and substantial house. It has a surgery with an operating theatre at the back, and two pauper wards on the right, one for males containing fourteen beds, and one for females containing six beds. The left wing is a Police Hospital containing twelve beds. This Hospital is supported by the munificent monthly subscription of Rupees 150 given by the Rajah of Venkatagerry. This Institution has also a small uninvested endowment which is being annually increased by subscriptions and donations. As the Rajah has so liberally taken on himself the sole maintenance of the Hospital, it is proposed to devote the annual interest of the endowment towards the establishment of Talook Dispensaries and the education of Native Doctors. The Dispensary and Hospital were built in 1850 by public subscription and a Government grant.

3. There is also a Branch Dispensary in the town of Nellore, (which has a small invested endowment of Rupees 4,000), where a Sub-Assistant Surgeon prescribes for out-patients, but there is no hospital here. The number of in and out-patients during 1867 is shown below:—

	In-patients.	Out-patients.
Civil Dispensary	290	4,325
Branch do.	...	5,383
		9,998

4. The Zillah Surgeon Dr. E. Eyre Lloyd informs me that the chief of the Native Doctors of Nellore by name Esuf Khan, who is anxious to see something of the English practice of medicines and surgery, has for some time been in daily attendance at the Civil Dispensary, and he is given to understand that there are five or six more willing to attend in like manner. Esuf Khan belongs to the Yuvani or Greek school, and seems a sharp intelligent man, and willing to gain and receive instructions, though he is advanced in years, being forty-five or fifty years of age. He has but one son seven years old, to whom Dr. Lloyd thinks, when he attains a proper age, he will be glad to give an improved education in medical science.

5. Dr. Lloyd suggests that the Tahsildars should call a conference of the leading Native Doctors in each talook and try and persuade those who have sons or relatives old enough to send them to Nellore where they can attend at the Civil and Branch Dispensary and obtain instructions and acquire practical experience in the art of surgery and the use of medicines. For this purpose he proposes to establish a few scholarships as funds are available, and suggests that those who have a knowledge of English might perhaps on vacancies occurring be admitted as students at the Medical College at Madras, where they would receive a more extended course of instructions; the others would go out and practice in the villages, and would prove a more efficient class of men than the present Native Doctors generally.

6. In Government Order, dated 5th November 1867, No. 1,392, Public Department, on a proposal of the Acting Sub-Collector, Government sanctioned the Dresser at the Ongole Police Hospital prescribing for out-patients and giving them medicines, granting him on this account an increase of Rupees 10 a month to his salary. They also sanctioned a grant of Rupees 500 towards the erection of a Talook Dispensary at this station, provided the people raised an equal sum within six months. This sum I have no doubt will be collected. It will thus be seen that we have made a beginning both in the matter of Talook Dispensaries and the education of Native Doctors. The question remains to be considered how we can best raise means to carry out extended operations. On receipt of the Board's Proceedings, I at once instructed the Tahsildars and Deputy Tahsildars to make known the proposals of Government for the collection of a voluntary cess for this purpose. This they have done village by village. The people generally, I am happy to be able to report, have responded very heartily to the call. They fully appreciate the advantages of the European practice of medicines and surgery, and would be glad to have these advantages brought more within their

reach. Accordingly in every talook, *Fil Zaphitas* or Agreements have been numerous signed by the people for the collection of an annual cess at the rate of one anna per house. They everywhere express themselves perfectly willing to pay this, but they have one request, and that is, that the amount may be entered in their puttahs. They urge, that if the sum be regarded as a voluntary subscription they are unable to organize any means for its collection; and if the heads of villages are left to collect it, it will be made a handle of extortion, and larger sums collected under this name which will go into the officials' pockets. We will pay the one anna per house cheerfully they all say, only enter it in our puttahs if we have puttahs. I do not myself see how this is feasible, considering that but a small number of householders comparatively are Puttahdars also, and the subscription is a voluntary one and not a legal demand of the State; but heads of villages when collecting the amount might be required to give a cadjan receipt with three words and a signature thus— "Received, Dispensary subscription 1868. P. Ramudu," and I think this would satisfy the people. Many express their willingness to contribute a larger sum than one anna a year.

7. The following is an estimate prepared by the Tahsildars as to the annual amount that may be collected on this account:—

Government Talooks.	Number of houses.	Amount at 1 Anna per house promised.		
		RS.	A.	P.
Gudur	12,000	750	0	0
Rapur	6,282	392	10	0
Nellore	21,154	1,322	2	0
Atmakur... ..	10,278	642	6	0
Kavali	6,927	432	15	0
Udayagiri	4,981	311	5	0
Kandukur	13,397	837	5	0
Kanigiri... ..	15,260	953	12	0
Adanki Division	5,128	320	8	0
<i>Zemindary Talooks.</i>				
Darisi	9,053	565	13	0
Podile	8,988	561	12	0
	1,32,267	8,266	11	0

In the other two Zemindary talooks of Vencatagherry and Polur, the Rajah does not wish the ryots to be canvassed to contribute, as he himself has undertaken the support of the Nellore Civil Dispensary, paying Rupees 150 a month as already stated.

8. I believe this sum, say Rupees 8,000 a year in round numbers, may be easily collected, and will prove sufficient to start the beneficial proposals of Government on a suitable scale. I request instructions as to authorizing collections in the present year.

9. The Zillah Surgeon would devote the whole of the annual collections in the first place to provide an endowment for the Nellore Civil Dispensary, which he points out is at present entirely supported by the Rajah's monthly subscription. If this were to be withdrawn either by the Rajah or his successor, the hospital would have nothing to fall back upon. I consider, however, that when these funds are raised for the express object of providing Talook Dispensary and educating Native Doctors to practice in the villages, the money ought to be so laid out, though perhaps Rupees 1,000 a year might be set aside gradually, to provide an endowment for the Nellore Civil Dispensary.

10. The fresh Talook Dispensaries should, I think, be established at (1) Ongole, (2) Venkatagherry, and (3) Udayagiri.

11. I think it right to mention here that the Rajah of Venkatagherry maintains three Vaccinators on his estate. One is also maintained by the Nellore Municipality.

From F. B. MOLONY, Esq., Acting Collector of Cuddapah, to the Acting Secretary to the Board of Revenue, dated 24th August 1868, No. 177.

1. With reference to Proceedings of the Board, No. 4,425, of 15th July 1867, communicating Proceedings of the Madras Government, No. 1,307, dated 10th June 1867, I have the honour to submit the following observations on the scheme for the instruction of Native Medical Practitioners in the treatment of the more common forms of disease.

2. I think there can be no question that the object sought to be attained is one of immense importance. It is quite impossible to be much in communication with the Natives without being struck with the gross ignorance of the Hakeems who pretend to treat them for the more common phases of disease. With disease the least out of the usual forms they don't attempt to grapple, and, in my opinion, the remedies they use kill in many more instances than they cure.

3. It is quite impossible even to form an estimate of the amount of mischief wrought by the ignorance of these people, but I feel convinced it is enormous.

4. The eagerness with which the Natives seek European or superior Native medical advice, especially in Surgical cases, wherever it is procurable, is sufficient proof of the value they attach to superior medical attainments; but at the same time they have the greatest dislike to a voluntary cess for this or any other object. Were the payment of a cess for the object proposed a legal obligation, they would pay it without a murmur; but a voluntary cess they will not pay, at least at present, in this district. I think much might be done by establishing classes at Government Dispensaries for instruction in Medical Science. The expense would not be great, and might be met by a small fee for each pupil; and if that were not enough, by subscription. The pupils would very soon establish their superiority over the untaught Hakeems, and be able to maintain themselves by their practice.

