

antecedents; (2) the frequency with which certain symptoms occur; (3) the minor ailments to which those who suffer from it are most liable; (4) the climatic conditions with which it is associated.

II. Chorea: (1) its relation to rheumatism and other diseases; (2) the frequency with which certain symptoms occur; (3) the minor ailments to which those who suffer from it are most liable; (4) the conditions predisposing to it.

III. Acute pneumonia: (1) its epidemic prevalence; (2) its communicability; (3) its association with other prevalent diseases and with defective sanitary conditions; (4) its symptoms, duration, and result.

IV. To devise a plan for obtaining complete medical life-histories of patients.

Papers will shortly appear in the JOURNAL, giving details of the objects and scope of each of these inquiries. With regard to the last (No. IV), which at first may appear of alarming dimensions, there will be proposed a plan of a comprehensive nature, which will demand careful discussion, as it will be a new feature of medical research.

A list of the members of the General Committee, as thus far constituted, is appended.

Appointed by Committee of Council.—Professor Humphry, F.R.S. (Chairman); C. G. Wheelhouse, Esq. (Leeds); W. D. Husband, Esq. (Bournemouth); Dr. W. F. Wade (Birmingham); Dr. A. Carpenter (Croydon); Dr. B. Foster (Birmingham); Dr. A. Ransome (Manchester); Dr. E. H. Sieveking (London); Dr. T. C. Allbutt, F.R.S. (Leeds).

Representatives elected on General Committee.—Dr. Duckworth, Dr. Lauder Brunton, F.R.S. (St. Bartholomew's Hospital); Dr. F. Taylor, Dr. Goodhart (Guy's Hospital); Dr. Barlow (University College Hospital); Dr. Sharkey (St. Thomas's Hospital); Dr. Burney Yeo (King's College Hospital); Dr. Stephen Mackenzie, Dr. F. C. Turner (London Hospital); Dr. Cavafy (St. George's Hospital); Dr. Cheadle (St. Mary's Hospital); Dr. Sidney Coupland (Middlesex Hospital); Dr. T. H. Green (Charing Cross Hospital); Dr. O. Sturges (Westminster Hospital); Dr. A. Davidson (Liverpool); Mr. A. Jackson (Sheffield); Dr. D. Drummond (Newcastle); Dr. E. M. Skerritt (Bristol); Dr. C. Parsons (Dover); Dr. Underhill (Edinburgh); Dr. Duffey (Dublin); Dr. G. Atkins (Cork); Dr. Withers Moore (Brighton); Dr. W. J. Tyson (Folkestone); Dr. H. Galton, Esq., F.R.S. (London); Dr. Mahomed (Honorary Secretary).

ASSOCIATION INTELLIGENCE.

COMMITTEE OF COUNCIL:

NOTICE OF QUARTERLY MEETINGS FOR 1882: ELECTION OF MEMBERS.

MEETINGS of the Committee of Council will be held on Wednesday, April 12th, July 12th, and October 18th. Gentlemen desirous of becoming members of the Association must send in their forms of application for election to the General Secretary not later than 21 days before each meeting, viz., March 22nd, June 22nd, September 27th, in accordance with the regulation for the election of members passed at the meeting of the Committee of Council of October 12th, 1881.

November 4th, 1881. FRANCIS FOWKE, General Secretary.

COMMITTEE ON THE STUDY OF AURAL SURGERY.

At a final meeting of this Committee, held on March 1st, the honorary secretary announced that the following gentlemen, previously elected, had signified their willingness to join the Committee since the meeting on January 25th, viz.: Messrs. G. Abbott (London), John Chiene (Edinburgh), Angus Macmillan (Hull), and J. B. Story (Dublin). Dr. Robert Sinclair of Dundee was also elected a member of the Committee, raising the total number of members to fifty-eight. The report drawn up by the Subcommittee was then approved and adopted, and the honorary secretary was directed to forward the same to the Committee of Council, with a list of the members of the Committee appended.

BRANCH MEETINGS TO BE HELD.

SOUTH-EASTERN BRANCH: EAST AND WEST SUSSEX DISTRICTS.—A conjoint meeting of the above districts will be held at Brighton on March 29th, 1882. Dr. Ewart of Brighton will preside. Members desirous of making communications to the meeting are requested to give notice thereof to the Honorary Secretary, West Sussex District, 5, The Steyne, Worthing.

