

ASSOCIATION INTELLIGENCE.

COMMITTEE OF COUNCIL.

NOTICE OF QUARTERLY MEETINGS FOR 1883: ELECTION OF MEMBERS.

MEETINGS of the Committee of Council will be held on Wednesday April 11th, July 11th, and October 17th. Gentlemen desirous of becoming members must send in their forms of application for election to the General Secretary not later than twenty-one days before each meeting, viz., March 21st, May 21st, September 26th, in accordance with the regulation for the election of members passed at the meeting of the Committee of Council of October 12th, 1881.

FRANCIS FOWKE, *General Secretary.*

November 9th, 1882.

COLLECTIVE INVESTIGATION OF DISEASE.

CARDS and explanatory memoranda for the inquiries concerning Acute Pneumonia, Chorea, and Acute Rheumatism, can be had by application to the Honorary Secretaries of the Local Committees appointed by the Branches, or to the Secretary of the Collective Investigation Committee. Of these diseases, each member of the Association is earnestly requested to record at least *one ordinary case* coming under observation during the year.

Inquiries concerning Diphtheria and Syphilis have been prepared, and can be had on application by those willing to contribute information on these subjects. There are two cards on Diphtheria, one containing clinical, the other etiological inquiries, together with an explanatory memorandum. One of these cards is intended to serve as a guide to the systematic examination of a house or district for sanitary purposes. There are also two sets of inquiries concerning Syphilis, one for acquired, the other for inherited, disease. These are accompanied by an explanatory memorandum giving information concerning the most recently observed symptoms of the inherited disease.

All these inquiries will be continued during the present year.

F. A. MAHOMED, Secretary to the Committee.

12, St. Thomas's Street, S.E.

BRANCH MEETINGS TO BE HELD.

DUBLIN BRANCH.—An adjourned special general meeting of the Branch will be held on Tuesday next, February 13th, at the King and Queen's College of Physicians, Kildare Street, at 4 P.M., to resume the debate on the resolution proposing the adoption of the annual report of the outgoing Council, and upon the amendment thereon, moved by Dr. Athill, and seconded by Dr. Grimshaw, Registrar-General.—GEORGE F. DUFFEY, M.D., Honorary Secretary, 30, Fitzwilliam Place, Dublin, February 7th, 1883.

STAFFORDSHIRE BRANCH.—The second general meeting of the present session will be held at the London and North-Western Hotel, Stafford, on Thursday, February 22nd, at 3.30 P.M.—VINCENT JACKSON, General Secretary, Wolverhampton, January 30th, 1883.

BORDER COUNTIES BRANCH.—The spring meeting of this Branch will be held at the Central Hotel, Carlisle, on Thursday, February 22nd, at 8 P.M. Members intending to read papers or show specimens are requested to give notice to RODERICK MACLAREN, M.D., Carlisle, Honorary Secretary *pro tem.*; or to J. SMITH, M.D., Dumfries, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: SOUTH LONDON DISTRICT.—A meeting will be held at the Royal Hospital School, Greenwich, on Thursday, February 15th, at 8 P.M. Papers: Dr. Robert J. W. Oswald: On a Rare Sequela of Scarlet Fever. Mr. Brindley James: On the Influence of the Mind over the Body.—W. JOHNSON SMITH, Acting Honorary Secretary.—February 5th, 1883.

DUBLIN BRANCH.

The sixth annual meeting of the Dublin Branch of the Association was held on Thursday, January 25th, in the College of Physicians, Kildare Street, when Dr. KIDD resigned the presidential chair to Dr. BANKS, the incoming President.

Report of Council.—Dr. G. F. DUFFEY, honorary secretary, read the report of the Council. The report mentioned the different Bills for the better notification of infectious diseases introduced during last session, and proposed thanks to Mr. Meldon for the great trouble he had taken with his Bill.

The report specially referred to the Report of the Royal Commission on the Medical Acts—a matter of great importance and of deep interest to the Association, inasmuch as it goes far to embody the great principles of medical reform for which the Association and

the profession have unceasingly struggled during fifty years. The Association, at the jubilee meeting at Worcester in August last, distinctly authorised the Medical Reform Committee to memorialise the Government to introduce a medical Bill during the ensuing session of Parliament, based on the Report of the Royal Commission; and, on November 22nd, the President and chief officials of the Association, accompanied by representatives of all the leading organs of the medical press, were introduced to the Lord President and the Vice-President of the Privy Council by His Grace the Duke of Westminster, and were most favourably received. The deputation, in obedience to the mandate of the Association, distinctly pledged the Association to support a Bill to remedy the defects of the Medical Act of 1858.

1. To remedy the defective constitution of the General Medical Council.

2. To establish a minimum uniform qualifying examination for practitioners by conjoint examining boards, established one in each of the three divisions of the kingdom, conferring a licence in medicine, surgery, and midwifery.

3. To strengthen the so-called penal clauses of the Medical Act, so as to afford adequate protection to the public against the false assumption of medical titles by unqualified and unexamined persons.

To remedy these defects has been the aim of medical reformers, and at no former period has so promising a prospect of success been afforded as through the Report of the Royal Commission and the present favourable support of the Government. The report stated that the Council of the Dublin Branch were divided in opinion as to the merits of the proposition to change the constitution of the General Medical Council by the admission of direct representatives of the profession into it, and therefore on this point made no recommendation.