5. I do not think matters are ripe in this part of India for the introduction of the large scheme which has been introduced in the Punjab, but feel convinced that much good may be done in a smaller way, and that gradually a better system may be introduced. I enclose a letter to my address on this subject from the Acting Zillah Surgeon, who has undertaken to instruct a certain number of students in their own vernacular language in Medicine and Surgery. Iyasawmy Pillay has also promised to give lectures to a class, if one can be formed, twice a week, or oftener if necessary, on the uses and proper doses of the most useful medicine in prevailing diseases, and in the treatment of the more common accidents and injuries. He proposes to allow the students a sum of Rupees 7 monthly to induce them to attend regularly. I observe that this course is pointed out in the Principal Inspector General's letter, and I shall endeavour to raise by subscription the necessary funds for the purpose.

ENCLOSURE No. 1.

From M. IYASAWMY, Acting Zillah Surgeon of Cuddapah, to the Acting Collector of Cuddapah, dated 21st August 1868, No. 36.

1. In reply to your docket, No. 726, dated the 20th instant, enclosing Proceedings* of the Board of Revenue, No. 4,425, of the 15th July 1867, I have the honour to state that, from the inquiries

I made as to the advisability and practicability of instructing the sons and relatives of the Native Doctors and Hakeems in Medicine and Surgery on the European system, I am of opinion that the scheme is perfectly feasible, and will, no doubt, confer an immense benefit upon the people of the district.

2. I do not think, however, it would be quite politic to invite the people, in the beginning, to contribute, by a voluntary cess, for carrying out the proposed plan.

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3. I would, therefore, respectfully suggest that the expenses for training the sons of Native Doctors (or others who are willing to be taught) might, in the first instance, be undertaken by Government, and that when the people begin to perceive and appreciate the advantages and usefulness of these Practitioners, they may then perhaps be induced to tax themselves voluntarily for the maintenance of their own Native Physician, and also the cost of medicines, etc., supplied to them.

4. By pursuing this course, I presume the scheme under contemplation might attain the success that has attended the various Civil Dispensaries in the Mofussil stations, and like them it might become self-supporting ultimately.

Exd. T. Cartledge.

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From T. A. N. CHASE, Esq., Collector of Kurnool, to the Secretary to the Board of Revenue, dated on Circuit at Peapally, 30th January 1868, No. 39.

1. Referring to Board's Proceedings, No. 4,425, dated 15th July 1867, I have the honour to report that careful inquiries have been instituted, in all the talooks of this district, to ascertain whether the people are generally willing to contribute a voluntary cess, for the purpose of instructing native medical practitioners in the approved methods of prevention and treatment of diseases, and that the inhabitants of the talooks noted in the margin say they are generally willing to make a donation towards the scheme. The people of the other talooks are not disposed to pay anything on this account.

Pattikonda.
Nandikotkur.
Nandial.
Cumbum:

2. As the majority of the people are against the measure, I am of opinion that the present time is not well-adapted for carrying it out with any probability of success.

3. The people express themselves as unwilling to pay voluntary taxes, since so many new taxes, such as License-tax, Road Cess, &c., have been levied, and after such unfavourable seasons, which have raised all articles of consumption to such an extreme price as to convert several articles which were formerly necessities into luxuries.

Exd. J. Wright.

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From E. G. R. FANE, Esq., Collector of Madras, to the Secretary to the Board of Revenue, dated
Saidapet, 16th January 1868, No. 15.

1. I have the honour to acknowledge the receipt of the Board's Proceedings of the 15th July last, No. 4,425.

2. The scheme proposed by the Inspector General, if it could be carried out, would no doubt prove a great blessing to the people of this country; but I believe the time has not yet arrived for its introduction, especially if the cost of so doing is to be defrayed by a tax upon houses, small though that tax be.

3. The Sub-Collector and the Madras Deputy Collector have each favoured me with their opinions, and copies of their respective letters are herewith sent.

4. The Board will perceive that they differ *in toto*. For myself, I am more inclined to Mr. Burnell's way of thinking on the subject, than to the Deputy Collector.

5. Mr. Burnell, however, at the conclusion of his letter seems to think that something might be done if a Doctor with the peculiar tact of Doctor Shortt were appointed as the teacher of the proposed school; other men with the same "speciality" as Doctor Shortt might be found, and in that way the scheme might be introduced on a small scale in two or three parts of the Presidency.

6. I do not also see why, whenever there is a Municipality in a town, a certain amount of the funds should not be allotted by the Committee to found such a Medical school as they, the Committee, would most approve of, and that doubtless would be a school somewhat resembling the ones now recommended by the Inspector General, being for the instruction of Native youths in the use and properties of their own medicines, and in the Diagnosis of the various diseases that are usually treated by those medicines.

7. There is no doubt but that many of the medicines in use by Native Practitioners are very good, many being in fact the same as our own and many not used by us, being, I believe, now acknowledged by the European faculty to be worth introduction into their Pharmacopœia.

8. I have consulted several Native Doctors living in the neighbourhood of Saidapet, and they all agree that if Medical schools of the above description were established, they would be glad to send their sons, or others who are to succeed them in their profession, to those schools.

ENCLOSURE No. 1.

From A. C. BURNELL, Esq., Acting Sub-Collector of the Madras District, to the Acting Collector of the Madras District, dated Chingleput, 16th November 1867, No. 258.

In reply to your endorsement, No. 488, on the Proceedings of the Revenue Board, dated July 15th of 1867, No. 4,425, I have the honour to inform you that I see no chance whatever of raising subscriptions to supply Medical aid to the people.

In the first place the people complain most bitterly of the taxes already levied, and especially of the Municipal taxes; now Conjevaram would be the very place to attempt to carry out such a scheme, and there the greatest discontent prevails.

Secondly, the people abhor the European system of treatment. They complain that their habits and constitution are never taken into consideration, and that the medicine administered does more harm than good. They think better of Surgical operations. As far as my experience goes, not one Medical Officer in twenty ever gains the confidence of the people; so even in more favourable time, I see little chance of a voluntary rate being established.

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Thirdly—As the extract from the Punjab Administration Report clearly shows, little or nothing is known about the oriental systems of medicine practised in India. The account in this extract is erroneous on the face of it. The real Medical Practitioner among the Natives are sometimes Brahmins and oftener Mahomedans. Though perhaps behind the times considerably, they are far from being the uneducated charlatans that they are commonly supposed to be. I have seen many Hindus who had a thorough knowledge of the standard works on their profession which exist in Sanskrit, and of which Doctor Taylor and Doctor H. H. Wilson (both Medical men and great Sanskrit Scholars) have expressed a favourable opinion. The Mahomedan Hakeems have, in many serious cases I have heard of, done very well, and I know as a fact that they are thought by some of the Native gentlemen at Madras (even those who have been much in contact with Europeans) to be by far the best advisers in cases of serious disease. In Malabar, eight families exist who were originally established at the first foundation of that Colony, for giving medical aid to the people. They are mostly Brahmins, and still preserve their old credit, though they have inherited princely incomes. Now all these men, apart from their being very few in number, would never receive instruction, and I do not think they would be any the better for it if they were willing, for they would not abandon their old systems.

There is a large class of ignorant coolies who ought to be put down by criminal prosecutions, and who pretend to cure diseases and treat patients; but it would be labour thrown away to try to instruct such miserable wretches.

That Lying-in-Hospitals are greatly needed I do not doubt; the mortality among women from bad treatment is excessive; but Native Doctors seldom or never interfere in such cases. Unfortunately though all Natives admit the want, it is almost impossible to start such institutions. When I was at Calicut six years ago, I recollect that Doctor Wyndowe (then in medical charge of the station) endeavoured to get a few women to take lessons from him, and quite failed even among the low caste Hindu women. I then at his request introduced to him the Reverend Mr. Fritz, but he could not persuade any of his converts either; so the scheme fell to the ground.