WEST SOMERSET BRANCH.—The spring meeting of this Branch will be held at the Railway Hotel, Taunton, on Thursday, March 30th, at five o'clock. The following question has been settled by the Council as the one on which members should

be invited to express their opinion at the said meeting after dinner: "What is your Experience of the Complications and Sequelæ of Scarlet Fever?"—W. M. KELLY, M.D., Honorary Secretary.—Taunton, February 28th, 1882.

METROPOLITAN COUNTIES BRANCH: NORTHERN DISTRICT.—The next meeting of the District will be held at the house of Dr. Grosvenor, 22, Priory Road, Kilburn, on Wednesday, March 22nd, at 8.30 P.M. Dr. Danford Thomas will read a paper on The Registration of Diseases and Deaths. Mr. Ernest Hart will preside.—G. W. POTTER, M.D., Honorary Secretary, 12, Grosvenor Road, N.—March 6th, 1882.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting of the above District will be held on Thursday evening, March 16th, at half-past eight, at the Hackney New Town Hall; John Wood, Esq., F.R.S., will preside. The following papers will be read: Fred. Treves, F.R.C.S. Eng.: On the Treatment of Strumous Gland-Disease; Joseph Hunt, M.D.: On the Diagnosis and Treatment of Pleuritic Effusions in Children.—FREDERICK WALLACE, Honorary Secretary, 96, Cazenove Road, Upper Clapton, N.—March 1st, 1882.

CORRESPONDENCE.

ETHER *versus* CHLOROFORM.

SIR,—The discussion which is going on in your columns concerning the comparative safety of ether and chloroform is most important, especially as an eminent surgeon has not scrupled to write to the *Times* in such terms as to lead the laity to infer that the surgeon who uses chloroform is wilfully endangering the patient's life. When death occurs during the administration of chloroform, it seems to be always assumed that the anæsthetic was the cause of death; but, if ether were employed, some other explanation is generally suggested. Surely it is not forgotten that patients died on the operating-table quite as frequently, if not more so, before anæsthetics were used. I have only twice seen a major amputation performed without anæsthetics. In one, an amputation of the thigh, the patient died before the operation was completed; in the other, an amputation of the arm, the patient became pulseless and apparently dead in the middle of the operation, and was resuscitated with great difficulty. The symptoms in both these cases were exactly similar to those which are described as due to chloroform; and, if it had been administered, they would certainly have been attributed to it. We must all have heard of patients dying suddenly during the extraction of a tooth, or even while awaiting that operation, when no anæsthetic has been used. I believe that the outcry against chloroform is likely to have prejudicial results, because it not only makes patients about to be operated on nervous and likely to faint, but, what is perhaps of more importance, it causes timidity in the administrator, who, fearing to give an overdose, does not give sufficient to neutralise the shock of the operation. I observe that, in fatal cases, the administrators often seem to take credit to themselves for the small amount of chloroform expended. Lister, in his admirable article on Chloroform in Holmes's *System of Surgery*, points out that most of the fatal cases are probably due to this cause. Macleod, in his valuable clinical lectures on the administration of chloroform, published in your JOURNAL in January 1876, takes much the same view. During my student and house-surgeon days, from 1856 to 1861, chloroform was freely and deeply administered, and deaths were unknown. I cannot but think that the nervousness of the patients and the timidity of the administrators, both caused by the newspaper discussions on the subject, have a great deal to do with the great increase of mortality. It is very probable that the proportion of deaths from ether and chloroform represents the proportion in which they are used. Ether is so inconvenient and so unpleasant to the patient, that chloroform is generally preferred; but those surgeons who use ether proclaim the fact upon the housetops, while those who prefer chloroform say very little about it, as they consider the matter still *sub judice*. The mixture of alcohol, chloroform, and ether, if given boldly and in large quantities, seems to act as well as chloroform alone; but experience only can show whether it is safer. It seems to me, if I may judge from the published cases, that, when the heart fails during the administration of chloroform, much time is wasted in applying galvanism, which is probably useless, and possibly injurious; while Nélaton's plan of inverting the patient appears to be forgotten. I am inclined to think that this, combined with artificial respiration, is the most reliable plan of treatment, as pointed out by Dr. Macleod.

