

REPORT

# TIIE MEDICAL TOPOGRAPHY AND STATISTICS 

OF

## THEPRESIDENCX DIVISION OF Tres madras ARME,

## INCLUDINE

 WITHIN THE LIMITS OF THE SUPREME COURT.

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PUBLISHED BY ORDER OF GOVERNMENT.

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## PREFATORY REMARKS BY_THE MEDICAL BOARD.

The Supreme Government having called upon the Medical Board for information on the Medical Topography of India, they consider a few preliminary observations necessary in order to explain the circumstances under which the reports for this Presidency have been drawn up, and the cause of the delay experienced in carrying into effect the ordcrs of Government in a satisfactory manner.

The records of the Medical Board Office were known to contain a large and valuable collection of topographical and statistical information, but the various documents were so incomplete as to render it necessary to makc a further reference to the Medical Officers of the Establishment. Every Medical Officer throughout the country was, accordingly, required to furnish a report of the District, Station, or Cantonment in which he then served, or of any other with which he was best acquainted.

The additional documents thus procurcd were, however, still so defective that a series of complete reports by individual Mcdical Officers, could not be selected for publication. The Medical Board, therefore, with a view to fulfil the wishes of Govcrnment, propose to compile from the whole of the records at their disposal, a general Topographical and Statistical account of each of the Military Divisions of this Prcsidency, to be comprised in ten numbers. The proposed serics will also include a report on the hill countries of Coorg and the Neilghcrrics, as well as one on the Tcnasserim provinces and the Eastern settlcments.

In preparing the reports for the Press it was necessary to alter and modify the language and arrangement of the original text considerably. But care has been taken to give the opinions of the authors on professional points, as nearly in their own words as possible. Hence a diversity of style, and certain defects and inaccuracies, arising from these causes, may probably be observed.

Tables of Disease and Mortality, both of the Civil and Military departments, for Europeans and Natives, will be annexed to the reports. This part of the work, drawn up from returns in the Medical Board Office will be found to contain much valuable information.

In drawing up the reports for publication, it was, in some instances, difficult to avoid repetitions. This was more especially the case with those of the Southern, Mysore, and Canara Divisions in which the same information may be found in more than one of the reports. But it will be seen that such repetitions could not be avoided without rendering some of them imperfect.

The time of the Secretary to the Medical Board, on whom the duty of preparing the reports devolved, being much occupied with the ordinary business of his office, it became requisite to employ an assistant in arranging the work for publication ;-Dr. Lorimer, Garrison Assistant Surgeon of Fort St. George, was accordingly selected for that purpose; and it is but justice to state, that notwithstanding his other professional avocations he has for the last three years zealously afforded his gratuitous aid to the Secretary,--and the numerous tables of diseases already alluded to, were framed by Dr. Lorimer,-a labour in itself of no ordinary magnitude.

In conclusion the Medical Board acknowledge their obligations to Mr. Chamier, Chief Secretary, for several raluable reports and other papers containing much statistical and
general information. They are also indebted to Lieutenant Colonel Strahan, Quarter Master General of the Army for the comprehensive map of Southern India prefixed to the Presidency report, which was prepared by his order expressby for this work.

> By order,

GEORGE PEARS, M. D.
Secretary Medical Board.

Fort St. George, Medical Board Office. 15th November, 1842. $\}$

## INTRODUCTION.

The Madras Presidency comprises the southern and eastern portions of the peninsula of India. In figure it is somewhat triangular, and lies between the 8 th and 22nd degrees of North latitude, and the 75th and 85th degrees of East longitude. It includes the dominions of the Rajah of Nagpore, -of the Nizam or Soobah of the Deccan, -of the Rajah of Mysore, and those of some other native chiefs of smaller extent. Its greatest length and breadth are respectively, about 800 and 450 miles, forming an area computed at 290,000 square miles. On the North, or base of the triangle, it is bounded by Hindostan proper,-on the South, at Cape Comorin, by the Indian Ocean and Gulf of Manaar, -on the East, by the Bay of Bengal,-and on the West by the Indian Ocean and the Bombay Presidency.

The general aspect of the country on the eastern coast, is that of a levcl sandy plain, with hills rising at the distance of from 30 to 60 miles inland, which form the line of eastern Ghauts, and run south-westerly in an oblique direction from Ganjam to Cape Comorin. A similar chain of mountains called the western Ghauts, runs along the west coast, from the Concan in the Bombay Presidency to Cape Comorin, where they unite with the eastern range. The western range is within the average distance of about half a degree from the sea, though occasionally it approaches much nearer to the coast. The ascent to these hills is so remarkably abrupt, particularly from the coast side, as to render them nearly inaccessible, except at a few natural openings or defiles which will be more particularly described hereaftcr. In this range is situated the celebrated Neilgherries or Blue Mountains of Coimbatore, and the elevated country of Coorg.

The centre of the peninsula includes the Table lands of

Mysore, a country having a mcan average height of 3,000 feet;-the Ccded Districts, an irrcgularly mountainous country with a mean height of 1,600 feet above the sea ;-the Deccan or Hyderabad country, (abounding with hills and rocks, of primitive formation,) the average elevation of which is 1,900 feet;-and Berar, in which is included the country of Nagpore, having numerous fertile alluvial plains, with large tracts of unreclaimed and uninhabited jungle, and ranges of barren mountains, of moderatc elevation.

The peninsula of India being situated within the tropics, the territories it comprises are necessarily exposed to high solar temperature. The heat, howevcr, is, in many situations, very considerably mitigated by elevation and proximity to the sea. These regions are also exposed to the influence of the periodical winds or monsoons, which greatly modify the heat and moisture incident to the climate.

The monsoons are called the North-east and South-west, and are attended by the periodical rains; the former, which exerts its influence chiefly on the eastern coast, commences usually in October, and continues till December, when the rains cease, and the wind becomes dry and parching. The South-west monsoon which begins in May, continues till August or September, and is felt chiefly on the Malabar coast and western parts of the country. At other seasons of the year the winds are variable, but for the most part southerly, from March till May, i.e., from the termination of one monsoon, till the commencement of the other. A more particular account of the climate will be found in the reports of the several divisions and stations.

The Madras presidency with the exception of the settlements eastward of the Bay of Bengal, includes the following military sub-divisions, viz. the Presidency Division,-the Centre do.-the Southern do.-the Provinces of Malabar and Canara,-the Mysore Division,-the Ceded Districts,the Northern Division,-the Hyderabad do.-and the Nagpore Division.

The boundaries and relative situation of each may be traeed on the annexed map. The diseases peculiar to the various parts of the country will be particularly noticed in the several divisional reports; for, the varieties of climate to be met with produce, as might be expected, a corresponding difference in the nature and character of the prevailing diseases.

The following Table of diseases exhibits at one vier, the total of admissions into hospital,-the nature of the diseases, and the number of deaths for a period of ten years for Europeans and Natives; and therefore affords data for comparing the influence of climate on both, as well as the relative healthiness of the several divisions of the Army.

Gencral Table exhibiting tho total number of Admissions and Deaths in the Madras Army, during a period of ten years from 1829 to 1838.




## MADRAS,

situation. The capital of the Presidency of the same name, is situated on the eoast of Coromandel, in Latitude $13^{\circ} 6$ North, and Longitude $80^{\circ} 21$ East.

The town of Madras and its limits within the jurisdiction of the Supreme Court, is from 7 to 8 miles in length, extending along the coast from the Adyar river on the south, to Tandiavoodoo on the north; and averages in breadth, from three to four miles inland. It is bounded by the sea on the entire of its eastern face, on the south by the Adyar river, and on the north and west by the Chingleput distriet, and the extensive shcets of water called the Long and Nungumbaucum tanks. The site of Madras is a perfectly flat sandy plain, but little elevated above the level of the sea, presenting no natural eminences of any deseription.

The nearest hills or clevated land are those of the Mount and Palaveram to the south-west, distant 8 and 10 miles respeetively ; and the Pulicat hills distant from 25 to 30 miles, in a northerly direction.

There are several extensive tanks in and about Madras, which for the most part are shallow, and beeome completely dried up during a great portion of the year, when their beds are partially cultivated as rice ground, and are also used for grazing eattle ; these loealities however do not appear to be productive sources of malarious disease.

## General description of Town.

The town properly so ealled is somewhat of a square form, and extends along the beach to the northward nearly one mile, and is enclosed on that and its west side by a strong wall, in former days fortificd.

Fort Saint George is situated at the distance of about half a mile due south; and the villages of Royaporum, Tepery, Chintadrapettah, Poodoopettah, Egmore, Triplicane, Royapettah, and Saint Thomé, which have gradually risen up to the nortll, west, and south of the town, are now included under the same cognomen ; with these it has an irregular shape, and is from ten to twelve miles in circumference ; with a po-

Extent and Population. pulation variously estimatcd, but generally beliered not to be under three hundred and fifty thousand souls.

Black Town. The Black-town, or that part of Madras within the walls, lies very low, being in some places only six inches above the level of the sea at spring tides, against the inroads of which it was found necessary several years ago to protect it, by a strong bulwark of stone; its population amonnts to upwards of 100,000 persons, chiefly natives, and of various castes, with a small proportion of Indo-Britons, and a few Europeans.

Three broad strcets intersect the town, running north and south, dividing it into four nearly equal parts ; these streets are respectable in appearance, well built, and contain many terraced, upstair houses ; the principal European shops ; the Supreme Court Jail; the Black Town, Male and Female, Orphan Schools; and on the beach, parallel with these strects, is a line of public offices, including the Supreme Court, the Custom House, the Marine Board Office, and also the Offices and Store houses of the principal European merchants; these are well finished buildings, having colonades to the upper stories, supported on arched bases, and plastered with shell mortar, forming a hard, smooth and polished surface, resembling white marble, when recently laid on.

The minor strcets, occupied chicfly by natives, are numerous, irrcgular and of various dimensions, many of them extremely narrow, and ill-ventilated ; the construction of the houses is also very variable, but the great majority have walls
of brick and clay chmamed over, with tiled roofs. The form of the mative houses so general throughout India, is very commonly preserved here, viz. that of a hollow square, with the rooms opening into a court yard in the centre, entered by one door from the strect, and seldom having any other opening outwards, on the ground floor; this effectually secures the privacy so much sought after by the natives, but at the same time, it interferes with proper ventilation, and on the occurrence of any epidemic, or contagious disease, must favor their extension, and increase the number of the victims.

Drains. The streets, with few exceptions, have drains on both sides, which are narrow, deep and open ; they are cleared out every morning, and the contents removed by carts; the levels of some of them however have been imperfectly taken, rendering it difficult to prevent stagnant offensive matter fiom accumulating. There are three common sewers into which the smaller drains empty themselves, two of them running from the eastern part of the town, in a direct course to the sea; one is entirely open, the other partly covered; the third and the largest is placed in the principal strcet, the centre and lowest part of the town, and proceeds along its whole length; from north to south; this drain which is partly open, and partly covered, empties itself into the Cooum river ncar the Fort. These drains though daily attencled to, and kcpt tolerably free from accumulation, not being floored with stone, and there being moreover but very littlc slope, offensive slimy matter collects in them, which is with difficulty removed. The effluvia arising from these drains is a source of continual complaint by those residing in their immediate neighbourhood, and must be detrimental to health ; indeed remittent fever is not unfrequent in this part of the town, and is occasionally, it has been said, of a very bad type. The nuisance might be in a great measure remedied, by obliging the inhabitants to throw chatties of water into the drain opposite their houses daily, which would help to wash away the mud deposited in them, but the evil can only be ef-
fectually removed by having them floored with solid masonry, and constructed of an oval shape; a greater fall might be secured by having the head of the drains, somewhat more raised ; the subject of improving their construction has for some time past been under the consideration of the authorities.

Water. The town is amply supplied with water, of a remarkably pure and good quality, from wells varying in depth from twenty to thirty fcet. The water obtained from the wells in a certain enclosure near the north wall, known by the name of the "seven wells", is especially valued for its purity, which it is said by sea-faring people to preserve for a length of time at sea. Public water works have been erected in this enclosure by government, and two reservoirs have been constructed, one in the fort, the other midway between the fort and the town, which are daily filled from the wells by means of metal pipes: the shipping, and all the inhabitants who choose to send for it, are supplied from these sources.

The purity and wholesomeness of this water, seem to depend on its being filtered through a bed of fine sand, consisting almost entirely of quartz, which extends several miles in length in a northerly direction, but is not more than three or four hundred yards in breadth, its depth varying from one to fiftecn feet; in some places the bed of sand is found near the surface, and in others it is covered to a considerable depth, with red clay and sand. It has been found, in digging wells in this stratum of sand, that if it be passed through, the watcr obtained below is of an inferior quality, and frequently brackish.*

On the north, west, and south sides of the town, is an open space of ground, or esplanade, separating it from the fort. The north esplanade is in a very filthy state from being the resort of natives every morning and evening, so also is the

[^0]west, along which a canal runs parallel to the wall at the distance of forty or fifty yards, the banks of which are also resorted to as a place d'aisance by multitudes of natives.

The following is a concise description of the different villages, which now form part of this extensive town.

Royapooram. Royapooram is situated outside the walls, on the north side of Black-town, at the distance of about a quarter of a mile, and extends for one mile along the beach. The inhabitants are chiefly fishermen aud boatmen, amounting to about 8,000 , they are persons of low caste, many being roman catholic christians ; they live in huts of an inferior description, having mud walls, and cadjan (dried palmira leaves) roofs; the lanes and streets are very narrow, and unprovided with drains, so that there is a collection of filth, at alnost every door. Scavengers are not employed in this district, and the space of ground between the town wall and the village is used as a necessary by the natives, and as a receptacle for the contents of the scavenger's carts from the town. From their filthy condition and the poverty of the inhabitants disease, when it appears in an epidemic form in Madras, invariably causes great havoc in this village ; from the manner in which most of the people live, (for here poverty and vice truly go together) their families are badly clothed and fed; and their children are observed to be small and unhealthy; and it is calculated that two-thirds of them clic bcfore the age of maturity. The most prevalent forms of disease are fever, dysentery, diarrhoea, and scrofula; and fiom their being exposed so much to the glare of the sun on the water, the boatmen very generally, have defective vision, their eyes becoming amaurotic, or cataractous, at an early period.

Vepery, in cluding the vllage of Pursewakum. Pursewakum. nade about half a mile wide; the prin che are well built, provided with drains, and kept clean, but the cross streets and lanes are close and often filthy.

Onc of the native regiments of the garrison is stationed in Vepery; a description of the lincs or hutting ground \&e. will be given hereafter.

Chintadrapettah.

This village adjoins Vepery, being scparatcd almost eneloses Chintadrapettah. The inhabitants are principally hindoos. The houses in Chintadrapettah are regularly built in streets, with drains on each side, and the rillage generally, has a eleanly appcarance, cxcept in the out-skirts.

A publie dispensary, deseribed in another place, is situated in this part of the town; and the return of discases there given, shows the nature of the various distempers gencrally prevailing throughout Madras. The populous villages of Poodoopettah and Egmore, lie nearly due west of Chintadrapettah; the former being on the opposite bank of the river, and the latter at the distance of about half a mile west of Poodoopettah.

Triplicane and Triplieane, a very large village or town, runs paRoyapettah. rallel with the sca about one mile south of the fort, from which it is separatcd by the esplanade, the Cooum river, and the government gardens. It is distinguished by being the seat of His Highness the Nabob of the Carnatie, the palace being situated at the north-east part of the town, elose to the sea bcach. Govcrnment House adjoins the palace, the parks being only separated by a wall.

The inhabitants are ehiefly mahomedans, most of whom are followers, or in the service, of the Nabob.

The principal streets are elean and wide, having drains at either side; but the baek streets are confined, and many of them without drains, they are filthy and offensive, and it has consequently been observed that when epidemic diseases appear, the inhabitants of these loealities suffer considcrably more than those in other situations. Westward of Triplicanc, and nearly adjoining to it, is situated the extensive
and populous village of Royapettah; which is inhabited by a mixed population consisting of mahomedans, hindoos, and indo britons.

Saint Thomé Saint Thomé, another village included under the general cognomen of Madras, lies about three miles to the southward of the fort close to the sea; and is called by the natives Mylapore, or " the city of peacocks." The inhabitants consist of hindoos, mahomedans and roman catholic christians, these last being a rery dark complexioned race between portuguese and natives. The parts laid out in streets are generally clean, and in good order: there are several extensive cocoanut and plantain gardens in the vicinity, and some unappropriated or waste ground, both in and around the village, which give it a straggling and unconnected appearance ; the situation of the village however, close on the sea beach, is considered favorable for european convalescents, and from its salubrity, it has for many years past been resorted to by sick officers from inland stations, for whose accommodation a number of convenient houses have been built on private speculation.

Garden hous. es or residences of the principal european inhabitants.

The garden-houses of the principal european residents are situated in separate plots of ground called compounds, and extend from three to four miles inland. They are generally of two storics, constructed in a pleasing light style of architecturc, terraced with porticoes and verandahs supported by pillars. The lower story is often raised several fect from the ground ; the doors and windows are large, and provided with venetian blinds so as to admit free rentilation; and the apartments are lofty, spacious and airy.

During the prevalence of the hot winds, tatties made of the root of the cussa or kuskus, a sweet smelling grass, are placed at the doors and windows, on the western side of the house, and kept wet, whereby a cool refreshing air blows gently
through the apartments ; and by these means with the aid of the punkah, the extreme heat is moderated.