7. I only know of one place where it was succeeded, namely, at Manargudy, in the Tanjore District.

8. I do not think that it will be out of place if I mention Doctor Shortt as the only person who can give reliable information on the subject that I have met with; nor will it be out of place if (as I know from personal inquiry) I state that all the people in the District have such confidence in him that any institution under his care will certainly prosper. In the most remote villages, I often meet with patients of his, who recollect his name with the greatest gratitude for the disinterested interest he always took in their cases. However, I fear that the money aid would be but small.

(True Copy.)

(Signed) E. G. R. FANE,
Collector.

ENCLOSURE No. 2.

From V. RUNGASAWMY IYER, Deputy Collector of Madras, to the Acting Collector of Madras, dated 29th November 1867, No. 250.

1. I have the honour to submit my report on the Proceedings of the Board of Revenue, of date the 15th July 1867, No. 4,425, as called for in your Memoranda, No. 488 of the 24th idem, and No. 821 of the 23rd instant.

2. Having carefully gone through the said Proceedings, and also consulted some respectable Natives at Madras on the subject in question, I learn that the scheme proposed by the Inspector General, Medical Department, for educating the sons of the Native Doctors and Hakeems in the European method of medicines, would work well amongst the Native community.

3. The whole Proceedings in question relate only to educating the Native Practitioners in the administration of Medical aid in the European method; but the opinions of the Native public is that the English medicines do not seem to be so well adapted in this part of the country, as they are in

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a great measure very strong and do not suit well in this hot climate. They, in general, have a great belief in the Native medicines, and I think there is some truth in it; but as the Native Doctors are not able either to prepare the medicines carefully or administer it according to the nature of the different diseases, this defect really appertains to the want of perfect knowledge and pecuniary aid on the part of the Native Practitioners. I am therefore of opinion that the Native Practitioners may be systematically educated to administer both Native and European medicines as occasion may call for.

4. This undertaking will really entail an expenditure, and which, I think, could be met by a levy of an annual moderate cess, say not exceeding one Anna, from the house-holders. This trifling contribution for the good of the public will be cheerfully paid by the inhabitants, and it will form a sufficient fund to carry out the proposed object.

(True Copy.)

(Signed) E. G. R. FANE,
Collector.

Exd. T. Cartledge.

From J. D. ROBINSON, Esq., Collector of North Arcot, to the Secretary to the Board of Revenue,
dated Chittoor, 9th August 1867, No. 212.

1. I have the honour, with reference to the Proceedings of the Board, dated 15th ultimo, No. 4,425, to state for their information that, immediately on receipt of that paper, I wrote to the Acting Sub-Collector and the Acting Head Assistant to canvass meetings at Vellore and Old Arcot, and at Wallajapett and Gudiathum respectively, for the purpose of ascertaining the state of feeling among the native communities in those places, regarding the proposition of raising a voluntary cess to meet the expenses of instructing native practitioners in the approved methods of prevention and treatment of the more common epidemic diseases of the country.

2. In reply to my reference, Mr. Comyn has written me a letter, * of which I beg to enclose a copy. I most fully concur in Mr. Comyn's opinion that, in the present state of feeling among the native community of Vellore, it would be futile and ill-timed to attempt any appeal for the purpose of obtaining contributions on behalf of the object advocated in the paper to which this correspondence relates. I was myself at Vellore during a part of the recent disturbances, and am satisfied, from what I then saw and heard, that there is a general feeling of irritation and discontent on the subject of taxation, which would render any appeal of this nature absolutely nugatory and unsuccessful.

3. Mr. Wilkinson has not yet replied to my reference; but as soon as an answer is received, I shall forward a copy to the Board with any remarks which I may have to offer upon it.

ENCLOSURE No. 1.

From W. H. COMYN, Esq., Acting Sub-Collector of North Arcot, to the Collector of North Arcot,
dated Chittoor, 5th August 1867, No. 318.

1. In reply to your letter of the 3rd instant, No. 533, I have the honour to inform you that, while I am quite ready to carry out to the best of my ability the wishes of Government expressed in paragraph 2 of their order* forwarded therewith, at the same time, considering the present state of feeling which prevails among the members of the native community of this place, I am convinced that my efforts would be attended with very little success.

2. The question of erecting a suitable building for a Dispensary here, was one to which I intended giving my early attention, but recent events, which I have fully reported to Government in my letter, No. 143, dated 30th ultimo, (which you also have seen,) have completely dispelled any illusion I may have had as to the probability of obtaining contributions from the inhabitants of this place towards that object. Although the public peace has been restored, there still remains a deep-rooted aversion in the minds of the people to Municipal taxation; and until this is dispelled, any attempt to obtain voluntary contributions from them would be practically useless. I would, therefore, suggest the advisability of postponing all efforts in this direction, until the public mind has regained its wonted contentment and serenity.

(True Copy.)

(Signed) J. D. ROBINSON,
Collector.

From J. D. ROBINSON, Esq., Collector of North Arcot, to the Secretary to the Board of Revenue, dated Chittoor, 10th September 1867, No. 254.

1. In continuation of my letter noted in the margin, I have the honour to forward, herewith, transcript of correspondence, which has passed between my Acting Head Assistant and myself, on the subject of instructing native practitioners in the approved methods of prevention and treatment of the more common epidemic diseases of the country.

Dated 29th August 1867, No. 3,593.
Letter from Acting Head Assistant
Collector, dated 5th September 1867,
No. 334.
Do. dated 10th September 1867.

2. I hope that, under the circumstances represented, the Board will be pleased to approve of my proposal to abstain from any further action in the matter for the present.

ENCLOSURE No. 1.

From J. L. WARNER, Esq., Acting Head Assistant Collector, to the Collector of North Arcot, dated Ranipett, 5th September 1867, No. 334.

1. With reference to your letter, No. 522, to my predecessor, and dated July 27th, 1867, I have the honour to request that you will instruct me whether you still wish to have these meetings called. I was over at Wallajah this morning; I find the municipality in good working order, and I was much pleased with the general appearance of the streets; but when I opened to the Tahsildar the scheme suggested in your letter, and its accompanying Board's Proceedings, he seemed to think the time very ill-chosen for working upon the pockets of the natives. I am of the same opinion, and for the success of the scheme I would prefer to wait a short time longer, that the Hindoos may have begun to appreciate the meaning and the unselfishness of a Municipal system, before we attempt to concoct a new scheme, which they will at once put down as another tax on their pockets, brought upon them as the necessary consequence of their having allowed themselves to be wheedled into a Municipality without a struggle to avoid it. I do not mean by this to condemn the Municipal system, but taking the native point of view regarding it, to show by that what difficulty will attend the carrying out of more schemes than one satisfactorily at the same time, when those schemes press at all upon the pockets of the natives.

2. I have another objection to urge against my proceeding at once to call these meetings. I do not know anything at all of the principal men about here yet, and I may, by acting in too great a hurry, involuntarily give offence, which would at once be the ruin of the scheme. Consequently, I should like to study the matter a little, and to find out who are likely to be on my side, as there will no doubt be a strong feeling, in the first place, against the introduction of English medicines at all.

4. I request you will be good enough to send me instructions, how I am to act.

(True Copy.)

(Signed) J. D. ROBINSON,
Collector.

ENCLOSURE No. 2.

From J. D. ROBINSON, Esq., Collector of North Arcot, to the Acting Head Assistant Collector of North Arcot, dated Chittoor, 10th September 1867.

Adverting to your letter, dated the 5th instant, No. 334, I have the honour to observe that I think it would be better to let the matter stand over for the present. I have already deprecated the experiment so far as it concerns Vellore, and I entirely concur with you in thinking that any appeal to the liberality of the Wallajapett community at this time would be singularly ill-timed and premature. With Municipal and License-taxes, and on a increased Road Cess to pay, the people are already grumbling at their burdens, and I feel assured that any attempt to enlist their support in this direction would fail signally, and possibly close the door to future action under more promising circumstances.