If I had to be operated upon, I should not, with my present knowledge, take ether, if I could get anyone to give me chloroform; but I should stipulate that the drug should be got from a first-rate maker, and tested before it was used.—I am, sir, your obedient servant,

B. J. TUCK, M.R.C.S., etc.,

Surgeon to the Seaford Convalescent Hospital.

Seaford, Sussex, March 5th, 1882.

thus making the amount of his remuneration dependent upon the results obtained, the vaccination-officer is stimulated to increased exertion, and an efficient check can be kept upon his work.

VACCINATION IN THE CENTRAL PROVINCES OF INDIA.

IN his report on vaccination in the central provinces during the season of 1880-1, Dr. Hutchinson states that in no year since the introduction of systematic vaccination have so many cases been vaccinated. The total number of operations performed was 325,021, 302,226 of which were successful. Dr. Hutchinson adds that the amount of work done could have been largely increased, had all conditions been favourable. Six of the eighteen districts reported serious decrease of work, and in the three the increase was very inconsiderable. If it had not been for the large increase reported from the other districts, the figures of the past season would not have borne a favourable comparison with those of the previous one. Among the chief causes of the decrease were the apathy and idleness of many of the native vaccinators, and gross neglect on the part of others. It should be mentioned, however, that several of the vaccinators were employed on census duty. Revaccination does not appear to have received the attention which it merits, the operation having been performed in only thirteen of the eighteen districts; and in nine of these districts the numbers were insignificant. Alluding to the dislike which the natives have to vaccination, Dr. Hutchinson states that, while superstition governs the opinions of the people, it is hopeless to expect that vaccination will be welcomed, though their prejudices may be conciliated by judicious and considerate treatment. He thinks that the practice of vaccinating the children of low-caste parents should be abandoned in favour of the plan of commencing with the children of the higher castes, and that the practice of operating upon infants of very tender age should be given up.

SUPERANNUATION OF POOR-LAW MEDICAL OFFICERS.

SIR,—I have read with much interest the appeal of the gentleman who signs himself "A Dispensary Doctor", in your issue of the 25th ultimo, and generally I concur with him in his statement as to the differential character of the position of the English parish doctor when contrasted with his Irish confrère; but though, in England, a greater prospect does exist of eking out the parish pay by general practice, yet, in many instances, unfortunately far too frequent, the condition of provincial district medical officers here is equally as bad as in the worst parts of Ireland. Again, it would not be difficult to make out a list infinitely longer, and in many instances equally distressing, of men who have been refused superannuation, or who feebly hold on to office, because their stipends, small as they may be, afford them almost their entire means of subsistence. Should any of your readers desire to get authentic information on this subject, I would refer them to the return obtained by my brother, Mr. Thorold Rogers, two years ago, and which may be purchased for a penny of Messrs. Hansard, the parliamentary printers, Great Queen Street, Lincoln's Inn Fields.

Your correspondent solicits the moral support of his English confrères. I write to state that he may rely on securing the co-operation of our Association whenever the time arrives when such will be of service. I use the word "time arrives"; for at present, and mainly owing to the obstructive policy of your correspondent's representatives, it is very doubtful whether we shall get legislation of any kind during the present session. Our support will take the shape of petitioning the House; we shall also seek an interview with the Irish Secretary, and, if considered advisable, with the Premier, and urge on them the necessity for an amendment of the Act. In the meanwhile, I would urge on your correspondent and on his medical friends to use that influence which they may possess to diminish the obstructive activity of the Biggars, O'Donnells, and Sextons, etc., whose proceedings in Parliament render all legislation impossible.—I am, sir, yours obediently,

JOSEPH ROGERS, Chairman of Council Poor-law Medical Officers' Association.
33, Soho Square, March 1st, 1882.

UNIVERSITY INTELLIGENCE.

UNIVERSITY OF CAMBRIDGE.