The adoption of the report was proposed by the Rev. Dr. HAUGHTON, and seconded by Dr. WHEELER, Vice-President of the College of Surgeons. On this point, Dr. Haughton said he was strongly in favour of direct representation, and had been for many years, because the profession contributed the funds which were disposed of by the General Medical Council. He thus held to the opinion he gave before the Select Committee (Query 3558), that direct representation would bridge over the chasm which exists between the Medical Council and the profession. He was certain that the men who would be sent forward as direct representatives of the Council would be men that he would feel it an honour to sit beside and legislate with in the Medical Council.

The Council of the Dublin Branch is in great part composed of members who are closely connected with Trinity College and the Dublin corporations. It is notorious that these corporations have failed, after repeated futile attempts, to frame a conjoint board of examination for granting licences to practise. The conjunction even of the two Royal Colleges—Physicians and Surgeons—broke down. Witness Professor Haughton (Query 3549, Select Committee, evidence), who replied: "That combination appeared more practicable than the others; but still the inevitable money question turned up at the end between the two corporations, and that failed." Under such circumstances, and in such a locality as Dublin, it is not to be marvelled at if approval of the Report of the Royal Commission was wanting. It was, however, unanimously agreed that—

"The name of no person should be admitted to the register who has not passed a satisfactory examination, or examinations, in medicine, surgery, or (*sic*) midwifery. Each of the medical authorities ought to be compelled, either to give a complete examination, or to combine with other bodies for the purpose."

The Association, in 1858, drafted a clause to interdict registration to all who did not possess a qualification both in medicine and surgery, but was forced to withdraw the clause in order to retain the support of the Government to the Bill. Since 1858 experience has, however, proved the impossibility of supervising the examinations of nineteen bodies; visitations, if they are to serve any good purpose, must be continuous. The whole of the examination should be inspected from the beginning to the end by the inspectors. This is the opinion given by Dr. Haughton before the Select Committee (6,506, 6,508). Compare this with the evidence of Dr. William Stoker, of Dublin, before the Royal Commission (5,169): "The rejection rate has been very much higher at that examination at which the visitation took place;" and (5,170) "afterwards the examination was unaltered." In the face of this evidence, it is manifest spasmodic fitful visitations are almost the reverse of useful; to be beneficial, they must be regularly carried out. The mover of the report said nothing as to the means by which this could be done, evidently the less said, the better. Three conjoint boards may be

efficiently supervised. Nineteen examining bodies, involving inevitable inequality in their examinations, with a tendency to competition downwards, as the natural consequence of their number, may well be considered quite independent of effectual supervision. Legislation would be necessary to enforce even this recommendation. What sane man could hope for legislation on such a basis? The thing is impracticable, and, therefore, though the Council were unanimous on this point, no good result can follow.

The one portal scheme, and an uniform standard of examination, were stigmatised as destructive to the corporations, and injurious to the profession as well as to the public. In supporting this part of the report, Dr. Haughton acknowledged: "Over and over again he had known friends, whose lives were of importance, to be attended by practitioners to whom he would not entrust the drawing of a tooth." What can well be worse than this picture? And yet, in connection with this statement, he alleges his chief objection to that proposal of the commissioners was, "that the portal must necessarily be a very low one," thus inferring what no one, professional or otherwise, can ever be led to credit that Sir William Jenner, Mr. Simon, and Dr. Robert McDonnell, together with their highly gifted fellow commissioners, have lent themselves to a scheme for lowering, instead of improving and elevating, a profession, on the proper education of which the issues of life and death depend. That Dr. Haughton should hazard such a statement in face of the details of crass ignorance and incapacity revealed in the evidence before the Royal Commission, is inexplicable.

It is not easy to conceive a more simple proposal than the formation of a conjoint examining board, one in each division of the kingdom, in the framing of which board representatives of the existing medical authorities shall coalesce under the sanction of a medical council, in which council all interests—those, namely, of the public, the profession, and the corporations—are represented. The interests of the universities are specially protected by the exemption of their students from all but the practical subjects of examination, and the interests of no single corporation are disregarded. Provision is also made for the admission into the scheme of such new colleges and universities as may hereafter be established.

So adverse a report to the policy of the Association, and so supported, did not pass unchallenged. Dr. ATTHILL, a member of the council from which the report emanated, moved an amendment to the effect:

"That the Branch approves in principle of the policy of the Parent Society."

Dr. ATTHILL commenced his very able speech by remarking that it was unusual for a member of council to move an amendment to the report of his council, but that he considered he was on this occasion justified in doing so from the want of unanimity in the council, for that several important amendments to the report, which would have altered its complexion materially, were lost by a majority of only one, and that even that majority would have disappeared had not Dr. R. McDonnell thought himself bound not to vote because he had been a Royal Commissioner, in fact there was no majority. He stated that, when he was Registrar of the College of Physicians instances frequently came before him in which men were rejected as being dangerously ignorant, and would reappear after a few days or weeks fully qualified and would be impressed with the same mark as the licentiates of the college. Both the Colleges of Physicians and Surgeons had failed to exclude that class of men.