(True Copy.)

(Signed) J. D. ROBINSON,
Collector.

Exd. J. Wright.

From C. W. READE, Esq., Collector of South Arcot, to the Acting Secretary to the Board of Revenue, dated Manaloorpett, 30th April 1868, No. 103.

In reference to the Proceedings of the Board, No. 4,425, dated 15th July last, in which Collectors are called on to ascertain by inquiry whether the people generally are in favour of the scheme proposed by the Principal Inspector General of the Medical Department, of voluntary taxation for the purpose of training up Native Practitioners for the dispensing of European medicines and treatment of the sick, I have the honour to forward copy of letters* received from my Sub-

- From Sub-Collector, dated 16th September 1867, No. 320.
- Do. Head Assistant Collector, dated 19th November, 1867, No. 246.
- Do. Zillah Surgeon, dated 14th November 1867, No. 141.

Collector, Head Assistant, and the Zillah Surgeon, in the views expressed in which I generally concur.

ENCLOSURE No. 1.

From W. F. HATHAWAY, Esq., Sub-Collector, to the Collector of South Arcot, dated Chellumbrum, 16th September 1867, No. 320.

1. With reference to the Order of Government of the 10th June 1867, circulated in the Proceedings of the Board of Revenue of the 15th July, I have the honour to report that the result of my inquiries in the matter is that though it would not be possible to carry out any such scheme generally throughout a district or a talook, yet in single towns it might succeed very well, especially in connection with a Dispensary. A certain portion of the funds so raised would meet the current expenses of the Dispensary, and the rest would support a certain number of the most intelligent of the Native Doctors who thus would assist as Hospital Attendants, and would also at the same time learn something of English practice, so that each on the expiration of his scholarship would be qualified to earn his own livelihood as a tolerably good Practitioner.

2. Chellumbrum is the only town in this Sub-Division where it could be tried, and here the people being already anxious to obtain medical attendance, have had the scheme explained to them, and seem to be rather pleased with it. The rate might be fixed at 1½ Annas a house at first, and as the number in a position to pay it is about 2,500, this would give a yearly income of 234 Rupees. The most intelligent young man in the caste of Native Doctors would be selected and paid an allowance of 6 or 7 Rupees a month. He would be under the orders of the Dispensary Dresser to assist as an apprentice, and gradually would learn something of English medicine. I think the principle a good one, as tending to bring our system of medicine into greater repute amongst the Natives, and to enlist on our side the caste of Native Doctors who are really more popular with the Native community at large, and yet from various causes at present stand aloof from English instruction. The inhabitants of this place seem to regard the scheme with favour, and, indeed, as it is a voluntary one, will probably at once attempt to institute something of the sort as the easiest and most popular way of raising funds. If it succeeds, possibly some other town will follow the example.

ENCLOSURE No. 2.

From A. L. LISTER, Esq., Acting Head Assistant Collector, to the Collector of South Arcot, dated Gingee, 19th November 1867, No. 246.

1. In reply to your Official Memorandum, No. 636, dated 23rd July 1867, I have the honour to state that I am of opinion that the inhabitants of my talooks are sufficiently advanced in civilization to appreciate and contribute money to a scheme for the improvement of Native Medical Practitioners.

2. I do not agree with you in thinking the scheme "elaborate." Men "taught how to do a minimum amount of harm with the greatest amount of good," and understanding "the uses and doses of the more common medicines," would be, I believe, peculiarly acceptable to the people, and the boon would be thoroughly appreciated.

3. I think a sum of one and a half anna for each house would very generally be contributed.

4. The rising generation of Native Practitioners are not, however, willing to leave their homes to be instructed at Cuddalore or elsewhere; but this is not a practical difficulty, for if the inhabitants of Trinamallay pay for a slightly educated Vetyan, it does not much signify where he comes from, and indeed a stranger would be likely, I think, to meet with more respect and confidence,

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5. I would, however, remark that the inhabitants of my talooks, like the majority of their countrymen, are not peculiarly anxious to pay for a prospective advantage; if one of these trained men were sent to the talook, the money for the training of another would be immediately forthcoming; and I would venture to suggest to you, for the consideration of Government, that with a view to start the system and give immediate practical effect to it, it would be well for Government to train a few men immediately and send them to districts where the inhabitants would be willing to pay for them; and the money subsequently collected could be taken to reimburse Government, or else to train others, if it should be considered desirable to extend the system.

ENCLOSURE No. 3.

From J. BILDERBECK, Esq., Civil Surgeon of Cuddalore, to the Collector of South Arcot, dated 14th November 1867, No. 141.

1. I have the honour, with reference to your letter, No. 831, dated 12th September last, to inform you that, in communication with Native Surgeon J. Rajendrum, I have ascertained that there are Native youths in this station who are willing to be instructed in the principles and practice of European Medical treatment; but much will depend on the extent of pecuniary inducement held out to them during their studies and on their passing for practice.

2. For my own part I am quite willing to devote a portion of my time for their instruction.

(True Copies.)

(Signed) C. W. READE,
Collector.

Exd. T. Cartledge.

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From G. L. MORRIS, Esq., Collector of Tanjore, to the Secretary to the Board of Revenue, dated Vallam, Tanjore talook, 4th January 1868, No. 2.

With reference to the Proceedings of the Board of Revenue, dated 15th July 1867, No. 4,425 I have the honour to state that the inhabitants of six out of nine of the talooks in this district, are reported to have expressed their willingness to pay a cess varying from half anna to two annas per house yearly, towards instructing native practitioners in the approved methods of prevention and treatment of the more common epidemic diseases of this country, and that those living in the remaining three talooks are said to have not exhibited any particular interest in the matter, but if anything a repugnance towards paying for any such project as that proposed. I think, therefore, that the people of this district may be considered to be *generally* in favour of the adoption of the proposed scheme, the dissentients being those living in towns which are now subject to the payment of Municipal taxes, and which have hospitals established in their neighbourhood.

Exd. J. Wright.

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From C. T. LONGLEY, Esq., Acting Collector of Trichinopoly, to the Acting Secretary to the Board of Revenue, dated 19th September 1868, No. 176.

ADVERTING to the Board's Proceedings, No. 4,425, dated 15th July 1867, I have the honour to inform you that, from careful inquiries instituted personally and through my Assistants, the inhabitants of this district are not willing to contribute any cess to meet the expenses for carrying out the proposed scheme.

2. The people appear generally to recognise the importance of the scheme, but the cesses*

* Municipal Cess.
Irrigation do.
Road do.
Village do.

already imposed, and the contributions made by them this year to the Civil Dispensary, make them averse (for the present at any rate) to any further taxation in furtherance of the scheme under notice.

Ed. T. Cartledge.

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From the Honourable D. ARBUTHNOTT, Collector of Madura, to the Secretary to the Board of Revenue, dated Camp at Oosilampatty, 12th February 1868, No. 32.

1. With reference to the Board's Proceedings, dated 15th July 1867, No. 4,425, I have the honour to submit copies of letters from the Sub-Collector and Acting Head Assistant Collector, dated the 6th November and 30th ultimo, Nos. 156 and 14, respectively, and to state that I entirely concur in the views expressed by them.

2. Besides giving a certificate to every purchaser of medicine, as proposed by the Sub-Collector, I would make it a condition that his store of medicine should be liable at any time to inspection by a Covenanted Officer of Government, so that there might be some check to the sale of spurious medicines if such should be attempted.

3. I have the pleasure to bring to the favourable notice of the Board the generosity of the Saptur and Elumalai Zemindars, who have voluntarily offered to pay the expences of four young men during their stay at the Madura Dispensary for one year, and the former has also offered a reward of Rupees 500 for the best Tamil treatise on medicines as practiced by Europeans.

