

Report of the Committee of the Royal College of Physicians of Edinburgh appointed (July 1850) to make enquiry regarding the numbers of Medical Practitioners at present settled and in practice, in the **Northern Counties of Scotland**, particularly in **Shetland, Orkney, Caithness, Sutherland, Ross, Inverness and Argyll**, - to determine the proportion which the Practitioners bear to the whole population, and to ascertain whether there be much complaint on the part of the people of the difficulty of obtaining medical aid.

I The first step taken by your Committee was to communicate with the Board of Supervision for the relief of the poor, in the hope, that that body might be in possession of information regarding the number and location of medical practitioners in the Highlands, such as was sought for by the Royal College. In reply, the Chairman of the Board referred your Committee to the Returns laid before Parliament, and published in the Annual Reports of the Board. The information contained in those returns was not of the kind required by the Committee, except to a very limited extent. Nevertheless, they had reason to congratulate themselves on the result of their communication with the Board, since it gave occasion to the Chairman to express his conviction of the importance of having the "position of medical men in relation to their attendance on the poor very greatly improved" and to announce the fact that, by the distribution of the grant of £10,000, annually by her Majesty's Government, in aid of the funds provided by the Parochial Boards to remunerate medical practitioners, the situation of these "is progressively improving in the country generally more particularly in the remote parishes", circumstances, these, which would doubtless exert a direct influence on the actual supply of medical aid to the mass of the people, the amount of which supply is the object of your Committee's inquiry.

II Your Committee began their inquiry by addressing a set of queries bearing upon the object to the Ministers of Parishes, and some other parties, resident in the Counties of Argyll, Bute, Inverness, Ross, Sutherland, Caithness, Orkney and Shetland, to the number of 320, in 170 parishes. Of these, 200 sent replies, referring to 155 parishes. To those who did not answer the first circular sent, a second set of queries was addressed and from some of these, answers were obtained.

The 15 or 16 parishes not yet reported upon are chiefly in districts where the supply of medical aid is sufficient. All the destitute districts are fully reported upon. Thus, the Committee has received 32 returns from the 33 parishes of Orkney and Shetland; from all, except one, of the parishes of Caithness; from all in Sutherland, and from all, except one, in the large Islands of Skye, Lewis and Uist. So that the committee has the satisfaction of stating that the queries issued in name of the Royal College have been treated with all possible respect, and answered more fully than could have been expected. (The queries and annexed circular are inserted in the Appendix to this Report).

III A detailed examination of the returns gives the following results:

- A. That, of the 155 parishes reported upon 62 are adequately supplied with medical practitioners, 52 are partially supplied, and 41 are never, or almost never, visited by any regular practitioner, and may therefore, be regarded as destitute of medical aid
- B. That in, or in the vicinity of, the 52 partially supplied parishes (containing together, according to the census of 1841, a population of 80,967) there are about 70 medical practitioners, some of whom appear to have charge of vast districts of country.
- C. That the 41 destitute parishes (containing together a population of 34,361) are situated chiefly in Ross, Sutherland and the islands.
- D. That the deficiency of properly qualified practitioners is much felt and complained of in some districts, less so in others, although similarly circumstanced: but it is obvious that,

throughout the 93 inadequately supplied parishes generally there is much suffering from disease and injury from accidents, that might be remedied were proper help at hand. The following may suffice as examples of the complaints contained in the returns.

Gigha. "The people of Gigha feel the want of medical aid much; and complain of such want as a great deprivation."

Jura. "The want of a Medical Practitioner resident in this Parish is felt by the people to be a great disadvantage."

Kilchoman. "The want of medical aid is felt generally, especially by the poorer class, who cannot afford to call a medical man from a distance."

Kildalton & Oa. "There is a very general complaint. A well qualified practitioner is indispensably necessary for this district. It is only the want of the fair prospect of adequate emolument which prevents one from occupying the field."

Kilminver and Kilmelford. "No medical practitioner. – custom makes the people silent"

Ardnamurchan. "The people are very fond of advice and medicines, but suffer their diseases silently, as they cannot afford, without ruin, to send to a distance for medical aid."