The compounds are usually planted with trees and slirubs, and when viewed even from a height, the tops of many of the houses only can be seen; these plantations interrupt due ventilation, but the evil is tolerated, in consideration of the protection they in a great measure afford, from the clouds of dust arising from the public roads and parched sandy soil, during a great part of the year.

Groups of native huts are seen interspersed here and there, in the vicinity of the garden houses.

Population. No census has ever been taken of the population of the several villages above described, and no records of births or deaths are kept; it is however generally supposed as already stated, that including Black-town it cannot be under $3,50,000$ souls.

The construction of the native houses in general is similar to those of black-town, most of them are built of mud or mud and bricks, and roofed with cadjan leaves, presenting a mean appearance.

Wells. Wells are numerous in every part of Madras though the water of many of them is brackislı and not drinkable, being only used for washing, cooking, \&c.; there are however several which afford an ample supply of good water. In digging wells the upper part of the soil is found to be sandy, to the depth of several feet, a bed of clay is then met with mixed with reddish sand, and broken down sea shells extending to a great depth. Much doubt is always experienced as to the nature of the water which may be found ; fresh, salt, or brackish springs, not unfrequently being contiguous to each other, a circumstance not depending on the depth to which the wells are sunk.

Tanks. Besides wells, tanks are also numerous, and some of them rery extensive such as the Long tank, and Spur tank; a few contain good water derived from springs, but most of them are filled by the rains during the monsoon, and only auswer for partial irrigation, becoming clried up as the hot season approaches ; many have been neglected for several years and allowed to become filthy, from cattle being washed in them, and their banks being used as necessaries; thus causing a nuisance much complained of, and there can be no doubt that in place of being uscful or beneficial, they are prejudicial to the health of the inhabitants in their vicinity.

It may be mentioned here that the use of the brackish water found throughout Madras, excites eutaneous eruptions of a troublesome nature, and not unfrequently fever, and strangers resorting to Madras whether Europeans or natives, are liable to be affected by it.

Food of Na- The staple article of food is rice, eaten either with tive popula- curry, *tyre, butter-milk, saltfish, chatney, chillies
tion. or some condiment. Natives usually take three meals in the twenty-four hours, the first early in the morning; the second at 2 or 3 P . M. ; and the third or supper, at 7 or 8 P. M. ; and but little animal food is used except by the mahomedan part of the inhabitants, who are generally more robust and of stronger constitutions than hindoos; various descriptions of inferior grain are used by the poor. Rice is brought from a distance both by sea and land, but vegetables are grown in great abundance in the immediate vicinity of Madras, such as onions, bendies, brinjals, cucumbers, gourds, and many different kinds of greens.

The lower orders are much addicted to the use of spirituous liquors and fermented toddy; opium cating, and smoking are also common amongst mussulmans, who smoke several kinds of narcotic drugs in their hookahs.

[^1]Police. Madras has a regularly constituted Police establishment, under the regulations of which department the town has in many respects much improved.

The establishment is exclusively composed of natives called peons, placed undcr curopean superintendence and formed into six divisions; one being placed in Black-town, and one in each of the principal villages above described.

The common sewers, drains and strects of the sereral divisions arc kept tolcrably clean by the police with the aid of the Assessment department, and all encroachments upon the public streets, such as small huts, pandals, vcrandahs, \&c. tolerated in former years, have bcen removed, and are now strictly prohibited. The drains have also been much improved of late years, though as already mentioned, owing to the low site of Madras generally, much difficulty exists in rendering them thoroughly efficient.

The erection of public necessaries in order to prevent the inhabitants resorting to the receptacles already mentioned, is a desideratum, and would add not only to the health, but also be conducive to the comfort of the pcople. It is understood to be in contemplation to crect three of these buildings, one at Vcpery, one at Peramboor, and one at the north side of Black-town.

Markets, pro- It would appear that the Police have but little visions, \&c. control in superintending the supply of native provisions, exposed for sale, although their interference is occasionally much requircd, as the people are generally so blinded by custom, that they continue to use the same food they hare been accustomcd to, although their neighbours and fricnds may be suffering from its deleterious effects. The truth of this statcment was particularly romarked in 183\%, and fatal consequences werc not unfrequently noted; a particular sort of cheap rice having becn exposed for sale, was eatcu by the lower orders, though all the people acknowledged it caused bow-
el complaints, which in mauy instances terminated in cholera. There are also several kinds of fish, which at particular seasons, are known to be nnwholsome, but which are eaten, although the people are well acquainted with the bad effects resulting from their use.

The European markets and slaughter houses are more under the control of the police, and are well regulated, and kept tolerably clean. They are supplied abundantly with beef, mutton, veal, kid, \&c. of a fair quality, and at moderate prices, (the animals are generally slaughtered over night;) fowls, capons, turkiés, ducks, geese, \&c. are also plentiful. There is also an ample supply of excellent fish, of different kinds; and vegetables of various sorts, such as potatoes, turnips, peas, carrots, cabbages, knolkole, beans, greens of several varieties, sweet potatocs, yams, onions, and sallad; the potatoes are imported from Bangalore and other parts of Mysore, where they grow in perfection. The market is also well supplicd with various kinds of fruit, as mangoes, plantains, pine-apples, custard-apples, oranges, grapes, jack fruit, guavas, \&c. and many others less esteemed.

Public hous -
The licensed public houses, are also under the es. surveillance of the police, and are restricted to particular localities, the orwners bcing liable to punishment for misconduct, or breach of the regulations.

Climate. Before entering on a particular description of the climate of Madras, it may be nccessary to premise a few general observations on that of Southern India.

Monsoons. Like other tropical countrics the Indian peuinsula is within the influence of the trade winds, or as they are here called monsoons. Thesc monsoons, or prevailing currents of air, are supposed to be the effect of the colder air from the opposite sides of the cquator to that in which the sun is situated, rushing to supply the place of the highly
rareied air smrounding the tropical continents, the temperature of which is greatly increased at that period. The perfect clasticity of atmospherical air enabling it to keep up an equilibrium notwithstanding the powerful effect of a tropical sun acting in so extensive a space, as the continents of Africa and Asia.

The wind for a certain period of the year blows from the south-west, and for a certain period fron the north-east ; the south-west monsoon prevails while the sun is north of the line, the temperature of the continent of India being then higher than that of the ocean, this wind continues from April till October, with more or less regularity as to its commencement, and termination. The Nortl east monsoon which succeeds, sets in about the middle of October, and continues till March; the sun being south of the line, the temperature of the occan, and of the tropical parts of the African continent are then higher than that of India ; the periods at which these monsoons set in, is carlier in the south west monsoon, in the southern parts; and in the northeast monsoon, in the more northern parts of the peninsula. These mousoons are usually ushered in by heavy rains, attended with much thunder, and lightening, and occasionally by sever.c gales. The north-east monsoon expends its violence chicfly on the Coromandel coast, whereas the South-west monsoon is felt with more screrity, on the coast of Malabar.

Land and Besides these annual changes, it is of importSea Breezes. tance to notice, that during the hot months especially, when the sun is north of the cquator, a diurnal change in the direction of the winds is produced, and which is more particularly experienced in the vicinity of the sea coast, known as the land, and sea breezes. These daily clanges of the wind, are explicable on the same principles as thosc of the monsoons, viz. the rarefaction of the air on the land during the heat of the day, causing a rush of cooler air from the sea to supply its place, whilst a current in the opposite direction, occurs when the sun is below the horizon. The sca
breeze usually commenees about noon, or $1 o^{\prime}$ Clock P . M. when the sun is nearly vertical for a great portion of the year, and continues till sun set, or later, when it is succeeded by the land wind, whieh commenees towards midnight, and continues till the sea breeze sets in next day; the change from the hot and oppressive land wind, to a cool refreshing sea breeze, (commonly ealled the Doctor from its invigorating effects,) often occuring with surprising rapidity, and with an interval of not more than from five to ten minutes.

The year admits of a further division into the hot, rainy, and cool seasons ; the hot season eommencing in Mareh, and continuing till the end of May or June when the rains set in, and last with occasional breaks, or intervals of greater or lcss duration, till November; after which the weather beeomes cool, dry and pleasant, and continues so till the end of February.

Climate of During the months of January, and February the Madras. weather at Madras is cool and pleasant and this period is considered to be the most healthy season of the year ; the mean temperature of these months is $76^{\circ}$ of Fahrenheit ; the wind blows steadily from N.E. and E. and the average fall of rain is 1 inch, 25 cents. In Mareh, April and part of May the south (or as it is called) the " along-shore" wind prevails, and is reckoned very unwholesome, partieularly to old residents, who generally suffer during this time of the year from rheumatic pains; the mean temperature of these months is $85^{\circ}$; and the average of rain 1 ineh, 85 cents. In the early part of May, very violent gales of wind have oceasionally been experienced, aecompanied with heavy falls of rain ; about the middle of the month the hot land wind commences, and blows gencrally with great violence from about midnight till 12 , or 1 o $^{\circ}$ Clock in the day, when it is succeeded by the sea* breeze, which at this season is very refreshing; the land wind continues throughout June and

[^2]July; the mean temperature of these months being $88^{\circ}$; and the average of rain 2 inches, 20 cents. In the beginning of July there are generally heavy showers of rain, which diminish the heat of the land wind, but it continues to blow during the month, though with less violence : mean temperature $85^{\circ}$, arerage fall of rain $3-37$. In the month of August, and September, the weather becomes cloudy, elose and oppressive, the sea breeze being uncertain, and the winds generally light and variable, with frequent calms; heavy falls of rain ushered in by thunder and lightning also occur in these months, the mean temperature of which is $84^{\circ}$; and the average of rain 10 inches, 6 cents; it is during these months, that the cholera has generally raged epidemically at Madras. About the beginning of October the N. E. monsoon commences, and continues, through the months of November and December ; in October heavy gales of wind are very frequently experienced: the weather is eool and damp, the mean temperature $80^{\circ}$, and the average of rain 30 inches.

Average medium temperature throughout the year, for 10 ycars.

| 1829 | 1830 | 1831 |  |  | 1834 | 1835 | 1836 | 1837 | 183 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Fahrenheit. 83 | 81 | $81 \frac{1}{2}$ | 84 | 83 | 87 | 82 | $77 \frac{1}{3}$ | $82 \frac{1}{2}$ | $86 \frac{1}{2}$ |

Hurricanes
frequent The coast of Coromandel having from time to of frequent to time been subject to hurricanes, or violent gales of wind, the most remarkable of which oeeurred at the following periods,

|  | A. D. | A. D. |
| :---: | :---: | :---: |
| 2d October | 1746 24 th October | 1815 |
| 21st | 1763 29th \& 30th March | 1880 |
| 5 th | 1782 6th December | 1887 |
| 26th November | 1785 30th October | 1836 |
| 10th \& 11th December | 1807 1st | 1837 |
| 1 st \& 2d May | 181111 th Norember |  |

it is of importance to attend to the slight fluctuations which occur in the mercury in these latitudes, as indicated by the

Barometcr, more particularly at ccrtain seasons; as they have been known to fortel the approach of storms; and such was actually the case, in the sevcre storm at Madras in October 1836.

On the morning of the 30th Octobcr of that year, the Barometcr was obscrved to fall, and bccome unsteady, and this being considcred a ccrtain indication of an approaching gale, due warning was accordingly given to the shipping to quit the roads, and all with onc exception having put to sea, escaped the danger of being driven on shore.

The following is a copy of the Meteorologieal journal, kcpt at the Madras observatory, during this gale.

## Barometer. Inch.

20th Oct. 183610 o'Clock A. м. . 30,050 rain. 30th do. ," 6 do. ..29,940 brisk brecze.
" do. ,, 730 do. . .29,864 strong wind at intervals.
"do. ", 12 Noon ..29,707 approaching to a
" do. ", 1 o'Clock p. Mr. . 29,586 brisk gale.
" do. " 3 do. . 29,510 at times violent gale.
," do. ", 4 do. . .29,360 rery violent gale.
," do. " 5 do. . .29,150 approaching to hurricane.
" do. " 7 to 8 do. ..28,915 a violent hurricane.
" do. ,, 11 do. . .29,650 very strong wind.
N. B.-The storm was aeeompanied by very heavy and constant rain; 10 inehcs having fallen during the 29th, and 30th October.

The annexcd statement cxhibits the mean monthly range of the Baromcter and Thermometcr, for the year 1838; as the variations indicated by the former instrument are in ordinary circumstances very trifling, it has not been considered necessary to include the obscrvations of more than one year, in this report.

Metcorological Olservations during the year $18: 88$.

|  |  | Barometer at |  |  | Thermoneter at |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 10 A.s. | 4 r. s. | 10 P.s. | $10 \mathrm{~A} . \mathrm{m}$. | 1 P. 3. | 10 ғ.м |
| January, monthly mean. |  | Inch. | Inch. | Inch. | $\bigcirc$ | ¢ | $\bigcirc$ |
|  |  | 30,147 | 30,063 | 30,118 | 75,4 | 77,9 | 73,4 |
| Fcbruary | do. | 30,127 | 30,010 | 30,100 | 78,4 | 8U,6 | 77, 3 |
| March | do. | 30,073 | 29,960 | 30,039 | 82,9 | 85,3 | 81, s |
| April | do. | 30,00-1 | 29,883 | 29,968 | 86,7 | 88,4 | 83,9 |
| May | do. | 29,928 | 29,817 | 29,912 | 88,9 | 80,6 | 85,7 |
| June | do. | 29,868 | 29,765 | 29,839 | 88,5 | 90,3 | 86,7 |
| July | do. | 29,882 | 29,797 | 29,865 | 88,4 | 91,6 | 86,7 |
| August | do. | 29,864 | 29,767 | 29,813 | 85,3 | 88, 9 | 81,9 |
| September | do. | 29,913 | 29,837 | 29,901 | 86,8 | 89,1 | 81,7 |
| October | do. | 30,027 | 29,962 | 30,013 | 83,3 | 85,4 | 81,3 |
| November | do. | 30,049 | 29,974 | 30.030 | 78,7 | 80,0 | 77,9 |
| December | do. | 30,106 | 30,028 | 30,08i | 77,6 | 79,1 | 76,7 |

Endemic dis- Fever of the intermittent, and remittenttypes, may eases, Fever. be said to be endemic amongst the natives of Madras ; neithcr of which however have prevailed to any extent during the last scventeen years; thesc fevers are attributed by the medical officer, who has been in charge of the Black-town, during the whole of that time, to the imperfect manncr in which it is drained: the greatest number of cases have always bcen observed to occur about the centre of the town (where the drainage is most stagnant), during the hot season of the year.

Leprosy. Lepra is likewise endemic, being very common, and supposed by the natives to be both contagious and hereditary; it is also considered by them, to be a direct manifestation of the anger of the deity. This disease is very generally seen amongst the poorest classes of natives, both hindoos and mahomedans; it is but rarely observed before puberty, but both sexes are equally liable to it.

Elephantiasis. Elephantiasis, the leprosy of the Arabians, is considered to be a species, or variety of the last named disease, and is another endemic on this part of the coast. It is said by the natives not to be infectious; but they believe it to bc hereditary; and like lepra, the poorer classes of peo-
ple seem to be most obnoxious to its attacks, being seldom scen in those who are well fed and clothed; and though exceptions are occasionally met with, imnutritious diet and filthy habits, are believed to faror its development. The feet, legs and scrotum, are the parts usually affected with this diseasc.

For further remarks on elephantiasis, see Southern Division, district Cochin, where it is so very prevalent, as to be designated the " Cochin Leg."

Guinea Guinea Worm has been observed to occur anWorm. nually for the last six years in the villages of Chintadrapettah, Vepery, and Perambore ; it was not seen in any of these places prior to that period, but the numbers affected have since been on the increase; it usually prevails in the months of February, March, April, May and June. The water which is used by the inhabitants of these parts of the town, both for drinking, and for the purposes of ablution, is the same to which they have been accustomed for many years past. Guinea worm has been met with equally in Indo-britons, and in the natives resident in these villages, but is more rarely seen in Europeans.

Cholera. Cholera.-This disease which for a considerable time past has been of annual occurrence, in some years prevails to a considerable extent; and is attended with its usual formidable mortality. The greatest number. of attacks have always taken place amongst the poorest classes of people ; and the per centage of mortality has also been observed to be greatest amongst them ;-it generally makes its appearance, towards the end of the hot, and beginning of the wet-season, continuing with more or less severity during the months of August, September and October, and in some years till January.

[^3]howerer much indifference on the part of the natives to receive raccination, and this too, notwithstanding that they are fully aware of its protecting influence, and are encouraged to bring their children to the vaccine depôt by laving rice served out to them ; when small pox prevails, the dread of that disease brings them forward, but even then, some prefer small pox inoculation. This prejudice against vaccination arises from apathy, and not from inefficiency as to its antivariolous influence, for here as in Europe, it equally maintains its prophylactic power. The benefits of this department have been greatly extended by the medical subordinates in the regular serrice being now all instructed in vaccination, and required whether attached to regiments or civil stations, to perform the operation in their immediate neighbourhood, under the superintendence of the medical officers, under whom they may be placed. The additional aid thus given to the vaccine department will be ample, and this measure which has been encouraged by government is expected to be followed by most beneficial results.