ENCLOSURE No. 1.

From J. R. ARBUTHNOTT, Esq., Sub-Collector, to the Collector of Madura, dated 6th November 1867, No. 156.

1. I have received your letter, No. —, of — ultimo, requesting me to record my views as to the adoption of a system proposed for the introduction of European medicine and treatment amongst native doctors.

2. I am aware that the plan under consideration has many advantages, but there is no concealing the fact that it is too elaborate and too far developed to be summarily introduced amongst the people here who are uneducated, prejudiced, and above all things unwilling to part with their money for the contingent and to their obscure chance of future personal benefit. The collection of even the small sum of money proposed in the scheme must be attended with a certain amount of pressure; and the people would consider that it was a new tax being exacted from them by Government under the pretext that it was a voluntary contribution.

3. After inquiry amongst the native doctors here, and others in a position to afford information on the subject, I am led to think that the following plan might be adopted as an experiment. The trial would, at all events, tend to the diffusion of European medicines and knowledge, and might be of great use in the event of epidemic breaking out amongst the people.

4. My proposal is, that Government should supply any native doctor, or other person who might apply for them, with the usual remedies for fever, cholera, and other epidemics at cost price; the only condition being that the purchaser should take not less than a certain amount in value at a time. On his purchasing the medicines, I would give him a certificate to the effect that he had purchased and was at liberty to prescribe quinine and other European medicines.

5. As a rule, native doctors instead of charging for their medicines exact a round sum for their attendance; a very common arrangement is for the patient to pay half a stated sum in advance, and the remainder when cured. Now I think that these men would secure a larger practice and be more successful, if they used and held a kind of license to show that they presented European medicines, whereas those who confined themselves to the use of native drugs would gradually lose ground, and be eventually deprived from their practice.

6. The medicines to be used would at first be of the most simple description, and their issue accompanied by plain directions as to their application and use.

7. It may be said that this scheme is on a very limited scale, and likely to be slow in its action; but I think it will be conceded that it is practical, inexpensive, easily tested, and that if it succeeds, the result will be permanent and progressive, for it will own its development to spontaneous action, instead of being propped up and kept in existence by official influence.

8. I subjoin a list of persons who have expressed their desire to purchase small supplies of English medicines beginning with two and going up to five Rupees worth. If this plan be thought worthy of a trial, I shall be glad to aid in carrying it out, and will make arrangements for the sale of any medicines that may be consigned to me:—

List of persons.

- I. Cunnevady Renter, Audimulem Pillay.
- II. Ammayanaicker Renter, Narayana Chettiar.
- III. Nellacottah Zemindar, Koolappa Naick.
- IV. Ramagiri, Pensioner Mudumeenommal.
- V. Nochipatty, Vencatachella Iyengar.
- VI. Combay Sengum Pillay.
- VII. Battalagoondoo, Curnum Moottoocomaru Pillay.
- VIII. Vembarputty Subba Naick.
- IX. Siluvarputty, Gulam Hoossain Rowten.
- X. Tennarpady Nattamgar Sitar Rowten.
- XI. Karikulali Nattamgar Ramanada Velliakone.
- XII. Vadipatty Kuppareddy.
- XIII. Subba Naick.
- XIV. Pichamoideen Rowten.
- XV. Rajappa Chetty.
- XVI. Alagappa Nadan.
- XVII. Vencataramen Chetty.
- XVIII. Vellia Nadan.

(True Copy.)

(Signed) P. SESHAGIRI,
For Collector.

ENCLOSURE No. 2.

From G. McWATERS, Esq., Acting Head Assistant Collector, to the Collector of Madura, dated Tiroopuranam, 30th January 1868, No. 14.

1. With reference to your letter, No. 1,586, dated 8th October last, I have the honour to inform you that I called upon the Sub-Magistrates in the Ramnad and Shivagunah Zemindaries to make inquiries and to report whether or not the people generally were in favour of instructing the Vythians or native doctors in medicine.

2. I now submit the result of their inquiry.

3. In Shevagunah, Tirooppatur, Ramnad, Tiroovadavai, and Pamben, the people rather view with disfavour the instructions of Vythians, and especially the voluntary contribution of a cess for that purpose.

4. In Mudoogulatoor and Tiroochuly, a few respectable inhabitants are willing to contribute a voluntary cess.

5. The people, I believe, hardly know what it is proposed to do. As an initiatory measure, I think it would be a good thing to supply the Sub-Magistrates and some Munsiffs with a few useful European medicines, with directions as to use, for distribution at cost price. The natives would readily purchase them, and in time perhaps change their opinions as to the advisability of imparting medical instruction to their own doctors.

(A true Extract.)

(Signed) P. SESHAGIRI,
For Collector.

From R. K. PUCKLE, Esq., Collector of Tinnevely, to the Secretary to the Board of Revenue, dated Kodikurichi, 31st August 1867, No. 460.

1. In reply to the Board's Proceedings, No. 4,425, dated 15th July 1867, I have some diffidence in offering an opinion, as the indifference of the mass of the people, on all subjects that do not materially affect their property or prejudices, is so great that it is impossible for a European to ascertain what their real feelings are, and it is worse than useless to accept the sentiments of the educated few in the Cutcherries as representing the views of the people. I can, therefore, only form an opinion from circumstances and cases that have fallen under my observation.

2. The mass of the people care nothing for public charity in our acceptance of the term. Charity bestowed on individuals of a particular class is thought highly of by that class throughout, but no one else cares about it; the idea of public charity common to all alike on equal terms has no existence in the native mind.

3. The Hospitals and Dispensaries established by the British Government, though intended as such, are not really public charities, for the public will not accept them; and only certain classes who have no prejudices, or are driven by necessity to conceal them, consent to be benefited by what we conceive to be the noblest form of charity.

4. Doctors, Apothecaries, and Dressers have but little practice among the native community; the latter dread surgical operations, and have no belief in European drugs.

5. The Native Doctors are skilful herbalists, and have excellent specifics for the more ordinary complaints. In special cases they take their chance, and trust as much to superstition as to drugs. Native Doctors are not Accoucheurs; the management of childbirth is entirely in the hands of Midwives, who must needs be ignorant of theory, as native women have no education, but some have practical experience, and are highly thought of in consequence. The education of both Native Doctors and Midwives in Anatomy, Surgery, and the use of drugs, would doubtless be beneficial, but such education must be gratuitous, as no village in this part of the country would voluntarily consent to tax itself for the education of the Doctor and Midwife.

6. Special taxes are specially disliked; an increase in the price of salt or stamps would be accepted without a murmur; but the direct taxation for roads and trades, however small it may be, is felt by all affected to be a burden, and I doubt the possibility of persuading the people to tax themselves for anything further.

Exd. J. Wright.

From G. A. BALLARD, Esq., Collector of Malabar, to the Acting Secretary to the Board of Revenue, dated Calicut, 2nd February 1869, No. 35.

I HAVE the honor to reply on the Board's Proceedings, dated 15th July 1867, No. 4,425, calling for report as to whether the people of this district are willing to submit to a voluntary cess with a view to the establishment of Talook Dispensaries and provision of scholarships for the encouragement of study by the relations of Native Medical Practitioners in European medical science.

2. I have made careful and extensive inquiries. As usual little general feeling of any sort can be said to prevail unless the question is stirred. Some of the people have a horror of European medicine from caste prejudices. Many regard the treatment with dread. The masses are apathetic so long as they are let alone; but if a question of assessment is raised, apathy I fear gives place to antagonism.

3. I by no means wish it to be thought that where European medical treatment by attentive officers can be obtained, the sick and needy do not extensively avail themselves of it. The Returns of the Civil Hospitals and Dispensaries show how much and how increasingly they are being appreciated.

