

in France, to eighty miles west of Dunmore Head in the south-west of Ireland.

The following are the resulting heights, velocities, &c., of the two fireballs, which have been computed from a considerable number of descriptions forwarded to me from many parts of the country:—

1913, June 14.			
G.M.T. ... ..	8h. 4m.	...	10h. 0m.
Magnitude	= much brighter than	▷	brighter than ▷
Height at first	= 77 miles		54 miles
" end	= 29 "		54 "
Luminous course	= 58 "		490 "
Velocity per second	= 22 "		26 "
Radiant point	= 263° + 64°		282° - 23°
Name of meteor	= ζ Draconid		ψ Sagittarid

Long as the flight of 490 miles undoubtedly is for the second fireball, it is probably much less than the actual course. When the object was last seen from Ireland it was really rising in the air, and was still burning strongly when low apparent altitude carried it behind either trees or buildings, as viewed by several observers. I suppose it is possible for a meteor to escape out of the atmosphere when its flight is horizontal and its material capable of withstanding absolute disintegration. We want more observations from the west of Ireland.

The daylight fireball at 8h. 4m. left a streak for about three minutes, and several of the observers state that a noise like thunder followed its disruption in two or three minutes. One person at Watford avers that he is certain the meteor was not more than twenty yards distant from where he stood, for he witnessed the object descend in front of some trees.

W. F. DENNING.

#### THE STATE AND MEDICAL RESEARCH.

A COMMITTEE with executive functions, to be known as the Medical Research Committee, has been appointed for the purpose of dealing with the money made available for research under the Insurance Act. The Committee is constituted as follows:—

The Right Hon. Lord Moulton of Bank, F.R.S. (chairman).

Dr. C. Addison, M.P.

Mr. Waldorf Astor, M.P.

Sir T. Clifford Allbutt, K.C.B., F.R.S., Regius professor of physic, University of Cambridge.

Mr. C. J. Bond, senior honorary surgeon, Leicester Infirmary.

Dr. W. Bulloch, F.R.S., bacteriologist to the London Hospital, and professor of bacteriology in the University of London.

Prof. M. Hay, professor of forensic medicine and public health, Aberdeen University.

Dr. F. Gowland Hopkins, F.R.S., reader in chemical physiology in the University of Cambridge.

Sir W. B. Leishman, F.R.S., professor of pathology, Royal Army Medical College.

The appointment of the Committee is the outcome of the final report of the Departmental Committee on Tuberculosis, which was summarised in an article in *NATURE* on April 24 (vol. xci, p. 191). In this report the Committee

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recommended the appointment of an Advisory Council and an Executive Committee, and both have now been constituted. The Advisory Council is to make suggestions, and to submit the Executive Committee's budget to the Government, and to advise the Executive Committee.

The Executive Committee is to frame a budget to be considered with the Advisory Council before being submitted to the Government; to determine the scheme of research work; to make periodic reports, and generally to organise and supervise research work.

The Departmental Committee suggested that the work of research could be carried out advantageously on the following, among other, lines:—

(a) A central bureau should be established and should be the headquarters of the Advisory Council and Executive Committee. The central bureau should have a statistical and sociological department, in the work of which should be included the coordination and correlation of results. With regard to statistical investigations, every effort should be made to utilise, where possible, and cooperate with the statistical departments of the different Government departments. Statistics should be so collected and framed as to be comparable with the existing statistics of mortality.

There should also be a library and publishing department. The central bureau should be under the immediate control of the Executive Committee.

(b) Clinical, pathological, bacteriological, chemical, and other scientific researches should be carried out by competent investigators employed by the Executive Committee in institutions approved by it.

(c) When the Government, on the recommendation of the Executive Committee, and after consulting the Advisory Council, deems such arrangements desirable, researches of the same nature as those referred to in the preceding paragraph should be carried out in an institution or institutions (including laboratories and hospital wards) which should be under the immediate control of the Executive Committee to the extent and for the purpose in question.

(d) Money should be available in order that special inquiries—*e.g.* of a statistical and sociological nature—should be carried out by the Executive Committee if necessary, independently of any particular institution.

(e) The question whether a sum of money, not exceeding 100*l.* per annum, should be available as a prize or prizes for the best original research work done should be considered. The money should only be awarded if the discovery is of sufficient importance and utility.

As regards research workers the Departmental Committee recommended that some workers of proved and exceptional ability should be enabled to devote their whole time to research work, and should be given a definite and adequate salary, and be entitled to a pension. The Committee also considered that efforts should be made to retain for research work young and talented investigators who would otherwise tend to drift into other lines.

