

gress, and sometimes going through its course without any perceptible efflorescence. Its edges are commonly elevated, and afford, on being punctured, a limpid fluid.

"A little practice in vaccine inoculation, attentively conducted, impresses on the mind the perfect character of the vaccine pustule; therefore, when a deviation arises, of whatever kind it may be, common prudence points out the necessity of reinoculation—first, with vaccine virus of the most active kind; and, secondly, should this be ineffectual, with the variolous virus. But, if the constitution shows an insusceptibility of one, it commonly does of the other.

"When any constitutional symptoms occur in inoculated cow-pox, they are commonly first perceptible (especially in children) on the fourth or fifth day. They appear again, and sometimes in adults, not unlike a mild attack from inoculated small-pox on the eighth, ninth, or tenth day. The former arise from the general effects of the virus on the habit; the latter from the irritation of the pustule.

"If the effluvia of the small-pox have been received into the habit previously to the inoculation of the vaccine virus, the vaccine inoculation will not always be found to stop its progress, although the pustule may make its advances without interruption.

"The lancet used for inoculation should always be perfectly clean. After each puncture, it is proper to dip it into water and wipe it dry.

"The preservation of vaccine virus upon a lancet beyond the period of a few days should never be attempted, as it is apt to produce rust, which will decompose it.—(Signed) EDWARD JENNER."

ASSOCIATION INTELLIGENCE.

BRANCH MEETINGS TO BE HELD.

METROPOLITAN COUNTIES BRANCH.—A general meeting of this Branch will be held at the rooms of the Medical Society of London, 11, Chandos Street, Cavendish Square, on Wednesday, February 23rd, at 8 P.M., when Mr. Timothy Holmes will introduce a discussion on "Hospital Management".—Mr. Nelson Hardy has given notice that he will propose the following addition to Law 19 of the Branch. "Provided always, that nothing contained in this Law shall prevent the discussion at the Annual Meeting of motions of praise or dispraise affecting any of the officers of the Branch, of which ten days' notice in writing has been previously given."—ALEXANDER HENRY, M.D., W. CHAPMAN GRIGG, M.D., Honorary Secretaries.

METROPOLITAN COUNTIES BRANCH: NORTHERN DISTRICT.—The next meeting of this district will be held at Dr. Hilliard's, Fairmead House, Upper Holloway Road, on Wednesday, February 23rd, at 8.30 P.M., when the following papers, etc., will be discussed. Dr. Potter: On the question of a Home Hospital for North London; Mr. Pearce Gould will exhibit a Patient upon whom he has operated for Varicocele, and explain his mode of operating; Dr. Thorowgood: On the Use of the Hypophosphite Salts in the Treatment of Phthisis.—THOMAS STRETCH DOWSE, Honorary Secretary.—14, Welbeck Street, February 5th, 1881.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting of the above District will be held on Thursday evening, February 17th, 1881, at 8.30, at the New Town Hall, Hackney; Dr. De Berdt Hovell, F.R.C.S., in the chair. The following papers will be read. Jonathan Hutchinson, F.R.C.S.: "On Diseases of the Tongue"; M. Greenwood, L.R.C.P.L.: "Some Remarks on the Symptoms and Diagnosis of Typhoid Fever".—FREDERICK WALLACE, Honorary Secretary, 243, Hackney Road, February 8th, 1881.

STAFFORDSHIRE BRANCH.—The second ordinary meeting of the session will be held at the Infirmary, Stafford, on Thursday, February 24th, at 3.30 P.M.—VINCENT JACKSON, J. G. U. WEST, Honorary Secretaries.—Wolverhampton, January 30th, 1881.

BATH AND BRISTOL BRANCH.—The fourth meeting of the session will be held at the Grand Pump Room Hotel, Bath, on Thursday evening, March 3rd, at 7.15 P.M.; Alex. Waugh, Esq., President.—R. S. FOWLER, E. MARKHAM SKERRITT, Honorary Secretaries.—6, Belmont, Bath, February 1881.

NORTH OF IRELAND BRANCH.—A meeting of this Branch will be held in the Belfast Royal Hospital, on Friday, March 4th, at 12 o'clock noon. Members intending to read papers or send communications will kindly intimate their intention to JOHN MOORE, M.D., Honorary Secretary, 2, Carlisle Terrace, Belfast.—February 7th, 1881.

BATH AND BRISTOL BRANCH: ORDINARY MEETING.

THE third ordinary meeting of the session was held at the Bristol Museum and Library, on Thursday evening, January 20th; ALEXANDER WAUGH, Esq., President, in the chair. There were also present twenty-four members.

New Members.—The following gentlemen were elected members of the Association and of the Branch: Hope Gosse, Esq., Midsomer Norton; and W. E. Shorland, Esq., Bristol.

Communications.—Dr. J. G. Davey read a paper on Transference of Senses. In the discussion which ensued, the following gentlemen took part: Dr. Long Fox, Dr. Markham Skerritt, Dr. Bonville Fox, Mr. Collins, Dr. Burder, Dr. Shingleton Smith, and Mr. S. H. Swayne.

Dr. Roxburgh exhibited a new Freezing Microtome, and demonstrated its mode of use.