But the people generally are certainly not desirous of voluntarily contributing generally or of being taxed specially to provide themselves with improved medical advisers.

4. Fully impressed with the importance of the subject, and most desirous in every legitimate way to aid progress therein, I can hold out no hope that any purely voluntary system will have general success in Malabar; though on special occasions and with a certain amount of the mild pressure usual at such times, considerable sums have been contributed for Hospitals.

5. I should strongly deprecate at present the imposition of a general cess to provide Doctors or Hospitals.

The universal feeling is that cesses are too numerous already, and I am sure a medical cess would excite very strong opposition.

But I see no reason why an Act of the nature of the Malabar Educational Act should not be passed, which should enable local majorities in particular localities to tax themselves when so disposed to provide, with Government assistance in aid, Doctors, Medicines, and Hospitals, as they now can (under Act VI. of 1863) assess themselves to provide school-masters, books, and school-rooms. Such an Act judiciously worked might be very beneficial in its influence, and I think this is the direction in which effort to spread the advantages of European medical science in the rural districts should be directed.

Exd. T. Cartledge.

Encl^{re} in B^o No 2
 N. D. Dated 27 Apr
 1869. No 2531 -

File of Collector's
 replies -

46

From A. WEDDERBURN, Esq., Collector of Coimbatore, to the Acting Secretary to the Board of Revenue, dated 22nd September 1868, No. 248.

WITH reference to the Proceedings of the Board of Revenue, dated 15th July 1867, No. 4,425, containing the Order of Government, dated 10th June 1867, No. 143, requesting a report whether the people were willing to contribute in aid of what may be termed a Medical Cess, of one or two annas per house, I have the honour to state that my predecessor promulgated the scheme, and called on Tahsildars to report the views of the people.

2. From the reports of the Tahsildars, the scheme has more or less commended itself to the people.

3. I have had some experience in the personal agitation of this question in another district, and I am not disposed to credit the sanguine views and reports of some of the Tahsildars.

4. The Coimbatore Tahsildar put the matter before the people, assembled at Settlement, when all the village officers were present. He reports that only a few intelligent persons appreciated the scheme, and that to have effect, the cess should be compulsory.

5. The Sattiamungalum Tahsildar reports a small minority in favour of the scheme.

6. The Collegal Tahsildar (of a wild talook) reports total non-appreciation of the scheme.

7. The Pollachy Tahsildar, whose people have the advantage of a Dispensary, reports a universal approval.

8. The Perindorai Tahsildar reports a universal approval, but states it in a general way.

9. The Bhowany Tahsildar (adjoining talook) has a very different account to render.

10. The Polladum Tahsildar states universal approval, but has quadrupled the houses, having estimated the population instead of their dwellings.

11. The Caroor Tahsildar, an able man, whose talook, a wet one, might be considered advanced, reports non-concurrence.

12. The Dharapooram and Oodoomalpettai Tahsildars report universal approval.

13. I find then that two of the ablest Tahsildars, the Coimbatore and Caroor officials, are by no means sanguine.

14. I think a scheme of this sort should be gradually introduced. I would make trial of one talook, and that talook should be one which enjoys the present benefit of a Dispensary, and of an able Tahsildar.

15. I would introduce the projected voluntary cess first into the Pollachy talook, where a Dispensary founded in the time of Mr. Thomas, by the munificence of several Poligar proprietors, of whom the Samattoor contributed the largest amount, at present exists, and where its advantages are enjoyed, and may be appreciated by the people who, it is said, are willing to contribute.

16. The talook contribution of Pollachy is given at upwards of Rupees 2,000 annually.

17. I think it better to try the experiment in one talook, as it will be easier to drop the scheme if unsuccessful. If successful, the plan will recommend itself to the people of the other talooks, and the time lost at first will be compensated by the greater stability attending a successful result.

Exd. T. Cartledge.

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(47)

From C. N. POCHIN, Esq., Collector of Salem, to the Secretary to the Board of Revenue, dated Camp at Bodinaikenputty, Salem Talook, 28th February 1868, No. 59.

1. I have the honour to reply to the Board's Proceedings of the 15th July last, No. 4,425, on the subject of instructing Native Medical Practitioners in the approved methods of prevention and treatment of the more common epidemic diseases of the country.
2. Immediately on the receipt of the Board's Proceedings, I desired my subordinates in charge of divisions to ascertain the wishes and opinions of the people, and the enclosed copy of their replies contains the result of the inquiries instituted.
3. The people in the Sub-division are in favor of the scheme, while those in the Head Assistant's division are opposed to it. The Deputy Collector thinks that unless the cess is made compulsory, "it will fall to the ground." The inhabitants of the Salem and Ahtur Talooks are inclined to the proposal, but are opposed to any extra taxation of any description, as they consider that they are mulct sufficiently heavily already with Municipal, License, Road Cess, &c.
4. I am myself of opinion that any instruction given to Native Hakeems would be a move in the right direction, but would not advocate more taxation than is actually necessary.
5. The object might, I think, be obtained to some degree at least by making Hakeems attend the Civil Dispensaries and observe the mode of treatment adopted there. The Zillah and Native Surgeons might be required without any inconvenience to either of them to give twice a week at least some instruction to the Hakeems in the shape of easy intelligible lectures. After a prescribed course of regular attendance extending over say a year and a half or two, every Hakeem might be furnished by the Chief Medical Officer of the station with a certificate of qualification. Possessed of this, he could proceed to practice independently. People must by degrees appreciate the services of such men, and their holding the Chief Medical Officer's diploma is a guarantee in a measure for the public placing more confidence in these men than those who have had no instruction of any kind whatever. This would prove a sufficient inducement to many to attend the Dispensary for instruction without remuneration, and I should not be surprised if some of the wealthy and charitably disposed natives come forward to support the men while under instruction.
6. Legislature might assist by rendering it penal for a person to practice medicine without having been duly qualified; but I think that such a course would be at present too premature, and should not be attempted till other endeavours have been resorted to without effect.

ENCLOSURE No. 1.

From J. F. PRICE, Esq., Acting Sub-Collector of Salem, to the Collector of Salem, dated Oosoor, 18th November 1867, No. 140.

1. With reference to your letter No. 1,397, dated 15th instant, I have the honour to inform you that I have made inquiries in the Oosoor and Kristnagherry Talooks, and that the people there have been unanimous in expressing themselves in favour of the scheme referred to in your letter No. 1,001, dated 10th August last.
2. As in your letter above alluded to, you instructed me to make personal inquiries, but at the same time informed me that it was not necessary that I should make a tour expressly for this purpose, and as I have had no occasion to visit the Darampuri Talook since June last, I have not made any personal inquiries there, but from what I have heard, I am sure that the inhabitants of that part of the Division will approve as strongly of the scheme as those of Oosoor and Kristnagherry.
3. I start in a day or two for a tour in the Darampuri Talook, and will then mention the proposition regarding Hakeems to the people of the different towns visited by me, and will let you know the result.

(True Copy.)

(Signed) C. N. POCHIN,
Collector.

/recd

ENCLOSURE No. 2.

From B. C. LEGGETT, Esq., Deputy Collector, to the Collector of Salem, dated Namkul, 22nd November 1867, No.—.

1. In reply to your letter No. 1,399, dated the 15th instant, I have the honour to report, that I have consulted many influential persons, ryots included, in my division, as to the feasibility of the scheme mooted by Government in their Proceedings, No. 1,307, dated 10th June 1867.
2. Not long ago I held a meeting, and the subject was well discussed by a large number of respectable men, and I was somewhat astonished at the willingness evinced by all for the adoption of the proposed scheme of contributing a voluntary cess for the maintenance of trained Hakeems.
3. Notwithstanding, I am afraid that the scheme will fall to the ground, unless the cess is made compulsory instead of voluntary.
4. A tax of an anna per house I do not think would be burdensome, but would suggest a sufficient number of Hakeems be entertained, say, one for each Firka (or Revenue Division) in a talook.