Infuenza. Influenza has also risited Madras at times; the disease is of the same character as seen in other parts of the world ; but is generally mild, and seldom fatal either here or in other parts of southern India.

The tables appended will show the prevalence of the foregoing diseases; the last mentioned being included under the head of ephemeral fever.

Diarrhoea
and Dysen- Diarrhoea and Dysentery, are of frequent occurtery. rence, the former appearing occasionally in an epidemic form, when preceding or following the appearance of cholera.

Native treat. ment of Discase. composed

For the cure of leprosy the natives possess no effectual remedies, they prescribe the asiatic pill, of arsenic, pepper and the *mudar root, but little

[^4]confidence howerer is placed in it, and they rely more on nutritious diet, than on medicine.

In fcver, morcury, arsenic and some felrifuge barks are giren, but the efficacy of the latter is doubtful.

Croton appears to be the principal purgative employed by them, and is uscd in almost evcry disease; aloes, camboge, senna, and rhubarb, which are procurable in the bazaars, being seldom given.

In cholera the chief remedies are astringents with stimulants, and opium ; a combination of pepper and spices has also long been used by native practitioncrs, and a pill of corrosive sublimate and common salt, forms another favorite remedy.

In small pox, gentle laxatives such as castor oil, with a cooling regimen consisting of cocoanut water, lime juice, and congee water, butter milk, tyre \&c. are prescribed, every thing heating being withheld, and the patient kept in a cool apartment. The irritation on the surface, is relieved by the application of plantain leaves smeared with oil.

In diarrhœa and dysentery, chalk combined with spices, black pepper roasted, catechu, opium, the seeds of the poppy, and castor oil, are the chief remedics.

The natives generally are in the habit of using purgatives periodically, as a prophylactic against disease.

The endemic diseascs amongst the European part of the population civil and military, describcd hereafter, are fever, dysentery, and hepatitis, but more especially, the two first.

## MADRAS NATIVE INFIRMARY.

This infirmary was estallished in the year 1799, for the purpose of receiving, and affording medical aid to the native poor of the Presidency.

The Monegar Choultry or Poor Asylum, which was established in 1784, and which has since undergone considerable improrement in its construction, was united with the native infirmary under the sanction of Government in 1809, upon a guarantee in favor of the latter, that its funds amounting to Rupees 51,358 should be transferred to the joint charity, in Government securities, unredeemable.

The hospital and offices form an irregular square, which is divided in its centre by a high wall separating the accommodation for the men, from that of the women. It is a pent roofed brick building, and tiled, with a verandah on the inner side towards the area, and calculated to contain 140 patients; all the wards are well ventilated by doors and rindors, and by ventilators in the roof. Attached to it are quarters for the apothecary, an excellent surgery, and a dispensary for issu. ing medicines to out patients.

Seven cells are appropriated for insane patients, capable of accommodating 14 persons; those for the men and women being in separate areas, and surrounded by walls of sufficient height to render them secure. The institution is well arranged, and appears well calculated in every respect for a natire hospital.

A Leper Hospital for Indo-Britons and natives is also attached to this institution, a distinct building surrounded by a wall 12 feet high and capable of containing about $110^{*}$ patients; the Ennore road passes between it and the infirmary, and its inmates are not permitted to have any intercourse with the patients in the infirmary.

The records of the infimary, and those of the two dispen-
saries, show the nature of the diseases to which the natives of this part of India are subject. To account for the vast mortality which occurs, it is necessary to premise, that disease whether acute or chronic, is frequently allowed by natives to run its course undcr native treatment, or without applying for aid until it becomes too late to derive benofit from medicine, from their having in many instances an aversion to enter an hospital until all their own resources fail.

The majority of the patients belong to the lowest and poorest classes who, notwithstanding their poverty, will not apply for aid till reduced to the last extremity; the result of treatment cannot therefore be correctly ascertained, nor can it be otherwise from what has been already stated, than unsatisfactory.

During the 12 years from 1827, to 1838 inclusive, 12,446 patients have been treated in this hospital, and the mortality has been in the same period, 3,344 ; or very nearly 27 per cent, on the number of admissions.

In the year 1833,* which was a year of famine, no less than 5,518 persons were admitted into the infirmary and 1,779 deaths took place; excluding this period the average annual admissions for eleven ycars, have been 559 ; and the average annual number of deaths 141 ; the percentage of deaths, on the number treated, being $23 \frac{1}{3}$.

[^5]and more important species of
The following table exhibits the number of admissions and deaths, from each class, disease in each half year, for the above period.
No. 1.-Table exhibiting the Number of admissions and deaths from eaeh class of Disease for 12 years.



## REIVARMS

Fever. The admissions from fever have not been very numerous but the mortality has been great, and in the remittent form it is fully 30 per cent; nearly one half of the total admissions under this head occurred in 1833, the year of famine, as above remarked.

The treatment has consisted in the exhibition of smart purgatives on admission, followed by the use of the saline antimonial solution, and an occasional scruple dose of calomel at bed time-leeches and blisters being applied when thought necessary. V. S. has been seldom admissible from the weak state of the patients. Quinine does not appear to have been employed; but during convalescence tonics have been used.

Cholera. Cholera, as might be expected "a priori", has been attended here with fully its usual mortality. The treatment has been steadily, calomel in scruple doses, with compound powder of jalap given alternately; and stimulants, turpentine enemata, and sinapisms as adjuncts.

Diarrhea. The cases of Diarrhœa have been generally the effect of extreme want or this complaint has supervened in the latter stages of other diseases; no fewer than $18^{\prime \prime} 7$ cases, with 39 deaths occurred in 1833. In the treatment of these cases the mildest food was requisite, with gentle tonics, and cordials. The paucity of discases of the liver, and chest will be observed, whilst on the contrary diseases of the brain have been frequent.

Eruptive Fe- Eruptive Fevers. The table exhibits in a peculivers. arly striking manner the value of vaccination; fully one half of the cases of variola, in persons unprotected by its antidotal power, having died ; whilst in the cases (one hundred and thirty-eight in number) who had been vacciuated no death occurred, and it is worthy of observation that the greater number of cases in both classes of patients (the protected
and unprotected) happened in the samc year 1833, and were consequently in other respects, placed in similar circumstances. All the cases of modified small pox exhibited distinct marks of previous vaccination, in one or both arms; and many of the patients had been vaccinated at the Monegar choultry, adjoining to the hospital, to which they had resorted for food. Small pox might probably have spread to a considerable extent amongst the poor who came to the Presidency to seek for food, had it not been for the excrtions of the Superintendent of vaccination who on the disease appearing amongst the paupers, adopted the precaution of vaccinating all those applying for relief, who did not exhibit marks of small pox, or of previous vaccination; and out of the vast numbers who were fed at the choultry that year, nearly 8,000 received by the adoption of this system, successfully, the protection of vaccination.

Atrophia. Atrophia. The number of cases and mortality under this head are calculated to excite surprize ; but of the number exhibited in the table 3,917:-2,952 occurred in 1833, with 1,236 deaths, and were all the consequence of want ; many died on admission, others lived but a few hours, while the most of those who were rescued from a crucl fatc, were saved with difficulty. In almost every casc the bowels were relaxed on admission, or became so after taking food.

The treatment consisted in giving mild nutritious diet; rice congee of a thick consistence, with a little ginger powder and salt, was that generally preferred by the patients; cordials with aromatic spirits of ammonia and laudanum or astringents with chalk mixture, and laudanum ; the doses regulated according to the effect produced; in every instance where wine was given, it proved injurious.

Phlogosis \& Phlogosis. Under this head 1,513 cases of
Ulcrs. ulcers are included, with 215 deaths; the vast mortality attending this disease requires a few explanatory remarks. The worst cases have always been noticod to occur in
weakly ill fed persons; no fewcr than 502 admissions with 88 deaths, occurred in the year 1833; and 188, with 95 deaths, in the year following.

The character of the sore has been that described by some writers as gangrenous ulcer, by others phagedenic and by others hospital gangrene; many of the cascs closely rcscmbled this last form of disease, with the exception of not bcing contagious; it is a disease solely depending on debility from want of proper food; as would appear from its usually occurring in the feet and legs; and its being met with almost exclusively in hindoos, whereas it is seldom seen in the stouter, and better fed mahomedan. No local treatment is of benefit in these cases until the constitution is invigorated and improved by diet, and attention to the digestive functions; and it has been invariably found that as the general health im. proves, the sores also begin to amend; ulcers of this character are seldom absent from the infirmary, but no casc has erer occurred to countenance even the slightest suspicion of its being contagious, for although there are always many chronic ulcers and other sores in the institution, they have in no instance been observed to take on the phagedenic form.

Necessity for
Public Dis- Seeing then that there is so great a prejudice, Public Dis-
pensaries. and also an unwillingness on the part of the natives in general, to apply to an hospital for aid, for hcre as elsewhere, even poverty itself submits with reluctancc to leave its own abode, the usefulness and even the necessity of public dispensaries will be obvious. The peoplc have less objection to apply to them for aid, and when well regulated they are calculated to do much good, both in relieving sickness, and in preveuting disease.

The Chintadrapettalı Dispensary has been highly useful in both these respects, since it was established in 1808, as the following table will show.


The native population highly appreciate this institution, and also the one attached to the infirmary, which was opened in 183\%.

As already remarked these dispensaries are calculated to do much good, but this can only be effected under the strictest superintendence, as otherwise they would lad to abuse
and a needless waste of modicincs ; in both the institutions adverted to a considcrable proportion of the medicine preseribed, is given to the patients in the presence of the medical subordinates, and evcry care is taken to ensure the strictest regularity and attention. A register is kept shewing the namc, date of admission, diseasc, days of attendance, and the result in each case, and but very few patients are found to absent themselves until regularly discharged.

## GENERAL HOSPITAL.

Situation \& The General Hospital, as its name implies, is an Geueral description. institution for the reception of both European and native sick, whether belonging to the public service or not. It is situated on the esplanade of the Fort, at the south western extremity of Black-town, near an angle of the town or rampart wall, which encloscs, and bounds the building on its southern aspect; it is distant from the Fort, due west, 520 yards, being the average width of the esplanade on the southern and west sides. The soil on which the hospital is situated is sandy and dry; and the site though low, is not lower than that of the surrounding plain.

The space occupied by the hospital and offices attached, measures in length 185 yards, and 145 in breadth; being bounded on the south side by the rampart or town wall, on the east and west by a wall of 10 feet in height, and on the north partly by the wall, and some offices.

The hospital is a puckah building of one story, haring a terraced roof, with brick floors raised about a foot from the ground. It consists of threc ranges of buildings tro of which run parallel and are connccted by the third in the form of the letter $\mathbf{H I}$, the principal cntrance being in the range which faces east ; each of these buildings contains a double range of commodious wards, four in number, surrounded by a rerandah nine fect widc, the wards being each 80 feet in length by 21 in breadth, and $15 \frac{1}{2}$ fcet high. In the centre of the

## YYDTRABAD STBSTDIARE FOKCB.

Table No. 4.-Natives-Abstract of the preceding Returns, shewing the Total number of Admissions and Deaths, \&c. from 1829 to 1838.

parallel ranges which form the wings, are two apartments for the surgery and dispensary, and for the medical subordinates; and in the centre of the connecting building are rooms for the Commissariat hospital stores.

The wards are ventilated by doors and windows, there being three spacious dours, and three windows provided with venetian blinds, in each; the partition wall having likewise an equal number of arched door-ways. Each ward of which there are twelve in number, can accommodate sixteen patients, and the building is therefore calculated for $192 \mathrm{pa}-$ tients; but it can receive on emergency a much larger number.

The building now deseribed is solely for the reception of European sick, one half of which is appropriated as an hospital for the sick of Her Majesty's regiment occupying Fort Saint George.

Detached from the hospital but in the same enclosure, and extending its whole length from east to west, is a range of buildings, pent roofed and tiled ; one-half of which, capable of containing fifty patients, is set apart for European women and children, the other for native sick, of both sexes, who have separate apartments.

The dispensaries, store room, cookroom, and other outhouses are conveniently arranged, and well adapted for their purposes and there is an ample supply of water on the premises.

In the same enclosure are quarters for the surgeon of the General hospital and his assistants, as also for the senior medical officer of Her Majesty's regiment.

The aspect of the hospital between north and north east, is obstructed by the houses of Black-town, which are separated from it by a public road, leading to one of the gates, and forming one of the principal thoroughfares of Black-town; the buildings in the vicinity of the hospital are dense, intersected by narrow and filthy lanes; and inhabited by persons of the
lowest class. There are several native places of worship close by, and the noise, especially during any of the festivals, is a source of much annoyance to the sick.

The wall or rampart which surrounds Black-town forms an angle, as already stated, in which the general hospital and offices are situated, the rampart terminating on the southern side in a line with the front wall of the hospital compound; beyoud the rampart and around the town there is a clear space rarying in breadth from a quarter of a mile to one mile ; the eanal formerly alluded to as running parallel to the rampart, passes the hospital at the distance of 130 yards, and its banks for a considerable space, are resorted to as a place d'aisance by the natives.

There is also a ditch or drain between the eanal and rampart, which, after running parallel to the latter, turns to the south-west angle of it, at a distance of one hundred yards from the hospital compound, and after passing the whole length of the southern side of the hospital, it then meets a similar drain leading from Black-town, and also a branch of the Cooum river, immediately below the glacis of the western angle of the fort.

The south-eastern aspect of the hospital, is clear from the compound to the sea; a branch of the Cooum river running parallel to, and about two hundred yards distant from its southeru face; at the western angle of the fort, and nearly due east from the hospital, this branch turns towards the southward, where it unites again with the other branch, into which the main river had bifurcated about a mile higher up, encircling by their reunion a spacious piece of ground ealled the "Island."

Thus, the hospital is freely open to the southerly, and somewhat less so, to the easterly winds, or sea breeze, both however blow across these drains, and the easterly wind passes over the fort ditch also, before it reaches the hospital. When these drains are cleared out, the soil is spread on the banks
and allowed to dry there ; the time chosen for this purpose is usually the end of the hot season, and it has been remarked, that convalescence then proceeds more slowly amongst the sick than at other seasons of the year, aud that ulcers are apt to put on an unhealthy appearance, rendering frequent fumigation of the hospital necessary.

The hospital though centrical is, from the causes above stated, far from being in an eligible situation, though no cpidemic disease has prevailed in it for the last 10 years that could be attributed to its locality. The compound is small, and confined, being surrounded with a wall of 10 feet in height, which materially interrupts frce ventilation.

The construction of the building may be looked upon as a model, perfect in every respect for an hospital in this country, were the floor raised 5 feet higher from the ground.

Rules for the
admissions of It has been already mentioned, that this hospipatients. tal is open for the reception of European and native sick of the Military, Seamen of H. M's Navy, and of private ships; and European sick, not belonging to the service, whether male or female who may be destitute, are also admitted, clothed and victualled at the expence of Government. Native sick not belonging to the public service, are likewise admitted in cases of accidents and other emergencies.

The following is the scale of authorized deductions and charges recovercd from patients treated in the General hospital.

Commissioned officcrs and superior grades of Warrant officers.... ..... 1 0 0 per day.
Conductors, Overseers, Troop Quarter Masters, Riding Masters, SubConductors, Sub Oversecrs, Apothecarics, sccond Apothecaries, and Assistant Apothecaries. . . . . . . . . . . 0 0 8 do.
Wives of Warrant Officcrs. ........ $0 \quad 5 \quad 0$ do.
(The stoppage to be made from their Husband's abstracts.)

Non-Commissioned Officers, Corpo- 12. A. 1'.
yals, Drummers, Privates, Carnatie
Ordnance Artifieers, \&c. ........ 0) 3 do.
European Women, (wives of Soldiers.) $0 \begin{array}{llll}\text { I } & 1 & 0\end{array}$ do.
Seamen of the Royal Navy, and of
Merehant vessels.. ............... . 0 . 5 do.
Chelsea Pensioners, and Pensioners of
the H. C. Service. ............... 0 . 3 do.
Persous having the means of supporting themselves, or having relatives or friends able to support them, may be reeeived into the general hospital at the diseretion of the surgeon in eharge, subjeet to the approval of the Superintending Surgeon, provided that they furnish, if in the publie serviee, a requisition for admission from the head of the Office to whieh they belong; otherwise a written engagement from some respeetable individual at Madras, to pay monthly, the regulated charge for the period they may be in hospital.

Recoveries are to be made fiom persons of the foregoing description, at 8 annas per diem.

No stoppages are made from Sepoys,-Lascars,-Native Artificers,-or the poor.

The General hospital is the prineipal institution to which assistant surgeons, on their first admission on the establishment, are attaehed during their probationary course, for initiation into the treatment of tropieal diseases. It affords an excellent field of observation, and under the tuition and guidance of experienced superintendents, the probationers are generally qualified for the general duties of the serviee in about six months.

The tables annexed show the number of admissions iuto the General hospital, and deaths from particular diseases, as well as from eaeh elass of disease, during eaeh lialf year for a period of 10 years, with the per-eentage of deaths, to the number treated. The average annual number of admissions, for this period, amounts to nearly one thousand.

MADRAS.

## "TVxITSOF

 EUROPEAN TROOPS.



## 'TVIICSOH TVATNTS

No. 2.-Table exhibiting the Number of Admissions and Deaths from each Class of Disease for 10 ycars.


A few observations on the more important classes of disease are here given.