SPECIAL CORRESPONDENCE.

PARIS.

Anthropological Society of Paris.—*Professor Broca.*—*M. Roger's Address in the Academy of Medicine.*—*Medical Fees.*—*Treatment of Patients in Hospitals or in their Homes.*—*Enfants Assistés.*—*Mortuaries in Cemeteries.*—*Isolation of Infectious Cases.*

THE bureau of the Anthropological Society of Paris for the year 1881 is constituted as follows: *President*, Professor Parrot; *Vice-Presidents*, Dr. Thulié, Dr. Proust; *General Secretary*, Dr. Topinard; *Assistant General Secretary*, Dr. Magitot; *Ordinary Secretaries*, Dr. Pozzi and Dr. Chervin; *Treasurer*, M. Leguay; *Librarian*, M. Dureau; *Conservator of Collections*, Dr. Collineau. At the reopening of the meetings of the Anthropological Society for the year, M. Ploix, the outgoing President, and Professor Parrot, the newly elected President, both delivered most able addresses, and paid a graceful tribute to the memory of Professor Broca, who had been the general Secretary of the society from its foundation to the day of his death, extending over a period of twenty years. The death of Paul Broca was an irreparable loss, particularly to the Society of which he was the principal founder, the heart and soul. M. Parrot's address was most interesting, displaying remarkable talent, great erudition, and a philosophic turn of mind. In pointing out the great advantages of a knowledge of anthropology, he said that the tendency of the latter was to democratise science, and thus democratise the whole family of the human race.

M. Roger, the outgoing President of the Academy of Medicine, after having referred to the great loss sustained by the Academy by the death of Broca, Delpech, Piesse, and Personne, gave an account of his New Year's visit to the Minister of Public Instruction as head of all the educational and learned bodies in the country, at which he reminded the Minister of the promise made by his predecessors to provide the Academy with a more suitable building than that at present occupied by it; but, as M. Roger facetiously remarked, ministers pass away, their promises go with them, and the members of the Academy continue to hold their meetings in the sepulchral building in the Rue des Saints-Pères, much to the disgrace of a nation that pretends to be in the van of civilisation. M. Ricord, with his usual wit, suggested that, as many of the religious bodies were being turned out of their domiciles, an application might be made for a convent or monastery for the use of the Academy.

The subject of medical fees has been for some time the topic of discussion in the professional and lay papers of Paris; and Dr. Decaisne, a well-known popular writer, lately published a humorous article, entitled "Beasts of Burden and Medical Men", in which he pointed out that the former were, as far as remuneration was concerned, better treated than the doctors, as shown by the following statement. For a visit of ten kilometres, or six English miles, a medical man in the provinces is paid at the rate of two shillings; for three kilometres, a mule is paid five shillings and ten pence; for more than four kilometres, seven shillings and six pence; for more than twenty kilometres, sixteen shillings and eight pence. In Paris, the doctors are not much better paid; and, when their services are called into requisition, in case of accidents, etc., in the streets, they receive six francs (five shillings); and, to draw this paltry sum, they are subjected to so many annoyances, through the formalities of red-tapeism which are required of them, that they frequently prefer foregoing the fee to losing their time in going from one office to another. Thus it will be seen that a medical man is paid at a far more inferior rate to a mule. The above state of things is not to be wondered at, when we consider that the profession is much too overcrowded, and particularly in the larger cities; and lately there was a very interesting article in the *New York Medical Record* on the subject. The writer of the article made out that the profession was more overcrowded in the United States than in any other part of the world. For instance, the number of physicians there for the year 1878 amounted to 57,000; whereas, in Russia, the number of physicians for the same year was 13,475, the population of the United States being about half that of Russia. According to a report that was lately submitted to the Prefect of Police for the year 1879, there were, in Paris alone, 1,333 medical men. Besides these, there were 159 *officiers de santé*, and 945 *sages-femmes*. It may be here remarked that, while the number of *officiers de santé* is gradually diminishing, that of the *sages-femmes* is increasing. The number of *pharmaciens* for the same period amounted to 815; that is, 794 for Paris, and 111 for the suburbs. In a foot-note in *Galignani's Guide*, I find the following statement, which I quote for comparison. "It has been calculated that France had, in 1869, no fewer than 21,000 medical practitioners, and 6,765 apothecaries. Paris has 1,580

winter, 20 in summer; diarrhoea, 1 in winter, 31 in summer; dysentery, 1 in winter, 26 in summer; hydrocephalus, 5 in winter, 6 in summer: convulsions, 6 in winter, 22 in summer; total, 31 in winter, 129 in summer. But these figures, striking as they are, display not the whole truth, as they only represent December and January 1857; while, if the following six weeks were added, the contrast would have been still more surprising. The conclusion, then, from these figures is irrefragable, viz., that heat alone is the cause of infantile diarrhoea and dysentery. For, if the four colonies show a death-rate of 2 in ten months of mild weather, and of 57 in the first two of the three hotter months of summer, the fact is conclusive. The science of geographical medicine, from which this is only a scintilla, is yet unknown in these countries and in Europe; and the sooner that those whose business it is to search for the origin of those great branches into which disease is divided, and which are so remarkably altered by climate, the sooner they will begin to understand the cause of their peculiar forms; and among these will be that of infantile summer diarrhoea.—I have the honour to be, sir, your obedient servant,

J. WM. MACKENNA, M.D.

31, Great Marlborough Street, W.

