which enabled sin to be committed with impunity. Being reminded that this was most powerful testimony to the hygienic success of the Acts, he replied that he would quilify his previous statement by saying that sin could be committed with impunity "to a certain extent"—but to what extent the reverend witness did not define.

He handed in a report obtained from the secretary of the London Lock Hospital, from which it appeared that out of 537 patients under the Acts admitted in 1881, only 24 were reclaimed, i.e., a little over 5 per cent.: while, out of 642 voluntary patients, 272 were rescued, or rather more than 40 per cent. From this he argued as to the "hardeneffect of the Acts, and the great difficulty in obtaining any good

moral results with the women sent in under its provisions.

But it is not denied that there is much greater difficulty in dealing with women sent in under the Acts, for these reasons. In the first place, the great majority of them belong to the lowest and most ignorant class of the population. On the other hand, the voluntary patients, who from the very fact of their being such, show a desire for their physical welfare, belong to a totally different category. Many, no doubt, are prostitutes, but they mostly belong to a superior class, while very many are dressmakers, shop-girls, servants, and such like, and numbers of respectable married women are admitted to the "voluntary" wards in the course of the year. Naturally, with such as these any efforts at reclamation are much more successful. Moreover, the figures 537 do not represent that number of distinct patients, as many of the women sent in under the Acts are admitted several times in the course of the year, and on each occasion such a one would be entered as a separate case. However, it was decided to call as the next witness the Rev. Flavel Cook, Chaplain to the London Lock Hospital, who will, no doubt, explain these points more fully.

Mr. Baker referred to a petition from Woolwich for the repeal of the Acts, signed by the large number of 8,000 persons,—the total population of the district subject to the Acts being about 40,000. Signatures to this petition were collected by his mission women and others. He himself signed it, and he was the only Church clergyman who did so. Nor was it signed by one single magistrate, or member of the Local Board. He was not acquainted with the views of the present Members of Parlia-

ment for Greenwich on the subject of the Acts.

The reverend gentleman stated positively that he had never heard of any case in which the police had acted harshly in carrying out the Acts, and from his position he could hardly fail to know if there had been such. Not only had no respectable women been molested, but he was not aware of a single instance even of undue interference with a prostitute on their part.

COLLECTIVE INVESTIGATION COMMITTEE.

ON THE COLLECTIVE INVESTIGATION COMMITTEE'S MEMORANDUM ON CHOREA.

SIR,-The criticism which Dr. Donkin has offered on the memorandum on chorea calls for some reply. The paper in question was written by Dr. Stephen Mackenzie, on behalf of the committee, and was presented to the committee for revision and criticism before it was published. Dr. Sturges, who is a member of our committee, was present when the paper was under discussion; he had previously pointed out the necessity of distinguishing between well-pronounced articular and equivocal rheumatism in this inquiry, and I was under the impression that his requirements had been met; I find, however, that he also objects to the passage to which Dr. Donkin takes exception. The acceptance by the committee of incomplete evidence of rheumatism in these cases exists only in appearance, but not in fact.

If a general inquiry were made whether the patient had ever suffered from rheumatism, it is certain that, as Dr. Sturges pointed out, both cases of well-recognised rheumatism and also those with "vague pains and feverishness," would alike be returned. The committee have taken the precaution, therefore, of asking for returns to be made under the head of "Rheumatism" in three classes, viz. :—

Rheumatism—With distinct joint affection. Date.

With vague pains. Date. When we are in possession of our returns, it will, therefore, be possible to separate all those cases with only "vague pains," and exclude them from the distinctly rheumatic group. Dr. Donkin may rest assured that the committee will not regard every case of "vague pains" occurring in children as rheumatic; but it will be necessary to judge

Thus, I suppose Dr. Donkin would each case on its own merits. scarcely refuse to admit "vague pains with feverishness" to be rheumatic when repeatedly occurring in the case of a child who, previously to an attack of chorea, had developed well-marked heart-disease, and who had a strong family history of rheumatism. Such a case as this is no imaginary one; I have seen many like it. Indeed, the very common opinion that "vague pains with feverishness" in children are often rheumatic, has been arrived at quite apart from the question of chorea, from the frequent occurrence of these symptoms in those children who develope heart-disease, and have a strong family history F. A. MAHOMED, of rheumatism.-Yours faithfully,

12, St. Thomas's Street, Southwark, S.E., Hon. Secretary. April 8th, 1882.

ASSOCIATION INTELLIGENCE.

BRITISH MEDICAL ASSOCIATION: FIFTIETH ANNUAL MEETING.

THE Fiftieth Annual Meeting of the British Medical Association will be held at Worcester, on Tuesday, Wednesday, Thursday, and Friday, August 8th, 9th, 10th, and 11th, 1882.

President: BENJAMIN BARROW, F.R.C.S., Consulting-Surgeon to the Royal Isle of Wight Infirmary.

President-elect: WILLIAM STRANGE, M.D., Senior Physician to the General Infirmary, Worcester.

An Address in Medicine will be delivered by W. F. WADE, F.R.C.P.,

Physician to the Birmingham General Hospital.

An Address in Surgery will be delivered by WILLIAM STOKES, M.D., F.R.C.S.I., Professor of Surgery in the Royal College of Surgeons, Ireland.

The business of the Association will be transacted in Eight Sections, viz.:--

SECTION A. MEDICINE. - President: Thos. Clifford Allbutt, M.D., F.R.S. Vice-Presidents: George W. Balfour, M.D.; William Henry Broadbent, M.D.; G. H. Philipson, M.D. Secretaries: Edwin Rickards, M.B., 14, Newhall Street, Birmingham; H. Ashby, M.D., 13, St. John Street, Manchester.

SECTION B. SURGERY.—President: Augustin Prichard, F.R.C.S. Vice-Presidents: T. W. Walsh, F.R.C.S.; Reginald Harrison, F.R.C.S.; T. H. Bartleet, M.B., F.R.C.S. Secretaries: F. E. Manby, F.R.C.S., 10, King Street, Wolverhampton; Richard Clement Lucas, M.B., F.R.C.S., 18, Finsbury Square, E.C.

SECTION C. OBSTETRIC MEDICINE.—President: William Leishman, M.D. Vice-Presidents: Henry Vevers, M.R.C.S.; J. G. Sinclair Coghill, M.D.; Arthur W. Edis, M.D. Secretaries: C. J. Cullingworth, M.D., 25, St. John Street, Manchester; Tom Bates, L.R.C.P., Worcester.

SECTION D. PUBLIC MEDICINE.—President: Alfred Carpenter, M.D. Vice-Presidents: Alfred Hill, M.D.; Horace Swete, M.D.; E. T. Wilson, M.B. Secretaries: Geo. Haynes Fosbroke, jun., M.R.C.S., Bidford, Redditch; Francis Edward Atkinson, L.R.C.P., Settle, Vorkshire.

SECTION E. ANATOMY AND PHYSIOLOGY.—President: George M. Humphry, M.D., F.R.S. Vice-Presidents: S. S. Roden, M.D.; Frank Payne, M.D.; Gerald Yeo, M.D. Secretaries: J. B. Haycraft, M.D., Mason's College, Birmingham; James Shuter, M.B., F.R.C.S., 58, New Broad Street, London.

SECTION F. PATHOLOGY.—President: J. Hughlings Jackson, M.D., F.R.S. Vice-Presidents: W. R. Gowers, M.D.; H. T. Butlin, F.R.C.S.; Wm. Smith Greenfield, M.D. Secretaries: Sidney Coupland, M.D., 14, Weymouth Street, London; F. Treves, F.R.C.S., 18, Gordon Scurze London Gordon Square, London.

SECTION G. OPHTHALMOLOGY.—President: James Vose Solomon, F.R.C.S. Vice-Presidents: David Everett, F.R.C.S.; F. Mason, M.R.C.S.; Edwyn Andrew, M.D. Secretaries: Geo. Edwin Hyde, L.R.C.P., Worcester; J. A. Nunneley, M.B., 22, Park Place, Leeds.