TEACHING OF ANATOMY.—The Professor of Anatomy gives notice that:—1. Practical Anatomy in the dissecting room will be continued during the Easter vacation; 2. The Demonstrator will take classes of students preparing for the second examination for M.B. on Mondays Wednesdays and Fridays at 12 noon during the Easter vacation, beginning on March 27th; 3. The Demonstrator of Anatomy will give Demonstrations in Human Anatomy during the Easter term on Mondays and Fridays, at 12, noon, beginning on Monday, April 24th; 4. Mr. MacAlister will lecture on the Mechanics of the Human Skeleton during the Easter term on Wednesdays, at 12, noon, beginning on Wednesday, April 26th. These lectures will be given at the Old Anatomical School, and will be open to members of the anatomical class and to members of St. John's College without fee. The above demonstrations and lectures are intended more especially for students preparing for the natural sciences tripos.

OBITUARY.

GEO. BODINGTON, M.D. Erlangen, L.R.C.P. Edin., L.S.A.

DR. GEORGE BODINGTON, whose death occurred on February 5th, at Sutton Coldfield, in his eighty-third year, was a well-known and widely-respected practitioner. He was a descendant of one of the old yeoman families of Warwickshire—the Bodingtons of Cubbington, who have tilled their own land in that parish since the time of Henry VIII. As a boy, he was sent to Magdalen College School, at Oxford; and, when seventeen years old, was apprenticed to a Mr. Syer, a surgeon of Atherstone, by whom he was transferred, a year later, to a Mr. Wheelwright, a surgeon in the City of London. He afterwards became a student at St. Bartholomew's Hospital, and obtained the L.S.A. in 1825. On this qualification Dr. Bodington began to practice in Birmingham; but in a very short time he removed to the neighbouring village of Erdington, where he carried on a very successful practice until 1843. In this year, he determined to devote his whole time to the treatment of the insane at the Driffield House Asylum, Sutton Coldfield, of which he had become proprietor in 1836. At this work he continued until his retirement in 1868, when he handed the asylum over to his son, Dr. G. F. Bodington. Since that date he mainly occupied himself with public work in connection with the royal borough of Sutton Coldfield, of which he was warden in the years 1852-3, 1853-4, and, up to 1881, one of its most active members and magistrates.

Dr. Bodington was not a silent member of the profession. An acute observer, a vigorous thinker, and a good solid and fluent speaker, he was always able to take his share in the public work connected with his position. In politics, he was a man of strong opinions, and to the last was an ardent Protectionist, never wavering in his faith, but ever earnest in advocating the theories in which he believed. It is more especially, however, as a forgotten medical author that we would speak of Dr. Bodington. His first medical essay was *A Letter on a Case of Asiatic Cholera, addressed to the President and Council of the Central Board of Health, London*, and published in 1831. This pamphlet was a vigorous protest against the use of bleeding and calomel, and displayed the same tendency to think and reason for himself which made his later *Essay on the Treatment and Cure of Pulmonary Consumption*, 1840, so very noteworthy. In this little book, Dr. Bodington anticipated by many years the modern views on the treatment of phthisis. In 1840, consumptives were closely and carefully confined, from a fear of the evil influence of cold fresh air. Against this, Dr. Bodington earnestly protested, as "forcing them to breathe over and over again the same foul air contaminated with diseased effluvia of their own persons". Arguing against the value of antimony, calomel, and bleeding, he urged the free administration of nutritious food and stimulants, with plenty of exercise in pure air, and, if possible, dry "frosty air". He did not value sea-air highly, but contended for the drier air of inland districts. His great specific was cold dry air, which, he said, had a most powerful influence in "healing and closing of cavities and ulcers of the lungs". It is remarkable that a village doctor should have arrived, in 1840, at these conclusions, which anticipate some of our most recent teachings. He was severely handled by the reviewers, and so discouraged from pursuing observations which might have been of the greatest value.

In 1857, some years after he had given up general practice, a writer in the *Journal of Public Health* unearthed Dr. Bodington's treatise, and did him tardy but ample justice. We are glad again to claim for a general practitioner the high credit of having been the first, or among the first, to advocate the rational and scientific treatment of pulmonary consumption. Dr. Bodington was for many years a member of the Birmingham and Midland Counties Branch of the British Medical Association.

ALFRED GARDINER BROWN, F.R.C.S. Ed.