THE ADMINISTRATION OF FEVER HOSPITALS.

IT is to be feared that the inquiry upon which Dr. Thorne Thorne is now engaged for the Local Government Board into the infectious hospitals of the kingdom will bring to light many instances of loose and imperfect administration. It is but a short time since bitter complaints were made of the fever hospital at Hull; and we now receive complaints of the state of the affairs existing at the Sunderland House of Recovery. On December 25th last (vol. II, 1880, page 1024), we offered some criticisms upon the building itself; and it seems that its administration is as defective as its structure. A medical correspondent from Sunderland describes the management as a farce, and thinks that the woman who is kept there to do everything is a most improper person to have entire charge of a fever hospital. In support of this, he instances a case where he sent a mother and three children into the hospital on a particular Sunday. The eldest child, a boy of nearly four years of age, became very ill between Monday and Tuesday morning, when the nurse was ordered to see that he had beef-tea and brandy frequently. At 10 P.M., the child's mother came to say that her child had not had any beef-tea or brandy given to him. Directions were given her to request the nurse to get what had been ordered at once. The next morning the child was dead. When our informant saw the nurse, he expostulated with her for not giving the beef-tea and brandy as ordered, to which she replied: "Well, it wouldn't have made any difference, would it?" To the answer: "They were ordered with the hope of saving the child's life," she repeated what she said before in a very heartless sort of way. Our correspondent very properly expresses his surprise that, although he has reported this conduct of the nurse to several members of the sanitary committee, no inquiry has been made into the matter. It is difficult to understand the reasons for such neglect on the part of those charged with the sanitary welfare of the borough; and it is to be hoped that the town council will at once see fit to order an investigation of the circumstances described, and take measures for insuring the proper management of the hospital for which they are responsible.

SEWAGE-FARMS.

SIR,—I live in the neighbourhood of a sewage-farm. The sewer-filters are situated on the roadside, about two hundred yards distant from a village largely populated, covered over with loose planks. There is a man constantly employed in carrying away the refuse, and is there from early morning until night. I have to go that way daily, and sometimes the stench is so great, that really it is a hardship to pass them. This man has been employed in cleaning these filters for years, and is, and always has been, in perfect health. Can any of your numerous readers inform me how this man escapes from typhoid or other zymotic fevers, considering the fact that all text-books on medicine put down that the stench arising from sewage matter is the main cause of typhoid fever, and other forms of blood-poisoning? I may also add that this sewage-farm is periodically flooded. Would this not be very detrimental to public health? This neighbourhood is very healthy, and perfectly free from typhoid and other diseases said to arise from sewage contamination. I have been speaking to several medical men residing in the neighbourhood upon this subject. They all tell me that typhoid fever is the exception here, and not the rule.—I am, etc.,

I. H. J.

* I. H. J.'s letter is one of the many proofs which constantly come before us of the errors which are committed by local authorities, as well as individuals, in calling things by wrong names. A sewage-farm, properly so called, is one thing; that described by I. H. J. is another thing altogether. A sewage-farm should have the sewage delivered upon it in a fresh state, and fresh sewage does not stink. The stench described by our correspondent indicates either that the works are wrongly constructed, or else that the local authority neglects its duty, and allows of an accumulation which ought not to be. There are several points in I. H. J.'s letter which may be considered, independently of the local authority's neglect. It should be borne in mind that the foci of ethetic disease must in most instances be derived from preceding cases; that these foci will not operate upon other people unless these people are fitted to receive them; that the foci retain their infective power only so long as they are kept within certain physical states (we use the term foci so as to avoid the germ-theory controversy). Those physical states are altogether destroyed by the agency of putrefaction. It has been shown very clearly by several observers that infective matters lose their specific form of infection as soon as putrefaction is fully established; that, although putrefying matters are injurious in their own way, they do not act as specific foci. They have actions peculiar to themselves, but are not excitants of typhus, or cholera, or typhoid fever, or small-pox. The inference which I. H. J. may draw, therefore, from the experience which his case affords is, that the physical conditions to which his sewer-man is exposed, are opposed to the continued production of ethetic disease. Putrefaction destroys the specific germs or foci of particular diseases. It is probable that the infective power of excreta is not potent until changes have commenced in its physical state. Here is the protection which exists in and upon sewage-farms. Fresh sewage, when at once applied to the land, is not allowed to get into its first stage of decomposition, and, as a consequence, the infective stage is not reached; for sewage, when properly used on a sewage-farm, does not go into decomposition, but the changes induced are in the contrary direction; whilst, when putrefaction is established, the infective stage has passed away. The expression of I. H. J. as regards the absence of ethetic disease in the neighbourhood of even badly managed sewage-farms, is now an acknowledged fact; but sewage-farming is not likely to find many advocates until a class of men have been educated who

know what sewage-farming is, and who can make it answer from an agricultural point of view. The present managers of sewage-farms are, in the majority of instances, ignorant of all those principles which are required for their proper care. The management of a sewage-farm requires scientific knowledge, agricultural education, and a good share of common sense. Most of the committees which now manage sewage-farms consist of men who excel in a belief of their own self-importance, but have none of the requisites for successfully carrying on a sewage-farm; hence the muddles which exist all over the country in regard to this very important use of sewage; and, until its principles are properly understood, it is not likely to be successful.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, February 3rd, 1881.