The framers of the report of the council of the Dublin Branch were satisfied with the *status quo ante*. He was not; he considered it essential that there should be some reform. Their profession was full of the lame, blind, and halt. There was no warrant for the inference drawn by the report and re-echoed by Dr. Haughton, that the standard of examination under a conjoint system, which would represent each division of the kingdom, would be on the low level of licensing bodies which had acquired a most disastrous representation for laxity and incompetency. At present there were nineteen bodies competing with each other in order to obtain fees and the result of this was a downward tendency in the qualification of the men they passed. With three licensing bodies, the downward competition would be modified, and their examination could be better supervised by the medical council. The corporations had done good, but they should remember that they existed for the public. He maintained that they ought to do everything in their power to elevate their profession and to exclude from it men who were a disgrace to it, which they could not do unless they reduced greatly the number of portals to it.

The Registrar-General, Dr. GRIMSHAW, in seconding the amendment, said that he also did so as a member of the Council. He did

not believe that the demand for medical reform was an ignorant demand. He affirmed that it came from the best half of the profession. They knew also that it came from the public. Ever since the British Medical Association was established, its policy had been in favour of medical reform. The corporations were now face to face with the recommendations of a powerful Royal Commission, and the public would not listen to men who set themselves against it. He believed that the tendency of the conjoint examination would be to elevate the profession, and so far from dwarfing the standard of qualification, as had been stated, would make the dwarf a giant compared with the minimum. If the General Medical Council had been an efficient body, no legislation would have been necessary now, but the existing state of things was the result of twenty-five years of its inefficiency. The corporations all seemed afraid to criticise each other and report on one another. The only remedy for this was, the introduction into the Council of the independent element, by the direct vote of the profession. He hoped that the sound corporations would be retained.

On the motion of Dr. JACOB, seconded by Dr. ROBERT McDONNELL, the debate was adjourned.

This important debate was resumed on February 6th, and a short notice of the proceedings will be found in our "Irish Week," p. 271. The principle of direct representation, having received the *imprimatur* of the Royal Commission, its advocates may well be satisfied. It is true the name of Sir James Paget was adduced against it, but his advocacy of its adoption by the Royal Commission was omitted.

The public press is gradually becoming enlightened on the subject of medical reform. In commenting on the meeting of the Dublin Branch, the *Freeman's Journal* of January 26th, in reference to Dr. Atthill's mention of dangerously ignorant men becoming licentiates, remarks: "Is this to continue because the vested interests of the 'corporations' may be hurt? Surely, such a proposition is absurd. Let the existing corporations remain. If they maintain a high standard, their degrees will still be of value; but let there be some official test that will satisfy the public that all medical men have at least a certain qualification. At present, the public have not perfect confidence in the 'corporations'."

NORTH LONDON DISTRICT.

A MEETING of this Branch was held on Friday evening, January 26th, at the house of J. Wallis Mason, Esq., No. 1, Osunaburgh Terrace, Regent's Park, when Dr. Felix Semon gave an address on "The Diagnostic Importance of Paralysis of the Glottis Openers."

A somewhat intricate subject was made very plain, and invested with much interest by the exhibition of a large model of the larynx and diagrammatic references. These rendered the following of the anatomical points of the lecture very clear and distinct. The influence of the nerves and muscles in their action on the vocal apparatus was first pointed out and fully explained. Numerous cases were read, illustrative of paralysis of the right or left vocal cords, and of the causes which produced these effects, some of them being thoracic and others cerebral.

It was shown that if the laryngoscope gave evidence of paralysis of the vocal cords, serious mischief may be expected to manifest itself perhaps in the brain in connection with the floor of the fourth ventricle, or else in the chest, by aneurysm of the subclavian, or pressure in the recurrent laryngeal nerves by goitre, or other causes. The paralysis of the vocal cords gave very early and decisive testimony of grave and serious disease being present, when other symptoms failed to attract much attention, and thus was made manifest by the recital of cases in illustration of Dr. Semon's views. Therefore, the laryngoscope has a value, not only in giving knowledge of diseases actually existing in the throat, but of indicating the presence of disease in somewhat distant parts. A discussion followed on a few points brought out in the address, and the meeting separated.

DEATH FROM CHLOROFORM.—Another of those sad occurrences which are occasionally to be expected when powerful remedies are used to produce insensibility to pain, observes the *Canadian Journal*, took place in Quebec. The patient was a boy, ten years of age, about to have a tooth extracted. The anæsthetic was administered by Dr. Russel, junior, with every possible care. On the first indication of alarming symptoms, the doctor immediately discontinued the inhalation and commenced artificial respiration. In this case life was maintained for about two hours after the discontinuance of the chloroform, the patient seeming to die of gradual paralysis of the nerves of respiration and circulation.

MEDICAL NEWS.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following gentlemen, having undergone the necessary examinations for the diplomas, were admitted Members of the College at a meeting of the Court of Examiners on the 25th ultimo.

Messrs. F. Charles Walford, Southampton; John Paley, Bournemouth; F. William Shore, L.R.C.P.Lond., Southampton; E. Henry Browne, L.R.C.P.Lond., Southampton; H. Walter Pigeon, B.A.Ontab., Clifton; J. W. Francis Long, Stamford Street; Arthur de Frenderville, Cornwall Road, W.; J. Henry Spitaly, L.R.C.P.Lond., Canonbury; C. J. Willmer Tatham, Dalington; E. Ernest Goddard, Cambridge Gardens, N.W.; H. L. Richards Dent, L.S.A., Woolwich; William Huntington, Liverpool; H. John Pringley, L.R.C.P.Lond., West Cowes; E. Courtenay Coward, L.R.C.P.Lond., Pennywern Road, W.; E. M. Bruce, L.S.A., Lordship Lane; G. Charles Gaidin, L.R.C.P.Edin., Jersey; Raheem Buksh, Calcutta; and J. Duncom Rineet, Montague Street, W.C.