SECTION H. OTOLOGY .- President: W. Laidlaw Purves, M.D. Vice-Presidents: Geo. P. Field, M.R.C.S.; A. H. Jacob, M.D.; E. Cresswell Baber, M.B. Secretaries: J. J. Kirk Duncanson, M.D., 22, Drumsheugh Gardens, Edinburgh; Peter McBride, M.D., 20, Alva Street, Edinburgh.

Honorary Local Secretaries: George W. Crowe, M.D., Shaw Street,

Worcester; H. C. Moore, M.R.C.S., 7, King Street, Hereford; Thelwell Pike, M.D., 2, Montpellier, Great Malvern.

Honorary Treasurer: G. A. Sheppard, M.R.C.S., Worcester.

TUESDAY, AUGUST 8TH.

2.15 P.M.—Meeting of Committee of Council.

3 P.M.—Meeting of the Council of 1881-82.

4.15 P.M.—Short service in the Cathedral, with sermon by the Dean of Worcester.

8 P.M.—General Meeting. President's Address; Annual Report of Council, and other business. Tea and Coffee after the Meeting.

WEDNESDAY, AUGUST 9TH.

9.30 A.M.—Meeting of Council of 1882-83.

11 A.M.—Second General Meeting. Address in Medicine.

1.30 P.M.—Luncheon given by the Worcester and Hereford Branch to Members of the Association (limit of to 500), and afterwards presentation of bust of Sir Charles Hastings to the Mayor and

sentation of bust of Sir Charles Hastings to the Mayor and Corporation of Worcester.

3 to 5.30 P.M.—Sectional Meetings.

7.45 P.M.—Special Service in the Cathedral, at which, by permission of the Dean, Haydn's Sacred Oratorio, "The Creation", will be performed by the Philharmonic Society, assisted by members of the Gloucester and Hereford Choirs, and conducted by W. Done, Esq., Organist to the Cathedral.

THURSDAY, AUGUST 10TH.

9 A.M.—Meeting of the Committee of Council.
10 A.M.—Third General Meeting. Reports of Committees.
11 A.M.—Address in Surgery.
2 to 5.30 P.M.—Sectional Meetings.
6.30 P.M.—Public Dinner. Tickets will not be issued later than twelve o'clock on the day of the dinner.

FRIDAY, AUGUST 11TH

9.30 to 11.30 A.M.—Sectional Meetings.

'11.30 P.M.—Concluding General Meeting. Reports of Committees.

3 P.M.—Garden Party, at Madresfield Court, Great Malvern, given by the Lord-Lieutenant and the Countess Beauchamp.

9 P.M.—Soireé of the President and G. W. Hastings, Esq., M.P.

Excursions to places of interest in the neighbourhood-Malvern, Hereford, the Wye, Stratford-on-Avon, etc.—on Saturday, August 12th, are in contemplation.

ANNUAL MUSEUM.

The sixteenth annual exhibition of objects of interest in connection with medicine, surgery, and their allied sciences will take place in the Music Hall, Worcester, during the second week of August, 1882; the floor-space of which building amounts to 4,000 square feet. The Committee appointed to take charge of the arrangements for this Museum will be glad to receive—I. Pathological specimens (wet or dry); 2. Drawings or diagrams illustrating disease; 3. Casts or models; 4. Surgical instruments and appliances; 5. Microscopic preparations; 6. Microscopes, thermometers, and other instruments of investigation; 7. Preparations, diagrams, etc., relating to investigations in anatomy and physiology; 8. New drugs, chemicals, pharmaceutical preparations, and dietetics; 9. Sanitary appliances, including drawings or models illustrating the ventilation of hospitals or private dwellings; 10. New medical books. It is intended that the surgical instruments, sanitary appliances, etc., shall be bond fide novelties, or improvements on those in common use. The pathological specimens will be arranged in departments.

Exhibition of Instruments and Apparatus.—It is intended to arrange for the exhibition of complete series of instruments, electro-therapeutic apparatus, instruments for physical diagnosis, and appliances relating to sanitary science and public health. Facilities will also be afforded, when requested, for the display of instruments in action, or for special

explanation by the exhibitors of apparatus, etc.

The Catalogue.—It is intended to print a catalogue, which will be as complete as circumstances may permit. The Committee earnestly request those who intend to exhibit to bear in mind that it is impossible that descriptions, etc., can be included in the catalogue unless sent in early. They should be received at least a month before the meeting, that is, not later than July 8th.

Communications, objects intended for exhibition, etc., to be addressed to the Secretary of the Museum Committee, Mr. J. RANDLE BUCK, 26, Sidbury, Worcester. During the week preceding the meeting all articles should be sent direct to the Music Hall, Worcester, and addressed to the care of the Curator of the Museum of the British Medical Association.

NOTICES OF MOTION.

Dr. MILNER FOTHERGILL hereby gives notice that, in accordance with By-law 43 of the Association, he will move, at the annual meeting

of the Association, that an addition be made to By-law 12 in the

following words, viz.:
"That the Editor shall be elected for a period of five years, but shall be eligible for re-election for a like period.

Dr. WARD COUSINS hereby gives notice that he will move, and that Dr. GRIGG will second:

"That the following alterations in By-law 35 are desirable: 1. The President of the Association to be an ex officio member of the Journal and Finance Committee.

2. The annual retirement of four of the elected members, who shall remain ineligible for re-election for two years.'

FRANCIS FOWKE, General Secretary.

London, April 13th, 1882.

BRANCH MEETINGS TO BE HELD.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.—The next meeting will be held at Tredegar on Thursday next, April 20th. Gentlemen intending to be present are requested to communicate the fact to Dr. Sheen, if they have not already done so, on secing this notice. Papers, etc., promised.—Mr. George A. Brown (Tredegar): Eight recent Cases of Tracheotomy in Croup; Case of Death from an Unusual Cause after Parturition. S. H. Steel, M. B. (Abergavenny): Pathological Specimens. Dr. Sheen (Cardiff): Two Cases of Femoral Aneurysm: Ligature of External Iliac: Recovery.—A. Sheen, M.D., D. A. Davies, M.B., Honorary Secretaries.—

THAMES VALLEY BRANCH.—The next meeting of this Branch will be held on Thursday, May 4th, at the Griffin Hotel, Kingston-on-Thames, at 6 p.m. Members desirous of bringing any communication forward are requested to give due notice to the Honorary Secretary.—Edward L. Fenn, M.D., Honorary Secretary, Richmond.—April 10th, 1882.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting of the above District will be held on Thursday evening, April 20th, at half-past eight o'clock, in the Reading-room of the London Hospital Medical College, when the following papers will be read. Joseph Hunt, M.D.: On the Diagnosis and Treatment of Pleuritic Effusion in Children; Stephen Machenzie, M.D.: On Vertigo.—FREDERICK WALLACE, Honorary Secretary, 96, Cazenove Road.—April 6th, 1882.

METROPOLITAN COUNTIES BRANCH: NORTHERN DISTRICT.—The next meeting of the District will be held at the house of Dr. T. Morton, 1, Greville Road, Kilburn Priory, N.W., on Thursday, April 27th, at 8.30 p.M. Dr. Stretch Dowse will read a paper on the Inhalation-Treatment of Bronchial and Lung Affections. Dr. Morton will preside.—G. W. POTTER, M.D., Honorary Secretary, 12, Grosvenor Road, N.—April 5th, 1882.

SOUTH-WESTERN BRANCH.—The next quarterly meeting will be held at the house of Mr. C. B. Rendle, Liskeard, on Monday, April 17th, at 2 P.M.; Dr. Hudson, of Redruth, President, in the chair. Members intending to read papers, or make communications, are requested to give notice. Mr. Rendle will be pleased to receive any members at lunch at 1 P.M.—S. REES-PHILIPPS, M.D., Honorary Secretary, Wonford House, Exeter.—March 29th, 1882.