Morven. "There are wide districts of country, and remote and populous islands, without any resident medical practitioner. For instance, the Island of Coll, in this district of Country, with a population of upwards of 1,500, is now, as it has always been, in this trying predicament; and it was only very recently that any stated provision towards affording medical aid was made in the neighbouring island of Tyree, which contains a population of nearly 5000, and which is distant 25 or 30 miles from the nearest point of Mull. In Morven also, the evil is very painfully felt. There is no resident medical practitioner. The Parish contains a population of about 1700, and comprehends the whole of that rugged district of country southwest of a line drawn from the head of Loch Sunart to the Linnhe Loch, opposite Lismore.

From Loch Sunart's side, the people have recourse as they best can, to medical aid, when such can be procured, in the adjacent districts of Ardnamurchan and Sunart; and on the south-west coast, all are dependant on the medical practitioners resident on the opposite island of Mull. These Gentlemen, however, are necessitated to extend their practice over a wide extent of rugged country; so that thus, even when the ferry to Mull is practicable, (and it is often attempted in such cases when it is so only at extreme risk) it not unfrequently happens that the anxious and impatient messenger for aid is not only disappointed in finding the practitioners at home, but may be required to journey a distance of twenty, or it may be forty, miles in quest of him. I have known an express, sent by myself under circumstances of painful anxiety, travel for three days in quest of the laborious medical man who usually attends my family. x x x Some years ago, an estimable landed proprietor of this Parish met with a severe accident, having had an eye blown out of the socket by a discharge of gunpowder, but it was not till the return of a boat sent to Oban, a sea distance of twenty miles, that he had the benefit of surgical aid. I might multiply cases of this nature that have come under my own observation, but I deem it unnecessary to do so. When persons on the upper ranks of life, who can command at all times the services of willing and active emissaries, are in such cases, subjected to so many difficulties in procuring medical aid, you can very easily imagine the trials of the poorer classes. In their case much misery occurs from this source almost daily.

Moy. "The want of medical aid is very generally felt."

Alness. "The people feel very much the want of medical aid."

Kilmorack “There are frequent complaints of the inadequacy in the supply of medical aid.”

“Several complaints are often made: and I have known and witnessed various cases of protracted suffering that might have been alleviated had proper advice been at hand”. **Shieldag**.

Fearn. “The people are not in the habit of complaining of the want of medical aid, inasmuch as they are reconciled to circumstances. There is great room, however from complaint as to this.”

Loth. “Very great complaints”.

Kinlochbervie “Very often and very great complaints; and it must be so where the population is so great, and the district is from 60 to 70 if not 80 miles long, besides at least, one arm of the sea.”

Tongue. “The district supplied by Dr. Black is upwards of 45 miles in length by 15 in breadth.”

Lochbroom. “Those who can afford it, are obliged to send to Dingwall for medical aid, a distance of upwards of 40 miles.”

Small Isles. “No medical man has resided here for the last 7 years. There are a great many complaints for want of medical aid, which it is very difficult, and sometimes impossible, to get, owing to the insular situation, especially in winter; The distance from the mainland being about 10 miles by sea.”

Cross. Lewis. “The people complain very much, as well they may of inadequacy in the supply of medical aid. Distance, poverty and disappointment press grievously upon them.”

Uig. Lewis. “No medical man resides within 30 miles of this Parish – in Lewis, a population of 20,000 has only two medical practitioners; - it is extremely melancholy to think of the destitution of the people in this respect.”

Papa-Westray. “The difficulty of procuring medical aid is felt by all the inhabitants of the island to be a very serious hardship.

“I cannot express in strong enough terms the lamentable condition of this parish, and certainly there is a loud call for something being done. There is no doubt that human life is often sacrificed by reason of the want of medical aid” (**Walls**.)

“The population of this island (**North Ronaldshay**) is 560 but there is no medical man resident nearer than Sanday, which is separated from this by a boisterous firth; which, at certain seasons, cannot be crossed with safety for a fortnight or three weeks.”