Four candidates passed in Surgery, and when qualified in Medicine and Midwifery will be admitted Members of the College; and nine candidates were referred for six months, and three for three months.

The following gentlemen passed on the 26th ultimo.

Messrs. E. Ralph Dimsey, L.R.C.P.Lond., Highgate; W. Essex Wynter, L.R.C.P.Lond., St. Margaret's; W. Augustus Norry, L.S.A., Wokingham; E. Ferdinand Grün, L.S.A., Putney; C. O'Brien Harding, Hornsea; W. Thomas Partridge, Luton; Edward A. Bewes, L.R.C.P.Edin., Ladbrooke Grove; A. H. Nicholson Lewars, L.S.A., Gower Street, W.C.; Howard Daynes, Canonbury; Rothney C. Stewart, L.S.A., Clifton Gardens; and J. Howard Champ, L.S.A., Chelmsford.

Eight gentlemen passed in Surgery, and when qualified in Medicine and Midwifery will be admitted Members of the College; two candidates were referred to their studies for three months, and five for six months.

The following gentlemen passed on the 29th ultimo.

Messrs. J. Edward Cave, L.R.C.P.Lond., Melbury Osmond; A. Watson Griffin, Peterborough; Henry Roberts, L.S.A., Shaftesbury; E. Booth Neller, Newport, Isle of Wight; A. John Dalton, South Norwood; H. George Eltmmer, Waldegrave Road, S.E.; Harry Harlock, Ely; A. William Fairies, Seymour Street, W.; Arthur Longman, L.S.A., Andover; A. de Courcy Scanlan, L.S.A., Eastbourne; and W. A. Dawson Montgomerly, M.B.Toronto, Toronto.

Six gentlemen passed in Surgery, and when qualified in Medicine and Midwifery will be admitted Members of the College; and one candidate was referred for three months, five for six months, and one for nine months.

The following gentlemen passed on the 30th ultimo.

Messrs. Henry Green, L.R.C.P.Edin., Norfolk Crescent; W. Dobinson Halliburton, Upper Norwood; Michael O'Kane, L.S.A., Camberwell; Charles W. Parsons, L.S.A., South Hackney; W. B. Crawford Treasure, L.S.A., Crewkerne; A. Probus Trinder, Highgate; R. Walker Watson, L.S.A., Highbury New Park; T. Harry White, L.S.A., Lincoln.

Of the 181 candidates examined during the past fortnight, 83 passed to the satisfaction of the Court, and obtained their diplomas; 52 passed in Surgery, and when qualified in Medicine and Midwifery will be admitted Members; the remaining 66 failed to reach the required standard, and were referred to their further professional studies. Twenty candidates who passed in Surgery at previous examinations, having subsequently obtained a medical degree or licence recognised by the College, were also admitted Members.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, February 1st, 1883.

Dodd, Anthony, Newcastle-on-Tyne.
Lane, Frederick Herbert, Rochester Square, N.W.
Ridman, George Hook, Selhurst Road, South Norwood.
Williams, Arthur John, Wallingford, Oxon.

The following gentleman also on the same day passed the Primary Professional Examination.
Ley, Herbert, St. Bartholomew's Hospital.

MEDICAL VACANCIES.

ANTHEM UNION.—Connor Dispensary, Medical Officer. Salary, £86 per annum, with fees. Election on February 13th.

ATHLONE UNION.—Athlone Dispensary, Medical Officer. Salary, £140 per annum, with fees. Election on February 16th.

REDFORD PROVIDENT DISPENSARY.—Dispenser. Salary, £80 per annum. Applications to the Honorary Secretary.

BELMONTED UNION.—Knockmalaver Dispensary, Medical Officer. Salary, £100 per annum, with fees. Election on February 12th.

BRADFORD FRIENDLY SOCIETIES' MEDICAL AID ASSOCIATION.—Assistant Medical Officer and Dispenser. Salary, £120 per annum. Applications to D. T. Gloane, 80, Arcadia Street, Manningham, Bradford, Yorks., by February 10th.

DARTHE UNION.—Oshel Dispensary, Medical Officer. Salary, £140, with fees. Election on February 14th.

CHARING CROSS HOSPITAL.—Medical Registrar. Applications by February 12th.

CHORLTON-UPON-MEDLOCK DISPENSARY, Manchester. Honorary Surgeon. Applications to the Honorary Secretary, A. Fox, Esq., 53, Princess Street, Manchester.

DENTAL HOSPITAL OF LONDON, Leicester Square.—Assistant Dental Surgeon. Applications by February 12th.

FIRTH COLLEGE, Sheffield.—Professor of Chemistry. Salary, £150 per annum. Applications to Ensor Drury, Registrar, by March 1st.

KENSINGTON DISPENSARY.—Resident Medical Officer. Salary, £125 per annum. Applications by February 10th.

KENT AND CANTERBURY HOSPITAL.—Assistant House-Surgeon and Dispenser. Salary, £50 per annum. Applications by February 23rd.

MORPETH DISPENSARY.—House-Surgeon. Salary, £120 per annum. Applications by March 1st.