NORTH OF ENGLAND BRANCH.—The spring meeting will be held at the Hospital, Stockton-on-Tees, on Friday, April 28th, at 3 P.M. The first business will be the election of a President-elect, in the place of the late Dr. Robert Wilson of Alnwick. The following papers and cases have been promised. r. Dr. Philipson: On Fixed Abdominal Pain. 2. Dr. Foss: Case of Fractured Patella treated by Aspiration of the Knec-Joint. 3. Dr. Foss: Case of Double Amputation. 4. Dr. Drummond: On some Points in the Diagnosis of Chronic Pulmonary Phthisis. The following subjects will be brought forward for discussion. a. Communication from Dr. J. M. Fothergill regarding the Editorship of the British Medical Journal. b. Communication from the South-Western Branch regarding Homeopathic Practitioners. Members and their friends will dine together at the Stockton Club at 5.30 P.M.; charge (exclusive of wine), 6s. 6d.— T. W. Barron, M.B., Durham, David Drummond, M.D., Newcastle, Honorary Secretaries.—April 12th, 1882.

NORTH WALES BRANCH.—(Amended Notice.)—The next intermediate meeting will be held at Portmadoc, on Thursday, the 27th instant. Notice of papers to be read, and other communications to be made should be sent in by Wednesday, the 19th instant. The arrangements for the meeting will be duly advertised in the JOURNAL of the Association.—J. LLOYD-ROBERTS, Honorary Secretary.—Denbigh, April 3rd, 1892.

SOUTH-EASTERN BRANCH: EAST AND WEST SUSSEX DISTRICTS.

A CONJOINT meeting of the above Districts was held at the Grand Hotel, Brighton, on Wednesday, March 29th, 1882; Dr. EWART, of Brighton, in the chair.

Papers.—The following papers were read.

1. Dr. Lee gave a condensed account of his experience of the treatment of Infantile Paralysis during a period of ten years, deduced chiefly from his observation of rather more than one hundred cases at the hospital in Great Ormond Street. One case, extending over eight years, was particularly mentioned, in which the amount of wasting was singularly small, and the results of the treatment employed very satisfactory. In Dr. Lee's opinion, the electro-therapeutic system of treatment was by no means so successful as the plan adopted in the case referred to, where, by means of artificial warmth, and motion sedulously pursued, the wasting of tissues had been prevented. Certain injurious effects produced by electro-galvanism were pointed out; and the proper management of this class of cases, so as to do what was best for the patients, and discourage the tendency of parents to resort to quackery were dwelt upon.

2. Dr. Treutler read notes of a case of Spinal Meningitis from Injury.

3. Mr. Willoughby Furness showed an adult man presenting the symptoms of Pseudo-hypertrophic Paralysis.

4. Dr. Mackey read a paper on the Treatment of Whooping-Cough, instancing one case in particular which yielded to morphia pushed to the stage of advanced narcotism.

5. Mr. Bernard Roth read a paper on the Treatment of Lateral Curvature of the Spine, chiefly by means of movements according to prescribed exercises.

6. Mr. Noble Smith showed some cases of Caries of the Vertebræ

under treatment by means of Steel Supports.

Investigation of Disease.—In the course of the meeting, Dr. Moore drew attention to the work of the London Committee for Investigating Disease, and recommended the appointment of a local committee to assist in the work; which committee was subsequently elected.

The Next Meeting of the East Sussex District will be held at Hastings in May. Dr. Trollope will preside.

CORRESPONDENCE.

ACONITE AND ACONITIA.

SIR,-I am surprised that in recent discussions on aconite little stress has been laid on the fact that the term aconitia, if unqualified, is What is aconitia? Of course we are told in works on meaningless. materia medica that it is an alkaloid obtained from Aconitum napellus; but is this the case? Commercial aconitia is certainly not a simple substance, and is probably a mixture of several alkaloids. Professor Binz of Bonn, at the last International Medical Congress, stated that there was no definite chemical compound met with in commerce under the name of aconitia, the various preparations obtained in England, France, Switzerland, and Germany differing so much in character that any results arrived at by experimenting with them were applicable only to the particular sample employed, and not to aconitia in general. Flückiger and Hanbury, in the last edition of the Pharmacographia, state that commercial aconitia is a mixture of aconine, pseudaconine, picraconitine, and other bodies. Wright apparently recognises three alkaloids obtained from different species of aconite—aconitine, from Aconitum nafellus; pseudaconitine, from Aconitum ferox; and japaconitine, from one or more Japanese species. What is the source of our aconitia? Is it obtained from A. napellus, from A. paniculatum (which both Fleming and Christison found to be inert), from A. ferox (the Bish poison), or from the Japanese species? Is our "aconitia" aconitine proper, or is it pseudaconitine, or japaconitine, or a mixture of all three? Messrs. Cleaver and Williams recently stated, at the Pharmaceutical Society, that extract of aconite is frequently made from Aconitum paniculatum. Mr. Holmes finds that a large proportion of the aconite-root now sold as Aconitum napellus is in reality Japanese aconite, and he has every reason to believe that Aconitum ferox has been used in this country, even during the last three or four years, in the preparation of the alkaloid.

It is generally stated that English aconitia is at least seventeen times as active as the German, the French being intermediate in power; but this classification into English, French, and German is clearly unre-Professor Plügge of Gröningen, in a recent liable and unscientific. paper, stated that he had investigated the physiological action of seven different kinds of commercial aconitia, and considered that they might be arranged in the following order of decreasing activity: 1. Petit; 2. Morson; 3. Hottot; 4. Hopkin and Williams; 5. Merck; 6. Schuchart; 7. Friedländer (Trommsdorf of Erfurt). This list is obviously incomplete, no mention being made of Duquesnel's crystallised aconitia, which is said—see his paper—to be more active than any of the amorphous varieties. Plugge finds that Merck's aconitia is from twenty to thirty times as active as Friedländer's, whilst Petit's is eight times as active as Merck's.

This is not a mere matter of curiosity, but is of considerable practical importance, several cases of poisoning having occurred from the substitution of one kind of aconitia for another. M. Desnos, in a recent number of the Bulletin de Thérapeutique, records the case of a gentleman, the subject of aortic disease, who suffered from severe anginal attacks. With the view of affording him relief, his medical advisers prescribed Hottot's granules of aconitia. The chemist, to whom the prescription was taken, substituted for the special aconitia which

had been ordered an aconitia which he happened to have in stock, the source of which is not known, but which was probably of German origin. Gradually, by the advice of the physicians, the dose was increased to four granules a day. This quantity was taken daily for several days, with marked relief to the anginal attacks, and without the production of disagreeable symptoms. At last the chemist, having exhausted his original stock of aconitia, went to Hottot's for a further supply. On the following day the patient, after taking the usual number of granules—which, unknown to him, had been prepared with the new aconitia—suddenly presented alarming symptoms of aconitia-poisoning: pains in the head, vertigo, loss of voice, great muscular weakness, pallor of the face, anxiety, weakness of the pulse, failure of the heart's action, tendency to fainting, coldness of the extremities, and profuse perspiration.

The respiration became feeble, irregular, short, and sighing. The patient was, in fact, in a most critical condition, and it was many hours before he was out of danger. In another case, which was investigated by Professors Pliigge and Huisinga, and published in the Berliner Klinische Wochenschrift, the patient was killed by the substitution by the chemist of Petit's nitrate of aconitia for Friedländer's, which the physician had intended to prescribe, but had neglected specifically to indicate. In Germany, three cases of poisoning by French aconitia were reported by Busscher. The doses which occasioned the toxic symptoms were, respectively, fourtenths of a milligramme (about 1-160th of a grain), one and a half milligrammes (about 1-45th of a grain), and four milligrammes (about 1-15th of a grain). In the last case death occurred. The dose had been ordered by a physician who was under the impression that the French and German aconitiæ were the same.