Fiver.
Fever, the table shows the number and prevalence of each form of fcyer, the general character of which has been mild and tractable, and the following remarks bear chiefly on the use of Quinine and purgatives, in the treatment of the intermittent and remittent types of that disease, by the surgeon of the institution during the period referred to.

A purgative is usually given on admission followed when there is no irritability of the stomach, by the use of the saline antimonial $\dagger$ mixture; at bed time a full dose of calomel (grs. $x$ ) is given, and on the least tendency to a remission, whether manifested by diminishcd frequency of pulse, decrease of temperature, or even a feeling of general improvement on the part of the patient, or aly other change however slight, if considered indicative of this condition, quinine is exhibited. The term remission is here used in its relative sense, and however variable in the hour of its occurrence, or indistinct in its manifestation, is the period at which the use of this remedy is commenced. It is given in doses of grs. r . every hour, to the sixth time. The extent to which this medicine is prescribed, has been rendered necessary by the failure of sualler quantities in producing the required effect, and it has consequently been given for some time, in doses considerably larger than appeared necessary on its first introduction into practice, in this country.

In general it is given in the form of pills, diarrhoea haring in several instances been found to follow its use when administcred in solution, and which has not again recurred when the pills were rcsumed. In several cases it has produced headache, which was relieved by the patient taking a little arrow-root.

The period of remission is a guide not only for the use of

[^6]the quinine, but also for the benefieial cxhibition of other remedics, particularly purgatives, for although there cannot be a cloubt of their importance in the treatment of this disease, yet it is believed, that the reeurrence of paroxysms of fever have been, among other bad effeets, distinctly referrible to the irritation produced by the exhibition of them, at ineligiole periods.

The invariably deranged state of the seereting and excreting functions in fever, is cousidered to indieate the use of purgative medieines, and the remoral of the aceumulations neeessarily colleeting in the bowels, should be effeeted, more especially after the first stage of the disease, in the manner least likely to produce irritation or exhaustion; the most eligible period for the exhibition of a purgative is believed to be the commencement of a remission, or intermission, at whatever hour this may take place; and mueh disappointment has been experienced, in finding the paroxysm of an intermittent, antieipate its usual period of recurrenee, or a remittent beeome almost continued, or more severe in its exacerbation, from the administration of a dose of purgative medieine, without attention to eonsiderations now laid down, and in such eases it has usually been observed, that the effeet of the medieine was suspended, until in an intermittent, the paroxysm had reached its last stage, or been succeeded by approaching apyrexia, or in a remittent fever, until it approached the next usual period of abatement, the paroxysm being at the same time prolonged and the symptoms aggravated.

In one ease of a long eontinued and low remittent fever, altended with a jaundieed state of the skin, and œedema with mueh debility and whieh had subsided under the use of quinine, a relapse followed an attempt made to inerease the actirity of the bowels, and restore the secretions to a more healthy state. The use of quinine again produced its beneficial effects, and a repetition of an aetive purgative, without reference to the time of exhibition, was a second time followed rith a relapse ;
the same result, on several occasions, was obscrved in the same casc, before convalescence was confirmed.

The effects now mentioned may be considered more prejudicial, than any likely to result from permitting the bowels to retain their contents, for a limited period, or until the quinine has lad time to exert its specific beneficial influence on the system. The debilitating effects of loose watery motions, at a late stage of the disease when the time for depletion has passed, and when exhaustion of the vital energy may be apprehended, are too obvious to require remark.

The administration of calomel in the treatment of these fevers, more inmediately in reference to its action on the biliary system, is indicated by the appearance of those symptoms usually termed bilious, manifested by the dusky yellow tinge of the eyes, skin, \&c.; when however it is considered that its operation as a purgative, will be likely to produce a degree of irritation, incompatible with the efficacy of the quinine, it is combined with opium, a remcdy which although contra-indicated at an earlier stage, when evacuations are required, yet when restlessncss is more the effect of nervous dcbility, than of febrile irritation, its use is attended with bencficial results.

The attempt to restore the diseased visceral secretions to a healthy condition, during the existence of fever, is it will be seen considered of doubtful propriety, and the occurrence of the desired improvement, when it does manifestitself under such treatment, is too readily considered as its effect.

The same remark also applies to blisters, and to those medicines given for the purpose of restoring the secretion of the skin; the utility of the latter (diaphoretics) has however been evident in cases, where their free effects could be produced during a remission, and maintained for a sufficient length of time to be extended to the succeeding paroxysmal period.

It appears thercfore, that during the employment of quinine, the stomach, (the natural functions of which are so palpably deranged in fever) ought to be left undisturbed as much as possible ; and it is worthy of remark, with regard to this remedy (quinine) that no bad consequences, nor any aggravation of the symptoms, have been observed, even after it has been continued throughout the greater part of an exacerbation. The treatment after the fever has been subdued, consisted in the exhibition of altcrative and laxative medicines, continued while they appeared to be required for the restoration of healthy secretions.

Cholera.
Cholera, but few cases of this disease have been received into the general hospital, previous to the appearance of the stage of collapse, and a great proportion of them have been in a moribund state on admission; this arises from the generality of the patients not being under control, and therefore not compelled as in military hospitals to apply for aid, at that early period of the disease, when it is most likely to be efficacious; and will fully explain the unusually high ratio of mortality observed in the tables.

The treatment pursued in cases which were in a state to dcrive benefit from medicine, has been generally calomel in ten, or twenty grain doses, with fifty minims of the tincture of opium ; stimulants, as carbonate of aminonia and sulphuric ether, \&c., sinapisms and blisters to the epigastrium, and external warmth by heated sand in bags. At one time, the nitric and muriatic acids were exhibited, croton oil and jalap, but not proving successful, this treatment was abandoned.

Dysentery. The principal remedies employed in the treatment of dysentery, have been bloodletting general and topical, ipecacuanha, mercury, castor oil and fomentations.

The propriety of venesection uecessarily depends on the strength of the patient, and urgency of the symptoms; the
quantity of blood drawn is regulated by the effects produced by it on the circulation ; it has been generally carried to syncope, or until the pulse becomes feeble, a second bleeding has seldom been required, and V. S. is considered admissible only in the very early stage of the acute form of the disease.

Topical depletion is afterwards employed, whon the repetition of V. S., may be cousidered ineligible.
'Ihe syinptoms requiring the application of leeches, after general bleeding, are local pain, a sensation of heat, or uneasiness of the abdomen upon pressure, and the appearance of any considerable quantity of slime and blood, in the evacuations indicating the existence of inflammation at a stage of the complaint, when it may be of the utmost importance to save as much as possible the strength of the patient; in mild cases, local bleedings alone have been sufficient; and where a patient has bcen debilitated by former disease, dissipation, or a lengthened residence in the country, the abstraction of blood is unnecessary.

Nauseating doses of ipecacuanha are usually commenced immediately after bleeding, and the operation of a dose of castor oil; and its employment is continued, to the extent of five grains, in combination with an equal quantity of powder of gum arabic, cvery hour, or second hour, as the patient's stomach may be able to bear it, without inducing vomiting; it is given in the form of pills, and during its use, fluids are sparingly allowed.

The sudorific effect of this medicine is assisted by the application of fomentations to the abdomen, a remcdy of the greatest importance, and which appears to be particularly gratcful to the patient's feelings, relieving griping and tenesmus.

It is important to remark, that with the relief from griping
and straining, a corresponding improvement in the appearance of the biliary discharge, has generally followed the administration of ipecacuan, and become apparent after a sufficient quantity had been taken to produce nausca.

The laxative prcferred during the treatment, is castor oil, it has been found to operate with equal efficacy, and less irritation than any other medicine of this class; it is given on admission, and repeated afterwards when indicated by tormina, scanty stools, and much straining.

When the evacuations are partly feculent, of a dark or brown green colour, or of several shades of yellow, mixed with dysenteric discharge ; or when they exhibit any of those numcrous shadcs of difference, which are considered as appearances indicating a deficiency, or vitiated quality of the hepatic secretion, mercury is prescribed; a dose of calomel varying from ten to twenty grains is given at bed timc, on the evening of admission; and its repetition on the following night, which is the period preferred for exhibiting it, is regulated by the appearance of the hepatic secretion, indicated by the evacuations. When the stools become tinged of a bright yellow colour, notwithstanding the presence of slime or blood, blue pill is substituted in such quantities, and at such inter. vals, as to induce a continuance of the secretion of the colour alluded to, and is seldom entirely omitted before convalescence.

The use of mercury is entirely regulated by the indications now mentioned, and the quantities cxhibitcd are thercfore as various as the states of the biliary secretions.

In cascs complicated with hepatic affections, mercury is more freely exhibited, although never carried to the cxtent of producing ptyalism; and with the exception of one case, in which an unusually small quantity slightly affected the mouth, it has not occurrcd; the intention having bcen accomplished in all the othcr cases, without the saliyary glands becoming affected.

Opium exeept in the form of enema has formed no part of the treatment.

The diet during the treatment of the disease, is strictly of the most unirritating kind, consisting of congee, arrow-root and sago.

Chronic Dy- In the chromic form of dysentery, blue pill with sentery. ipceacuan, in doses of two or three grains; three times a day, with tonic bitters, and small doses of eastor oil, have been the remedies principally used ; strict attention is paid to the regimen, and a flannel band is worn round the body. The result of the treatment in both forms is scen in the foregoing table.

Hepatic Dis. The treatment of hepatic affections has not difease. fered from that usually employed. A great proportion of the cases have been of a chronic nature, occuring in pensioned, or invalided men, or patients arriving from outstations, sent to the Presidency for change of air, which accounts for the number of these complaints, and also for the comparatively large percentage of mortality.

Phthisis Pul- Phthisis Pulmonalis, this disease has been fremonalis. quently met with in Indo-britons; it has also been seen oceasionally in European subjects about the age of puberty, and within the first two or three years after arriving in India, but is of rare occurrence after that period; and, in natives true tubercular phthisis, has comparatively been seldoni met with.

Chronic Rheumatism

In a chronic form, rheumatism constitutes a numerous class of cases, both among Europeans and natives.

Cases of ehronic rheumatism, in Europeans have very generally occurred after syphilis, and have been attended with enlargement of the bones and joints, and should more proper-
ly have been entered under the designation of secondary syphilis, than rheumatism ; some patients however have been similarly affected, without its being referrible to a venereal origin, but it must here be remarked, that rheumatism has seldom been seen, attended with enlargement of the bones or periosteum, unless after syphilis, or where mercury had been used to a considerable extent, for the cure of other diseases. Most of these cases have oceured in old soldiers, few of whom have passed through their period of service, without having repeatedly been placed under the influence of mercury ; and it has also been observed, that in scrophulous constitutions, the incautious exhibition of mercury, is of itself productive of symptoms resembling those considered secondary syphilis.

In these cases, the general health is always more or less affected, and the first step in the treatment, is directed to its improvement. In attempting to effect this object, the secretions are regulated by the use of laxative medieine, with alterative doses of blue pill, in eombination with ipecacuan and sarsaparilla, aided by gentle tonics; the diet being carefully attended to.

The use of alteratives in such cases is often unnecessarily protraeted, their effects being slowly produced are likely to be unobserved, and it must be obvious, that their continued administration may occasion actual discase. The first symptoms of amendment to be expeeted from alterative medicines are an improvement in the appearance of the tongue, a return of appetite, and regularity of the bowels; the sleep beeoming more refreshing, the skin smooth and free from eruption, and the urine copious and of natural colour. When these effects have been produced, the use of the remedies in question may be gradually and safely discontin ued; while on the other hand, perseverance in them after having been used for three or four weeks, without beneficial results, appears to be of doubtful propriety and is considered to indieate the necessity of searching for some loeal affeetion, as the cause, of the unfayorable symptoms continuing.

With regard to local applieations, blisters and liniments being found useful, are very generally employcd; opiates at bed time hare also been remedies, from which much immediate rclief has been experienced; the rapour bath, has been used with considerable benefit, as likewise the tepid bath.

In rheumatic eases where a periodicity in the return of the discase, or in the increase of severity of the pain, is observable, as is perhap's more frequently the case, when it oceurs as a sequela of fever, the sulphate of quinine has been used, with marked advantage.

Atrophia. Atrophia, under this head have been included, those cachectic eases which have presented themselves in the last stage of ill defincd ehronic disease; the state indicated having been the effect of long contiuucd illness, involving the whole of the natural functions, and producing a degree of emaciation and debility, which appears to be the chief feature of this complaint.

## MEDICAL 5CHOOL.

Medical $\quad$ Attached to the General hospital is the Medical
School. school, an Institution established by Sir Frederick Adam in 1835, for the instruction in Medicine and Surgery of East indians, and natives entering the subordinate medical branch of the service; and which was subsequently, in the year 1838, thrown open to private students or persons not in the public service under the ${ }^{*}$ regulations given below.

[^7]The building consists of a theatre or lecture room, a library and museum, and a laboratory. The course of education comprises the study of Materia Medica, and Pharmaceutical chemistry, Anatomy and Physiology, Surgery and the practice of Physic.

The pupils of the public service consist of two classes, viz. Europeans or East indians, and natives: the former being in the grade of "Medical apprentice," and the latter of "Native medical pupil," from which they are promoted to "Assistant apothccary," and "Second dresser," respective$\mathrm{l}_{\mathrm{y}}$ after cxamination, and strictly according to merit. They are then available for transfer to the various hospitals; and the information respecting the nature and treatment of disease both medical and surgical, imparted to them at the institution renders them valuable hospital assistants.
5. Private students to have access in common with the others, to works of reference belouging to the school, but to provide their own stationery, and books required for private study; all other benefits to be gratuitous.
6. Objectionable conduct to be brought to the notice of the Medical Board, and to subject the students to expulsion, or such other penalty, as may be considered necessary, for the preservation of the disciplinc of the Institution.
N. B.-As students cannot be admitted to a class after a course of instruction has commenced, it is necessary, that all applicants, should be prepared to enter on their duties with the next Public Class formed subsequently to their admission of which due intimation will, from time to time, be published in the Fort St. George Gazette.
$\left.\begin{array}{l}\text { Medical Board Office, } \\ \text { 25th August, } 1838 .\end{array}\right\}$
By order,
(Signed) Geo. Pearse, M. D.

## IUNATIC ASYIUM,

Site and des. The Lunatic Asylum, is situated at Kilpauk, a
cription. cription. retired part of the environs of Madras, about two miles and a half west from Fort St. George, placed in the middle of an enclosed square piece of ground about thirteen english acres in extent. The ground presents a level surface of turf, with but little vegetation, beyond a few cocoanut trees, at its eastern angles; the situation is rather low, and the soil deep, and clayey.

Rules for ad- The asylum is the only establishment under $\underset{\substack{\text { mission } \\ \text { Patients. }}}{\substack{\text { for }}}$ the Madras presidency intended exclusively for the reception of lunatics, and is adapted for the accommodation of such insane persons, whether Europeans or Nutives, as from continued mental derangement, may require restraint, and treatment in an institution of the kind. Harmless idiots however, are received into the native infirmary. All military insane persons European or native under ordinary circumstances, are required to be kept for at least three months, from the commencement of their illness, under the immediate charge of the local medical officers throughout the presidency, before being sent to the asylum ; and agreeably to the orders of the Honorable the Court of Directors, all Europeans afllicted with insanity, are sent to England with as little delay as circumstances admit of. Insane European officers, during their detention at the presidency, are accommodated in quarters attached to the gencral hospital, but soldiers are generally kept in the asylum for some time preparatory to their embarkation. In general therefore there are but few European patients at a time in the asylum; its usual inmates chiefly consisting of Indo-britons, and natives, many of the latter being criminal lunatics, sent from the interior.

The building, which is coustructed of bricin, and terraced, consists of three quadrangles of one story, on the inner sides of which are arranged the apartments, or cells for the patients, each having its door opening into the square, and opposite to it a barred window facing outwards. The
principal square, which was originally intended chiefly for the accommodation of Europcan male patients, has its front to the east ; and the two smaller squares, one for female paticnts, and the other for native male patients, are placed behind it. The whole building is surrounded generally at a distance of about fifty feet, by a curtain wall, nearly six feet high.

The cntrance to the great square is on the eastern face, on one side of which the dispensary, offices, and commissariat hospital stores are placed, and on the other are apartments for the resident subordinate medical attendants, and cookrooms, none of which open into the square. There are twenty-four cells in the large quadrangle, and in the centre of the area, which is about 140 feet square, is a large bath room, amply supplied with water. In each of the two smaller quadrangles are six single cells, and four double ones, and though somc what smaller than the European cells, they are equally well ventilated. The cells and verandahs of the whole building arc floorcd with square bricks: and to admit of the more ready purification of the apartments, of such patients as arc inattentive to cleanliness, the floor of each cell has a slight inclination to one of the angles, on the outward face, where a small circular opening through the wall, gives ready exit to the water used in washing the floor, and it is carried off by drains round the building, keeping the whole perfectly dry.

Extent of ac- The asylum contains fifty six separate apart-
commodations. ments for patients; and this accommodation has been found to be sufficiontly extensive although a separate cell is invariably allotted to each individual, the number of patients in the institution having, for many years past, but rarely amounted to fifty at any one time.

Long verandahs, and shaded walks in the square, afford convenicnt space for modcrate cxercisc; but all patients whose cases admit of it, are induccd, in favourable weather, to take excrecisc in the outer enclosure every morning and evening, on a circular walk in front of the asylum.