PETERBOROUGH GENERAL DISPENSARY AND INFIRMARY.—Honorary Physician. Applications by February 13th.

ROCHESTER AND DISTRICT FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Resident Medical Officer. Salary, £200 per annum. Applications to H. S. Kybett, 55, High Street, Chatham, by February 16th.

ROYAL MEDICAL BENEVOLENT COLLEGE.—Morgan Annuitant. Applications by the end of February.

SALFORD ROYAL HOSPITAL.—District Surgeon for the Pendleton Branch Dispensary. Salary, £80 per annum. Applications to G. H. Larnuth by February 13th.

SHEFFIELD PUBLIC HOSPITAL AND DISPENSARY.—Junior Assistant House-Surgeon. Salary, £50 per annum. Applications by February 14th.

ST. MARK'S OPHTHALMIC HOSPITAL, Lincoln Place, Dublin.—Resident Surgeon. Salary, £52 10s. per annum. Applications to the Chairman of the Board of Governors of the Hospital, by February 17th.

THE HOSPITAL, St. Albans.—Dispenser. Applications to the Honorary Secretary.

WESTERN GENERAL DISPENSARY.—Honorary Surgeon-Dentist. Applications by February 12th.

WEST LONDON HOSPITAL, Hammersmith.—Assistant Physician. Applications by February 27th.

WESTMINSTER GENERAL DISPENSARY, Gerrard Street, Soho.—Resident Medical Officer. Salary, £100 per annum. Applications by February 17th.

WOLVERHAMPTON FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Resident Medical Officer. Salary, £225 per annum. Applications to J. H. Williams, 71, Newbridge, Wolverhampton, by February 13th.

MEDICAL APPOINTMENTS.

COLLINGWOOD, David, M.B., B.S.Lond., M.R.C.S.Eng., appointed one of the Senior Demonstrators of Anatomy at University College, London.

HADDEN, William E., M.D., M.Ch., appointed Assistant House-Surgeon to the South Dispensary, Liverpool.

HART, George H., L.R.C.P.Edin., M.R.C.S.Eng., appointed Medical Officer of Health for the Urban Sanitary District of Harborne.

HOLT, H. L., M.R.C.S., appointed Resident House-Surgeon to the Brixton, Streatham, and Herne Hill Dispensary, vice G. J. Wilson, M.R.C.S., resigned.

MILLER, C. M., M.R.C.S., appointed House-Surgeon and Registrar to the London Temperance Hospital.

MOORE, S. H., L.R.C.P., appointed Resident Medical Officer to the Chelsea Workhouse and Infirmary, vice W. H. Nethercliff, F.R.C.S., resigned.

NEIL, J. M.B., appointed Assistant Medical Officer to the Portsmouth Lunatic Asylum, vice A. K. Davis, L.R.C.P., resigned.

PRINGLE, J. J., M.B., appointed Medical Registrar to the Middlesex Hospital vice J. W. Browne, M.B., resigned.

WILLIAMS, J. Alexander, M.B., M.R.C.S.E., appointed House-Surgeon to the London Hospital.

WILLSON, H., M.R.C.S., appointed Medical Officer of the First District to the St. Saviour's Union, vice T. S. Worboys, M.R.C.S., deceased.

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.

BIRTHS.

SUCKLING.—On the 7th inst., the wife of C. W. Suckling, M.D.Lond., of 108, Newhall Street, Birmingham, of a son.

WHITBY.—On the 30th ult., at Summerfield, Birmingham, the wife of Edward Vickers Whitby, M.R.C.S., of a daughter.

MARRIAGE.

SMYTH—ABBOTT.—On February 1st, at St. Margaret, Ormesby, by Canon George Venables, Vicar of Great Yarmouth, and Rural Dean, assisted by the Rev. R. S. Blofeld, M.A., Vicar of the parish, Francis Sydney Smyth, L.R.C.P., L.R.O.S., of Brockley, S.E., youngest son of Spencer T. Smyth, M.D., F.R.C.S. Eng., of Forest Hill, to Fanny Elizabeth, only daughter of the late Stephen Abbott, Esq., of Castleacre, Norfolk.

DEATH.

TOULMIN.—On the 4th instant, at 36, Thurlow Square, South Kensington, Frederick Justus Toulmin, F.R.C.S.E., aged 64 years.

SURGEON-MAJOR CUFFE, of Woodhall Spa, has been presented with a gold keyless chronometer and chain, bearing the following inscription: "Presented to Robert Cuffe, Esq., by a few grateful patients and friends. Woodhall Spa, January 1883." Great regret is, we hear, expressed at the near prospect of losing Mr. Cuffe's valuable professional services at Woodhall.