“The want of property qualified medical practitioners has been severely felt in these islands.” (**Westray**)

“I have, with extreme pain, witnessed many cases of protracted suffering, where medical aid might have been of service (**Sandwick**)

“The people feel deeply the want of medical aid” (**Delting**)

“Very grievous complaints indeed are made” (**Delting**)

“The people having never enjoyed the benefit, cannot grumble at the want of medical aid, but deeply do they feel it.” (**Nesting**)

“There is a great complaint among the people in general for want of medical aid” (**Walls**)

e. Strong testimony is borne by several of the reports to the indefatigable, zealous, and self-denying labours of the Highland practitioners generally: and much regret is expressed that they are, for the most part, very poorly remunerated. "I must state" writes one clergyman "that I know of no class of men more extensively, or more actively charitable than medical practitioners in the Highlands." Another reporter (the very reverend the moderator of the General Assembly of the Church of Scotland) concludes his lengthened and valuable communication to your Committee in these words: - "I know of no class of men more inadequately remunerated than the medical practitioners of the Highlands, or who obtain a livelihood at a greater sacrifice of time and of labour. Some of them, it is true, may have evinced a culpable degree of carelessness in advancing in a knowledge of their profession, and this is not surprising, under the many disadvantages of their position; but, very generally, they have been found to evince an untiring zeal and energy in prosecuting their professional duties under peculiar hardships, and difficulties which disinterested humanity, guided by sound and enlightened principles, could alone animate and sustain."

f. The existing deficiency of duly qualified practitioners is compensated for in many parishes (particularly in Shetland) by the ministers themselves giving advice and medicine: while, in a few places, there are proprietors, and factors on large estates, who, having studied medicine in their youth, benevolently exert their skill on behalf of their sick neighbours. In some remote districts, the midwife is the only person who undertakes the treatment of disease. From a few parishes, there are complaints of there being not even a midwife.

g. In reply to the query - "Does your experience enable you to suggest any measure of general applicability - such as would be likely to relieve, to some extent, the evils (if they exist) of deficiency in the supply of medical aid?" - the following suggestions have been presented by various reporters

I That Government should be applied to for a grant of money sufficient to give salaries to medical practitioners locating themselves in the districts now destitute.

This is suggested by a large number of the reporters. The following is given as a specimen of the statements made on this subject. **Walls. Shetland.** "I have often thought that from the isolated position of these islands, and from the poverty of its landed proprietary, a strong application should be made to Government, to induce it to appoint five or six medical men in the most destitute localities in Shetland, as it is utterly impossible, in the circumstances, (except from some unforeseen act of benevolence, which cannot be calculated upon) that sufficient medical aid can otherwise be obtained."

2. That Government should be requested to place some of the medical officers of the navy and army, now on half pay, in the destitute parishes. In support of this idea, one of the reporters emits the following significant query - "Would it not conduce to the advantage of these gentlemen professionally, as in other respects, and would it not be satisfactory to the country at large, and beneficial to the Highlands in particular, if certain arrangements could be made through parties here and elsewhere by which certain of these might be induced, if not required, to take medical charge of the poorer districts of the Highlands?" (The minister of Davist writer of "A State medical establishment")

3. That, in connection with any measure that may be under taken for the relief of the existing destitution, the use of a few small steamships should be added, in which the practitioners might be conveyed to the more distant localities, at certain fixed times, where and when the sick, able to travel, might rendezvous to meet them.

4. That the proprietors generally should be requested to allow medical practitioners the use of small farms in convenient localities, on which suitable houses might be erected at the public expense; or otherwise, that a general land-Tax should be established, for the support of at least one medical practitioner in each parish.

See note below *

5 That small hospitals for the sick should be erected in some of the more populous districts.

6 That a benevolent association should be formed for the purpose of supplying medical aid to the Highlands and Islands, partly, in the way of furnishing the existing practitioners (or where there are none, the ministers) with medicines, &c, for the poor not receiving Parish relief; - partly in the way of giving some of the people themselves a complete medical education; and training a few of the women as nurses and midwives.

* *

* It is owing to the generosity of some of the larger proprietors (amongst whom His Grace the Duke of Sutherland has especially distinguished himself) that many more large districts are not utterly destitute. And it is in the way of allowing the practitioners pieces of land for grazing horse and cow, and giving houses free that encouragement is given for well qualified men to settle in remote localities.

** One of the Reporters states that a certain noble Lady connected with Argyleshire, has had several persons educated at her own expense as midwives and stationed in remote districts.

7 That Mutual Assurance Societies for securing medical aid to their members should be formed in the badly supplied districts.

8 That, with a view to prepare for ulterior measures, a deputation of properly qualified persons should be sent to the destitute districts, that the exact state of matters may be seen and fully reported.

