

(1) The entire ship's company of the man-o'-war which took my expedition to the islands was inoculated. Communication with the shore at the various ports was as far as possible avoided; but this ideal was not entirely attained. Not one case developed.

(2) Every member of my expedition was inoculated at least four times in three months. Not a single case developed, although the risk of infection was no small one, when it is remembered that in Samoa alone one-fifth of the entire population was wiped out by the scourge. Two officers had an illness of four to five days, not as severe as the influenza of normal times.

(3) An interesting experiment to test the efficacy of the vaccine was provided by the Governor of American Samoa, who sent, against the wishes of British Samoa, forty natives from Pago Pago (a clean port) to Apia during the progress of the epidemic. These were isolated, inoculated and not released until judged to be in a positive phase. Not one contracted the disease and the Secretary of Native Affairs, who knew their names and villages, reported all clear after a lapse of one month.

(4) Ship's company and passengers of the steamer which brought the expedition from Suva to Sydney were inoculated without exception. We anchored in quarantine in Sydney, and on the second day a case was taken ashore. We remained on board, quarantined, another week. Although the ship was very overcrowded, not another case developed.

(5) The Naval Depot at Williamstown contains a floating population of about five hundred, half of whom live on shore and the rest, of course, have a fair amount of shore leave. All hands have been inoculated twice in the last three months. There have been only ten cases (all mild except two) and no deaths.

The severe reaction in some cases to the lymph used during the small-pox epidemic of 1913 on an unvaccinated adult community has done much harm to what must perforce be called the cause of vaccination in Australia, seeing that the public is nowadays taught that it is entitled to an opinion on subjects it knows nothing about. It may reassure these opinionated objectors to know that in this case at any rate there is little or no reaction. I myself have seen only one reaction in all my inoculations.

Conscientious objectors, if the legislature has not the courage to compel inoculation, should be isolated from the rest of the community, it being pointed out to them that we object not so much to their attempted suicide as to their carrying the disease unmitigated to those who are not tired of life.

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(CANTAB.), F.R.C.S. (ENG.), F.R.G.S., C.M.Z.S.:
A NOTE OF APPRECIATION.¹

By J. C. Verco, M.D. (Lond.), F.R.C.S. (Eng.),
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Medical Association.

The medical profession has learned with profound regret of the death of Sir Edward Stirling on March 20 at his home at St. Vigean's, Mount Lofty.

¹ Read at a Meeting of the South Australian Branch of the British Medical Association on March 27, 1919.

It was my very pleasing duty in the presidential address of June, 1917, to refer with warmest congratulations to the knighthood he had received shortly before; but now, so soon afterwards, it is my sad duty to speak of him as one who has passed over to the great majority.

Dr. Stirling was a South Australian—we say it with a tinge of pride. He was born at The Lodge, Strathalbyn, in 1848, the eldest son of the Honourable Edward Stirling, at one time member of the Legislative Council. He was educated at St. Peter's College, Adelaide, under Archdeacon Farr and, gaining the Westminster Scholarship, went to Europe to complete his studies. He received instruction for eighteen months in Germany and France and then entered at Trinity College, Cambridge. There, in 1869, he took his B.A. degree with honours in Natural Science, and his M.A. in 1872. His Membership of the Royal College of Surgeons was obtained in 1872 and his Fellowship in 1874. The degree of M.B. (Cantab.) was gained in 1872 and the M.D. in 1880. His professional education was pursued at the Medical School of St. George's Hospital, London, where after graduation he was House Surgeon, and later Assistant Surgeon until he left for South Australia. During this time he was also Lecturer on Microscopic Anatomy and on Physiology, and Joint Lecturer on Operative Surgery, as well as "Administrator of Anæsthetics," as he once subscribed himself in a letter to the daily press.

Returning to Adelaide in 1881, he began professional work as a consulting surgeon, but did not long continue in private practice. The University of Adelaide had been founded but a short time before, and he was appointed from January 1, 1882, its Lecturer on Physiology, and in the Register of April 8, 1882, may be found in full his Introductory Lecture, delivered at the University on March 3. This position he retained until 1900, when a Chair of Physiology was established, and he was promoted to a professorship and held it until his death. He was a Member of Council from 1881 onwards, and Dean of the Faculty of Medicine for eleven years; besides which he had a seat on several committees. In 1884 he paid a visit to England in order to secure various *desiderata* to illustrate and demonstrate his lectures, and to choose in conjunction with Dr. J. Davies Thomas, a professor of anatomy. In March, 1885, he was in Adelaide again, and with him was Dr. Archibald Watson, who has been Professor of Anatomy ever since.

As the University was now providing education in anatomy, physiology and chemistry (of which Dr. Rennie was Professor) students could take the first two years of a medical curriculum, and several medical undergraduates enrolled. Unless these were to be allowed, or rather compelled, to leave the State after passing their second year examination and to pursue their next three years of study elsewhere, it was necessary to make provision for the remainder of the course. I remember spending an evening on May 21, 1886, at Dr. Stirling's house on Lefevre Terrace, North Adelaide, in company with Dr. W. Gardner and Dr. E. W. Way, arranging regulations for those three years, nominating lecturers and demonstrators and fixing their salaries. These were to be