Dunlop, James Hay, Upper Norwood, S.E.

Gabe, John Bernard, Morriston, near Swansea.

The following gentleman also on the same day passed the Primary Professional Examination.

Cranstone, William Lefevre, University College.

The name of Charles Henry Wakeham was omitted from the list of candidates who passed the Arts Examination in the second class on the 21st and 22nd January last.

ROYAL COLLEGES OF PHYSICIANS AND SURGEONS OF EDINBURGH: DOUBLE QUALIFICATION.—The following gentlemen passed their first professional examination during the February sittings of the examiners.

Hugh Tilsley Massey, Surrey; Alexander Moulds Dale Eason, Lancashire; William Edgar Ryves, India; William Henry Clarke, Longsight; William Bird, Yorkshire; William Henry Fretz, Colombo, Ceylon; Frederick Herbert Perry, Waddington; John Philip Sullivan, Dublin; Denis Scully, Tipperary; William Bedford Silverwood, Shelley, near Huddersfield; William Flood, County Cavan; Gerald Barry Wilson, Dungarvey Rectory; William Pennefather Warren, Cork; Cornelius Joseph O'Brien, Cork; Henry Frederic Horne, India; William George Lveridge, County Louth; Joseph Hysanth Tynan, County Longford; Arthur Ernest Marsack, Bucks; Henry James Edwards, Windermere; Arthur Clarke Walker, Liverpool; William James Browne, County Derry; John Henry Whitham, Cambridgeshire; James Watson, Holywoods, Down; Campbell Tulloch Dewar, Jamaica; James Addington Caldwell, Bucks; Thomas Houghton Mitchell, Limerick; Frank Oldfield, London; George William O'Flaherty, County Galway; James Henry Ferguson, Bolton; Robert Dickie Bradford, Carnbeg; George Savage Martin Baxter, Brighton.

The following gentlemen passed their final examination, and were admitted L.R.C.P. Edinburgh and L.R.C.S. Edinburgh.

William Patrick Connolly, Limerick; Arthur Crosbie Dixey, London; William Edgar Ryves, India; William Lloyd Reade, Portarlington; Roland Philip Williams, Holyhead; William Oscar Prosser, Lunenburg, Ont.; John Keay, Manchester; Herbert Linney Hawksley, Buxton; Hugh Tilsley Massey, Surrey; Alexander Moulds Dale Eason, Liverpool; James Charles McKee, County Down; Thomas Wallace, County Limerick; Timothy Warren Irwin, County Cork.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH.—The following gentlemen passed their final examination, and were admitted Licentiates of the College on January 28th.

Edmund Alleyne Cook, London; Thomas Sayer, Kirkby Stephen; Adam Prentice Tudhope, Coatbridge; Simson Stuart, County Mayo; John Andrew Fehrsen, South Africa; Channing Neill, Belfast.

The following gentlemen passed their first professional examination for the Licence in Dental Surgery of the College.

Ernest Burt, Weymouth; Joseph Miller, London; William John Watson, Birmingham; Harry Thorn, London; Frank Harrison, Sheffield.

The following gentlemen passed their final examination, and were admitted Licentiates in Dental Surgery.

William Herbert Williamson, Leicester; William John Watson, Birmingham; Joseph Miller, London; Harry Thorn, London.

MEDICAL VACANCIES.

Particulars of those marked with an asterisk will be found in the advertisement columns.

THE following vacancies are announced:—

***BRIGHTON AND HOVE LYING-IN INSTITUTION.**—A fourth Honorary Surgeon. Applications, with testimonials and copies of registration, to the Secretary, by the 1st of March.

CARLOW UNION.—Medical Officer for Ballickmoyler and Newtown Dispensary District. Salary, £120 per annum, with £20 yearly as Medical Officer of Health, registration and vaccination fees. Election on the 18th February.

CENTRAL LONDON SICK ASYLUM DISTRICT.—Assistant Medical Officer for Asylum at Highgate. Salary, £100 per annum, with board and residence. Applications, with not more than four recent testimonials, to William Appleton, Clerk to the Managers, not later than Monday, February 14th.

DURHAM UNION.—Medical Officer. Applications, with testimonials, diplomas, certificates, licences, and other instruments testifying to qualifications, to be sent on or before February 18th.

*ROYAL NATIONAL HOSPITAL FOR CONSUMPTION, Ventnor, Isle of Wight.—Resident Medical Officer. Salary, £100 per annum, with board and residence. Applications, with testimonials, to the Secretary, 12, Pall Mall, London, S.W., on or before Monday, February 14th.

*ROYAL SOUTHERN HOSPITAL, Liverpool.—Junior House-Surgeon. Salary, 60 guineas per annum, with board and lodging at Hospital. Applications, with testimonials, to A. Garrett, Esq., Treasurer, at the Hospital, on or before the 16th February.