IV Your Committee, on concluding this section of their report, desire to acknowledge, in a special manner, the important aid they have received in the prosecution of their inquiry from the Reverend gentlemen and others, who so kindly answered their queries, for the most part, in the fullest manner; and they take leave more particularly to mention the following, as having favoured them with communications of considerable importance.

The Rev^d Will. Cameron, Lochbroom

The Rev^d Arch^d Clerk – Kilmalie

The Rev^d Alex^r Gunn, Watten

D^r Coll. Macdonald Lochshiel

Rev^d Angus MacIntyre, Kinlochspelve

Rev^d Alex^r MacKenzie, Kildalton

Very Rev^d D^r Macleod, Morven.

Rev^d Arch^d Nichol, Walls. Shetland.

Rev^d A. Shand. Nesting.

V It was thought by your Committee not unlikely that the experience of the light-keepers of the Lighthouses, situated along the extensive Coasts of the Highlands, to the number of 16, might furnish some important information bearing upon the object of the Committee's investigation; and, accordingly, an application was made to Mr Allan Stevenson, Engineer to the Commissioners of Northern Lighthouses, with a view to obtain this. In reply, Mr Stevenson, on the part of the Commissioners, favoured the Committee with a copy of a Report on the subject of providing medical attendance ~~on~~ for the Lightkeepers throughout Scotland. From this document it appears that the Commissioners calculate upon being able to obtain medical aid for their men at all the Lighthouses, even in such situations as Cape Wrath, and Skerryvore, whenever it is needed. In consideration of the length and danger of some of the voyages and journeys to and from certain of the light-houses, the Commissioners offer fees, varying from 10/6 to 3 Guineas a visit.

VI From the very commencement of their inquiry, your Committee felt that they occupied a position of no small delicacy in regard to the medical practitioners now resident in or near the inadequately supplied districts. Accordingly in their first circular they expressed the desire they felt to "carry the profession at large along with them in this inquiry" and to do nothing that might prove, directly or indirectly, injurious to the interests of those whose great labours they know to be so poorly remunerated. Having, through the replies to the first set of queries, obtained the addresses of most, if not all, of the persons practising medicine in the Highlands and Islands, Your Committee issued a Circular, with queries appended, to 71 of these, resident in the vicinity of the parishes, reported as either destitute of medical aid or imperfectly supplied. The circular bore that the object kept in view by the Royal College, in prosecuting this inquiry, is the removal of the reproach now justly lying on the Country at large on account of so great a number of the people being inadequately supplied with medical advice; at the same time, to have this good end accomplished, not only without injury, but with positive advantage to the existing practitioners. The queries were intended to bring out statements of facts regarding the amount of labour gone through in the ordinary discharge of professional duty, the remuneration received, whether increased or diminished of late years, and the hopes entertained of progressive amelioration of circumstances, as the result of some general measure or enactment.

From the 71 persons to whom these queries were addressed, answers have been received from 53, almost all of whom seem to be legally qualified; Of these, 12 have been in practice for ten years, or between 10 and 20 years; 12 for 20 years or between 20 and 30 years; 8 for 30 years and upwards; one (the venerable Dr. Wishart of Dingwall) having practised for 56 years. Most of these gentlemen report the length of their ordinary daily rides at from 3 to 14 miles, and their greatest distances at from 10 to 100 miles; almost all travel on horseback, generally; 16 make use of wheeled conveyances partially; and 17 are obliged to take boats daily. Three only report the entire absence of roads in the districts which they occupy, and these are in Orkney and Shetland; seven complain of the roads being very bad; but, by all the others, the state of the roads is said to be excellent. With regard to the present position of medical men in the Highlands, compared with what it was some years ago, 26 report it as unchanged, 15 as being improved, (chiefly under the operation of the New Poor Law) and only 12 as being worse than it was; but so many as 28 complain of the great inadequacy of the remuneration received; in some places two thirds of the people pay nothing, in others the proportion of gratis to paying patients is as 19 to one. * Only four gentlemen state that they have no complaint to make; all the rest appear to regard their lot as a hard one, and complain, some of the hardships and dangers to which they are necessarily exposed in travelling great distances, by sea and land, in all weathers, over bad roads and in crazy boats; others of the want of improving society; others of the interference of unqualified practitioners; and a few of the unjust treatment they experience at the hands of the Parochial Boards.