MR. GARDINER BROWN, was, as a student, well known at Guy's Hospital for his scientific attainments, great mechanical ability, and inventive skill. He was indeed a born inventor. Recently as surgeon-aurist to the London Hospital, his scientific and mechanical proclivities proved of high service to himself and to the cause of aural surgery. He was gradually becoming recognised as a leading aurist, when his career was suddenly cut short by death, which occurred on February 23rd, at the age of 44, after six days' illness. His kindly nature, his unobtrusive manners, his punctilious sense of honour, and the courageous cheerfulness with which he bore trials of no ordinary severity, endeared him to an appreciative circle of professional and private friends.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

A MEETING of the Council of the College was held on Thursday, the 9th March. The minutes of the previous meeting of Council were read and confirmed.

It was decided to send an address of congratulation and sympathy to the Queen, in reference to the late dastardly attempt on Her Majesty's life.

The formula for the necessary alteration of the standing rule relating to the further study of rejected candidates for the primary membership examination was approved. Rejected candidates will in future be required to give evidence of three months' anatomical and physiological study before again presenting themselves for examination, instead of three months' dissection as heretofore.

Messrs. W. M. Coates of Salisbury and Alexander Harkin of Belfast were elected Fellows.

Mr. Christopher Heath's motion, that no candidate be allowed to present himself for the pass membership examination until a period of two years has elapsed since the date of passing the primary examination, was referred to a Committee to report thereon to the Council.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, March 2nd, 1882.

Atkinson, Thomas Reuel, West Park, Clifton, Bristol.
Key, David Thomas, The Oval, Brixton, S.W.
Prangley, Henry John, West Cowes, Isle of Wight.
Williams, Charles, Llangennech, Carmarthen.

MEDICAL VACANCIES.

The following vacancies are announced :—

DENTAL HOSPITAL OF LONDON, Leicester Square.—Administrator of Anæsthetics. Applications by March 13th.

DENTAL HOSPITAL OF LONDON, Leicester Square.—Assistant Dental Surgeon. Applications by March 13th.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E. —Clinical Assistant. Applications by March 23rd.

EPSOM UNION, DISTRICT OF LEATHERHEAD AND FETCHAM.—Medical Officer and Public Vaccinator. Salary, £50 per annum. Applications by March 21st.

ESSEX AND COLCHESTER GENERAL HOSPITAL.—Member of Surgical Staff. Applications by the 29th March.

ESSEX AND COLCHESTER GENERAL HOSPITAL.—Physician. Applications by the 29th March.

GENERAL HOSPITAL FOR SICK CHILDREN, Pendlebury, Manchester.—Resident Medical Officer. Salary, £80 per annum. Applications by March 22nd.

GENERAL INFIRMARY, NORTHAMPTON.—Assistant House-Surgeon. Salary, £80 per annum. Applications by the 13th March.

GREAT NORTHERN HOSPITAL, Caledonian Road, N.—Obstetric Physician. Applications to the Secretary by March 31st.

GREAT NORTHERN HOSPITAL, Caledonian Road, N.—Surgeon. Applications to the Secretary by March 31st.

HARTLEPOOL UNION—Medical Officer and Public Vaccinator. Salary, £50 per annum. Applications by the 17th instant.

HARTLEPOOL UNION WORKHOUSE—Medical Officer. Salary, £65 per annum. Applications by the 17th instant.

KENT AND CANTERBURY HOSPITAL—House-Surgeon. Salary, £80 per annum. Applications by April 6th.

KENT COUNTY LUNATIC ASYLUM, Chatham Downs, near Canterbury.—Second Assistant Medical Officer. Salary, £120 per annum. Applications by the 21st instant.

KIDDERMINSTER FRIENDLY SOCIETIES' MEDICAL ASSOCIATION—Medical Officer. Applications by the 11th instant.

KNIGHTON UNION—District Medical Officer. Salary, £40 per annum. Applications by 29th instant.

MOUNTMELICK UNION—Medical Officer for Maryborough Dispensary District. Salary, £100 per annum, with £20 yearly as Medical Officer of Health, registration, and vaccination fees. Election on the 17th instant.

NORTH WALES COUNTIES LUNATIC ASYLUM, Denbigh. — Medical Superintendent. Salary, £450 per annum. Applications by the 29th instant.

NOTTINGHAM DISPENSARY—Resident Surgeon. Salary, £200 per annum. Applications by March 25th.