*ST. BARTHOLOMEW'S HOSPITAL.—Assistant Surgeon. Candidates must attend a Committee of Governors on Thursday, February 24th. All applications to be left, on or before Tuesday, the 22nd inst., with William Henry Cross, Clerk.

MEDICAL APPOINTMENTS.

BEALE, E. C., M.A., M.B., M.R.C.P., appointed Physician to the Out-patients at the Great Northern Hospital, *vice* J. A. Ormerod, M.B., resigned.

CARTER, D'Arcy B., M.R.C.S.Eng., L.R.C.P.Ed., appointed House-Surgeon to the Clayton Hospital and Wakefield General Dispensary.

CROWE, J. W., M.D., appointed Assistant Physician to the Worcester Infirmary, and Certifying Surgeon to the Worcester Factories.

DAVIES-COLLEY, J. Neville C., M.A., M.B., M.C., appointed Surgeon to Guy's Hospital, *vice* J. Cooper Forster, M.B., F.R.C.S., resigned.

DOWDING, Alexander W. Woodman, M.B., M.S., L.R.C.P., appointed a Clinical Assistant at the London Hospital.

FAGGE, C. Hilton, M.D., F.R.C.P., appointed Physician to Guy's Hospital, *vice* S. O. HABERSHON, M.D., F.R.C.P., resigned.

GRAY, J. Allan, M.A., M.D., M.R.C.P.Ed., has been appointed a Visiting Medical Officer to the Leith Hospital, *vice* R. Macnair, M.D., resigned.

JAMES, Charles E., A.B., M.B., appointed second Surgeon to the Kilkenny County Infirmary, *vice* L. C. Kinchela, A.B., M.D., resigned.

POUND, F. J., M.R.C.S., appointed House-Surgeon to the Royal Hants County Hospital, *vice* Leedham Fuller, M.R.C.S.Eng., resigned.

ROUÉ, W. Barrett, M.B., M.S., appointed Physician to the Bristol Hospital for Sick Children and Women, *vice* Alexander Steven, M.D., resigned.

POOR-LAW MEDICAL APPOINTMENTS.

*ABBOTT, C. E., M.R.C.S.E., appointed Medical Officer of Health to the Baintree Union Rural Sanitary Authority, at £150 per annum for three years.

BLANDFORD, I. W., M.R.C.S.E., appointed Surgeon to Stockton Union, Norton District, *vice* J. R. Murray, resigned.

ILLINGWORTH, C. R., M.B., appointed Medical Officer to the Rishton District, Blackburn Union.

PHILLIPS, J. D., L.F.P.S.G., appointed Surgeon to the Hoxne Union.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths, is 3s. 6d., which should be forwarded in stamps with the announcements.

BIRTH.

WOODS.—February 2nd, at Killarney Asylum, the wife of Oscar T. Woods, M.D., Medical Superintendent, of a daughter.

MARRIAGES.

HARINGTON—PHILSON.—On the 8th inst., at Christ Church, Cheltenham, by the Rev. C. C. Dolben, Rector of Ipsley, and Rural Dean, assisted by the Rev. C. May, Curate of Christ Church, Hastings Norman Victor Harington, I.M.S., son of the late Rev. H. H. Harington, H.E.I.C.S., to Anna Mary (Minnie), youngest daughter of W. Philson, M.D., of Sherborne Lodge, Cheltenham.

NEALE—CARSTENS.—On December 20th, 1880, at St. Andrew's, Port Nolloth, Namaqualand, by the Rev. C. E. Jones, John Edward Neale, Surgeon, eldest son of Dr. Richard Neale, of South Hampstead, London, N.W., to Ellen Marie, second daughter of Captain R. Carstens, of Port Nolloth. No cards.—Foreign papers please copy.

SANDWELL—LLOYD.—On Feb. 9th, at the Parish Church, Thurles, co. Tipperary, by the Rev. Canon Harley, M.A., assisted by the Rev. C. S. Cooke, Rector, Edward Sandwell, L.R.C.P., M.R.C.S.Eng., of Charles Street, Soho Square, W., to Eliza, second daughter of C. H. Lloyd, Esq., J.P., of Lisheen Castle, Templemore, co. Tipperary, Ireland. No cards.

DEATHS.

AITCHISON.—On the 3rd inst., at 8, George Square, Edinburgh, George Aitchison, M.A., M.D., F.R.C.P.E.

CAHILL.—On the 6th inst., at 26, Albert Gate, Hyde Park, after a protracted illness, Thomas Cahill, M.D. R. I. P.

SUPERANNUATIONS. — Mr. James Edward Mitchell Williams, M.R.C.S.Eng., late Medical Officer for the Whitstable District of the Blean Union, has obtained a superannuation allowance of £50 *per annum*; and Mr. Edward Bates, Ext.L.R.C.P.Lond., late Medical Officer for the Bonvilstone District of the Cardiff Union, one of £30 *per annum*.

PRESENTATION.—A deputation from the Munster Lodge of Odd-fellows Society waited on Dr. Cremen of Cork last week, at his residence, and presented him with an address of congratulation on his recovery from a recent illness, and thanking him for the services he had rendered to the members of the Society in his professional capacity as medical attendant of some of the Lodges. His wife was also presented with a handsome walnut cabinet case, a richly chased set of silver dessert knives and forks, and fruit spoons, and a patent biscuitaire.