There is evidently a general impression that aconitia is rarely prescribed for internal administration, and it may be as well to consider what grounds there are for this opinion. Not very long ago the New York Therapeutical Society was engaged in considering the best mode of administering this remedy, and suggested the following formula: of administering this femedy, and suggested the following formula: Aconitia (Duquesnel's) gr. I-10th; glycerine, alcohol, āā 5j; peppermin water to 3ii. Dose, a teaspoonful. In the late Professor Gubler's Leçons de Thérapeutique, published only two years ago, he says of aconitia, "C'est un médicament d'une très grande puissance, et certáinement appellé à beaucoup d'avenir." He speaks of its effects on trigeminal neuralgia as being truly marvellous. In the second edition of the Commentaires Thérapeutiques du Codex, the case is recorded of a man on whom Nélaton had performed resection of all the branches of the trigeminal nerve for neuralgia without benefit. The patient was in despair, and attempted suicide. It was then proposed to remove the Gasserian ganglion; but, as aconitia had not been tried, it was determined to see first what it would do. The patient began with fourteen of Hottot's granules a day, equivalent to seven milligrammes, or about a fifth of a grain. He obtained almost immediate relief, and the good effect was kept up by taking from eight to ten granules daily. patient was so free from pain that he said he felt as if he was in paradise, and declared that nothing that had ever been done for him had given him such thorough and lasting relief. Gubler considers that it is equally beneficial in other painful affections, and says that it has been employed with success in irritating and painful affections of the circulatory system and respiratory tract. He especially commends it for asthma, paroxysmal cough, palpitation, angina pectoris, and for the relief of the pain of acute rheumatism and gout. In all these cases it is evidently intended that the drug should be given internally, for, he says, it is not wise to begin with more than half a milligramme—about a thirty-second of a grain-of amorphous aconitia, twice a day; but it may be gradually increased to two, four, or even five milligrammes. Dumas considered that aconitia is useful, not only in neuralgia, but in many catarrhal affections. He finds that it is readily tolerated if methodically administered, and that it may be given for a long time without fear of the effects of accumulation. Dr. Oulmont, in a paper in Le Progrès Médical, in December 1879, advocates the use of aconitia, not only in neuralgia, but in dental caries, otitis, and paraplegia. He gives details of four cases of acute rheumatism in which aconitia was given with marked benefit. Acute rheumatoid arthritis, he finds, may also be treated successfully by the same remedy. In four individuals, to whom it was administered in doses of half a milligramme per diem, In four individuals, increased gradually to one and a half milligramme, a cure was effected —in one instance in eight days, and in another ten days. He says it is sometimes convenient to give aconitia hypodermically, in doses of half a milligramme of the crystallised alkaloid once or twice a day. As an external application for the relief of neuralgia and old rheumatic pains it has been recommended by Turnbull, Headland, Fuller, and others, and also by Tilt as a sedative application in uterine affec-

Much more evidence of a similar nature might be adduced as to the

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

A QUARTERLY Meeting of the Council of the College was held on Thursday, April 13th. The minutes of the Ordinary Council, held on the 0th March, were read and confirmed. Reports were received from the several Annual Committees and from the Committee on the conditions of admission to the Pass examination for the diploma of member. [We are obliged to defer the publication of the report until next week. The substance of it is, that candidates are not to be admitted to the Pass Examination for the membership within two years after passing the primary examination, except in certain circumstances which are specified.]

Mr. J. COOPER FORSTER moved :- "That in future all candidates for the primary or anatomical and physiological examination, whether for the Diploma of Member or of Fellow of the College, be only required to attend one winter course of lectures on anatomy instead of two courses of such lectures. And that candidates for the final examination, whether for the membership or fellowship, be required to produce the following additional certificate, viz. : Of having attended during three months a course of surgical or regional anatomy, with demonstrations."

The first and last part of the motion was referred to the Nomination Committee for consideration; the second to the Court of Examiners, to which also was referred Mr. SPENCER SMITH'S motion :- "That it be referred to the Court of Examiners to consider and report to the council whether or not it is desirable that all students rejected in the pass examination for the Diploma of Member should be placed in the same category as regards the time required to elapse before they can present themselves for re-examination."

Professor HUMPHRY was re-elected a member of the Court of

Examiners.

A letter was read from the Secretary of State for the Home Department in reference to the sale of poisons, which was referred to the President and Vice-Presidents to consider and report to the Council; and another letter was read regarding the appointment of two public analysts to undertake post mortem examinations in criminal cases, one to be nominated by the President of the College of Surgeons, and the other by the President of the Royal College of Physicians. The Council accepted the duty of nomination on behalf of their President.

The Report of the Visitors on the college and other examinations was referred to the President and Vice-Presidents to consider and report upon

to the Council after conference with the Board and Court of Examiners.

The Jacksonian prize was awarded to Dr. William Alexander, of Liverpool.

MEDICAL NEWS.

ROYAL COLLEGE OF SURGEONS OF ENGLAND. - The following gentlemen passed their primary examinations in Anatomy and Physiology, at a meeting of the Board of Examiners, on the 5th instant, and

when eligible will be admitted to the pass examination.

when eligible will be admitted to the pass examination.

Messrs. John Gay, Charles H. Upham, Charles B. Innes, Charles Gayford, and Archibald E. Garrod, students of St. Bartholomew's Hospital; George Morgan and Henry A. Sheppard, of the Charing Cross Hospital; James Milner and George H. Scott, of the Leeds School; Thomas M. Smith and Priestley Leech, of the Manchester School; George A. Bolton, of St. George's Hospital; George S. Wild, of the Liverpool School; Harold G. Dixon, of the Cambridge School; Thomas Young, of the Birmingham School; Charles Andrews, of University College; John F. Bateson, of the Edinburgh School; Alexander Y. Reily, of the Middlesex Hospital; and Harry Tuck, of the Westminster Hospital.

Five candidates were rejected.

Five candidates were rejected.

The following gentlemen passed on the 6th instant.

Messrs. John Elliott, Frederic P. Maynard, Alfred G. Francis, Samuel H. Habershon, Andrew A. Orr, and Charles E. Tanner, of St. Bartholomew's Hospital; George O. White-Cooper, Herbert W. G. Doyne, Francis H. Mead, and John T. Williams, of St. George's Hospital; George A. Carpenter, Herbert Bidwell, Edward S. Whelpton, and John R. Staddon, of St. Thomas's Hospital; William T. Rees and George H. Allden, of the London Hospital; Edward R. F. Mason, of the Leeds School; Albert E. Nelham and Albert Bowhay, of the Charing Cross Hospital; Charles H. East, of King's College; and Thomas Pennington, of the Manchester School.

Four candidates were rejected.

The following gentlemen passed on the 10th instant.

Messrs. Francis H. Napier, Charles P. Mathew, Alfred C. Francis, Frank A. Spreat, Arthur M. Jackson, George A. E. Murray, and Harry C. Chapman, of St. Bartholomew's Hospital; Edwin J. Norris, Alfred J. R. Tyler, and George F. Hentsch, of the Charing Cross Hospital; Henry C. Bowman, Herbert D. Harthan, and Edward Somers, of the Manchester School; George A. Shackel, Charles C. Reilly and George F. Welsford, of St. Thomas's Hospital; Philip H. Nutting and John M. Evans, of the London Hospital; Tudor G. Lavie and H. Marmaduke Page, of St. George's Hospital; Francis Penny,

of King's College; Edward B. Parfitt, of University College; and George B. Harrop, of Guy's Hospital.

Four candidates were rejected.

The following gentlemen passed on the 11th instant.

The following gentlemen passed on the 11th instant.

Messrs. Frederick G. Failes, Herbert W. Chambers, Philip R. W. Santi, William T. Gardner, Charles Kebbell, John P. Roughton, and Edward C. Smith, of St. Bartholomew's Hospital; Robert Lawson, Arthur B. Druitt, Charles J. West, and Seth Gregory, of St. Thomas's Hospital; Reginald J. C. Cottell, Charles E. Liesching, Henry E. South, and Henry Potter, of St. George's Hospital; James E. Jefferis and John W. Carr, of University College; Frank Hichens, Edwin Volckman, and John J. Langston, of the London Hospital; Edward J. Smith, of the Charing Cross Hospital; and Walter H. Brazil, of the Manchester School

Four candidates were rejected.

The following gentlemen passed on the 12th instant.