(True Copy.)

(Signed) C. N. POCHIN,
Collector.

ENCLOSURE No. 3.

From J. R. DANIEL, Esq., Head Assistant Collector of Salem, to the Collector of Salem, dated Trippatore, 20th December 1867, No. 469.

1. I have the honour to reply to your letter No. 1,398, dated November 15th, 1867.
2. From the inquiries I have made the people here are most decidedly averse to contributing anything towards the maintenance of trained Hakeems.
3. I regret the delay in answering the reference. Mr. Woodroffe, before I arrived, had instituted inquiries in Trippatore itself, but he was unable to state positively the wishes of the people beyond the head-quarter station, and I was unable to do so until I had visited the places; the people are so unwilling at present to adopt this scheme, that I would have replied earlier, but I have been waiting for the decision of the Vaniembady people, where I made more particular inquiries than elsewhere. I called together about thirty of the principal inhabitants and explained the proposal to them; I was unable to induce them to give me a definite answer, so I was obliged to consent to their proposal that I should allow them a few days to find out the wishes of the people generally, after which they would write and let me know; three of the principal men undertook to do this, but as yet I have received no reply although I had written to them again to let me know their determination.
4. The general feeling of the meeting, however, was so clearly against, that I was waiting more as a matter of form for their reply; but as you wish for an immediate answer, I have no hesitation in saying that the people here would be strongly opposed to this scheme.

(True Copy.)

(Signed) C. N. POCHIN,
Collector.

ENCLOSURE No. 4.

From J. F. PRICE, Esq., Acting Sub-Collector of Salem, to the Collector of Salem, dated Camp Kaveripatnam, 3rd December 1867, No. 831.

In continuation of my letter No. 813, dated 18th ultimo, I have the honour to report that I have made inquiries in the chief towns of the Darampury Talook and that the people are unanimous in their approval of the scheme mentioned in your letter No. 1,001, dated 10th August last.

(True Copy.)

(Signed) C. N. POCHIN,
Collector.

Exd. T. Cartledge.

From H. S. THOMAS, Esq., Acting Collector of South Canara, to the Secretary to the Board of Revenue, dated Mangalore, 11th January 1868, No. 33.

1. I have the honour to reply to the Board's Proceedings noted in the margin, in which Collectors are directed to institute careful inquiries, and report whether the people generally are in favour of instructing Native Medical Practitioners in the approved methods of prevention and treatment of the more common epidemic diseases of the country, and willing to contribute a voluntary cess to meet the expenses of carrying out the scheme.

2. On receipt of these orders, I had a notice published in the District Gazette, * pointing out to the people the highly advantageous character of the proposed scheme, and directing the several Tahsildars and Deputy Tahsildars to use their best endeavours to make it thoroughly known and understood by the people, and to report as to their wishes within a definite period.

* Dated 17th August 1867, page 527.

3. These officers have clearly exerted themselves, and, in the majority of the talooks, have obtained a seeming acquiescence from the inhabitants; but beyond this, none have advanced, none have been able to call out any voluntary exhibition of anxiety for the introduction of the proposed measure, such as would tend to show that it was really appreciated and desired.

4. It is very difficult to obtain accurate information as to the real wishes of the people. The nearest approach thereto would seem to be conclusions drawn from such indications as their apathy in the matter, their general prejudices against European medicines, and their suspicion of the levy of a new rate however light in promise.

5. Setting aside, therefore, the localities in which the prejudices against European medicines are specially strong, and taking those in which apathy and suspicion appear to be the only motives which induced the people to hold back or at best to give a lukewarm assent, it would seem that a good beginning is all that is required to convert them to allopathy.

6. Such a beginning might, I think, be made in the neighbourhood of Mulky under favourable circumstances, and with a better prospect of success and good example than elsewhere in the District.

7. Mulky is the head-quarter of a German Missionary Gentleman Mr. Maenner, who has for some years, as far as his means would admit, afforded medical aid to the sick living in his neighbourhood, and such a confidence has he succeeded in obtaining amongst the people, that all castes, creeds, and classes, indiscriminately seek the advice which he always gives gratuitously. The fact of his being a Missionary appears to rouse no religious scruples, for the Samiar or Manager of the Temple, and most holy man among the Brahmins, sought the favour of his medical attendance within the Temple precincts, and was cured from his sick bed. I mention this instance as conclusive evidence of what indeed is known to be the general maxim that the eating or drinking of anything in the form of medicine, is not opposed to caste rules, and even one of the five sins may be committed with impunity, if the spirit is declared to be medicinal.

8. I think, therefore, that there can be no possible objection, and every advantage from our availing ourselves of the favourable impression already created by this gentleman, and furthering his efforts by raising the voluntary contribution in that neighbourhood first, and supplying him with medicines, one Hospital Assistant, two Compounders, a case of instruments, and a small contingent allowance to meet the carriage of his medicines, &c. Personal allowance he would seek none.

9. If the experiment is successful in commending itself to the minds of the majority, the system could be extended as opportunity offered.

10. As a commencement, I would suggest that a duly trained Hospital Assistant, one Ponambalam, who behaved well in his late Fever mission, be placed at his disposal, the Government being relieved of his pay, but not of his claim to pension, till the experiment is further advanced, and we are in a position to decide on his permanent retention or otherwise.

11. For Compounders, Mr. Maenner would doubtless select such men as were unobjected to in the neighbourhood, and gave promise of eventually developing into Native Practitioners or Hakeems.

12. A somewhat analogous experiment was made in Arcot where the Reverend J. Scudder commanded a degree of popular confidence and success, that the Government Dresser had failed to attain to. If the Board consider the suggestion promises favourably, I will give my best attention to setting it on foot.

Exd. T. Cartledge.

50

MEMORANDUM

ON THE

TRAINING OF A CLASS OF NATIVE DOCTORS, AND THE COST.

From the testimony of Dr. Paterson of the Medical Mission, Madras, and Dr. Scudder of Arcot, and the experience of our own Medical College, it is doubtful whether a fairly efficient training could be given in less than three years. It would be necessary, therefore, that the candidates should attend regularly for this period, or at least for two years, and that some measures should be decided upon to bind the youths to a stipulated period of attendance in return for the advantages placed in their way. I am not sure that an indenture of Apprenticeship would not be the most effectual way of securing the object in view, or if this be thought too stringent, that the parents or friends of the student should be required to enter into a bond to repay to the Government any stipend the student may have drawn, should he wish to withdraw from the Medical profession before completing the authorised course of study. If this is not clearly laid down at the beginning we shall have a host of applicants who have no intention of doing anything beyond drawing their monthly pay, and waiting an opportunity of entering the service of Government in some subordinate capacity unconnected with the Medical Department.

2. In the three years' training, I would have the students taught thoroughly and practically all that they actually needed to make them useful practitioners. They should begin at the beginning, learning besides the ordinary compounding of physic to distinguish drugs one from another, and the doses, mode of preparation, uses, and combinations of each. In this part of their training I would insist on the need of teaching the young men how to use the drugs indigenous to the country, and which are to be found in every bazaar. A very large proportion of the drugs, included in the British and new Indian Pharmacopœia, are to be met with in Indian bazaars; often, it is true, dirty or impure, but still available for use. I would teach the young men practically how to purify the rough products of the bazaar, and instruct them in the art of drying and preserving indigenous drugs, so as to retain their medicinal virtues intact. As a rule, I would allow no European drug or chemical to be used when an efficient native substitute could be provided. Thus, for instance, *Jalap*, being an article of foreign produce, and there being many good purgatives available in India, I would prohibit the use of such a drug in Dispensary practice, restricting the student entirely to the purgative medicines they would be able to obtain in the country. In this branch of learning I would encourage the officers in charge of Civil Dispensaries and Provincial Medical Schools, to prosecute experimental investigations into the nature and properties of little known native drugs, thereby proving to the students either their value or uselessness.