HEALTH OF FOREIGN CITIES.—It appears from the statistics, published in the Registrar-General's last weekly return, that the death-rate recently averaged 35.2 per 1000 in the three principal Indian cities; it was 28.6 in Bombay, 40.2 in Calcutta, and 42.4 in Madras. Cholera caused 79 deaths in Calcutta, showing a decline of 18 from the number in the previous week; the deaths in Bombay included 15 from small-pox and 16 from measles, while the largest proportional fatality of "fever" was recorded in Madras. According to the most recent weekly returns, the average annual death-rate per 1000 persons estimated to be living in twenty-one of the largest European cities, was 27.1, and was no less than 3.4 above the mean rate last week in twenty-eight of the largest English towns. The death-rate in St. Petersburg was equal to 43.7, and showed a further increase upon the high rates in recent weeks; the 778 deaths included 29 fatal cases of small-pox, 26 of scarlet fever, and 22 of typhus and typhoid fever. In three other northern cities—Copenhagen, Stockholm, and Christiania—the death-rate averaged 26.1, and ranged from 17.1 in Christiania to 29.6 in Copenhagen; scarlet fever caused 6 deaths in Stockholm, and whooping-cough 4 in Copenhagen. In Paris, the death-rate was equal to 26.7, and the deaths included 45 from typhoid fever, and 15 from small-pox. The 210 deaths in Brussels were equal to a rate of 27.2, and included 6 fatal cases of small-pox. The rate in Geneva did not exceed 20.8. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the mean death-rate was 28.3, and ranged from 26.9 in Amsterdam, to 28.2 in Rotterdam; small-pox caused 7 deaths in Rotterdam, and diphtheria 6 in Amsterdam. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 27.6, and ranged from 21.5 and 23.8 in Berlin and Dresden, to 35.4 and 39.4 in Prague and Trieste. Small-pox caused 5 deaths in Vienna and 2 in Buda-Pesth; diphtheria showed the largest proportion of fatality in Dresden. The death-rate was equal to 29.8 in Turin, and 38.9 in Venice; typhoid fever caused 6 deaths in Turin, and measles showed fatal prevalence in both these Italian cities. In four of the largest American cities, the mean death-rate was 26.2; the rate ranged from 19.4 in Brooklyn, to 34.5 in Baltimore. Small-pox caused 83 deaths in Baltimore, showing a further increase upon previous weekly numbers, and 10 in Philadelphia. Typhoid fever caused 15 deaths in Philadelphia, and diphtheria showed excessive fatality in most of these American cities, especially in Baltimore.

ANTISEPTIC VALUE OF CARBONIC ACID.—The preservative action of carbonic acid on meat has recently been demonstrated by Professor Kelbe, of Leipsic. He hung pieces of beef, including fat and bone, in cylindrical tinned-iron vessels, which were kept in a warm room of the laboratory, where the temperature at midday rose to 89 Fahr. Each piece was hung from the cross bar; a plate for dropping liquid stood below; just over this was a tubular passage for entrance of carbonic acid; the cylindrical lid of the vessel entered an annular trough holding glycerine, and had a tube in the middle. When nearly all the air was supposed to be driven out through the latter tube by the entering gas, the elastic tubes connected to both tubes were pinched with screws. After eight days in the vessel the beef was not distinguishable from fresh beef in aspect or taste after cooking, and the gravy was like that from fresh beef. After a fortnight the beef had become somewhat gray externally, and only a fine palate could distinguish the gravy from that of fresh meat. Sometimes beef and gravy had a weakly acid taste, which was easily remedied with a little carbonate of potash. After three weeks the beef was still of the same good quality, only softer than fresh beef and requiring less time to cook. It was quite free from bad smell even after from four to five weeks, but the cooked gravy then no longer tasted so good as fresh gravy. The experiment ceased at that point, and it is believed to establish that carbonic acid is an excellent means of preserving beef from putrefaction, and maintaining its good taste for several weeks. It is noteworthy that mutton under like treatment began to smell badly after eight days; veal, also, could not be kept so long as beef. Fowl and game have not yet been operated upon; but fish, lobsters, oysters, and fruit could be kept for a short time. Further tests are to be made of this antiseptic. The antiseptic value of carbonic acid gas has long been known to those interested in the question, and has been the subject of many previous experiments. The effort has been made on more than one occasion, we believe, to make this agent available for commercial purposes; and those who are familiar with the specimens at the Great Exhibition of 1851, will remember that on that occasion a variety of articles of food were shown, which had been preserved in carbonic acid gas for very long periods of time, and which were then quite fresh and sweet. Hitherto, however, the difficulty has been

how to make this prove available, on a large scale, for commercial use.

BETHLEM HOSPITAL AND ITS TRUSTS.—A curious point, which is of considerable interest to the trustees of charitable funds, has just arisen in connection with the bequests made to Bethlem Hospital, London. It would seem that, about a century ago one John Baynard bequeathed the sum of £1,000 to the governors of Bethlem Hospital on condition that the hospital should at any time receive for treatment an insane patient to be nominated by the churchwardens of St. Margaret's parish, in the city of Rochester, who were appointed the sole trustees of the fund. From time to time patients have been duly received at the hospital from the parish of St. Margaret, but within the last few years difficulties have arisen between the governors of the hospital and the churchwardens as to the reception of patients, the hospital authorities on various pretexts, declining to admit the patients nominated by the churchwardens. The trustees accordingly brought the matter before the Charity Commissioners, who called upon the governors of the hospital to fulfil the conditions required of them, the result being that the hospital authorities expressed their wish to pay back the amount of the sum left to the hospital by Baynard—namely, £1,000—and so relieve themselves of their obligation. This the Charity Commissioners have allowed to be done, and a new scheme is about to be arranged for the disposal of the funds of the charity. In the meantime the churchwardens of St. Margaret's insist that the hospital authorities should repay a much larger sum than the original £1,000, considering the great difference in the value of money as compared with the present time and the date of the bequest. The point urged by the churchwardens is now under the consideration of the Charity Commissioners.