PARISH OF GAIRLOCH, Ross-shire.—Medical Officer. Salary, £100 per annum. Applications to the Chairman, Osgood H. Mackenzie, Esq.

RICARTSBAR ASYLUM, Paisley.—Superintendent. Salary, £100 per annum. Applications to R. Rowand, Inspector of Poor, Paisley.

ROCHESTER AND DISTRICT FRIENDLY SOCIETIES' MEDICAL AID ASSOCIATION—Assistant Medical Officer. Salary, £120 per annum. Applications to H. T. Kybett, 48, High Street, Strood, Kent, by March 14th.

ST. LUKE'S HOSPITAL—Clinical Assistant. Applications by March 23rd.

TAUNTON UNION—Medical Officer. Salary, £52 per annum. Applications by March 18th.

TOWCESTER UNION—Medical Officer. Salary, £60 per annum. Applications by March 20th.

MEDICAL APPOINTMENTS.

ELLIOTT, J. Trimble, M.D., elected Medical Officer of the Kilmore Dispensary, co. Monaghan.

FIRTH, Eustace, M.B., C.M., appointed Medical Officer of the Rishangles District of the Hartismere Union.

HARRISON, W. A., M.B., appointed Medical Officer of Health for Pontefract Borough.

LIMONT, James, M.A., B.Sc., M.R.C.S., appointed Senior House-Surgeon to the Newcastle Infirmary.

NICOLL, T. V., M.R.C.S., appointed Honorary Medical Officer to the British Asylum for Deaf and Dumb Females at Clapton, *vice* A. Boswell, M.B., resigned.

OWEN, J. W., M.R.C.S., appointed Medical Officer to the St. Asaph Union.

POPHAM, S. L., M.D., appointed Resident Physician to the Craiglockhart Hydro-pathic Establishment, *vice* T. D. Wilson, M.D., resigned.

PUDDICOMBE, F. M., L.R.C.P., appointed House-Surgeon to the Teignmouth, Dawlish, and Newton Infirmary and Convalescent Home, Teignmouth, *vice* F. W. H. D. Harris, M.R.C.S., resigned.

ROBINSON, J. J., M.B., appointed House-Surgeon to the St. Mark's Ophthalmic Hospital, Dublin, *vice* S. Davis, M.B., resigned.

SMYTH, A. C. B., L.R.C.P., appointed Assistant Medical Officer and Chloroformist to the Hospital for Women and Children.

STAMFORD, Wm., L.R.C.P.Lond., M.R.C.S.Eng., and L.S.A., appointed Medical Officer of Health for Tunbridge Wells, *vice* W. H. Rix, M.R.C.S. and L.S.A., resigned.

STREET, A. F., M.B., appointed Junior Resident Medical Officer to the Radcliffe Infirmary, Oxford.

THOMAS, J. H., L.R.C.P., appointed Medical Officer of Health to the Wellingborough Rural Sanitary Authority.

TUKE, J. B., jun., M.B., appointed Assistant Medical Officer to the Montrose Royal Lunatic Asylum, *vice* A. Thomson, M.B., resigned.

VENN, A. M. D., appointed Honorary Physician to the British Lying-in Hospital, *vice* Arthur Edis, M.D.

WALSH, W. A. S., M.R.C.S.Eng., L.S.A., appointed one of the Medical Officers to the Worcester Dispensary and Provident Medical Institution, *vice* J. D. Jeffery, M.R.C.S.Eng., deceased.

WELCH, Geo., M.R.C.S., appointed Assistant House-Surgeon to the St. Bartholomew's Hospital, Chatham, *vice* G. H. Patterson, M.R.C.S., resigned.

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.

MARRIAGE.

MOFFAT—ADIE.—At 2, St. Colme Street, Edinburgh, on the 2nd instant, by the Rev. John A. Cooke Auchtergaven and the Rev. T. S. Anderson Crailing, Robert Moffat, M.D., Falkirk, to Martha, eldest daughter of the late James Gray, of Kalemouth, Roxburghshire, and widow of the late James Arthur Adie, Voe, Shetland.

LADY HARRIET BENTINCK, who gave a donation of £4000 sterling to purchase new premises for the International Hospital at Naples, has added a new gift of £500 sterling to the former sum.