3. As regards *Chemistry*, the general principles should be taught, and what perhaps is of more importance the students should be shown how to prepare their own chemicals for medical practice, such as nitrate of silver, sulphate of copper and iron, and salts of potash, soda, and ammonia. They should be taught easy tests for the discovery of poisons, and for the examination of urine, etc. The chemical studies in fact should have a practical bearing, and be of such a nature as to be useful to them in every-day life. The simplest and roughest of apparatus should be used in these demonstrations, so as to show what can be done without the complicated apparatus of modern chemical laboratories.

4. Then again, in regard to Surgery, I would teach them how to bandage and dress wounds, to bleed, blister, extract teeth, open abscesses, perform vaccination; show them the best means of stopping hæmorrhage, of putting up fractures with simple splints and apparatus, such as every village could furnish, and in fact make them safe and efficient practitioners in most of the cases likely to come before them.

5. The study of Practical Anatomy would be attended at first by many difficulties, but these difficulties need not interfere with demonstrations of the frame-work of the human body. The position of important viscera, blood vessels, etc, might further be demonstrated by means of models and diagrams, and in this way, and by taking advantage of the opportunities for post mortem examination of prisoners, etc., a fair general knowledge of Anatomy might be given, without insisting

upon a course of dissection. A plain and simple explanation of the principles of Physiology there would be no difficulty in expounding for the present at least, and bearing in mind the difficulty of teaching even more important things, I am not inclined to lay an undue stress upon the demonstration of Anatomy from the subject.

6. In Practical Medicine I should strive to make the class efficient in diagnosing and treating the more ordinary forms of disease, letting them see especially how much may be done, in certain cases, to relieve suffering by intelligent nursing and administration of suitable diet. The common diseases of the country should be thoroughly understood, and the senior students should be exercised in diagnosing and prescribing for the cases coming in from day to day.

7. In Hygiene I would teach them the value of pure air, water, and food, and dwell especially upon the means to be adopted for the prevention of epidemic and contagious diseases, and sanitary regulations suitable for native communities, for preserving health at fairs, feasts, and places of pilgrimage.

8. At the end of the third year or second year as may be decided, of training in these subjects, candidates should be eligible for a license to practice if found qualified on examination.

9. The education, for the present at least, must be given in the vernacular of the district. A knowledge of English would be very desirable for the students to give them access to our best text books, but in the present stage of general education we can hardly expect a competent knowledge of English by the sons of Native Doctors living in out-of-the-way towns and villages. Already some Medical text books have been translated into Tamil, and are now available for vernacular students; others will, doubtless, follow if there should arise a demand for this kind of literature. Most of the European text books are, I think, too minute and diffuse for the object we have in view. I would have them simplified, or rather re-written, before translation for the special purpose of teaching native youths.

10. For the present oral teaching should be chiefly relied on, and each Provincial School should have a Sub-Assistant Surgeon attached to it, who could impart instruction in the vernacular of the district. The Civil Surgeon of the district would be responsible for the general superintendence and discipline of the school. He should be selected specially for his ability in Educational work, and as an inducement to qualify in the vernacular a special allowance should be paid to him for the extra labor and responsibility of the Medical School.

11. The cost of a Medical School for the training of Native Doctors for the Provinces need not be very heavy. It is assumed that the Civil Surgeon of the district, or officer in charge of the chief Civil Hospital, would be nominated to the post of Superintendent of the school, and in selecting Medical Officers as Civil Surgeons of the stations where it is proposed to establish these schools, some consideration should be given to their qualifications for teaching. By the revised scale of Medical salaries the sum of Rupees 250 a month is allowed for the superintendence of a Medical School, when this work is performed as an additional charge. This sum would not be at all too much for the labor and responsibility involved, and as, for the present, the teaching must be in the vernacular the Medical Officer in charge of the school should be required to qualify according to the "Higher Standard" in the vernacular of the district, within a reasonable time of his appointment to entitle him to draw the salary.

12. The Medical Officer would require to be assisted in the teaching by a Sub-Assistant Surgeon or Native Surgeon, and this official should be entitled to some additional remuneration for the work. I think a staff salary of Rupees 100 a month would be a reasonable amount for this purpose.

13. The pupils would have to be induced to remain to complete their training by the offer of stipends; Rupees 7 per month is, perhaps, the lowest amount that would answer. A total number of 24 pupils at one time would be quite enough for any of our Civil Hospitals to have. As the proposed course of training would extend over three years, there would require to be eight new entrants in each year to keep up the school to its working strength.

14. It may be thought advisable, perhaps, to leave to zemindars and others the duty of supplying the funds for some of the stipends to pupils. In the estimate given below provision has been made for the full number of 24.

15. The Civil Hospitals chosen for this experiment should be altered, so as to enable them to keep up from 20 to 30 beds for the purpose of Clinical instruction.

16. A class or lecture room should also be provided in the Hospital compound, or near thereto, for the accommodation of, say, 30 pupils.

17. The estimates for these could be best furnished by the Department Public Works.

18. Estimated cost of a Provincial Medical School:—

	Annual.	
	RS.	RS.
Superintendent at.....	250	3,000
Assistant to do. at.....	100	1,200
24 Pupils at.....	7	2,016
Special grant to Hospital for the maintenance of extra patients for the purposes of Clinical instruction.....		1,000
Books, diagrams, models, and furniture.....		500
Prizes for proficiency.....		200
		7,916

19. Cost of building a class room is not included, but this would not be an annual expenditure.

20. For a grant of Rupees 32,000 yearly four Provincial Medical Schools could be at once instituted. The cost for the first two years would scarcely amount to the maximum here shown.

21. The endowed Hospitals of Madura, Palamcottah, Vizagapatam, and Nellore or Cuddapah, might be chosen to commence this experiment. If a school is needed in the Malayalam districts I would suggest Cochin as an excellent station on account of the well managed Civil Dispensary and Hospital there.

MADRAS,
12th March 1869.

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

Exd. J. Tulloch.

Order in Council No. 27
D. D. dated 27 April 1869
No. 2831

Revenue Department

PROCEEDINGS of the MADRAS GOVERNMENT.

Read the following. Proceedings of the
Board of Revenue.

Submitting Reports from C. C. C. C.
regarding contribution of certain
people for instruction of Native
Practitioners for prevention and
treatment of epidemic diseases. H. C. 27th April 1869, No. 2831.

Submitting letter from C. C. C. C.
of Secretary on subject of contribu-
tions for instruction of persons of
Native and Practitioners in
European Medical Service. 25th May 1869, No. 3697.

Order thereon 12 April 1870 No. 513

Dr. Mackenzie's Memo.

The establishment of Medical
Schools in the Provinces has received the at-
tention of Government in the Public Depart-
ment, and the consideration of the reports of
the Inspector General of the Indian Medical
Department and of the Special Committee
appointed under G. O. No. 1059 dated 30th July
1869 on the subject, has been deferred until
the provisions of the Local Fund and Town
Improvement Bills shall have been
discussed and passed into law - The
communications from the Board abo-

Public Order of 3rd
March 1870 No. 260

and Public Order
4 May 1870

Records

records, will therefore be transferred
to the Public Department, to be consi-
dered hereafter, with the other com-
munications on the subject.

(True Extract)

W. A. Will

Sept 10 1862

To

The Public Department
withd envelope

Edw. A.

No 3 March 70 No 20

30 July 1869 - 204

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Pathe 18

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Pathe 18

No 513

534

4-5

2/12 } April
2/13 }

7 of due to 39

No 565

Coming in course
new paper respect
the establishment
Medical School
the Province

Pathe 18

Pathe 18