The Departmental Committee computed that the income for the purposes of research under the Insurance Act will amount to about 57,000*l.* a year, and the Medical Research Committee will be called upon to draw up a general plan of research to be entered upon at once, and to be carried out year by year. But before the Minister respon-

sible for national health insurance consents to the adoption of the plans of the Research Committee they will be subjected to examination and criticism by the Advisory Council, which is a large and representative body including most of the members of the Departmental Committee. It was appointed by Mr. Lloyd George after receiving suggestions for suitable names from each of the universities of the United Kingdom, from the Royal Colleges of Physicians and of Surgeons, from the Royal Society, and from other public bodies interested in the question. It includes medical representatives of the four National Health Insurance Commissions, and the other Government departments concerned in medical work.

*SIR JONATHAN HUTCHINSON, F.R.S.*

WHEN the history of modern medicine comes to be written it is certain that Sir Jonathan Hutchinson, who died in his eighty-fifth year at Haslemere on June 23, will occupy a more prominent position than that usually assigned to him by his contemporaries. He had the misfortune to be at work when Pasteur and Lister opened up new, attractive, and practical fields of research, carrying with them all the eager intellects of a younger generation, and leaving the subject of this notice to explore the inexhaustible fields of clinical medicine. From the year 1844, when he was apprenticed to Dr. Caleb Williams, of York, at the age of sixteen, until the day of his death, within a month of finishing his eighty-fifth year, he never ceased to study the manifestations of health and disease, and to place his observations and inferences on record.

Sir Jonathan Hutchinson was an inductive philosopher who patiently and accurately collected facts to provide a sure basis for the principles of scientific medicine. The monument he leaves behind him is seen in the volumes of the "Archives of Surgery," "Atlas of Illustrations of Clinical Surgery," and the hundreds of clinical records which are to be found in medical literature of the last fifty years. He leaves behind him no brilliant discovery to fix his name in the public memory, and yet it may be claimed for him that he did more than any man of his time to solidify the foundations of the surgeon's art.

He was a self-made surgeon, neither the follower nor the leader of any school. It is true that after coming to London in 1850, at the age of twenty-two, he came under the influence of Lawrence and of Paget at St. Bartholomew's Hospital for a few months, but the spirit which dominated him when he ultimately settled in London was the quiet inquiring and observing mood which he acquired in the seclusion of his Quaker home in Selby. Before he was in his thirtieth year he was on the staff of the leading eye hospital (Moorfields), Blackfriars Hospital for Diseases of the Skin, the Metropolitan and the London Hospitals, where he had to deal with all the problems of general surgery.

With those great and varied clinical fields at

his disposal he was able, in less than ten years from the time he settled in London, to produce convincing proof that a host of conditions which were regarded as separate diseases were really the remote manifestations of syphilis, and amenable to specific remedies.

The varied and puzzling diseases to which the skin was liable had a special attraction for Sir Jonathan Hutchinson, and it was at an early stage of his career that he began a systematic investigation of the cause and nature of leprosy. In 1859 he came to the conclusion that it was due to eating imperfectly preserved fish, and that the disease was therefore non-contagious and preventable. Fifty years later found him still searching in various parts of the earth for evidence to support his original contention.

The persistency which he applied to the study of leprosy he gave to all the various lines of research he took up. He was a student of growth; he never ceased recording facts and cases which were likely to reveal the principles which regulate the growth and development of the animal body. His lectures at the Royal College of Surgeons in 1881 on the pedigree of disease are happy illustrations of the methods by which he sought to advance this kind of knowledge. He was a surgeon who made a reputation not by the use of the operating knife, but by the application of his intellect to the understanding and cure of disease. He operated with success; he introduced new procedures, but he recognised that recourse to operation was necessitated by the imperfections of the healer's art.

He was an educationist, believing that all teaching should be objective. He did much as chairman of the Museum Committee and as president of the College of Surgeons for the great museum founded by John Hunter; he established and furnished three museums in the Polyclinic (Medical Graduates' College) in Chenies Street, in his native town of Selby, and in Haslemere, where he latterly made his home.

*NOTES.*

WE heartily congratulate Dr. A. F. R. Wollaston on his return from a successful visit to the Ingkipulu Mountains (Nassau range), Netherlands New Guinea. Last year Dr. Wollaston gave an account of the unlucky attempt of the British Ornithologists' Union Expedition in "Pygmies and Papuans," and quite recently Capt. C. G. Rawling has published another book on the same expedition, "The Land of the New Guinea Pygmies." On the present occasion Mr. C. B. Kloss, curator of the Kuala Lumpur Museum, accompanied Dr. Wollaston, and, in addition to an engineer and five native collectors, they took with them seventy-five "Dyaks," and a large escort was provided by the Netherlands Government. Four and a half months were occupied in reaching the mountains from the coast. The geographical results cannot be worked out for some time. Extensive zoological collections were made which comprise many new species; among