TEN thousand tons of ice, gathered from a river which contained sewage, we hear, have been condemned by the Newhaven Board of Health.

THE Brighton Town Council have decided to purchase Preston Park from Mr. Benett-Stanford, at the price of £50,000, for the purpose of converting it into a public recreation-ground.

AN effort is being made to organise a branch of the British Medical Association at Allahabad, the capital of the North-Western Provinces.

THE death of Elenor, Lady Burrows, the wife of Sir George Burrows, M.D., F.R.S., late President of the Royal College of Physicians, occurred a few days ago. Her ladyship was the youngest daughter of the late Mr. John Abernethy, F.R.S., formerly President of the Royal College of Surgeons.

THE managers of the Royal Infirmary of Edinburgh have received from Messrs. J. C. Brodie and Sons, W. S. Edinburgh, the sum of £13,500 for the funds of the Institution from the estate of the late Dr. Thomas Hunter, Deputy Inspector-General of Hospitals.

CHOLERA AT TRICHINOPOLY.—There has been a serious outbreak of Cholera at Trichinopoly, and 2,457 persons are reported to have suffered from it since the 24th of October, when it first made its appearance.

WEST KENT MEDICO-CHIRURGICAL SOCIETY.—The sixth meeting of the twenty-sixth session was held at the Royal Kent Dispensary, Greenwich Road, on Friday evening, March 3rd, when the following papers were read: Remarks on Succession within the Abdomen, by J. Braxton Hicks, M.D., F.R.S.; a Case of Intestinal Obstruction which Recovered under the Use of Belladonna, by R. Carrington, M.D., physician to the Seaman's Hospital.

ANTISEPTIC SOLUTIONS OF ATROPINE AND ESERINE.—Kraemer believes (*Corr-Blatt für Schweizer Aerzte*, 1881, No. 19) that the solutions of atropine and eserine used in eye-diseases are not unfrequently the cause of irritation, and even catarrh, through their containing fungi—e.g., *leptothrix*, etc. He recommends the addition to the solutions of 4 per cent. of boracic acid, or 0.1 per cent. of carbolic acid. He has found, from numerous experiments, that not only do these solutions then remain longer clear, but there is much less frequently irritation or inflammation during their use.

HEALTH OF FOREIGN CITIES.—The following figures are deduced from a table in the Registrar-General's last weekly return, and afford trustworthy indications of the recent health and sanitary condition of various foreign and colonial cities. According to the most recently received official weekly returns, the annual death-rate in the three principal Indian cities averaged 34.9 per 1000, and was equal to 29.3 in Calcutta, 34.0 in Bombay, and 42.4 in Madras. Cholera caused 12 deaths in Bombay, 24 in Calcutta, and 26 in Madras; 42 deaths from measles were returned in Bombay, and 6 from small-pox in Madras. The death-rate in Alexandria was 34.7, scarcely differing from the rate in the previous week; 8 fatal cases of typhoid fever were reported. In twenty European cities, the death-rate averaged 32.4, and exceeded by no less than 7.9 the mean rate prevailing last week in twenty-eight of the largest English towns. The death-rate in St. Petersburg was equal to 49.0, but showed a further slight decline from the still higher rates in previous weeks; 46 deaths resulted from typhus and typhoid fevers, and 18 from scarlet fever. In three other northern cities—Copenhagen, Stockholm, and Christiania—the death-rate averaged 30.2, measles causing 22 deaths in Copenhagen and 6 in Christiania. In Paris, the death-rate was 31.7, and scarcely differed from that which prevailed in the previous week; 64 deaths were referred to diphtheria and croup, 36 to typhoid fever, and 11 to small-pox. The rate in Geneva was equal to 30.1. In Brussels, the rate fell again to 26.2, although the deaths included 2 from small-pox and 3 from measles. In the three principal Dutch cities, the death-rate did not average more than 25.6, and was equal to 24.0 in the Hague, 25.7 in Amsterdam, and 26.4 in Rotterdam. Small-pox caused one death in Rotterdam. The Registrar-General's table includes returns from nine German and Austrian cities, in which the death-rate averaged 32.0; it ranged from 25.3 and 25.9 in Berlin and Dresden, to 40.1 and 47.1 in Munich and Buda-Pesth. Small-pox caused 19 deaths in Vienna, 9 in Prague, and 8 in Buda-Pesth; and diphtheria 69 deaths in Berlin. The death-rate was equal to 37.4 in Venice, where 2 deaths were referred to diphtheria and croup. No returns were received from any other Italian city. The average death-rate in four of the principal American cities was equal to 29.2; the rates in these cities ranged from 25.6 in Philadelphia to 34.5 in New York. Small-pox caused 20 deaths in New York, 15 in Philadelphia, and 2 in Baltimore; and diphtheria was more or less fatally prevalent in each of these American cities.