Observations The site of the institution is apparently healthy, on the sick
treated. for during the last fifteen years no disease has prevailed among its inmates, which could be fairly attributed to its locality.

From what has already been said with regard to the mode of admission of European military insane patients, the rules of the service requiring them to be at least three months under treatment, before they are transferred to the asylum, (in the majority of cases twice this period has elapsed,) and from their remaining bat a short time in the institution, its records afford no satisfactory information as to the result of treatment in cases of mental disease, amongst this class of patients. The same rules are attended to in the admission of natives, in whom the acute stage of the disease has also generally passed away, (especially among those not belonging to the service, and who form a large proportion of the admissions) and in such cases the treatment can therefore be but palliative. The prejudices of the people in general prevent post mortem examinations being made, and the pathology of mental diseases can therefore be little advanced by this institution.

## EYE INEIRINARY.

Site and de- The Eye infirmary is situated at the S. W. ex-
scription of the Eye In- tremity of Vepery, in a large enclosure adjoining the Poonanallee road. The edifice which has a southern aspect is built of brick and terraced, and consists of a centre and two wings. The centre portion which is two stories high, is the residence of the superintendent; the wing on either side, of one story, forming the wards for the patients; one wing consists of a ward 133 feet long, and 20 broad, capable of containing I03 patients, and the other is divided, into four separate apartments, viz. one for sepoys, a second for high caste natives, a third for inferior grades, and the fourth for all serious cases, particularly those who have undergone any operation; this wing can accommodate 105 patients, so that the whole house is calculated for 208 patients. It is well ventilated by doors, and venetianed windows ; and there is an ample supply of good water on the premises. A commodious surgery and rooms for the medical subordinates are attached, also a room for high caste natives to take the food, \&c. with cook-rooms: and other conveniences.

From the preceding remarks it will be observed, that the accommodation in the infirmary, properly so called, is exclusively for natives. European patients are accommodated in a ward in the general hospital.

The Eye infirmary was established in 1819, and is open for the reception of European and native soldiers, as well as for Europeans and natives not belonging to the service. The medical charge is vested in the Company's oculist; the duties being conducted under the general supervision of the Superintending surgeon, and of the Medical Board. Assistant surgeons recently arrived from Europe are enjoined to pay every possible attention to the practice in this institution ; and they are ordered to attend there frequently, and especially on the day set apart for operations.

The following tables show the number of admissions, cures, \&c. in each class of patients Civil and Military, during the nine years, from 1830 to 1838 inclusive, and the nature of the most prevalent diseases.

MILITARY.


- Amaurosis . . . . . Eur. 2. .Nat. 10 b Amaurosis. . Eur. 9 Nat. 6
Cataract.........Eur. 6. . Nat. 10 Cataract...... Eur. 0 Nat. 3
Ophthalmy acutc and chronic. .Eur. 10 Nat. 3
c Ophthalmy acute, chronic, and suppurative...Eur. 16 Nat. 8
Night blindncss................................Eur. 4 Nat. 8

ClVIL.


OUT PATIENTS.


* Amaurosis 11................ b Amaurosis........... .... 85

Cataract 60............ .. Cataract incipient......... 51
Ophthalmy acute, chronic,? and suppurative, with ul- 48 cerated cornea ... ....)48

Nebula....................... 19
Albugo....................... . . 14
c Ophthalmy acute, chronic and suppurative..... ........ 117
Night blindness............................................ . . . 42
Ophthalmia. In the treatment of this disease the application of the solution of the nitrate of silver, 4 to 8 grains to the ounce of water combined with the free use of the extract of belladona, has been attended very generally with immediate benefit; the latter remedy having been found useful in allaying irritation and pain both in the acute and chronic stages. In one case of iritis from injury, it had the effect of lessening the pain and inflammation, after the usual remedies had failed-and its application four times daily, restored the eye to its perfect function, the cormea assuming a healthy appearance, and the pupil recovering its natural size, without any other remedy. In the disease called "country sore eye" the application of belladona in the first instance, followed by an ointment containing the nitrate of silver, has becu found to have a decided effect in checking the disease.

[^8]In sereral eases of vaseularity and uleeration of the comea, in constitutions of a scrofulous nature, the hydriodate of potash has been used with good effect ; after this remedy has been exhibited for some time, the cornea is observed, gradually to become clear, and the ulcer to heal, when the usual stimulating application completes the cure ; and in some cascs of this nature, where total blindness existed, sight has been restored by this mode of treatment.

Night blind- Night Blindness, is a very prevalent disease in ness. this country, the above tables show that it forms nearly one-fifth of the admissions. It has been found to be principally confined to the native agriculturists and artisans, and is seldom met with in the European, and but rarely in the Indo-briton.

The alleged causes of this disease are, exposure to the strong dazzling light and ardent heat of a tropical sun, by day, and to chilling dews by night, severe attiacks of fever, scanty and bad food, a disordered state of the alvine secretions, and worms; females have likewise been frequently observed to be affected with this complaint, after parturition.

This affection is considered by the oculist to be of more importance than is generally admitted, and he is of opinion that many of the cases of amaurosis and cataract treated in the infirmary, have had their commencement in night blindness.

Cataract. Cases of incipient cataract were formerly permitted to remain in hospital till the disease became completely formed, or they were operated upon at an early stage of the disease; they are now treated by mercurials, repeated counter irritation, blisters over the brows, loeal depletion by leeches from the neighbourhood of the eye and the nape of the neck, with repeated moxas and galvanism ; by which, in some cases, the opacity disappcars, and in others it is so much removed, as to permit the individual to have a useful share of vision, thus obviating in many instanees the neeessity for operation.

The operation generally preferred in this institution is "depression ;" as the cornea of the native in most cases either sloughs, or is so slow in uniting, as to require even a stimulus to excite a salutary degree of inflammation, after the operation of "extraction."

Several of the cases treated were those named "Morgagnian cataract;" on opening the capsule, of this form of the disease, the anterior chamber becomes eithcr entirely, or partially filled with a milky fluid; the lenses were generally small, though in some cases they were found to be large and soft. When the lens could be removed from the axis of vision, either by depression or reclination, it was effected; it has been observed that inflammation is more likely to set in, after an operation in this description of cataract, than in any other; should the lens be allowed to remain in situ, its absorption gradually takes place, and it ultimately disappears, if the inflammatory symptoms are quickly subdued. A case of congenital cataract of both cyes in a youth of 18 years of age, was operated upon in the year 1831, with complete success.

Disenses of The diseases of the cornea have been numerous; the Cornea. in ulceration with vascularity, the potassii iodidum and quinoe disulphas have been found most valuable remedies, in combination, or administered separately, according to circumstances. In some of the cases before a healthy action could be produced, the mouth was obliged to be slightly affected with mercury, when the above remedies acted very satisfactorily.

Amaurosis. The majority of this class of cases have been admitted with partial loss of sight, depending principally upon exposure to the sun during the day, and chills during the night ; in many instances the result of febrile disease, and inanition succeeding parturition. Strychnia both internally and externally has had a fair trial, but except in two instances it has not been followed with any success ; it was carried in these two cases to the extent of one grain, morning and evening.

## IMALE ORPHAN ASYLUIV.

Site and des- This Asylum was cstablished in the ycar 1784,
cription. for the maintenance, support, and education of destitutc orphan sons of the Europcan military, on the Madras establishment.

It is situated at Egmore, nearly two miles west from the Fort, in an enclosure of about $\mathscr{\varrho}^{2}$ english acres in cxtent; the ground having a slight rise towards the site of the building. The soil is a mixture of loam and sand covered with turf, and with the exception of a few trees, there is no other vegetation.

The building is of two stories and terraced, facing due south; the upper story being entirely appropriated for schoolrooms and sleeping apartments, and the lower as a dining room ; there is also a large nursery in a separate building for younger children, with every suitable convenience and comfort; baths, \&c. being amply provided. The entire building is calculated to contain 980 boys.

The water though abundant is brackish, and can only be used for cooking and bathing; that for drimking is brought from the seven wells in Black-town, formerly described.

A great majority of the inmates of the institution are Indobritons, very few being of pure European blood; their ages vary from four, to eighteen years.

Mospital. The hospital attached to the institution is a separate building of two stories, terraced, and capable of containing sixty paticnts. The upper story is set apart for medical cases, and the lower for other diseases, such as itch, ophthalmia, \&c.

Diseases. 'The average annual number of admissions into hospital for ten years,* exclusive of itch, and 3,533 cases of discase of the eye, has been 278 ; and the average annual number of deaths during the same time, 8 ; but ex-

[^9]cluding deaths from cholera, the number is reduced to 5 , the average annual strength for the same period being 380 . The diseases from which the largest mortality occurred, have been cholera, dysentery, fever, and rubeola of which last 158 cases were treated, with six deaths.

Ophthalmia. Ophithalmia has been very prevalent in the institution till within the last few years. In the beginning of the year 1835, the disease became remarkably frequent; and although in many cases it was proved to have arisen from the ordinary exciting causes, it was believed at that time, to have acquired somewhat of a contagious character, justly attributable to the imperfect ventilation of the sleeping apartments, the atmosphere in which was found to be close and sickening, not only at night, but also during the day. The whole building was purified with the chloride of lime, and attention paid to the full and free ventilation of the nurseries, and dormitories ; the result of which at the end of three or four months, was highly satisfactory.

Since that time venetian shutters of a green colour, have been placed in the windows, ventilators opened on the roof, and all the rooms of the house painted of a stone colour; and, during the two years, ending December 1838, only 293 cases of ophthalmic disease have been admitted, while in the two preceding years, 1057 were treated.

The general health of the institution has been greatly improved by the same means; for, taking the two first years, and the two last of the period embraced in these remarks, it is found, that 515 admissions occur in the first period, with 16 deaths; and 286, in the second period, with 7 deaths; excluding in both instances, the admissions from diseases of the skin and eye, those of the latter in the first period, amounting to no less than 680.

It is in contemplation to erect a more substantial nursery in place of the present one, which is a pent roof building, and this it is expected will improve still more the health of the inmates of this useful institution.

## FEMALEORPHAN ASYLUM,

Site and de- The sister institution to the preceding was estascription of Asylum. blished in the year 1787, and for like benevolent purposes, for the destitute orphan female children, of the European military, on this establishment.

It is situated at Chetputt, a retired part of the suburbs, about four miles directly inland from the Fort, in an equally extensive enclosure of ground, presenting a flat surface of turf, interspersed with a few trees, and surrounded by a hedge. The site is open high and dry, and the soil sandy.

The house is a long building facing the east, two storied and terraced, and capable of accommodating four hundred persons. The school rooms, and dormitories are on the upper story, and the dining hall on the ground floor, as also a very large room for recreation in wet weather ; it is well ventilated, light and air being regulated by venetian shutters; and also amply supplied with good water and provided with a comfortable commodious bath room, and other conveniences.

The inmates of this institution are chiefly Indo-britons, the ages varying from four to thirty years.

Hospital. The hospital is a separate building of two stories and terraced, facing the south; is well ventilated, and capable of containing thirty patients.

Disense. The average annual number of admissions into hospital for ten years," exclusive of diseases of the eye and skin, has been 254; and the annual number of deaths

[^10]for the same period, scarcely 4 ; but excluding deaths from cholera, the number is reduced to $2 \frac{1}{2}$ annually; the average annual strength during the same time has been 374 ; thus showing a degree of health scarcely equalled, and certainly not surpassed in any establishment of the kind in Europe.

The most fatal diseases have been cholera, dysentery, and fever, as in the other institution.

The diet in the two establishments, during the period embraced by these remarks, has been equally good, well regulated and varied; so that the cause of the difference in the health and mortality in the one institation, compared with the other, cannot be looked for in the quality or nature of the food; it is thought to be correctly attributed, to the greater exposure of the inmates of the one, to the ordinary exciting causes of disease, from the natural habits of the boys, and the consequent greater amount of febrile disease amongst them, of a more acute nature ; and the impaired constitutions of the boys from the badly ventilated state of the Male Asylum, previous to the year 1835 as before adverted to.

The following tables show the amount of febrile and other forms of acute disease, and the mortality attending them in both Asylums, for ten years ending in December 1838.

| MALE ASYLUM. | Aggregate strength 3,803. <br> From 1829 to 1838. |  | Total. |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Fevers. | \|Adm|died |Adm|died | Adm|died]| |  |  |  | $1 \cdot 583$ |
| Dysentery, acute \& chronic | 72 | 11910 | $191 \quad 12$ |  | $6 \cdot 2$ 2 |
| Cholera. . . . . . . . . . . . | 21 | 52.23 | $83 \quad 30$ | $2 \cdot 182$ | ; $36 \cdot 141$ |
| Variola ${ }^{\text {¢ }}$ | 9 | 10 | 101 | 0.262 | $10 \cdot 0$ |
| Varicella................. | 90 | $3{ }^{1}$ | 93 0 | $2 \cdot 445$ | $0 \cdot 0$ |
| Rubcola............. . . . . | 1576 | $1{ }^{1}$ | 1586 | $4 \cdot 154$ | 3•797 |


| FEMALE ASYLUM. | Aggregate 374 From 1829 | strength. ${ }_{\text {ctic }}^{\text {to 1838. }}$ | Total. |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Ferers. <br> Dysentery, acute \& chronic <br> Cholera. <br> Variola. <br> Varicella. <br> Rubeola. |   <br> Adm died <br> 124 4 <br> 264 3 <br> 11 10 <br> 0 0 <br> 57 0 <br> 85 0 <br> 8 0 | $\|$Adm  <br> 200 died <br> 30 1 <br> 35 4 <br> 7 3 <br> 0 0 <br> 4 0 <br> 0 0 |  | $8 \cdot 646$ 1.627 0.480 $0 \cdot 0$ 1.627 $2 \cdot 268$ | 1.543 11.475 72.222 $0 \cdot 0$ $0 \cdot 0$ $0 \cdot 0$ |

Having given for each institution a statement of the average results of disease for ten years, it seems necessary to notice here, the influence of unhealthy seasons in increasing both the sickness and mortality. In 1833, from the total want of the periodical rains, the intense heat, and consequent failure of the crops, sickness prevailed to a vast extent throughout the greater part of this presidency ; and although the innates of these institutions did not suffer from any deficiency or want of food, yet they exhibited the influence of that concealed morbid cause, which was acting so very generally, and induced in them a disposition to marasmus, atrophy, cholera, bowel complaints, and scurvy, with a state of system in which the vital powers were much depressed; the

* Worms (lumbrici) were a frequent eause of this discase, and oceurred in vast numbers, in several instances; in one the intestines appeared filled with them, and they were found even in the stomach and æsophagus; and in another case 450 were removed from the body of a small ehild.
tAt one time during the prevalenee of small pox, when vaceination was had recourse to, to eheek its progress, the following case oceurred, an example of which is not often witnessed, viz. that of the co-existence of the vaceine and variolous discasc in the same individual. The subject was a boy, 15 ycars of age, who was inoculated with the vaecine virus on the 7th of the month; his general health continued pretty good, until the evening of tho 11th, when febrile symptoms commenced. The vaceine pustules advanced very slowly but were well marked; on the 17 th they had the appearance which that disease commonly presents, on the 7 th day; on the 22d the crusts were about falling off: The variolous cruption which was of the confluent kind did not appear till the 16 th of the samc month, by the 20th the pustules on the surfaec were fully maturated, and the erusts fell off about the 30th. The disease proved mild, and the secondary fever was slight and of short chration.
consequence was a vast increase of sickness and mortality, from the want of that energy so necessary to a successful rallying of the powers of life, after the more violent, and apparently more dangerous symptoms of disease, have been overcome. In that year there were,

In the Male Asylum. In the Female Asylum.


* 14 By Cholera. $\dagger 3$ By Cholera.


## PRISONS.

Site and de- The Prisons of Madras are three in number, the scription of Jails. Supreme Court; the Convict; and the Police, or Magistrate's jail ; all of which are situated in Black-town.

The Supreme Court jail, erected in 180\%, stands close to the north wall of the town. It is of a square form, and consists of several buildings, (enclosed by a double wall, ) of two stories, for the different classes of prisoners, debtors, criminals, and felons; the upper stories being occupied but not exclusively by Europeans. The apartments are all well ventilated, and kept clean; and there is a spacious piece of ground between the walls, to allow the prisoners to take exercise when necessary; the whole prison is calculated to contain about 100 prisoners.

The hospital is an upper storied, terraced, brick building, situated at the north side of the jail, but quite unconnected with it, being placed in a distinct area, measuring 80 by 40 feet, surrounded by a high wall. It measures 40 feet by 19 , and can accommodate twenty patients. The apartments are well ventilated, by doors and windows.

The site of these buildings is rather low, and in the monsoon season much water lodges in the vicinity.

Convict Jail. The bomb-proofs of one of the bastions on the north rampart of the town form the convict jail ; it is situated near the Supreme Court jail, and is exclusively appropriated for natives. The cells or arches, and floors are constructed of granite, the doors and windows all opening into a small centrelarea; the ventilation is therefore from the nature of
the building very imperfect; it is close and confincd, and generally very much crowded; yet its inmatcs, as will be seen below, appear to cnjoy good hcalth.

The hospital of this prison is a small pent roof building, at one side of the cntrance, and affords accommodation for eight patients; it is not well ventilated, and on this account any cases of severe disease, which may occur, are removed to the native infirmary.