PUBLIC HEALTH.—The annual rate of mortality last week in twenty of the largest English towns averaged 28.0 per 1,000 of their aggregate population. The rates of mortality in the several towns, ranged in order from the lowest, were as follow: Newcastle-on-Tyne 20, Leicester 21, Sheffield 22, Bradford 23, Portsmouth 24, Birmingham 25, London 27, Nottingham 27, Hull 27, Salford 27, Plymouth 28, Wolverhampton 28, Leeds 28, Brighton 30, Sunderland 30, Bristol 30, Norwich 30, Oldham 33, Liverpool 36, and Manchester 37. Scarlet fever showed the largest proportional fatality in Norwich, Sunderland, and Oldham; and whooping-cough in Leeds and Liverpool. Of the 20 deaths referred to diphtheria in the twenty towns, 12 occurred in London, 3 in Bradford, 2 in Liverpool, and 2 in Birmingham. The death-rate from fever (principally enteric) was highest in Nottingham and Sunderland. Small-pox caused 58 more deaths in London and its suburban districts, but not one in any of the nineteen large provincial towns. In London, 1,926 deaths were registered, which exceeded the average by 43, and gave an annual death-rate of 27.1. The 1,926 deaths included 54 from small-pox, 39 from measles, 38 from scarlet fever, 12 from diphtheria, 39 from whooping-cough, 8 from enteric fever, one from an ill-defined form of continued fever, 16 from diarrhoea, one from dysentery; thus, 208 deaths were referred to these diseases, being 47 below the average. The deaths referred to diseases of the respiratory organs, which had been 371, 617, and 702 in the three preceding weeks, declined last week, under the influence of mild weather, to 606, but exceeded the average by 52; 417 were attributed to bronchitis, and 120 to pneumonia. Different forms of violence caused 79 deaths; 68 were the result of negligence or accident, including 21 from fractures and contusions, 14 from burns and scalds, 4 from drowning, and 17 of infants under one year of age from suffocation. At Greenwich, the mean temperature of the air was 42.8°, and 2.3° above the average. The general direction of the wind was S.W., and the horizontal movement of the air averaged 13.0 miles per hour, which was 1.1 below the average. Rain fell on each day of the week, to the aggregate amount of 0.22 of an inch. The duration of registered bright sunshine in the week was equal to 10 per cent. of its possible duration. The recorded amount of ozone showed a considerable excess throughout the week, except on Tuesday.

LONDON INTERNATIONAL MEDICAL AND SANITARY EXHIBITION.—The regulations for this exhibition, which is to be held by the Parkes Museum of Hygiene, at South Kensington, from July 16th to August 13th this year, were finally decided upon at a meeting of the committee on February 9th; and the full prospectus, with forms of application for space, will be ready for issue this week. The charge for floor space is to be one pound per foot frontage, with an average depth of six feet; wall space, from 5s. to 10s. per square yard. All applications for space must include a description in writing of the articles proposed to be exhibited, and the space allotted is to be strictly for the exhibition of articles specified. For machinery in motion, exhibitors will have to provide gas engines. Certificates of merit will be awarded, and the list of awards will be published in the annual report of the Parkes Museum of Hygiene. New inventions will be protected, as the privileges of the Protection of Inventions Act of 1870, will be extended to the exhibition. The work of organisation will be carried on at the Parkes Museum, and for this purpose the Library of the Museum will be open daily from 10 to 4; Saturdays, 10 to 2.

A FOREIGN BODY DISLODGED AFTER EIGHT YEARS.—In 1876, Dr. Singletary, of Arlington, Kentucky (*Louisville Medical News and New York Medical Record*), was called to see a girl, aged seven, and found her suffering from broncho-pneumonia. About four years previously, while playing with a nickel cent, she swallowed it, and since that time had been a sufferer. Previously healthy and robust, after the accident she became delicate, had constant dyspnoea, and passed through several attacks of pneumonia. She ate very slowly and with great care, for she could not swallow any solid food. It was always necessary for her to have some fluid when she ate, that her food might be washed down. During the first year her throat was sore, and she vomited often, but with great difficulty. In April 1880 she vomited about "half a gallon of pus," intermixed with "blood and corruption." This was just eight years, two months, and one day from the time of the accident. Twelve days later she passed the cent *per anum*. It was quite black and corroded, but still presented all the features plainly. It weighed eight grains less than an ordinary nickel cent., and as it was probably new when swallowed, it may have lost even more than eight grains. The girl is now well, hearty, robust, and playful; talking, eating, running, etc., just as other children. Dr. Singletary was unable to find a parallel case in the published records at his command.

OPERATION DAYS AT THE HOSPITALS.

MONDAY..... Metropolitan Free, 2 P.M.—St. Mark's, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Royal Orthopaedic, 2 P.M.

TUESDAY..... Guy's, 1.30 P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—West London, 3 P.M.—St. Mark's, 9 A.M.—Cancer Hospital, Brompton, 3 P.M.

WEDNESDAY... St. Bartholomew's, 1.30 P.M.—St. Mary's, 1.30 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—St. Peter's, 2 P.M.—National Orthopaedic, 10 A.M.