BRITISH HOME FOR INCURABLES, CLAPHAM.—A pleasant gathering took place on the evening of January 25th, at this institution, on the occasion of an entertainment under the direction of Mr. R. G. Salmond, the secretary. The programme of the evening was varied and included some capital singing by Messrs. Brett, Read, Hall, and Morgan; recitations by Mr. C. W. Annesley Trollope, which were enthusiastically received; and, by the kindness of Messrs. Mead and Deverell, the audience were treated to ventriloquism and conjuring by Professor Hellis, of the Royal Polytechnic Institution, a noticeable and thoroughly appreciated feature of which was the wonderful production of a packet, properly directed to each patient, containing a welcome and suitable present; nor were those forgotten who, owing to their terrible and incurable maladies, were confined to their beds, as Professor Hellis paid them all a visit, and distributed the gifts. The idea of bringing together in friendly intercourse, at this season of the year, all those connected with the management of the charity, is an excellent one; and, this being the first Christmas-entertainment that has taken place at the Home, it is a pleasure to record that it was a complete success, and gave intense satisfaction to both visitors and patients. It is to be hoped that it may be the means of bringing the urgent claims of this most deserving and national charity before the public. Among those present were: His Highness the Raja of Rampur; Captain Bedford Pim, R.N.; Mr. Krishnual Datta; Dr. Gardiner; Dr. and Mrs. Rugg; Dr. and Mrs. Cooper; Mr. and Mrs. J. A. Shaw Stewart; Mr. and Mrs. Frank Bevan; Colonel and Mrs. Clifton Gascoigne; Colonel and Mrs. Dugmore; Colonel Bates; Major and Mrs. Dundas; General and Mrs. Elliott; Mr. and Mrs. John Young; Mr. Baber; Mr. and Mrs. Hubert Scott; Miss Ripley; the Misses Cooper; the Rev. E. Maughan; Mr. and Miss Clarke; Mr. and Mrs. Forrester.

CORONERS' EXPENSES FOR MIDDLESEX.—The following were the disbursements of the different coroners for Middlesex, passed at the January Sessions: Sir John Humphreys, Eastern District, 312 inquisitions from November 13th to December 31st, £478 14s. 6d.; Dr. George Danford Thomas, Central District, 301 inquisitions, from November 11th to December 31st, £581 19s. 6d.; Dr. Diplock, Western District, 134 inquisitions, from November 13th to December 31st, £258 3s.; Mr. W. J. Payne, Liberty of the Duchy of Lancaster, 16 inquisitions, October 1st to December 31st, £38 19s. 6d.; Mr. Charles St. Clare Bedford, City and Liberty of Westminster, 59 inquisitions, from November 1st to December 31st, £123 18s.

MANCHESTER MEDICAL SOCIETY: MICROSCOPICAL SECTION.—The annual meeting of the Microscopical Section of the Manchester Medical Society was held on the 23rd ult. The following were elected officers for the ensuing year. *President:* Dr. J. Dreschfeld. *Vice-President:* Dr. D. J. Leech. *Committee:* Mr. J. Broadbent; Dr. J. Dixon-Mann; Dr. J. S. Bury; Dr. A. H. Griffith; Dr. H. Tomkins; Mr. A. W. Stocks. *Treasurer:* Dr. H. Ashby. *Secretary:* Mr. A. H. Young.

OPERATION DAYS AT THE HOSPITALS.

MONDAY.	Metropolitan Free, 2 P.M.—St. Mark's, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Royal Orthopaedic, 2 P.M.—Hospital for Women, 2 P.M.
TUESDAY.	Guy's, 1.30 P.M.—Westminster 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—West London, 3 P.M.—St. Mark's, 9 A.M.—Cancer Hospital, Brompton, 3 P.M.
WEDNESDAY.	St. Bartholomew's, 1.30 P.M.—St. Mary's, 1.30 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—St. Peter's, 2 P.M.—National Orthopaedic, 10 A.M.
THURSDAY.	St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Charing Cross, 2 P.M.—Royal London Ophthalmic, 11 A.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. W., 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; Orthopaedic, F., 12.30; Dental, Tu. F., 9.
ST. GEORGE'S.	Medical and Surgical, M. Tu. F. S., 1; Obstetric, Tu. S., 1; o.p., Th., 2; Eye, W. S., 2; Ear, Tu., 2; Skin, Th., 1; Throat, M., 2; Orthopaedic, W., 2; Dental, Tu. S., 9; Th., 1.
ST. MARY'S.	Medical and Surgical, daily, 1.45; Obstetric, Tu. F., 9.30; o.p., Tu. F., 2; Eye, Tu. F., 9.15; Ear, M. Th., 2; Skin, Tu., 1.30; Throat, M. Th., 1.45; 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., 10.30.
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. Dr. C. Theodore Williams will re-open the adjourned discussion on the Association of Bacilli and Tuberculosis.
TUESDAY.	Royal Medical and Chirurgical Society, 8 P.M., Ballot. 8.30 P.M., Mr. Christopher Heath: Aneurysm of the External Carotid Artery, Ligature of the Common Carotid. Mr. Howard Marsh: Ligature of the Carotid and Right Subclavian Arteries for Aneurysm of the Aorta. Mr. Henry Morris: Aneurysm of the Arch of the Aorta, involving the Innominate Artery, with Remarks on the Distal Ligature.
WEDNESDAY.	Hunterian Society, 7.30 P.M., Annual General Meeting for the Election of Officers. 8 P.M., The Annual Oration will be delivered by Mr. E. G. Gilbert in the theatre of the London Institution.—Royal Microscopical Society, 8 P.M. Annual Meeting.
THURSDAY.	Harveian Society of London, 8.30 P.M. Dr. Morton will open a Discussion on the Report of a Committee of the Society appointed for the purpose of Inquiring into the Mortality referable to Alcohol.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

SAD CASE OF A SURGEON'S WIDOW.