BEQUESTS AND DONATIONS.—Mr. Osgood Torkington, of Holly Lodge, Clapham Park, bequeathed £1,000 Consols, each, to the East London Hospital for Children, the Royal Hospital for Children and Women, the Hospital for Epilepsy and Paralysis and other Diseases of the Nervous System, the Evelina Hospital for Sick Children, the Samaritan Free Hospital for Women and Children, the West London Hospital, the Victoria Hospital for Sick Children, the North-Eastern Hospital for Children, the Hospital for Women, and the Royal Hospital for Diseases of the Chest; and £50 to the Clapham Dispensary; and £6,666 13s. 4d. Consols to be divided between the Metropolitan Free Hospital, the Cancer Hospital, the Royal Free Hospital, and the Westminster Hospital, upon the death of his niece Emma Clayton; £6,666 13s. 4d. Consols, to be divided between the Charing Cross Hospital, the Middlesex Hospital, St. Mary's Hospital, and the Great Northern Hospital, upon the death of his niece Clara Worger; £3,333 6s. 8d. to be divided between University College Hospital and St. Mark's Hospital, upon the death of his niece Edith Dinah Torkington; £3,333 6s. 8d. to be divided between King's College Hospital and the Poplar Hospital, upon the death of his niece Susannah Frances Torkington; and £5,000, New 3 per Cents., to be divided between the Royal Westminster Ophthalmic Hospital, the Royal Orthopædic Hospital, and the Hospital for Sick Children, upon the death of Selina Smith.—Colonel Cecil William Forester, of Admaston, Salop, bequeathed £2,500 to the Westminster Hospital, £2,000 to the County of Salop Infirmary, £1,000 to the Brompton Hospital for Consumption, £1,000 to the Royal Hospital for Incurables, and £500 to the Western Dispensary, Broadway, Westminster.—Sir Julian Goldsmid, Bart., has given one hundred guineas, and Lady Goldsmid fifty guineas, to University College Hospital.

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 Orthopædic, 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 Orthopædic, 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. Th. 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; Orthopædic, 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; Orthopædic, 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, M. Th., 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. Tu. Th. F., 2; Ear, S., 1.30; Skin, W., 1.45; S., 9.15; Throat, Th., 2.30; Dental, W., 10.3.

WESTMINSTER.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 3; 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. The President (Mr. Francis Mason): Opening Address. Dr. DREWITT: A Case of Marked Tetany in a Child (living specimen). Mr. REGINALD HARRISON (of Liverpool): The Early Treatment of Prostatic Enlargement. Dr. FANCOURT BARNES will exhibit a specimen of Stricture of the Rectum, mistaken for Retroflexion of the Uterus.—Royal College of Surgeons of England, 4 P.M. Professor W. H. Flower: On the Anatomy, Physiology, and Zoology of the Edentata.

TUESDAY.—Royal Medical and Chirurgical Society, 8.30 P.M. Dr. THEODORE WILLIAMS: On the Influence of Albuminuria on the Temperature Curve of Phthisis Pulmonalis; with an account of its Pathology.

WEDNESDAY.—Royal College of Surgeons of England, 4 P.M. Professor W. H. Flower: On the Anatomy, Physiology, and Zoology of the Edentata.

THURSDAY.—Harveian Society of London, 8 P.M. Dr. FITZPATRICK: A Case of Puerperal Septicæmia. Mr. W. B. OWEN: A Retrospect of Fifty Years' Professional Experience.

FRIDAY.—Royal College of Surgeons of England, 4 P.M. Professor W. H. Flower: On the Anatomy, Physiology, and Zoology of the Edentata.