THURSDAY.... St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Charing Cross, 2 P.M.—Royal London Ophthalmic, 11 P.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Hospital for Women, 2 P.M.—London, 2 P.M.—North-west London, 2.30 P.M.

FRIDAY..... King's College, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.—Royal South London Ophthalmic, 2 P.M.—Guy's, 1.30 P.M.—St. Thomas's (Ophthalmic Department), 2 P.M.—East London Hospital for Children, 2 P.M.

SATURDAY.... St. Bartholomew's, 1.30 P.M.—King's College, 1 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—Royal Free, 9 A.M. and 2 P.M.—London, 2 P.M.

HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

CHARING CROSS.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; Skin, M. Th.; Dental, M. W. F., 9.30.

GUY'S.—Medical and Surgical, daily, exc. Tu., 1.30; Obstetric, M. W. F., 1.30; Eye, M. Th., 1.30; Tu. F., 12.30; Ear, Tu. F., 12.30; Skin, Tu., 12.30; Dental, Tu. F., 12.

KING'S COLLEGE.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th., S., 2; o.p., M. W. F., 12.30; Eye, M. Th., 1; Ophthalmic Department, W., 1; Ear, Th., 2; Skin, Th.; Throat, Th., 3; Dental, Tu. F., 10.

LONDON.—Medical, daily exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p., W. S., 1.30; Eye, W. S., 9; Ear, S., 9.30; Skin, W., 9; Dental, Tu., 9.

MIDDLESEX.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; o.p., W. S., 1.30; Eye, W. S., 8.30; Ear and Throat, Tu., 9; Skin, F., 4; Dental, daily, 9.

ST. BARTHOLOMEW'S.—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, Tu. W. Th. S., 2; Ear, M., 2.30; Skin, F., 1.30; Larynx, W., 11.30; Orthopaedic, F., 12.30; Dental, Tu. F., 9.

ST. GEORGE'S.—Medical and Surgical, M. Tu. F. S., 1; Obstetric, Tu. S., 1; o.p., Th., 2; Eye, W. S., 2; Ear, Tu., 2; Skin, Th., 1; Throat, M., 2; Orthopaedic, W., 2; Dental, Tu. S., 9; Th., 1.

ST. MARY'S.—Medical and Surgical, daily, 1.15; Obstetric, Tu. F., 9.30; o.p., Tu. F., 1.30; Eye, M. Th., 1.30; Ear, W. S., 2; Skin, Th., 1.30; Throat, W. S., 12.30; Dental, W. S., 9.30.

ST. THOMAS'S.—Medical and Surgical, daily, except Sat., 2; Obstetric, M. Th., 2; o.p., W. F., 12.30; Eye, M. Th., 2; o.p., daily, except Sat., 1.30; Ear, Tu., 12.30; Skin, Th., 12.30; Throat, Tu., 12.30; Children, S., 12.30; Dental, Tu. F., 10.

UNIVERSITY COLLEGE.—Medical and Surgical, daily, 1 to 2; Obstetric, M. Tu. Th. F., 1.30; Eye, M. W. F., 2; Ear, S., 1.30; Skin, Tu., 1.30; S., 9; Throat, Th. 2.30; Dental, W., 10.3.

WESTMINSTER.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1; Eye, M. Th., 2.30; Ear, Tu. F., 9; Skin, Th., 1; Dental, W. S., 9.15.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8.30 P.M. Dr. Gilbert Smith will exhibit a specimen of Stricture of the Oesophagus due to Malignant Disease. Mr. Royes Bell will show a Case of Atrophy of Testicle following a Blow. Mr. J. C. Wordsworth, Defects of Sight said to be due to Railway Accidents. Dr. J. Milner Fothergill, The Prospects of Cases of Valvular Disease of the Heart.

TUESDAY.—Pathological Society of London, 8.30 P.M. Mr. Croft, Series of Specimens of Tubercular Disease of Joints. Mr. Makins, Specimens of Synovial Tuberculosis. Dr. Andrew Clark, Abscess of the Liver. Mr. Barwell, 1. Congenital Truncation of Forearm; 2. Unilateral Hypertrophy of Head and Face. Dr. Whipple, Tumour of Spinal Cord. Mr. C. Moullin, Degeneration of the Breast. Mr. Macnamara, Sacral Tumour containing Fœtal Structures. Mr. Shattock, Congenital Sacral Tumour (card). Dr. Pye-Smith, Cystic Disease of Kidneys and Liver.

WEDNESDAY.—Association of Surgeons practising Dental Surgery, 7.45 P.M., Council. 8.30 P.M., Brief Address from Mr. T. Edgelow (President); and casual communications.—Meteorological Society, 7 P.M. Mr. C. Greaves, Relative Humidity; Mr. W. Marriott, The Frost of January 1881 over the British Isles.

THURSDAY.—Harveian Society of London, 8.30 P.M. Dr. Woakes, Cases of Laryngeal Disease; Dr. Cheadle, The Treatment of Empyema.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS respecting editorial matters should be addressed to the Editor, 161, Strand, W.C., London; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 161, Strand, W.C., London.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL, are requested to communicate beforehand with the Manager, 161A, Strand, W.C.