Messrs. Frederic H. Wigmore, H. Winstanley Shadwell, Alfred T. Price, and Herbert Fox, of St. Bartholomew's Hospital; Francis A. Saw, Herbert M. Morris, Charles W. Ward, and George R. J. W. Fletcher, of the Charing Cross Hospital; Francis G. C. Danican, Barnes Nowell, and George C. Bell, of St. George's Hospital; William E. P. Phillips, James Chadwick, and Charles Caldecott, of Guy's Hospital; A. Beaumont Woakes and Frederick A. Floyer, of St. Thomas's Hospital; A. Beaumont Woakes and Frederick A. Floyer, of St. Thomas's Hospital; J. Harley Gough and Robert S. Robertson, of the Manchester School; Sydney D. Ashley and Henry W. Godfrey, of the London Hospital; Henry S. Walker and Alfred Lawrence, of University College; Alfred R. Hall, of St. Mary's Hospital; and Ernest G. Foot, of the Middlesex Hospital. Hospital.

Four candidates were rejected.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, April 6th, 1882.

Banerjca, Nahendra Nath, Calcutta.
Bostock, John, 29, Rutland Road, Victoria Park.
Bostock, John, 29, Rutland Road, Victoria Park.
Brooks, Walter Tyrrell, Penge Park Lane, Stoke Newington.
Hart, Marmaduke James, South Hill Park, Hampstead.
Hoyland, Stanley Streeton, Clifton Road, Rotherham.
Maitland, Alfred Derwent, to, Chester Place, W.
Willcocks, Arthur Durant, Scarsdale Villas, Kensington.

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

Cox, Joseph Bethell, St. Bartholomew's Hospital. Greet, Charles Harvey, London Hospital. Smith, W. A. Winwood, St. George's Hospital. Todd, Henry, London Hospital.

MEDICAL VACANCIES.

The following vacancies are announced:-

BRISTOL GENERAL HOSPITAL-Assistant House-Surgeon. Salary, £50 per annum. Applications by May 4th.

BRITISH HOSPITAL, Buenos Ayres, South America. —Resident Medical Officer. Salary, £200 per annum. Applications by May 1st.

CALLAN UNION—Medical Officer for Ballingarry Dispensary District. Salary, £100 per annum, with £20 per annum as Medical Officer of Health, registration and vaccination fees. Election on the 19th instant.

CAMBRIDGE COUNTY LUNATIC ASYLUM.—Assistant Medical Officer. Salary, £100 per annum. Applications by the 15th April. CHELTENHAM BRANCH DISPENSARY—Resident Medical Officer. Salary, £180 per annum. Applications by April 17th.

CHESTER GENERAL INFIRMARY — Visiting Surgeon. Salary, £80 per annum. Applications by 22nd instant.

INICAL HOSPITAL AND DISPENSARY FOR WOMEN AND CHIL-DREN, Park Place, Manchester.—House-Surgeon. Salary, £80 per annum. Applications to Mr. Edwin Marshall, Secretary, 38, Barton Arcade, Manchester, by 29th instant.

TTAGE HOSPITAL, Scotland.—House-Surgeon. Salary, £30 per annum. Applications to No. 161A, BRITISH MEDICAL JOURNAL Office, 161A, Strand.

ENNIS UNION-Second Medical Officer and Apothecary to the Workhouse, at a salary of £75 per annum.

GUEST HOSPITAL, Dudley.—Member for the Honorary Medical Staff. Applications by the 24th instant.

HARTLEPOOL UNION—Medical Officer for the District. Salary, £50 per annum. Applications to the Clerk by May 17th.

HARTLEPOOL UNION-Medical Officer for the Workhouse. Salary, £65 per annum. Applications to the Clerk by May 17th.

LONDON HOSPITAL, Whitechapel, E .- Aural Surgeon. Applications by the 18th April.

NATIONAL DENTAL HOSPITAL, 149, Great Portland Street, W.—House-Surgeon. Salary, £50 per annum. Applications by April 26th.

SCARBOROUGH FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—

Resident Medical Officer. Salary, £200 per annum. Applications by April 15th. SCHOOL OF DENTAL SURGERY—Teacher of Dental Metallurgy. Applications to the Dean of the Medical School, Dover Street, Liverpool, by April 25th.

SUNDERLAND INFIRMARY—Junior House-Surgeon. Salary, £60 per annum.
Applications to Chairman of the Medical Board by the 27th instant.

TOWNSHIP OF MANCHESTER.—Resident Assistant Medical Officer. Salary, £140 per annum. Applications, endorsed "Medical Appointment", by the 15th

WEST RIDING LUNATIC ASYLUM, Wakefield.—Resident Clinical Assistant.
Applications to Dr. Herbert Major, Medical Superintendent.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL .-Physician. Honorarium of £100 a year. Applications by April 24th

MEDICAL APPOINTMENTS.

FRASER, F., M.B., appointed District Medical Officer to the Sevenoaks Union. HOPKINS, H. C., M.R.C.S., appointed Surgeon to the Derby Provident Dispensary, vice T. Highton, M.R.C.S., resigned.

Jacob, David, M.D., elected Medical Officer of the Maryborough Dispensary Dispensary Dispensary, vice T. Mighton, M.R.C.S., resigned.

trict.

Mall, C. E. D., M.R.C.S., appointed Medical Officer of Health to the Westbury and Whormelkdown Union.

Partridge, Thomas, M.K.Q.C.P., re-elected Medical Officer of Health for the Rural and Urban District, Stroud Union.

PVE, Walter, F.R.C.S., appointed Examiner in Surgery and Clinical Surgery at the University of Glasgow.

Salter, J. R., M.B., appointed Second Assistant Medical Officer to the Kent County Lunatic Asylum, Chartham.

Scott, Richard J. H., M.R.C.S.Eng., appointed Assistant-Surgeon to the Royal United Hospital, Bath.

Treston, M. J., L.R.C.S., appointed Assistant Medical Officer to the Rochester and District Friendly Societies' Medical Aid Association.

Woolby, J. B., M.R.C.S., appointed Physician's Assistant to the Bristol General Hospital, vice R. J. Bryden, M.R.C.S., resigned.

BIRTHS, MARRIAGES, AND DEATHS.

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

FORRESTER.—At Sandgate, Kent, on the 6th inst., the wife of James S. Forrester Esq., Army Medical Department, of a daughter.

DR. LOMBARD TANNER has resigned the post of Assistant Medical Officer of the Cork District Lunatic Asylum.

DR. KENRICK H. B. WILLIAMS, of Movannedd, has been placed on the Commission of the Peace for Denbighshire.

VACCINATION.—Mr. John Hannay has been awarded by the Local Government Board a gratuity of £8 12s. for efficient vaccination in the Weobley district of the Weobley Union.

SOUTH KENSINGTON MUSEUM.—Mr. Edward Bellamy, Surgeon to the Charing Cross Hospital, will commence his course of lectures on the anatomy of the human form on Friday, the 12th proximo, at four o'clock, in the Science and Art Department of the above museum.

DISCOVERY OF HUMAN REMAINS.—The recent discovery of human remains, by some workmen engaged in Percy Mews, Newman Street, and their examination by Mr. Lloyd, and some other medical men who assisted him, has led to the conclusion that the remains are those of persons whose bodies had been used for anatomical purposes. The examination, which was a cursory one, made in a shed in the policestation yard, by the light of a lamp, revealed a mummified trunk and two dried and cleaned pelves, one male and one female. Both were undoubtedly anatomical preparations. The mummified trunk had apparently been wrapped in some fabric similar to those used for enveloping mummies. There was further found an exact cast of the lower part of the aorta in red waxy material, such as that used for injecting arteries prior to dissection. Also one or two humeri-fibulæ, tibiæ. etc., cleaned and prepared. The remains, which are supposed to have been in a cellar of the mews for many years, were removed to the mortuary of St. Pancras Workhouse, where only a few nights previously had been deposited a woman's foot, which had been found by a constable at no great distance, in London Street, Fitzroy Square.