The Police jail is situated in one of the strects of Blacktown; it is used merely as a temporary prison, and for short periods of confinement, both for Europeans and natives ; the cells are all arched, and well ventilated by doors and windows. There is no hospital attached to this jail.

Labour and The native convicts only are sentenced to hard
diet, \&cc. diet, \&c. labour, in irons, and work from 6 A. M. till 5 P. м., generally on the roads. They are dieted and clothed by the Commissariat department agreeably to the annexed scale.

Statement shewing the weekly consumption and average cost of provisions and clothing supplied by the Commissariat to each native prisoner in these different jails.


Statement shewing the weekly consumption and average cost of diet and clothing supplied by the Commissariat to each European prisoner in these different jails.

| tb Oz. | Rs. A. P. |  |
| :---: | :---: | :---: |
| 031 of Tea... | 031 |  |
| 07 of Sugar. | $\begin{array}{lll}0 & 1\end{array}$ |  |
| 214 of Rice. | 010 |  |
| 14 No. of loaves of Bread, equal to 7 ibs . | 089 |  |
| P. D. |  |  |
| 2 4 of Milk. | 02 |  |
| $3\}$ libs. of Mutton. | 0106 |  |
| Curry Stuff. | $0 \quad 0$ |  |
| Firewood. | 018 |  |
| Clothing, \&c. | 062 | 128 |
| Shoes, Soap, \&c. | $0 \quad 21$ |  |

Diseases. The following table No. 3 shows the amount of disease amongst the convicted prisoners, for a period of ten years, in the Madras Jails; the table includes both Europeans and natives, there being no separate returns, but the proportion of Europeans is very small. The amount of mortality cannot be accurately ascertained, the worst cases of disease, as already noticed, being removed to the native infirmary, and included in the returns of the sick of that institution, the number of transfers is however very trifling, amounting in the period embraced in these remarks only to 52.
BIACK-TOWN JAII.
" from each Class of Disease for 10 years, from 1829 to 1838 inclusive.
No. 3.-Table exhibiting the Number of



* Iucludes 2, 822 cases of Punitio.

Health of the The average annual strength for 10 years, has
Convicts. been 273 ; and, excluding 2,822 cases of "Punitia,"* from the amount of admissions, the average annual number of sick is found to be only 194, or 71 per cent on the strength; the mortality during the same period being 3 annually, and excluding cholera only 2 ; which is at the rate in the first case of one per cent, on the strength; and only $1 \frac{1}{2}$ on the sick treated; and in the latter instance, is only $\frac{2}{3}$ per cent, on the strength, and one on the sick treated. It is worthy also of remark that eleven of the fatal cases occurred in 1833. This statement which does not include the results in the 52 cases of acute disease transferred, as before stated, to the native infirmary, shows a surprising degree of health, and this too notwithstanding that the convicts are so badly housed ; they are regular however at their daily labour, but not overworked, their diet is good, and in due quantity, and served out to them at stated hours.

[^11]
## GARRISON OF FORT ST: GEORGE•

Garrison of The European force stationed at Madras, for Fort St. GeorgeEuro- many years past, has been one Regiment of Her pean Troops. Majesty's infantry, and two companies of Artillery, all of whom are quartered in Fort St. George, which is an irregular polygon somewhat in the form of a semi-circle, of which the sea face is nearly a diameter, running north and south, and presenting a clear front on that side of five hundred yards. The sea flows to within a few yards of the ramparts, which are fenced by an artificial barrier of stone work from the influence of the surf and tide; the foundation of the works on the sea face contains a series of cisterns, which are filled with fresh water from the wells formerly mentioned, as situated at the northern extremity of Black-town.

The Fort presents a doublc line of strong fortifications towards the land side, both bombproof; the inner one constructed so as to afford accommodation to a large body of troops, but which is not at present made available for this purpose, except a small portion occupied by the Artillery and occasionally by recruits on arrival from Europe.

Public Offi- Within the Fort are the offices of Government,
ccs. and of the various Public departments, and the barracks for the European troops.

Barracks. The barrack is situated at the north and western extremity, is of an oblong form, its length running north and south ; it is terraced and of two stories, and said to be capable of accommodating $1,000 \mathrm{men}$; the officers occupy the upper, and the men the lower story. The buildings in its vicinity greatly obstruct the access of air and its construction prevents frec ventilation, in the lower story especially ; for it will be readily perceived, that the eastern range shuts out the sea breeze, from the western, and the western range in like manner precludes the access of the land winds, to the opposite side
of the building ; besides, these winds waft the impure air from the windward to the leeward range; $i$. $e$. when the sea brceze prevails, the atmosphere in the western ranges becomes close and extromely disagreeable; and when the land wind prevails, the eastcrn side is in a similar state. These defects have been but partially remedied by the improved mode of ventilation recently adopted, viz. air holes cut through the walls near the ceiling, with the view of producing a constant current of air through the apartments. This plan of ventilation, (so common in the hospitals and public institutions in Europe, and first recommended by "Hennen," who also advised similar apertures to be made at the bottom of the wall, the openings of each being covered with an iron plate perforated with small holes, or a wire frame work, to break the force of the wind,) has been found to answer well in buildings of a single range, but it must be evident that in one constructed like these barracks, its efficacy can be but triffing; and the state of the atmosphere in the apartments furnished with the ventilators, has been found to be but little influenced by them, being still very impure.

All the apartments and the area in the centre of the quadrangle are paved with stone, and kept clean. The drains are said to be low and in some measure defective, and consequently impurities sometimes stagnate and give rise to unpleasant odours.

The upper story of the building is divided into separate apartments for the officers and from its elevation it is of course better ventilated.

It has generally been found when a regiment is complete in numbers, that the lower story does not afford sufficient accommodation; there being no parchery,* or other buildings, in the fort for the married men and families, one end of the lower range is therefore given up to them, and two comp:nies are accommodated upstairs.

[^12]It would be advisable perhaps from the circumstances now stated, and also from the European regiments having been increased to $1,000 \mathrm{men}$ each, to remove the officers to some convenient building in the neighbourhood, and give up the entire barrack to the soldicry; this arrangement would add much to the comfort of the troops, and at the same time be conducive to their health.

Duties and For the most part, the men are occupied in of the sol- the ordinary routine peaceable garrison and regimental duties of guards, drills, parades, \&c. nor hare thesc latter it is believed been carried to such an extent as to distress them; some of the guard rooms are said to be ill rentilated, and others to afford but an imperfect protection from the effects of the suu.

The time of the soldier when off duty being his own, and haring no employment it becomes irksome to him and passes hearily away; and the tedium of having nothing to do, but too frequently lcads to bad habits and intemperance, and his daily allowance of spirits (six ounces) is exceeded on every opportunity; to prevent the baneful conscquences of idleness, a reading room or library has been lately opened which there is cvery reason to belicve will be attended with good effects; it would be advisable also to employ the soldier in handicraft, such as making of shoes, shirts, stockings, stocks, \&c.; these observations are here introduced from observing the very partial influence, the institution of temperance socictics, has as yet exerted in European regimeuts, in India.

Diet. As to the diet of the men, it has always been unexceptionable both in quantity, and quality, but the allowance of animal food (one pound of meat daily), is perhaps too large.

The hospital has been described in the account already given of the general hospital, one half of which is appropriated for the sick of Her Majesty's regiment. In scasons of severe sickness, or when Cholera occurs, its distance from the
barracks (about half a mile) has beco found to be very inconvenient.

Diseases of The most fatal diseases have been cholera, dy-
faropean Troops. sentery, hepatitis, and fever.

The exciting causes of these diseases, assigned by the medical officers, are the general influence of the increased temperature of a tropical climate, upon the European constitution; exposure to the ardent heat of the sun; the effects of the scorching winds during a part of the year, and heary dews by night, at other seasons; the badly ventilated state of the barracks and guard rooms ; and, the intemperate habits of the men.

The general table of European military sick, shows the nature, and amount of disease, and mortality during a period of 10 years from 1829 , to 1838 inclusive; but, as it includes also, the sick of the Honorable Company's European Artillery the following table comprising only that of Her Majesty's regiments, stationed in this garrison is given for 7 years, from 1832, to 1838 inclusive.

| DISEASES. | $\begin{array}{\|c} \text { Average strength } 579 . \\ \text { Aggregate strength } \\ 4055 . \end{array}$ |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Fevers. | Adm ${ }_{\text {a }}^{\text {a }}$ ( ${ }^{\text {died }}$ | Adm <br> 769 |  |  | $43 \cdot 008$ |  |
| Cholera | 3812 | 7336 | 111 | 48 | $2 \cdot 737$ | $43 \cdot 2.43$ |
| Diarrhoa | 2310 | 3384 | 569 | 4 | 14.032 | $0 \cdot 703$ |
| Dysenteria acuta | 36918 | 71436 | 1083 | 54 | $26 \cdot 707$ | 4.986 |
| \#. Chronica. | 34.3 | 303 | 64 | 6 | 1.578 | $9-375$ |
| Hepatitis acuta.... | $227 \quad 7$ | $227 \quad 9$ | 454 | 16 | $11 \cdot 196$ | $3 \cdot 5.4$ |
| " Clironica. | 574 | 463 | 103 | 7 | $2 \cdot 540$ | 6-796 |
| Catarrhus ... | 2421 | 2860 | 528 | 1 | $13 \cdot 020$ | 0-189 |
| Phthisis pulmonalis | 31 | $4{ }^{4}$ | 7 | 5 | $0 \cdot 172$ | $71 \cdot 428$ |
| Hœmoptysis.... . . |  | $7 \quad 1$ | 18 | 1 | 0.413! | $5 \cdot 555$ |
| Pneumonia.. | $49 \mid$ | 683 | 117 | $4)$ | $2 \cdot 885$ | 3.418 |
| Rheumatism acutus.. | 239 0 | 267 0 | 506 | 0 | $12 \cdot 478$ | $0 \cdot 0$ |
| ", Chronicus. | 83 0 | 750 | 158 | 0 | 3.896 | $0 \cdot 0$ |
| Other diseases. | 2405122 | 2490 | 4895 | 21 | $120 \cdot 715$ | 0.429 |
| Total. | 496365 | 5394. 112 | 10357 | 177 | $255 \cdot 413$ | 1-703 |

Fevers. In the foregoing table, the class "Fevers" will be observed to form one-sixth of the whole admissions, the continued, and ephemeral being the most prevalent forms ; the fact that the amouut of mortality, is only one death, in every one hundred and seventy-four patients treated, sufficiently shews the very tractable nature of these diseases.

Diseases of this class are generally presented early for treatment, the head-ache, with the overpowering lassitude, and weakness, and general fceling of soreness over the body, with which they commence, prostrate the patient at once, incapacitate him from the performance of his duty, and compel him to seek for relief. The fcver most prevalent here is the continued, which, in the early stage is easily cut short, and the disease may almost always be subducd by a general bleeding, or the application of lcechcs to the temples when requisite, and in other instances without these measures, by an active purgative aided by 4 , or 5 grains of calomel, and an equal quantity of James's powder at bed time, followed up next day by the saline antimonial solution. The blood in such cases is seldom buffed, but the crassamentum is always firm. form occur, in which, when the symptoms have been allowed to go on for a day or two uncheeked, some inportant organ becomes involved, the brain and liver in particular at this station being liable to be effected, and congestion may exist in cither or both of these organs on the admission of the patient. Such cases, of what may be called the congestive form of fever, require much discrimination and tact in the treatment ; general bleeding should be less freely practiced, but the local abstraction of blood is urgently requircd, by which, with free purging and the judicious use of mercury, to obtain its anti-inflammatory action on the system and equalis免ing effcct on the circulation, the local complication is remored, and the inflammatory state of the system subdued; the mereury is best given for
this purpose in the form of calornel in four grain doses, as before mentioned, with the same quantity of James's powder, and repeated three or four times daily. In such cases it las been frequently observed, that the symptoms within a $f \in w$ days assume a typhoid type, with a dark dry tongue, and a petechial skin, but in no instance has the disease acquired the contagious property of the typhns of Europe, although in many other respects it may be said to be the same disease; its duration seldom exceeds 7 or 8 days, buta comatose state, as in typhus, precedes death.

## Remittent \& Intermittent Fevers.

The remittent and intermittent forms of focer will be observed to be of rare occurrence at Madras, two of the first, and ten of the second type having only been recorded by the medical officers of Her Majesty's service in the whole number of this class, 1744; the sources of these fevers, are not found to exist in a virulent or extensive degree in or near Madras, and the greater number of the cases which are entered in the tables of the sick of the General hospital, European and native, have been transferred from outstations, or were received from on board-ship, from Bombay, Calcutta and the eastern ports.

Cholera. Chotera, it will be observed has been attended with its usual high rate of mortality, it has occasioned fulls a fourth part of all the deaths; nothing particular has been remarked in the treatment; latterly warm saline enemata, f.equently exhibited, as recommended by Dr. Murray Inspector of H. M.'s hospitals, have been thought beneficial in rousing the system from the collapsed state, and in many instances, it has contributed essentially to the recorery of the patient. Quinine in ten grain doses given before the stage of collapse set in, has had in many instances a good effeet in checking the course of the disease.

Dysentery. Dysentery, forms nearly a tenth part of the whole admissions, and the mortality caused by it, amounts to a third part of all the deaths; the ratio of mortality from this disease on the sick treated, is about 5 per cent, and it is worthy of remark that during the seven years inchnded in
the foregoing tables it has been steadily at the same ratio, except in 1834 when it amounted to fully 10 per cent.

Fortunate indecd would it be for the soldier, and greatly less harassing to the anxious mind of the physician, were this disease ushored in with less equivocal symptoms than it often is. In numerous instances, and in many of the fatal eases, it has been noted, that the patients had been going about, suffering under the clisease for four, five and six days, and apparently not aware of their dangerous state; and in many of them it has been observed, that febrile symptoms, neither preceded, nor attended the disease throughout its whole course; and generally when fever was present it was slight.

The porportion of eases complicated with hepatic disease, cannot be ascertained, but they are known to have been of very frequent ocourrence, and abscess in the liver has been found occasionally after death.

The treatment by the several medical officers of Her Majesty's regiments, during the time included in these remarks, has varied but little; and consisted of general and local bleeding, calomel and ipecacuan, each in five or ten grain doses, three times daily, with or without opium ; blue pill having been occasionally substituted for the calomel; oily laxatives; blisters and antimonial ointment to the abdomen; the patient being restricted to a low mild dict; and tonics cxhibited during convalescence. The greatest number of cases of this disease and diarrhœa have occurred at the beginning of, and during the wet season.

Hepatitis. Hepalitis, is next in importance, the proportion of cases being about a twenty-third part of all the admissions; and an eighth part of all the mortality being occasioned by it. When early presented for treatment, it has been in geucral easily removed by depletion, general and local; purgatives; and mercury continucd till its specific effect on the system was produced. When the untoward termination in abscess
has taken place, which in most instances can be easily recognised from the history of the case, attention to the constitutional symptoms, and the persistence of tension over the epigastric space ; an early and free exit to the matter, before the strength of the patient has become much sunk, is of great importance ; the mode of puncturing the liver recommended, and adopted by the late Doctor Murray, bids fair to be of advantage in such cases ; he employed a long flat trocar, which he introduced between the cartilages of the $7 \mathrm{th}, 8 \mathrm{th}$ or 9 th ribs or epigastrum as circumstances pointed out; occasionally an exploratory needle (a very small, flat, canular instrument) having been previously introduced to ascertain the presence of matter ; in no case even in those where an abscess had not been present, has either the puncture of the needle, or the wound of the trocar been followed with peritonitic inflammation, or effusion into the abdomen either of blood, or pus; adhesive inflammation appearing from post mortem examinations to have been excited within twenty-four hours, round the aperture; and by keeping the canula inserted for that length of time all chance of the escape of matter into the abdomen is averted; further it is observed, that the peculiar function of the abdominal muscles, which is to keep the viscera in constant contact with each other, tends greatly to prevent effusion fiom any collapse of the liver, on the evacuation of the contents of an abscess. Within the last ferw years, Dr. Murray operated in 17 cases without any bad consequences following, and six of his patients have recovered. By giving an early exit to the matter and employing the necessary constitutional treatment (such as mild alteratives with tonics, and counter irritation,) the chances of recovery are much increased. In cases where more than one abscess may exist, it has been objected, that this operation must be ineffectual ; but it cannot be more so, than a delay in waiting till they enlarge or coalesce, on the contrary it is highly probable that the evacuation of one, may lead to the pointing of the others towards the emptied cyst.

Diseases of the Chest.

The diseases of the chest will be observed to be rather numerous, but the mortality except from
phthisis is not great, in these cases the disease had been excited cither in Europe, or in New South Wales, from whence I1. M.'s regiments frequently arrive.

It would have been desirable to have contrasted the sickness and mortality of the European Artillery stationed in the Fort, with that in H. M.'s regiments, but this cannot be accomplished, as the sick of the Artillery are treated in the general hospital, and embodied in the returns of that institution. It is generally acknowledged however, that they are more healthy, from their quarters being more airy, and the nature of their duties requiring less exposure either by day or night.