As examples of the statements contained in the reports transmitted by the medical practitioners, the following may be adduced:-

* A practitioner resident in a parish the population of which is 5000 reports that he has not received from private practice more than £5 annually

(From a Surgeon resident in the Hebrides)

“The hardships incident to my situation are various and numerous. Owing to the miserable and inadequate remuneration, I cannot afford, after supporting a wife and ten of a family, even to insure my life, or make any provision for myself or them. As my family increased, I was obliged to give up a medical periodical. I can scarcely afford to give my family the common rudiments of education. I have several inhabited islands to visit, which, in the winter and spring, is often attended with great risk and dangers.” x “I wish you would send a qualified person amongst us, to ascertain by personal observation our localities, and the superhuman labour attendant on our professional avocations”.

(From another, also resident in the Hebrides)

“The hardships of a medical practitioner in this and neighbouring islands cannot well be estimated by those who have not visited these remote parts, particularly in winter, and in tempestuous weather, to which it is exposed from the Atlantic. When visiting the smaller islands, no accommodation can be procured, and this increases the hardship. Some of the Ferries can only be crossed by a conveyance when the tide is out, and the other ferries are often dangerous.”

(From the Island of Lewis)

“The principal hardship here is, undoubtedly, the non payment of fees, which seems not unlikely to become an exceptional rule. The extent of non remuneration may be estimated from the fact that, for the last two years and a half, my partner and myself have travelled in one parish, upwards of 2000 miles on express visits; exclusive of the visits to paupers, and on vaccinating tours, without obtaining any payment whatever, not even, in most cases, for the medicines given. It may surely be deemed a hardship that disadvantages & discouragements of such a nature exist, sufficient to chill and repress the enthusiasm of most professional men, difficulties against which none but a genuine philanthropist of ample independance could heartily sustain a protracted interest in his patients, and prosecute his profession with ardour and success. While the utter inadequacy of remuneration is the master-grievance here, which must damp the zeal of any well qualified practitioner, there are several other drawbacks which might be noticed: did space permit; such as the great fatigues consequent on the long journeys to be travelled, the exposure to vicissitudes of weather, and sometimes to danger by sea, together with the discomforts from want of accommodation, &c. &c. which, through minor grievances, are, however much felt; but which, as well as the others complained of, admit of remedy to a great extent by some general measure or enactment.”

Dr B. who has practised during 30 years at Stromness, gives, in a few words, a very lively picture of the dangers to which he and his professional brethren are habitually exposed in the far north. “The boats they send” he writes “are often bad, not being able to have good ones; and were funds allowed, a good one would be got. I have to land on the barren shore, far from houses, and remain until daylight, not being able to trust to the boat: but could I get a good boat I would visit them oftener; they are much to be felt for.”

Judging from the nature of the reports received from other parties, it is very obvious that these complaints on the part of the medical practitioners are as it were, wrung from them, and

expressed to your Committee only because they hope it may be possible that some means may be devised for bettering their condition. There are probably, few men in any situation who undergo greater hardships on the discharge of professional duty, so continuously, and with so little prospect of reward. Many of them appear to be activated by the truest philanthropy, and must be regarded as ornaments to our profession, doing their best, in the most unfavourable possible circumstances, to manifest its benevolent spirit, and to confer the blessings of its science on the poorest of our fellow countrymen.

It must be satisfactory to the College to learn that, by these hardworking brethren, the application made to them in name of the college has been received and responded to with respect and gratitude. There is no indication in the returns received from them, of their having regarded the inquiry with any degree of jealousy. And the Committee cannot but add that the manner in which the queries have been answered by the great majority of the medical practitioners proves them to be, as a class, not at all inferior in education to their brethren in the south.

Your Committee have thus submitted a general view of all the information they have succeeded in collecting on this subject; and they have only now, in conclusion, to attempt to draw some practical inferences from the facts and statements that have been passed in review.

1. The general impression received from an examination of the returns is that, in several districts, and these, perhaps, scattered pretty equally over the whole range of the Highlands and Islands, there is such a lack of medical aid, as exposes the people in these districts to the risk of greater suffering and fatality than is experienced amongst their more highly favoured fellow-Countrymen in the south.