HEALTH OF FOREIGN CITIES.—The following facts and figures, derived from a table in the Registrar-General's last weekly return, 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 34.6 per 1,000, and was equal to 28.1 in Calcutta, 33.6 in Bombay, and 43.3 in Madras. Cholera caused 28 deaths in Calcutta, 42 in Madras, and small-pox 8 in Madras; fever fatality continues to show a marked excess in each of these three cities, the deaths from this cause in Calcutta and Madras being more numerous than in previous weeks. The death-rate in Alexandria rose again to 30.5, the 106 reported deaths including no fewer than 18 fatal cases of typhoid fever. In 22 European cities the death-rate averaged no less than 32.7, and exceeded by 10.4 the average rate prevailing last week in the 28 large English towns. The death-rate in St. Petersburg showed an increase upon recent weekly numbers, and was equal to 57.7; the 741 deaths included 58 from typhus and typhoid fever, and 27 from scarlet fever. In three other northern cities—Copenhagen, Stockholm, and Christiania—the death-rate averaged 21.8; measles caused 12 more deaths in Copenhagen, showing, however, a decline from the numbers of fatal cases in previous weeks. In Paris the deathrate showed a further increase to 31.2; the deaths included 70 from

diphtheria and croup, 41 from typhoid fever, and 15 from small-pox. The rate in Brussels also increased to 25.4, and 3 fatal cases of smallpox were reported; and in Geneva the high rate of 29.3 was again recorded. In the three principal Dutch cities the death-rate averaged 25.9; the highest rate was 29.1 in Rotterdam. The Registrar-General's table includes returns from nine German and Austrian cities, in which the death-rate averaged 33.1, and ranged from 23.8 in Dresden, to 41.1 in Vienna and 42.4 in Prague. Small-pox caused 33 more deaths in Vienna and II in Buda-Pesth, diphtheria 44 in Berlin, and typhoid fever 4 in Prague. In three of the principal Italian cities the death-rate averaged 29.7, the highest rate being 32.9 in Turin; typhoid fever caused 6 deaths in Venice and 4 in Rome, and diphtheria 9 in Turin. The Roman return relates to the first week in December, no more recent return having been received. The annual death-rate in four of the largest American cities averaged 27.9, and ranged from 23.1 in Brooklyn and Baltimore to 34.5 in New York. Small-pox caused 28 deaths in Brooklyn, 11 in New York, and 10 in Philadelphia. Scarlet fever and diphtheria continue to show fatal prevalence in New York.

AN AUSTRALIAN REMEDY FOR ASTHMA.—As to the correctness of the claim which has often been made on behalf of a species of Euphorbia indigenous to Queensland, and known scientifically as E. pilulifera, that it affords a remedy for asthmatic and bronchial affections, a correspondent of the Sydney Town and Country Journal writes to that paper that an ounce of the leaves of the plant placed in two quarts of water, and allowed to simmer till the quantity is reduced to one half, will afford a medicine which, taken a wine-glassful at a time, twice or thrice a day, will relieve the most obstinate cases of asthma, as well as coughs and ordinary chest affections. The leaves may be easily gathered and dried, and kept for a considerable length of time. Evidence of the virtues of a decoction of the leaves of this species of *Euphorbia* is very general in Queensland and parts of New South Wales, as other kinds of Euphorbia have a considerable medicinal reputation in India and elsewhere. Thus the leaves of the E. nereifolia are prescribed as a purgative by the native practitioners in India, while the root of the ipecacuanha is said to be equal in all respects to the true ipecacuanha. This extensive genus of plants evidently deserves the careful study of skilled botanists and druggists.

DONATIONS AND BEOUESTS.—The British Home for Incurables has received one hundred guineas each from Messrs. Copestake and Company, Mr. Herbert Clarke, and Mr. F. A. Beavan, and fifty guineas from "A Member of the Common Council."—The Society for the Discharge and Relief of Persons Imprisoned for Small Debts have given £100 to the Chelsea Hospital for Women, and £50 additional to the Dental Hospital of London.-Mr. Edwin Lawrence has given £100 to the purchase of freehold fund, and £10 10s. to the general fund, of the Royal Hospital for Women and Children.—The Rev. Canon Coulson and Mr. R. Tangye have each given £50 to the building fund of St. Peter's Hospital for Stone.—Mr. Richard Worsley has given £50 to University College Hospital.—Sir William Miller, Bart., has given 50 to the proposed Scarlet Fever Convalescent Home.—Messrs. Crosse and Blackwell have given fifty guineas additional to the Middlesex Hospital.—The Drapers' Company have given fifty guineas to the Chelsea Hospital for Women.—The Mercers' Company have given fifty guineas to Queen Charlotte's Lying In Hospital.—The Goldsmiths' Company have given £50 to the East London Hospital for Children.—The Great Northern Hospital has received £899 17s. 6d. consols under the will of Mr. Edward Curshee.—Mrs. Hannah Sarah Brightwen bequeathed £500 to the Great Yarmouth Hospital.—Mr. John Hartnell, of Blomfield Street, Upper Westbourne Terrace, bequeathed £200 each to the London Hospital, the Westminster Hospital, the Earlswood Asylum for Idiots, and the Hospital for Sick Children, and £100 each to the Charing Cross Hospital, the Middlesex Hospital, the Royal Free Hospital, the Royal London Ophthalmic Hospital, the Samaritan Free Hospital for Women and Children, the Royal National Hospital for Consumption and Diseases of the Chest at Ventnor, the Royal Hospital for Incurables, the London Fever Hospital, the National Hospital for the Paralysed and the Epileptic, the Metropolitan Convalescent Institution, the Seaside Convalescent Hospital at Seaford, and the Royal Sea Bathing Infirmary at Margate: in case of the death of Mrs. Isabella Weston Roberts without issue, all the above amounts are to be doubled out of the "residue" of his real and personal estate.—Mrs. Turner has given £350 additional to the Royal National Hospital for Consumption and Diseases of the Chest at Ventnor.—Mrs. Selina Theresa Mangles, of Sunningdale, Berks, has bequeathed £200 to St. George's Hospital.— Sir Moses Montefiore has given £100, Mr. A. Leland Noel £50, the Duchess of Bedford £25, and the Dowager Lady Wolverton £25, to the proposed Scarlet Fever Convalescent Home.

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 Ophthal-mic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—West London, 3 P.M.—St. Mark's, 9 A.M.—Cancer Hospital, Brompton,
- 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, I.P.M.—Central London Ophthalmic, I.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.—Northwest 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.
- 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,
- 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. Mr. Edmund Owen will show an Infant who has been treated for Acute Suppuration in the Hip-Joint Mr. Lund (of Manchester) will introduce a new method of treating Simple Fracture of the Patella. Mr. Henry Morris: Ichthyosis and Cancer of the
- Tongue.

 TUESDAY.—Pathological Society of London, 8.30 P.M. Specimens to be shown—Mr. Eve: Cancer originating in Membranes of Brain; Calcareous Tumour in Brain; Camel's Lung with Filaria Sanguinis. Dr. J. M. Hobson: Malignant Lymphoma. Mr. Roger Williams: Calculus formed on a Shell. Dr. B. Fenwick: Intrathoracic Tumour. Mr. M. Baker: Two cases of Prurigo of Hebra; Acneiform Keloid (living specimens). Mr. A. P. Gould: Lateral Asymmetry of Bones and Brain. Mr. Alban Doran: Papillary Cysts of the Ovary. Card specimens—Dr. S. West: Defects in Valves of Heart; Obliteration of Coronary Artery, etc. Mr. Golding-Bird: Aneurism from Palm of Hand. Mr. Eve: Perforating Ulcer of Foot. Dr. Lediard (of Carlisle): 1. Dislocation of Ankle; 2. Abscess in Fossa of Skull.
- WEDNESDAY.—Hunterian Society, 8 p.m. Dr. Dundas Grant: A Case of Myxcedema. Mr. C. J. Symonds: Acute Palmar Bursitis treated by Pressure Dr. Hughlings Jackson: Multiple Neuroses the result of Syphilis. Mr. Gilbert: A case of Neurotic Asthma.