General re-
markson the The general table No. 4 of Europcan military marks,on the table of Eu ropean miliropean miii- Majesty's regiments, the Artillery, Ordnance de-
tary sick. partment, Artificers, which latter with the Non-Commissioned Staff of the garrison, are treated in the general hospital, will shew clearly the total amount of sickness and mortality from the most important diseascs, during that period, for each half year, with the percentage of sick to strength, and deaths to disease.

It will be observed that a considerable increase in both siekness and mortality, occur during the scoond half of the year, bcing caused principally by cholera, diarrhœa, dysentery.

The arerage annual percentage of sick, to strength, has been 186; of mortality, to sick treated, $2 \frac{1}{3}$; of deaths, to strength, $4 \frac{1}{1}$ annually, which proportions have been pretty uniform throughout the whole period; in 1837, the proportion of deaths to strength, is double the average now stated, the increase of the mortality that year having been occasioned by cholera.

The nomenclature of diseases having been altered and enlarged in 1833, by order of the Medical Board another
more comprehensive table No. 5 is appended exhibiting the specific diseases in each of the classes therein mentioned, during a period of five years, from 1834 , to 1838 inclusive. 'Lhe total of each class of disease is shewn, with the mortality, and the percentage of admissions to the strength, and of deaths to the number treated.

The most numerous admissions have been from the class of fevers, abdominal complaints, venereal, rheumatism, and diseases of the liver, of the lungs and of the brain; and the greatest mortality has been caused by cholera, (which is kept distinct in the table, and placed next to the class of fevers) liver, and bowel complaints, diseases of the lungs, and dropsies, the average percentage of sick to strength, during these five years, being 221, and of deaths to sick treated, about 2.th ; of deaths to strength 4.895 .

MADRAS.

It may be useful also to notice here, the diseases of the women and children. A tahle for the same period has been

framed shewing the average strength, and the nature, and amount of disease, with the mortality amongst them.


PRESIDENCY DIVISION.

No. 4-Return of Sick of the European Troops exhibiting the half Yearly, Admissions and Deaths from the principal diseases,and those which have becn either Epidcmic or Endemic, during the period of ten Years-from 1829, to 1838 indusive.


Alstract of the preceding Returns, shewing the Total number of Admissions and Dealhs, fo. from 1829 to 1838.



Disenses of It has been observed, that children within the Children. first year after their arrival in this country, whether from England, New South Wales, or the Cape of "Good Hope," but especially from the latter place, become emaciated, suffer from disordered bowels, and fall into a state of marasmus by which many are cut off. The mesenteric glands on dissection are invariably found hypertrophied and the intestines contracted ; the liver also, is in some cases enlarged.

Tonics, quinine with nourishing food and wine are the most useful remedies in the treatnent of this disease, and in some cases the tincture of iodine has had a good effect.

Remarkable The following interesting case of convulsions case of con-
vulsions. which occurred in a boy aged 7 years, is from the rapidity of its progress worthy of being recorded; he was admitted March 4th with slight diarrhœea, for which he had a dose of castor oil, and next day his bowels were in a perfectly natural state; on the morning of the 6 th, between 6 and 7 o'clock, he was observed to have some degree of stupor, and shortly afterwards was affected with convulsive movements of the muscles of the limbs, neck and face, the pupils became dilated, and the countenance assumed a livid hue round the mouth and eyes ; the whole body was violently agitated with convulsions especially the left side ; in a short time the right side became entirely paralytic and motionless, but the convulsions continued to affect the other side every 8 , or 10 minutes, until deatl, which took place a little before 9 o'clock. A.m. Cold water was sprinkled over the face, and some stimulants were at first administered; a vein in the arm, and the temporal arteries were opened at 7 o'clock, but even then he had scarcely any pulse, and appeared to be sinking fast, and very little blood was obtained; a blister to the nape of the neck, and sinapisms to the feet were applied, without any effect. On dissection, the vessels on the surface of the brain were found to be very turgid, and the right ventricle greatly distended with bloody serum ; the left ventricle was in a natural state, and the
other parts of the brain appeared healthy. The table will shew the gencrally fatal nature of these diseases.

European children are likewise subject to a discharge from the vagina, on attaining their 7th or 8th ycar; the fluid is commonly of a muco-purulent appearance, and at times is in such quantity, as to affect the general health, inducing weakness, wasting, and loss of appetite; sometimes pain is felt about the uterine region, with uneasiness and scalding in voiding the urine.

Treatment. Strict attention to cleanliness, with local astringents, tonics, particularly chalybeates, and the frequent use of the cold affusion have proved effectual in removing this complaint.

Native troops The Troops forming the Native part of the stationed at Madras. Force, are usually three Regiments of infantry, which are hitted, one at Vepery, a second at Perambore, and the third, a veteran battalion, is located in Blacktown.

Vepery The lines in Vepery are situated immediately Lines. to the south of the principal street of the village, on a space of ground 370 yards in length, by 200 in breadth, which is insufficient for the entire regiment, and consequently two companies are placed on the opposite side of the street.

The huts which are in rows are built of mud, and roofed with palmira leaves or straw ; the space allotted to each being 12 feet by 6 , with an enclosure of the same dimensions; the floors are not raised from the ground, and consist of mud mixed with a little chunam; a mat laid thereon with a coarse cumbley usually forms the sepoy's bed, few liaving cots, or furniture of any kind.

The lines are kept as clean as circumstances permit, drains run on each side of the houses, but heretofore during the
rainy seasou, ou account of the principal drain not being properly constructed, the channels were apt to become choked; and the neighbouring locality flooded. This evil has howcver been lately remedied by the drain being efficiently opened.

In the immediate vicinity of the lincs there are several tanks of staguant watcr, which lave been allowed to get into a very offensive state, and are never uscd; the water of one situated near the parade ground however, is made use of by the sepoys in cooking, and for washing; adjoining is a Roman Catholic burying ground which occasionally emits offensive effluvia; these nuisances under ordinary circumstances do not seem to have any very prejudicial effect on the native constituticn, though doubtless they must, in a greater or less degrce, favor the action on the system of any epidemic poison ; and cholcra when it occurs in Madras, accordingly produces considerable havoc in and around these lines"; during the rainy season fever of a remittent form is sometimes severe and fatal in this locality, and catarrhs and rheumatism are also rather frequent ; but in the hot season it has generally been healthy.

Hospital. The Hospital is situated at the north end of the lines, close upon the main street; it is a substantial building raised two fect from the ground, built of brick and tiled, having a verandah on each sidc, with four small rooms taken off the ends ; it consists of one long ward 120 feet by 16 , and is capable of containing 60 patients ; the rooms off the verandahs serve for a surgery, dispensary, bath room and dead room. There is a palisade round the building at a distance of 40 fect, and at the two angles on the north side are a cook-room and privy.

Perambore Lines.

Perambore, where another native regiment is cantoned, is situated threc miles north-west of the Fort, and one mile north of the Vepery barracks. The district under this name comprehends several villages.

The huts of the men are disposed in the same way as at Vepery, in strcets, and constructed of similar materials.

The site of the lines is only five feet above the levcl of the sea, and the ground being uneven, much water lodges in the neighbourhood in the rainy season ; some parts are waste, but a considerable portion is under rice cultivation; the waste parts are very offensive, from being places of common resort for the natives.

The soil though sandy on the surface, is clayey at some depth, and numerous brick-kilns and potteries, surround the lines in every direction, the smoke from which at times renders the atmosphere very disagreeable.

Burying and burning grounds for the dead, are also nunierous round these lines, the latter as usual being very offensive.

The water here, as elsewhere in Madras, is for the most part brackish, containing salts of soda, magnesia and lime, in combination with muriatic and sulphuric acids, as in sea water, though in comparatively small proportions; good water is however found in a tank, and in a well in the mess compound.

Hospital. The hospital is situated close to one end of the lines, it is built of brick and tiled, and raised two feet from the ground ; it consists of one ward 61 feet, by $15 \frac{1}{2}$, and cannot accommodate with comfort more than 30 sick; a verandah surrounds the building, and at the distance of 8 , or 10 yards, a paling (within which also are the offices) encloses the whole. The accommodation is found to be occasionally insufficient for the sick of the regiment.

From what has now been stated, it will appear that these lines are ineligibly situated, and the distance from the Fort where the men are required to be on duty every second weck, is another objection to their position.

The exciting and predisposing causes of acute disease, exist here in a greater degree than in the Vepery lines, and the amount of acute disease in the one, compared with the other, is proportionably greater also, and at this part of the town, as in Vepery, cholera always commits great ravages.

Lines of the Veteran Battalion.

The lines of the Native Veteran Battalion are close to, and within the north wall of Black-town, in the immediate vicinity of the seven wells ; the situation though low, is healthy. The place of arms and hospital are also within the walls, close to the lines.

Hospital. The hospital is built of brick and tiled, with a pent roof, it consists of one long ward capable of containing 40 sick, a range of pillars in the centre supports the roof, which extends so as to form verandahs in front and rear, it also projects at the southern extremity where there are two small rooms, one for a dispensary, the other for the assistant apothecary ; it is well ventilated by doors and windows, but the latter are unprovided with venetians or blinds.

Although the men of this corps suffer chiefly from chronic complaints, the mortality amongst them is generally considerable. The following table shews the nature and amount of disease, with the mortality which has occurred from 1834 , to 1838 inclusive, in the 1st Native Veteran Battalion.


Body Guard The Governor's Body Guard which consists of
lines. two troops of cavalry, may also be considered as forming part of the Garrison ; the Body Guard lines are situated on the west part of the Island close to Government bridge, adjoining the Camp Equipage dcpôt, and are separated from the village of Chintadrapcttah by the river Cooum. The men are allowed to live in any of the surrounding villages, no hutting ground being allotted for them.

Barracks and The barracks and hospital, are in the neigh-
Hospital. bourhood of the horse lines ; the hospital is a small building forming the end of a range of store-rooms, but large enough for the sick of this body of men, who are generally robust, muscular and remarkably healthy, being almost exclusively Mahomedans of respectable families. Exccpt fever acute disease is rare amongst them, and it is gencrally of an ephemeral character and easily cured; within the last two or three years cases of dracunculus have not been unfrequent, this disease has chiefly occurred in men who had been on duty to Coimbatore (a station in the southern division,) but as formerly mentioned, the cause of the disease has been known to exist in the immediate vicinity of their lines for several years past, and it is highly probable that it has been engendered in many of the men in whom it has occurred, in the village of Chintadrapettah.

Duty of the
Native troops, The duty of the native troops, is much the same as that of the Europcan soldier ; they furnish part of the garrison, and other guards; those guards however in exposed situations, are almost exclusively mounted by the native soldier, as his constitution is comparatirely but little affected by the solar heat; they have in like manner drills and parades to attend ; but their duty in general has not been found to be prejudicial to health.

Dict and Their mode of living when off duty is perfectly similar to that of the native population in general, and the majority bcing married, have their families with them; when off duty they resume their native loose
garments, and retain all their native habits and customs. Their food like that of other natives consists of rice, eaten either with condinents, or with curry, the use of beetle nut and tobacco is very general, and some consume the latter to such an extent as to injure their constitutions, and induce a state of marasmus often attended with indigestion, and diarrhœa; others again especially amongst the mussulmans,

Smoking narcotic drugs. are addicted to the smoking of narcotic drugs, with the hookah, the abuse of which brings on a debilitated state of the system with nervous tremor, and not unfrequently temporary delirium which sometimes ends in confirmed mania; whilst in all, sooner or later, the habit is followed by emaciation, weakness, indigestion and fatal diarrlœea; but few of the sepoys comparatively are addicted to the use of ardent spirits. It should here be mentioned with regard to food, that in years of scarcity Government ensures an adequate supply of rice to the sepoy by granting a compensation, which brings it within his means to purchase, so that this portion of the native population is at all times placed, beyond the influence of want.

Remarks on the table of diseases of native troops

A table is appended shewing the nature and amount of the most important diseases, which have occurred during ten years, from 1829, to 1838 inclusive, with the mortality from each. The aggregate strength during that time, has been 60,142 , and the total admissions of sick 25,944 , or 43 per cent annually on the strength, presenting a striking difference in the ratio of sickness amongst them, as compared with European troops; the amount being less than $1-4$ th in the natives ; the proportion of deaths to the sick treated has been $2 \frac{1}{2}$ per cent, nearly the same as amongst the European troops, while that of deaths to the strength has bcen scarcely a fourth part as high, being little more than one per cent annually. The average per centage it will appear holds pretty uniform throughout the decennial period, except in 1837, and 1838, when the mortality was nearly double ; in these two yearr
the deaths to sick, werc 5 per cent, and 2 per cent. on the strength.

The most fatal diseases have becn cholera, diurrhoea, dysentery, intermittent fever, atrophy and rheumatism; the pcrcentage of deaths to the admissions of these and other diseases, is exhibited in the table.

It will be observed, that although more than one half of the admissions occurred during the first semi-annual period, the numbers under the heads "cholera," "diarrhœe,", "dysentery," and "fever" are much increased during the latter half of each year, owing to the prevalence at that time of the general exciting causes of acute disease, viz. cold and wet.

Cholera. The table shews that cholera has prevailed more or less every year, and that epidemic visitations of this disease happened in the years $1831,1832,1833,1837$ and 1838. Of the total number of cases which have occurred viz. 263, with 140 deaths, 108 cases, with 58 deaths, took place in 1833; no cause is stated for the great increase in this year, nor perhaps can any be given, for although Europeans suffered, comparatively to a small extent at that time, the general tables shew, that it has prevailed amongst them in other years, when the natives were almost exempt from it. Fully a fifth part of all the deaths amongst the native military, has been produced by cholera, and the great mortality, ( 53 per cent on the admissions) which has attended it, shews how inefficacious the treatment of this disease still continues to be ; the stimulating plan, aided by the use of calomel and opium, has been that most generally followed.

Diarrhcea. One of the causes of diarrhcea has bcen alluded to in the preceding remarks, viz. the exccssivc use of narcotic drugs, another very frequent exciting cause of it, as well also as of dysentery, is exposure to cold and wet in the rainy scason, and sleeping on damp floors with but scanty cover-
ing ; these diseases are also sometimes occasioned by the use of imperfectly boiled rice, eaten cold in the morning.

The treatment of cases of diarrhœa, occasioned by the long continued abuse of narcotic drugs, and attending a weakly atrophic state of the constitution is always unsatisfactory, and but seldom followed by a thorough, or permanent restoration to health. A course of tonics with gentle alteratives, and carefulatention to diet, with the stimulus of wine or spirits, is requisite; relapses are frequent, for men addicted to narcotics seldom remain longer than a month or two at duty, and are at last very generally lost to the service, by death, or by being discharged. When produced by cold, diarrhœa is more simple, and the treatment less complex; but there is a variety of the complaint, which is frequently observed to occur amongst Europeans as well as natives, during the prevalence of epidemic cholera, and also to precede and follow visitations of that disease, which requires much attention, and careful management. A few grains of calomel however, combined with laudanum or opium, and followed by an oily laxative, soon checks its progress ; and it has been observed in this form of the disease, that the exhibition of five grains of calomel and five of sulphate of quinine, with one grain of opium has been attended with a happy cffect; a gentle dose of rhabarb and magnesia, and the use of bitter tonics for a day or two generally restores the system to a healthy state.* Diarrhœa forms only 1-36th part of all the admissions, but it has caused nearly 1-14th of the mortality.

Dysentery. Dysentery in general is a mild disease as it occurs in the native, compared with this affection in the European, and is of more rare occurrence; the tables shew that little more than one man in two hundred amongst natives has been affected annually, while 17 per cent were

[^13]attacked amongst Europeans. The mortality compared with the number treated appears to be greater amonest the natives, but the fatal cascs have gencrally ocurred in old and worn out men, or the discase existcd for a long time in a chronic form, before admission, in men of dissipater liabits, as formerly alluded to. In such cases, obstinate though not extensive ulceration usually cxists at the caput coosum coli, and at the termination of the ilium, and the patient gencrally dies exhausted as if from inanition. In the treatment much difficulty is always experienced in regulating the diet, for although allowed that which is suitcd to the disease, arronsroot, sago, wine, \&c. the sepoys invariably persist in taking rice and curry in addition, and often in injurious quantities, by which the complaint becomes aggravated. The best treatment has been found to be mild nutritious diet, counter irritation over both iliac regions, particularly the right, tonic decoctions with quinine, but especially the decoction of colomba with lime water in equal parts, with the addition of a fcw grains of ipecacuan; and four or five grains of blue pill, with two or three of ipecacuan and onc of opium giren at bcd time, greatly assist the healing process by correcting the diseased secretions; the mineral acids, especially the nitric, and the sulphates of copper and iron, have also been used with good effcct, but as the curc is always of slow progress, the foregoing plan of treatment will be found best suited to the disease.

In the other and more ordinary cases of dysentery, the symptoms are scldom so acute as to requirc vencsection, and but rarcly the topical abstraction of blood, when however the evacuations arc frequent, slimy, bloody and viscid, and attended with heat and pain in the abdomen, and straining and tenesmus at stool, with fever; a few lecches to each lumbar region but particularly to the left, (for in this form of the disease the inflammation is almost cxclusively confined to the rectum and sigmoid flexure,) rcadily subdue the inflammatory action ; a dose of oil should then be given for the purpose of clearing out the bowels; after which a few dars use of the ipecacuan, in two or three grain doscs, four times
daily, conjoined with a light tonic, as infusion of gentian, restores the diseased bowel to a healthy condition; a small quantity of rhubarb may be added to the mixture, on the sccond or third day with adrantage.