2 If the population-returns of 1841 can be trusted to, (and it is not known to the Committee that those of the census of 1851 are as yet published) the number of persons who never receive, and cannot, without great expense, at any time, receive the benefit of medical aid, amounts to about 34,300; while those who receive it occasionally are in number about 90,000, making a total of 124,300. Doubtless, these numbers are almost daily becoming less by emigration, but it may be presumed that about 120,000 people scattered over wide and rugged districts, are at this moment most inadequately provided for in sickness

3 That this destitution is at once a consequence and a proof of the miserably depressed social state of the Highlands is but too obvious. With the economies of that state, this college has nothing whatever to do; but, whether the physical wellbeing of the people at large, or the interests of our professional brethren who share the privations of the poor Highlanders, and help them to the best of their ability, be considered, your Committee conceives that, in the simple facts now brought out, the most cogent reason is supplied for the Royal College attempting to do something, however little that may be, that may tend to bring about a better state of things.

4 It may be that, in attempting to do somewhat, in our own way, to relieve misery so obvious and so clamant, we may be forwarding the regeneration of the Highlands more directly than, at first sight, may appear likely; for if, through the instrumentality of this College (howsoever that may be exerted) several talented, energetic, and scientific medical practitioners were distributed throughout the Highlands and Islands, and provided with such means of livelihood as would raise them above the depressing fear of starvation, they might prove eminently useful in rousing the people to exertion, and in bringing to light some of the hidden treasures of the land and seas, so as to increase the means of subsistence for the thousands who are now starving. It is well known to some of the members of your Committee that at least one noble example has been set, in this way, in the West of Rossshire, by a gentleman who, till lately, practised medicine, but now labours most energetically

to prove what may be done by well-directed science and perseverance to improve the capacities even of Highland valleys glens. *

5 Your Committee see clearly enough the difficulties of the case now brought before the Royal College, and they are not yet prepared to say what ought to be done by the College, towards the amelioration of the calamitous state of matters thus presented to its view. But if it should be the pleasure of the College to allow this report to be on its table for the inspection of the Fellows during the next three months, the Committee venture to hope that by the end of that time the College will be prepared to adopt some definite plan of procedure, whereby may be brought about the much to be desired consummation contemplated.

Meanwhile, the Committee would, in conclusion, adduce a few reasons which lead them to think something must be done to meet this case.

* The gentleman here referred to is Dr. John MacKenzie of Eileanach, a Fellow of this College.

1 That there exists severe distress, and that it is remediable.

2 That professional brethren are suffering, and that unjustly.

3 That such a state of matters is a reproach to the nation, in which all are implicated.

4 That the past history and present circumstances of Highland destitution forbid the hope that any such improvement in the social state of the people will be brought about, within the present generation, as will enable them to provide medical aid for themselves; and, therefore, if relief is to be given at all, it must be ab extra.

5 That the operation of the New Poor Law, while it has improved, in some measure, the condition of the existing medical men, and has so far contributed to lessen the evils of deficiency of medical aid, has produced the anomaly of the very poor, who are recipients of parish aid, receiving more attention than those who are incomparatively in dependant circumstances, although unable to pay for medical aid.

6 That both science and the industrial arts would be promoted by well educated medical men being located in the Highlands, and encouraged to make researches into the physical condition, capabilities and productions of the country.

7 That greater security would be given to the lives of the many persons of distinction, and of great importance to the nation, who now annually traverse the Highlands as sportsmen and scientific observers (and who are not unfrequently the subjects of severe injuries by accidents) were the number of properly qualified surgeons increased.

8 That the scourge of small-pox may be kept in check by an increase of vaccination in the Highlands, as it appears that many of the existing population are not protected by vaccination, so that, when they come into the Lowlands they are peculiarly obnoxious to the contagion of small-pox; which fact is so well known to them that it, not unfrequently, prevents the poor from leaving home to seek for employment.

9 That, if it should be deemed expedient to apply to Government for a grant of public money to meet the case of the destitution of medical aid in the Highlands, the proceedings of parliament in regard to Ireland, as lately embodied in the act, passed last Session, "For the better distribution,

support and management of medical charities in Ireland.” may be taken as an encouragement to expect that, upon a proper representation, a similar measure would be readily extended to Scotland.

10 That, so far as this College is concerned, its being now in possession of the required information on the one hand, and, on the other, its being one of the recognized organs of communication between the government and the medical profession, form a cogent reason for its charging itself with the duty of representing the state of the case ~~to~~ in the proper quarter.

Edinburgh 3^d February 1852