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

 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 not answered, are requested to look to the Notices to Correspondents of the following week.
- WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

MEDICAL MEN AND HOUSE DUTY

- MEDICAL MEN AND HOUSE DUTY.

 SIR,—I find that medical men are charged inhabited house duty at the rate of ninepence in the pound, even though they use two rooms, one as a surgery and the
 other as a consulting room. A man engaged in business, who uses part of his
 house as a shop or warehouse, is only charged at the rate of sixpence in the pound.
 I think this is unjust to medical men, who are rated and taxed the same in other
 respects as the man who only pays sixpence.—Your obedient servant,
- ONE HEAVILY TAXED. * In the debate upon the Inhabited House Duties Act of 1851, Mr. Duncombe stated, in the House of Commons the same year, that a great number of professional persons, including medical men, complained that they were rated at ninepence in the pound for the occupation of houses which were much larger than pence in the pound for the occupation of houses which were much larger than they required for their private dwellings, and urged that such habitations should, as shops were, be lated at only sixpence in the pound. The Chancellor of the Exchequer, however, made an adverse reply to this equitable required for ground that the classes of persons who would be included in this category would be far too numerous. We, nevertheless, hope that the matter will again be brought before the notice of Parliament, and that medical men will soon be relieved of the excessive house duty which is imposed upon them.
- DR. JOHN BARCLAY.—In order to practise in France, it is necessary for a medical man not possessing a French degree to pass the requisite examinations of the French Faculty of Medicine, of which he will obtain particulars by application to the Dean of the Faculty of Medicine of the University of Paris. If he desires to restrict his practice to one department of France, he can obtain a licence for practice in that department by passing the minor examination of the Officier de Santé.
- de Santé.

 IMPURITIES OF ANÆSTHETICS.

 1R,—In the correspondence which has been carried on in your JOURNAL on the subject of anæsthetics, there is one point which, so far as I have noticed, has not been touched upon. When a death occurs during the administration of chloroform, it is, of course, quite natural that the surgeon should suspect the purity of the anæsthetic; and we know that, in many cases, the fatal result has been attributed to deleterious substances supposed to be present in the chloroform. Not being a physiologist, I would not venture to express an opinion on the probability of such being the case, except to the extent in which the subject is one of ordinary evidence, such as a jury would be expected to comprehend. Now we know that the impurities which inferior chloroform contains, are simply traces of the "oils" the impurities which inferior chloroform contains, are simply traces of the "oils" that are obtained in considerable quantity in the purification of chloroform. These "oils" have not been chemically examined, but evidently consist of a complex mixture, as they begin to distil at a temperature below 100° Cent. (212° Fahr.), rising to above 160° Cent. (320° Fahr.). So strong and characteristic an odour does this mixture possess, that one part in fifty thousand of chloroform can easily be detected by the nose. We may say that a sample containing one in forty thousand could never be allowed to pass. The question then arises, is it credible that this small proportion of impurity in a chloroform can in any case have been the cause of death? We shall leave this question for others to answer, only observing that we have never experienced any ill effects from the inhalation of these impurities, even when working with them "pure and simple"; and that the amount of such in an inferior chloroform would scarcely exceed one-hundredth of a grain in the ounce.
- It only remains to say that we should be happy to supply samples of chloroform of all degrees of purity, and of the impurities themselves, to any physiologist who cared to investigate the matter.—I am, sir, yours faithfully,

 J. F. Macfarlan and Co., 93, Abbey Hill, Edinburgh.
- IN Mr. Holderness's note on Fractured Patella (JOURNAL, April 8th, page 500, column 1), for "Lister's temperature-regulator", read "Leiter's temperature-regulator". The signature to the article on Poisoning by Nitrate of Potash should be "Richard Cross", not "Antonio Cross".

be "Richard Cross", not "Antonio Cross".

A Warning to Hospitals.

Sir,—There is a man who goes about imposing upon hospitals, named Charles Clark, from Tadley, Hants. He has favoured us with two visits, and, upon the second occasion, he abused our hospitality by absconding with sundry small sums of money, collected from his fellow-patients under the pretence of buying stamps or stationery for them, when he went out for his constitutional walk. The rector of the parish from which he comes writes as follows. "Charles Clark is a very bad character. One of his tricks is to make a home of some London or county hospital during the winter, and then leave; he is a great impostor."

The man can easily be recognised, as he has lost his left hand, and wears a hook. He has also an impediment in his speech, and drags his right leg when walking. If you will kindly give publicity to these facts, they may serve to warn the authorities of other hospitals; and should he (as I think is probable) have obtained admission to some other hospital, I should be very glad to learn of his present whereabouts. He left here on Friday, March 31st.—I am, dear sir, yours faithfully,

Sidies M. Quennell, Secretary.

Westminster Hospital, Broad Sanctuary, S.W., April 5th, 1882.

MEDICAL CORONERS.

MEDICAL CORONERS.

SIR,—I have read with interest a correspondence which has recently appeared in the JOURNAL, having reference to the course adopted by the medical coroner for Central Middlesex in the matter of the payment of medical witnesses in his court. I have no desire to express any opinion upon that particular dispute, but, referring to it, I do desire, with your permission, to express the opinion I have long entertained, that the members of the profession are scarcely to be credited with at least worldly wisdom in advocating the election of medical coroners. May I offer my only personal expressions eights matter?

my own personal experience in this matter?

I happen to practise on the borders of two counties. In the one, the coroner is a solicitor; in the other, a medical man. In every case involving the slightest doubt, the legal coroner calls medical evidence, and generally orders a post mortem examination to be made; whereas, unless there is a very strong and generally expressed reason to suspect foul play, the medical coroner decides the doubt himself, pressed reason to suspect tout piay, the medical cofoner decloes the adoption himself, and appears to entertain the strongest possible objection to summon a medical witness. Accordingly, it is a very rare occurrence for any of the medical men practising in his district to obtain a fee for evidence at an inquest. So much for the selfish view of the question. Then as to the conduct of the inquiry. The evidence in the legal coroner's court is carefully taken, and the proceedings are evidence in the legal coroner's court is carefully taken, and the proceedings are conducted with regularity, thoroughness, and despatch, while the medical witness is treated with deference and respect, which are not always accorded him in his medical brother's court, although I can make no personal complaint on this score. In the medical coroner's court, on the other hand, the commonest elements of the laws of evidence appear to be unknown, or, at all events, are disregarded; the inquiry is conducted in the most perfunctory manner, and the summing up is usually according to the following formula: "Gentlemen, there is no doubt in my mind that this case is one of death from natural causes for one of accidental death, where no cone is to blome but the descreted birreaff or the one mystel hand that mind that this case is one of death from natural causes (or one of accidental death, where no one is to blame but the deceased himself, as the case may be), and that, I presume, will be the verdict of you all." I could instance several cases where there has been grave suspicion as to the cause of death, and where a post mortem examination of the body or medical evidence would have cleared up all doubt, but where neither has been ordered.

Now, I have reason to believe that my experience is also that of others practising in different parts of the country; and, therefore, in the interest of the profession (for in a county or borough, where dozens of medical men may practise, only one can hold the office of coroner), and in the interest of the State, I hold, and always have held, that the profession is mistaken in advocating the appointment of a medical man to the office of coroner.

For obvious reasons (for our medical coroner is in many respects a good fellow), I somewhat unwillingly sign myself,

M.D.—The pamphlet should, we think, be laid before the authorities of the University of Glasgow, who could, no doubt, move the Medical Council to act in the matter. The police authorities might also be induced to take action, under Lord

matter. The police authorities might also be made.

Campbell's Act.

IR,—As a late resident in the Leeds Infirmary, I can corroborate what Mr. Blair, the manager, says in your last issue as to the efficiency of the warming, provided the fire is properly kept up; but the case of this hospital is not one which bears on the general question of steam versus water. Some few years ago, two powerful steam-boilers were erected for the purpose of supplying the cooking apparatus, and a steam-engine belonging to the laundry. It was then found convenient to use the steam for warming purposes. This is virtually "waste steam", which it is generally allowed can be economically used, as the extra fuel required is hardly worth mention, and skilled attendance is at hand. To stoke a steam-boiler well and economically, requires an amount of skill very different from that which suffices tor an ordinary hot water boiler. As an instance of a large hospital efficiently warmed with hot water, I may mention St. Thomas's.—I am, etc.,

Leeds, April 8th, 1882.