Dysentery constitutes only 1-62d part of the admissions, but the deaths from it amount to 1-18th of the whole mortality.

Hepatitis. The almost total absence of hepatic disease amongst natives, has been observed in a former place, and this will not fail to be remarked in these general tables; there being only 49 cases of hepatitis in 25,944 admissions.

Fever. Fever in its various types forms a large proportion of the admissions, not less than 1 -4th part, and it has produced nearly $1-7$ th of all the mortality ; the most prevalent forms have been the ephemeral, and the quotidian intcrmittent. The small mortality attending the first sufficiently shews its mild nature, being only onc death in every 243 attacks, in the second the mortality has been $2 \frac{1}{3}$ per cent on the number trcated. The large amount of cases of the latter type, (1809,) which have occurred, requires some notice, as it has been stated in the observations on the sick of the European part of the force, that intcrmittent fevers do not prevail to any extensive or virulent degree, in or around Madras.

The native Regiments at the Presidency are usually relicycd in from one to two years, and many of them come from parts of the country where both intermittent and remittent fevers, of a bad type, are endemic, especially the Ceded Districts, Mysore, and the Tenasserim Coast; and, as the medical returns of regiments, are furnished to the division in which the corps may happen to be on the last day of the half year to which they refer, although the regiment may not have been more than a few days stationcdin it, it frequently
happens not only here, but throughout the whole army, that the diseascs and deaths which have occurred during the four or five first noonths of the half ycar, in one division, are included in the returns of another scveral hundred milcs distant. T'o particularize a few such instances, this took place in the Presidency division, on the arrival of the 5 th N. I. from the Tcnasserim Coast, in 1834; of the 17th from the Ccded Districts, in 1836 ; and of the 19th from Mysorc, in 1838 ; a vcry large majority of the cases, and fully 3 -4ths of the number of deaths occurred under these circumstances, while again, as has been invariably remarked, the men of these regiments coutinue for a considerablc time, subject to relapses on slight exposure ; and in this way attacks of intermittent and remittent fevers, are occasionally seen at the Presidency. But further, detachments are not unfrequently sent to various out-stations on commaud, and the number of cases of fever which occur in these bodies of men is notoriously great, it not bcing unusual for the whole of a party to be attacked, and all these cases are included in the returns from the Head Quarters of the regiment. It has also been observed, and the fact seems to be generally acknowledged, that sickly regiments arriving from unhealthy malarious stations, soon regain their health and strength at Madras.

These observations are considered to afford a satisfactory explanation of the frcquency of intermittent and remittent fevers, shown in the returns of this division. It is quite true however, that these cliseases are at times of local origin, but not frequently, and they are in general mild, seldom fatal, and can very generally be removed without the aid of quinine, by a purgative, one or two doses of calomel at bed time: and the solution of neutral salts, with tartrate of antimony.

In the remittent type, after the inflammatory state of the system and the local complication, which generally affects the head, have been subdued by a few leeches, (for it is seldom so acute as to require V. S.) a smart purgative, and the use of the solution just mentioned, quinine is given to cleck the ten-
dency which is found to exist in this fever to lapse into the intermittent form ; but, should the inflammatory symptoms resist the first treatment, as occasionally happens, there is great danger of effusion taking place in the head, and this is best averted by a repetition of the leeches, and the continuance of the calomel to affect the system, along with counter irritation to the mape of the neck.

It may be instructive, as well as interesting to shew here in a tabular form, the proportion which the admissions, from each of the more important diseases, among European and Native troops bear to the total sick, with the proportion of deaths to the whole mortality, for the purpose of contrasting the result in each of these bodies of men.
Table shewing the number of Admissions and antount of Mortality from the most partieular diseases amongst both European and Native Troops at the Presidency during the period of ten years, from 1829 to 183 is inetusive, with the proportion each bears to the total number of Admissious and Deaths: the contrast in these respeets in several of the eolumns of disease between the European and Native sick, is very remarkablc.

Mortality to the strength; it also the annual pereentage of Admissions to the strength; of Deaths to the siek treated; and the percentage of it also exhibits the differcnee amongst European and Native sick in these respeets.


A second table No. 7 similar to that for Europeans, and of an equally comprehensive nature, and for the same period, riz. 5 years, has been made out for the Native part of the force; the diseases are similarly classified and the total admissions from each species and class of disease are shown, with the mortality, and the proportions of sick to strength, and of deaths to sick treated.

The most numerous admissions have been from the class of fevers, diseases of the abdominal viscera, venereal affections and diseases of the lungs; the greatest mortality has been occasioned by cholera, diseases of the abdomen, fever, chest affections, diseases of the brain, dropsies, and specific diseases, in which latter is included atrophy, from which nearly all the mortality occurring in this class has been produced; the peculiar state of the system denoted by the term atrophy, las been explained in the observations on that disease, under the head "General Hospital," and the same remarks apply to it equally as it occurs in the Native troops.

The annual average percentage of sick to strength during these five years has been $43 \frac{1}{2}$, of deaths to sick $3 \frac{1}{2}$, and of deaths to strength $1 \frac{1}{2}$.

From this and the corresponding table for Europeans, the following tabular statements have been framed; the first exhibits the amount of admissions and deaths, which have occurred from the more important classes of disease, and the proportion which the attacks and deaths from cach, bear to the total admissions and mortality ; the difference is also shewn in these points amongst the Europcan and native sick. The second cxhibits the percentage of sick to strength, and of mortality to disease ; and likewise of deaths to strength in the same classes of disease; and further points out the contrast in these respects, amongst the European and uative sick.
Amount of Diseases and Deaths from the several classes of diseases during five years from 1831 to 1838 , with the average proportions of 1 dmissions and Deaths.

|  | Fevers. |  | Cholcra. |  | Dysenteria. |  | Abdominal eomplaints. |  | Diseases of liver. |  | Diseases of lungs. |  | $\begin{aligned} & \text { Diseases } \\ & \text { of brain. } \end{aligned}$ |  | Dropsies. |  | Rheumatic affections. |  | Venereal complaints. |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 追 |  | $\begin{aligned} & \dot{\sim}+1 \\ & \underset{\sim}{2} \end{aligned}$ |  | 高 |  |  |  | $\begin{aligned} & \dot{\text { à }} \\ & \text { è } \end{aligned}$ |  | $\begin{gathered} \text { ò } \\ \text { an } \end{gathered}$ |  | oíc |  | $\begin{aligned} & \dot{\circ} \\ & \stackrel{y}{w} \end{aligned}$ |  | $\underset{\sim}{\circ}$ |  | $\stackrel{8}{8}$ |
| Europeans. <br> Total Admissions.. 9,986 | 1462 | $\underline{I}$ | 92 | $1{ }^{1} 8$ | 945 |  | 1297 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Total Deaths. .... 221 | 6 | $\frac{1}{73}$ | 46 |  | 545 50 |  | 11 | $\frac{1}{1} \overline{0}$ |  | $\frac{1}{7}$ |  |  | 14 |  |  |  | 5 |  |  |  |
| Natives. <br> Total Admissions.. 8,816 | 2241 | $\frac{1}{4}$ | 95 |  | 195 |  | 587 | 1 |  |  |  |  |  |  |  |  | 841 |  |  |  |
| Total Deaths.... 320 |  |  |  |  |  |  |  | $\stackrel{1}{9}$ |  |  |  |  |  |  |  |  | 14 |  |  |  |

Table No. 2 shewing the pereentage of Admissions to strength and that of Deaths to siek and strength in the same elasses of discase.

|  | Fevers. | Cholera. | Dysenteria. | Abdominal complaints. | Diseases of liver. | Diseases of lungs. | Diseases of brain. | Dropsies. | Rhe affec | $\begin{aligned} & \text { atie } \\ & \text { us. } \end{aligned}$ | Vene | $\begin{aligned} & \text { eral } \\ & \text { ius. } \end{aligned}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Europeans. Strength.............4,514 |  |  |  |  |  |  |  |  |  |  |  |  |
| Pereentage of Siek to strength.... | $32 \cdot 388$ | $2 \cdot 038$ | $20 \cdot 934$ | $28 \cdot 732$ | $12 \cdot 848$ | $12 \cdot 603$ | $12 \cdot 405$ | 0 - 0 30 | 16 |  | 37 |  |
| do. of Deatis to sick... | $\begin{array}{rrr}0 & \cdot 110 \\ 0 & \cdot 132\end{array}$ | $50 \cdot 0$ | 5 <br> 5 <br> 1 <br> 1$\cdot 9240$ | - $0 \cdot 848$ | $5 \cdot 0$ | $3 \cdot 490$ | $2 \cdot 500$ | $10 \cdot 045$ | 0 |  | 0 |  |
| do. Natives. |  | $1 \cdot 019$ | $1 \cdot 240$ | $0 \cdot 242$ | $0 \cdot 6.42$ | $0 \cdot 443$ | 0-310 | $0 \cdot 17 \%$ | 0 | - 310 | 0 | -0<8 |
| Strength.......... 20,253 |  |  |  |  |  |  |  |  |  |  |  |  |
| crentage or sick to strength. do. of Dealis to | 11.065 | 0-469 | 0-962 | $2 \cdot 898$ | $0 \cdot 098$ | $1 \cdot 076$ | $0 \cdot 834$ | 0-296 | 4 |  | 2 | 221 |
| do. of Deaths to strength.. | (1) $\begin{gathered}2 \\ 0 \\ 0\end{gathered}$ | 60 0 $0^{(28)}$ |  | 5 4 <br> 0 4 <br> 0 $\cdot 158$ | 20 ${ }^{0} \cdot 0$ | $\begin{array}{rrr}11 & 000 \\ 0 & 0138\end{array}$ | ${ }^{9} \cdot 167$ | 30 0 0 0 | 1 |  | 0 | - 444 |

No. 6-Return of Sich of the Native Troops exhbitmg the half Yearly Admissions and Doaths from the principal diseases, and those which have been cither Epidemic or Endemzic, during the period of ten Years-from 1829 to 1838 inclusive.

$=1$
$=-$

Abstruel of the preceding Returns, sleeving the Total number of Admissions and Deaths, \&c. from 1829 to 1838.



## CONCLUDING REMARKS.

General re- As respects the health of the European portion marks on the health of the European residents of Madras.
of the community in general, not included in the returns of the sick of the Presidency, which are annexed, it may be observed, that notwithstanding the existence of luxuriant, and in many situations uncontrolled vegetation; stagnant and offensive tanks, and lodgements of water; imperfect drainage and its consequences; and the influence of a vertical sun, Madras is perhaps, as healthy a city as can be found within the tropics, or even in ecme of the more temperate climes, and howercr inexplicable the immunity from epidemic diseases, which it usually enjoys, may be under these circumstances, such is however known to be the fact ; for with the exccption of cholera, which occasionally makes its appearance here, as well as in most other large towns throughout India, and of which it may be said "Equo pulsat pede, pauperum tabernas, regumque turres," scarce any other epidemic is met with amongst Europeans; the fevers and dysenteric cemplaints so general throughout most other parts of the country, being of rare occurrence.

The continued influence of the climate howcver acting on European constitutions sooner or later (with the cxception of some f.w persons who may be said to have become as it were naturalized by a long residence in India) induces chronic derangement of the hepatic sjstem usually characterized by some of the various forms of dyspepsia, and a torpid state of the bowels, requiring the frequent, and often daily use of apcrients, or encmata; and ultimately a change to a more tcmperate climate for its removal.

European females being but little in the open air, and seldem if ever exposed to the direct influcnce of the sun, soon lose the blocm of healith (or European complexion), but notwithstanding the etiolated appoasance which the countenance assumes, they may be said to cujoy a fair share of
health; many indeed having much better health than when in their native country; those of wcakly constitutions however, arc often great sufferers from the encrvating influence of the climate; and to its relaxing effects on the system is doubtless to be ascribed the comparativcly trifling degrec of bodily suffering, which attends child birth, which here, as in southern Europe, is seldom protracted, or difficult.

## APPENDIX.

register of meteorological observations, made at madras in july, 1810.

REGIS'TER OF METVOROLOGIC:LL OBSERFITIONS, MADE AT M.ADRAN IN AUGUST, 1840.

REGISTER OT METEOROLOGIC.1L OBSERV ATIONS, MADE AT MADRAS IN SEPTEMBER, 1810.

REGISTER OF METEOROLOGICAL OBSERVATIONS, MADE AT MADRAS IN OCTOBER 1840.



REGISTER OF METEOROLOGYCAL OBSERYATIONS, MADE AT MADRAS IN DECEMBER, 1840.

REGISTER OF WEYEOROLOGICAL OBSERLATIONS, MADE AT MJDRAS IN JANUARY, 1811.

register of meteorological observations, made at madras in fpbruary, 1841.

HEGISTER OF METEOROLOGICAL OBSERFATIONS, MADLA AT MADRIS IN MARCII, 1841.

REGISTER OF METEOROLOGTCAL OBSERF.ATIONS, MADE AT MADRAS APRIL, 1841.


[^14]TEGINTER OF METEOROLOGICAL OBSERTHTIOAS, MADE AT MADIAS IN MAY, 1841.

register of meteorological observations, made at madras in June, 1841.


[^15]REGISTEIT OF METEOROLOGTCAL OBSEIFITTIONS M.ADE AT M.ADR.AS IV JULY, 1811.

register of meteorologicil obserfations made at madras august, 1841.


[^16]HICLSTER OF METYOROLOGICAK, OBSERVATIONS, MADE AT MAHRAS IN SEPTEMBER, 1841

REGISTER OF METEOROLOGYCAL OBSERVATIONS, MADE AT MADRAS IN OCTOBER, 1811.

REGISTER OF METHOROLOGTCAL OBSERFATIONS .M.ADE AT MADI:AS IN NOFEMBLIR, 181!

REGISTER OF METEOROLOGICAL OBSELIATIONS MADH AT MADHAS DECHTBER, 1841.



IREGSTER OF METEOROLOGICAL OBSERVATIONS，MADE AT MADRAS IN FEBRUARY， 1842.



REGISTER OF METEOROLOGICAL OBSERIATIONS MADE AT MADRAS IN APRIL, 1842.

riegistrin of meteofologic.ll obserfationis, made at hadras in haf, 1842.

REGTSTER OF METEOROLOGICAL OBSERVATIONS, MADE AT MADRAS INV JUNE, 1818.

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| :---: | :---: | :---: |




[^0]:    * It may be mentioned here that the fine polish of the plaster, in the buildings of Madras, is obtained by the admixture of this pure sand with shell mortar.

[^1]:    * Milk coagulated and slightly acidulons.

[^2]:    * The Easterly and South S. E. wind.

[^3]:    Small Pox and Vaccination. Sinall Pox occasionally prevails epidemically: though much is done to eheck its progress and extension by the raccine department. There is

[^4]:    * Aclepias gigantea.

[^5]:    * The highest numbers rcceiving food from the Choultry at one time, during this ycar, were as follows:-

    At the Choultry Depot. . . . . . . . . . . . . . 39,017
    , Trivatoor do. ................... 31,866
    " Aroombakum .................... 9, 150
    Total. 80,033
    and the highest numbers employed on public works exclusive of those fed were, Under the orders of the Chief Engincer. . 16,647

    Do. do. Superintending do. 1,500 Under the orders of the Superintendent of Public Roads. . . . . . . . . . . . . . . . . . . . . . .
    Do. Inspector of Streets and Roads.
    No. Master A, 200
    Do. Superintendert 100
    o. Superintendeat Gun Carriage

    Manufactory............................ . 67
    Total. 22,684

[^6]:    + Containing one eighth of a grain of tartrate of antimony, in each ouncc.

[^7]:    * The following Regulations, for the admission of Private Students, or persons not in the Public Service, to the benefits of the course of instruction given at the Medical School, having been approved of by the Right Honorable the Governor in Council, are published for general information.

    1. Applicants for admission not to be under 15 , nor above 20 years of age.
    2. To possess a sufficient knowledge of the English language, and of the other branches of ordinary edncation, to qualify them for the study; an elementary knowledge of Latin being desirable, but not indispensable.
    3. Their qualifications to be ascertained by examination by the Medical Board, after which, if found cligible, their adinission will be sanctioned.
    4. On being enrolled as students, they are to be subject, exactly in the same manner as those of the Public Service, to all the preseut rules for the internal conduct of the Institution, and to such others as recessity may suggest, for the class of Pupils to which they belong, for the purpose of securing attention, regular attendance, \&c.
[^8]:    * The number remaining December 1829 are not ineluded in the column of admissions, which will explain the increase in seyeral of the other columne under the head "disclarged."

[^9]:    *From 1829 to 1838 inclusive.

[^10]:    *From 1 E29 to $1 \varepsilon 38$ inclusive.

[^11]:    * The cases of Punitio are never so severe as to unfit the prisoners for labour for more than 24 hours; the number of stripes inflicted being restricted to three dozens, but seldom exceed two dozen.

[^12]:    * A collection of cottages occupied by married soldiers.

[^13]:    * In similar cases amongst Europeans ten grains of calomel with one of opiun, has been generally given, followed in 3 or 4 hours by a laxative, and with very successful results.

[^14]:    The ahour obsurvations were kept at the loort Dispensury

[^15]:    The nbove Obsorvations were kept at the Fort Dispeusary.

[^16]:    The alsove obsurvations were kept at the Fort Dispensary.