PUBLIC HEALTH DEPARTMENT.—We shall be much obliged to Medical Officers of Health if they will, on forwarding their Annual and other Reports, favour us with *Duplicate Copies*.

CORRESPONDENTS who wish notice to be taken of their communications, should authenticate them with their names—of course not necessarily for publication.

CORRESPONDENTS not answered, are requested to look to the Notices to Correspondents of the following week.

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

THE SURGICAL AID SOCIETY.

SIR,—You have fallen into a very pardonable error with regard to Mr. Simpson's communication to the Charity Organisation Society, to which you refer in an editorial note, page 901 of the number of the JOURNAL for November 27th. The committee to which Mr. Simpson referred is one formed quite outside the Managing Committee of the Surgical Aid Society; and the object it has in view is that of bringing about a reform of the abuses that hang around the system of relief to which the committee tenaciously clings, and which is in the highest degree prejudicial, morally as well as physically, to the afflicted poor, for whose benefit the Society was established and now exists. The Reform Committee have, on several occasions, approached the Surgical Aid Committee for the purpose of pointing out that the system adopted by them, of compelling maimed patients to knock at the doors of strangers (subscribers), and solicit tickets, is in every way detrimental to the self-respect of those who are merely sufferers, and not mendicants.

In extenuation, the committee merely reply that they are afraid to make a change, lest the funds of the Society should suffer. It is, however, an obvious fallacy to suppose that such a mode of administering relief, in the case of those patients suffering the severest forms of injury or illness, can ultimately be for the pecuniary interests of any institution; and, for one whom it attracts, it must repel a dozen or more; and those who are repelled are the most generous givers, who love charity for its own sake; whilst those who are attracted are the selfish, who contribute only what is necessary for their own power and self-importance. There may be some persons of such degraded tastes as to regard their subscriptions to charities in the light of valuable patronage, but I cannot believe it applies to the majority.

It is the practice of the Surgical Aid Society to sell a list of their subscribers to the poor applicant for an appliance. This is accompanied by a suggestion to make a round of London to beg for tickets, but no information is afforded as to whose letters are still available; the consequence is, that an annoying and indiscriminate canvass of all the subscribers is the result. The first letter obtained merely places the patient in communication with the surgeon of the Society, who certifies that a certain instrument is required. The secretary then writes across the letter, that so many letters—necessarily varying according to the cost of the appliance—are needed; and, at the same time, intimates to the patient that, should the requisite number not have been obtained within a certain date, application may be made to him. In a number of cases, which have fallen under my own observation, the patients, after having expended days in a most fatiguing canvass, have failed to obtain the ten, fifteen, or twenty letters, and have consequently lost all hope of the much needed appliance; or the relief has come, alas! too late. The necessity for a wasting and fatiguing canvass, painful and degrading even to a person in fair bodily health (and the opposite of all that is most required for a surgical patient), is, therefore, entailed by the ordinary practice of the Surgical Aid Committee. Now, all that a large body of the subscribers ask of the managers is, to assimilate the practice of the Society, in dealing with applicants for relief, to that of hospitals generally; and, in particular, to that of the branch of the Hospital Sunday Fund, where, as soon as the committee is satisfied as to the patient's necessity, relief is at once prompt and immediate.

I much regret to say that the Reform Committee have, after months and years of perseverance, not succeeded in convincing the Managing Committee of the wrong their system is inflicting on the poor and suffering recipients of the charity. The appeals made have been rejected as traitorous, and even assailed, as at the annual meeting on Friday last, with the coarsest invectives, and motives have been assigned which I should not like to repeat. I enclose the last appeal sent forth by the Reform Committee, that you may judge of the mild argumentative nature of its contents. You will observe that it concludes with a modified form of an alternative scheme for improving the system of relief.

In a former appeal to the President and Committee of the Surgical Aid Society, it was suggested that every subscriber's letter of recommendation should entitle the patient, when certified by the surgeon of the institute, and approved by a competent committee, to the appliance suitable for the relief of his case. If, it was argued, every letter were to represent 10s. 6d. instead of 5s., as at present, then each subscriber of half-a-guinea would receive one letter in place of two; and, inasmuch as, according to the report of 1879, 4,789 appliances were granted in the course of the year, at a cost of £2,788, and an average of 1s. 8d. each; and taking into account the payments made by patients, which amounted in the year to £343; and also the donations of public bodies, amounting last year to £290—some of whom, at least, would not require letters in return—it is quite clear that the present income of the Society is sufficient to supply the appliance at once, and without inflicting a cruel injustice, on the presentation of a single letter of recommendation.

I may add that the action taken by the Reform Committee has already received the cordial approval of 566 subscribers of the Society, amongst whom may be enumerated the Duke of Rutland and the Earl of Shaftesbury, Sir Sidney Waterlow, Mr. Mocatta, Mr. Medley, Dr. A. Carpenter, Lady Penrhyn, Lady Charteris, and a host of influential ladies and gentlemen; and it is proposed to ask for a special meeting of the subscribers, to consider and settle the vexed question, at an early date.—I remain, your most obedient servant,
JABEZ HOGG.
1, Bedford Square, December 6th, 1880.