THE ATTRACTION TO EDINBURGH.

SIR,—I will endeavour to give "Civis Acad. Edinensis" the explanation he desires. The facility with which a Scotch university degree can be obtained naturally induces the Scotchman to work for it in preference to any minor qualification. So duces the Scotchman to work for it in preference to any minor qualification. So notorious is this, that a very large number of English students either enter on or finish their studies in Edinburgh. If we in the south would, with the same facility obtain a degree, the Colleges of Physicians and Surgeons might have to close their doors, and possibly those in Edinburgh would have to do the same. The reason why so many, after having obtained the M.R.C.S.Eng., run up to Edinburgh to take the L.R.C.P., is because no chemistry or botany is there required. If the London College of Physicians abandoned chemistry as a subject, very few, if any, of those bolding a surgical qualification, would then go north. I have studied of those holding a surgical qualification, would then go north. I have studied chemistry, Greek, and Hindustani; but I must confess my inability to pass an examination in the two former subjects, whereas I have done so in the last, and have found it to be of the utmost practical utility to me; and I am glad that the tendency of our day is to overthrow the theoretical for what is really practical.—I remain, yours truly, A T

A. O. H. W., AND OTHER CORRESPONDENTS.—The attention of our correspondents is once more directed to the standing notice which appears every week, requesting that notices of changes of address and other matters of business should be forwarded to the Manager at the office, and not to the Editor, who has nothing whatever to do with advertisements, changes of address, or any such matters; and he cannot be responsible for their being carried out.

CORRUGATED PAPER SPLINTS.

Sir,—I have had so many inquiries concerning the corrugated paper splint material which I described in your columns a few weeks back, that I shall be much obliged if you will allow me to state that the full name and address of the maker is George Smyth and Sons, 47A, Arlington Street, Islington, N.; who will answer all inquiries concerning it.— Faithfully yours,

4, Sackville Street, W., April 4th, 1882.

"MEDICUS" should address the Queen's Secretary, Windsor, on the subject.

INFANTILE PARALYSIS.

INFANTILE PARALYSIS.

IR,—I have a patient, a young girl fourteen years of age, who has had no use in her left arm or right leg for the last ten years, the result of infantile paralysis; and I shall feel much obliged if any of your subscribers can give me any advice as to what maker I can best apply to for a machine—tricycle or otherwise—to be easily worked by the right arm and left leg, so as to enable her to get about better from place to place, as at present she is entirely dependent upon the use of a crutch, and cannot go far without fatigue.—Faithfully yours,

ERNEST G. FRANCIS, L.R.C.P., M.R.C.S.

Kronstadt, Orange Free State, South Africa, March 7th, 1382.

OWING to want of space, and to unavoidable delay in preparing the illustrations, we have been reluctantly compelled to defer till next week the promised complete account of the American acrobat, Warren, who possesses a voluntary power of dislocating some of his joints.

A SELF-ACTING REPORTING MACHINE

A SELF-ACTING REPORTING MACHINE.

IRON gives an account of an instrument, invented by Herr A. Gentilli, of Vienna, and named by him the glossograph—consisting of an ingenious combination of delicate levers and blades which, placed upon the tongue and lips and under the nostrils of the speaker, are vibrated by the movements of the former and the breath flowing from the latter. The vibration is transmitted to pencils, which transcribe the several signs, produced by the action of the tongue and lips and the breath from several signs, produced by the action of the tongue and lips and the breath from the nostrils, upon a strip of paper moved by a mechanical arrangement. As in shorthand, a special system of writing, which may fitly be termed glossography, is produced, based upon the principle of syllabic construction and combination of consonants. It is said to be especially suitable for those languages the orthography of which differs least from the phonetic record of the apparatus. The instrument is self-acting in the fullest sense. Moreover, its application involves as little fatige to the speaker as severe attention on the part of the person transcribing. In reporting proceedings in Parliament or courts of law, it is not necessary that the speaker should use the apparatus himself. Anybody may articulate it by repeating in a low voice the words of a speaker, which is sufficient for recording the signs.

Guy's Hospital Biannual Festival of 1882 will take place this year at Willis's Rooms on Thursday, May 18th, when Mr. Edward Cock has consented to preside.

COMMUNICATIONS, LETTERS, etc., have been received from:-

Dr. Lush, Weymouth; Mr. A. Teevan, London; Mr. Lawson Tait, Birmingham; Mr. E. Owen, London; Mr. W. J. Mackie, Turvey; Dr. Tripe, London; Mr. A. R. Barnes, Hastings; Mr. A. J. Routh, London; Mr. S. Snell, Sheffield; Mr. J. Farquharson, Stockton-on-Tees; Dr. O. Sturges, London; Dr. Lloyd, London; Mr. Knott, Dublin; Dr. Brett, Watford; Dr. Jacob, Leeds; Dr. A. J. H. Crespi, Wimborne; Mr. T. Partridge, Stroud; Dr. G. W. Potter, London; Dr. Fairlie Clarke, Southborough; A Surgeon-General; Dr. Keen, Philadelphia; Our Glasgow Correspondent; Mr. Vincent Jackson, Wolverhampton; Dr. Sheen, Cardiff: Dr. Shuttleworth, Brighton; Mr. Parker, London; Dr. C. S. Clouston, Gunnersbury; Our Dublin Correspondent; Dr. Hobson, Croydon; Mr. Francis, Kronstadt, South Africa; Dr. Goodhart, London; Mr. R. H. J. Scott, London; Mr. John Furley, London; Mr. Howse, London; Dr. J. A. Campbell, Carlisle; Mr. F. St. George Mivart, London; Mr. E. H. Hardwicke, Solihull; Mr. J. H. Williams, Bootle; Dr. Schuster, Aix-la-Chapelle; Dr. R. Cross, Scarborough; Mr. O. Bowen, Liverpool; Dr. Wallace, London; Mr. Southam, Manchester; Dr. Ferguson, Peebles; Mr. H. Bracey, Birmingham; Mr. E. A. Cook, Richmond; Mr. T. M. Stone, London; Mr. W. Wilson, Carlisle; Mr. S. Quennell, London; Mr. W. H. Jebb, London; Mr. T. S. Hutchinson, Newington, Sittingbourne; Dr. W. Sneddon, Beith; Mr. B. J. Bateman, Birmingham; Mr. A. W. M. Robson, Leeds; Mr. T. Laffan, Cashel; Dr. C. Parsons, Dover; Dr. Hickinbotham, Birmingham; Dr. Saundby, Birmingham; Dr. Morgan, Pontypridd; Dr. Fletcher Beach, Darenth; Mr. J. E. Barlow, Liverpool; Dr. Richard Ryder, Nailsworth; Dr. H. Lionel Smith, Uttoxeter; Dr. Mahomed, London; Dr. J. Barclay, Leicester; Mr. Harrison, Elgin; etc.

BOOKS, ETC., RECEIVED.

Transactions of the International Medical Congress. By Sir W. Mac Cormac. London: J. W. Kolckmann. 1881.

he Science and Art of Midwifery. By W. T. Lusk, A. M., M.D. London: H. K. Lewis. 1881.

The National Temperance League's Annual. London: National Temperance Depôt.

Diseases and Injuries of the Eye. By J. R. Wolfe, M.D. London: J. and A. Churchill. 1882.

The Water-Supply of England and Wales. By C. E. De Rance. London: E. Stanford. 1882

The Student's Handbook of the Practice of Medicine. By H. A. Husband, M.B. Edinburgh: E. and S. Livingstone. 1882. The Hair in Health and Disease. By Dr. J. Pincus of Berlin. London: Chatto

and Windus. 1882.

Clinical Surgery. By Dr. T. Billroth. London: New Sydenham Society. 1881.

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