SIR,—May I acknowledge the following donations I have received in answer to the appeal I was enabled, through your kindness, to make in your JOURNAL of January 20th for poor Mrs. Stephens? T. Smith, F.R.C.S., £2 2s.; Dr. Bull, Hereford, £1 1s.; Henry Stear, Esq., £1 1s.; Dr. Gardiner, £1; J. A. Shaw Stewart, Esq., £1; L. L. Powell, Esq., 10s.; "K.", 10s.; H. A. L., 5s.; ditto, 5s. I only require a few pounds more to supply her with some necessary clothing, and hope to obtain a passage for her in the *Drummond Castle*, sailing on the 27th instant.—I am, sir, your obedient servant,

R. G. SALMOND, Secretary.

British Home for Incurables: Offices, 73, Cheapside, E.C.,
February 6th, 1883.

M. R. C. S. (Carlton).—Dr. Duhring's *Atlas of Skin-Diseases*.

ALCOHOL AND INTOXICATING DRINKS.

SIR,—I regret to see so devoted a friend to temperance as Miss Richardson, fall into an error very natural to all who, from having had no medical training, are practically unacquainted with the facts of the pathology of alcohol. Danger to the reformed inebriate does not lie in alcohol as alcohol, but in drinks in which this narcotic poison is present in intoxicating proportion. I have found 1½ per cent. of alcohol in ginger-beer, which has been drunk, not only without harm, but with considerable benefit, by the reformed. I have also seen marked good follow the administration of various un-intoxicating beverages containing from 5 to 2 per cent. Alcohol, probably (I, for one, have been unable to invalidate the conclusions of M. Muntz) exists in the air, earth, and water around us, as a product of organic decomposition. The total abstinence movement and the rescued inebriate are concerned simply with intoxicating drinks of all kinds, and of every strength. With un-intoxicating drinks, whether these contain, or do not contain, alcohol, the temperance reformation wages no war. If I am not misinformed, the inland Revenue classes all liquors with less than 3 per cent. of proof spirit (=1.37 per cent. of absolute alcohol by weight) as non-intoxicant. I should be glad to see of him, raised, as you suggest, to 2 per cent. of absolute alcohol by weight (=4.40 per cent. of proof spirit), any drink containing not more than this quantity by natural fermentation is practically un-intoxicating. A sample of un-intoxicating raisin wine, containing 1.61 per cent. of absolute alcohol by weight (=3.54 per cent. of proof spirit) is now before me. It is perfectly safe for any reformed drunkard, and it is practically non-intoxicating, for it is impossible to conceive of anyone drinking enough of it to produce even incipient intoxication. It would, in my judgment, be a severe blow to total abstinence if the Government were to impose a spirit duty on the great variety of favourite non-intoxicants which have done so much, in recent years, to popularise and extend the practice of temperance.

When we speak of any article as a poison, we, of course, mean in a dose sufficient to produce the symptoms characteristic of the particular poison. Of the effects of a minute dose of alcohol, or aconite, or any other poison, we know nothing. We cannot tell whether there has been a beneficial or an injurious effect, or, indeed, any effect at all. In a word, the total abstinence of the temperance movement is total abstinence from all *intoxicating* liquors.—Your obedient servant,
NORMAN KERR, M.D.
January 20th, 1883.

A COLLECTOR.—The portrait of Dr. John Arbuthnot is rare; the autograph of B. S. Albinus very rare. Pettigrew states there is not one in the Leyden University, where he was so long a professor: neither is there one at the Universities of Oxford or Cambridge, or the Royal College of Physicians; the sister College in Lincoln's Inn Fields is more fortunate, possessing two; but Mr. T. M. Stone has several, formerly in the possession of John Abernethy.

WATER CONTAMINATED WITH LEAD.

SIR,—I have read the letter of "Mr. Arthur Roberts" in your issue of the 20th instant, in which he says: "I have always found that filtering removed all the lead." It is a great pity that such a statement as this should be published. There are many cases in which water contains lead, and filtration is quite inefficient to remove it. It very often happens that water of certain classes, contaminated with lead, will not give it up even to a charcoal filter. It is evident that the experiments which Mr. Roberts has made have been on some classes of water only.—Yours truly,
G. W. WIGNER, F.C.S., F.I.C.
37, Lombard Street, E.C., January 23rd, 1883.

THE OLDEST MEMBER.—Both John and William Hunter were members of the old Corporation of Surgeons. John Hunter was buried under the church of St. Martin's-in-the-Fields; the remains were subsequently removed to Westminster Abbey. The remains of William Hunter were buried in the rector's vault of St. James, Piccadilly; he was the founder of the Hunterian School in Great Windmill Street, to which he removed in 1776.

STEAM DRAFT KETTLE.

SIR.—I am sorry that Dr. R. J. Lee feels himself aggrieved by Allen's advertisement of a "steam draft kettle." I have written to request him not to use this term, and not again to mention my name in connection with it. As Dr. Lee rightly says, I was formerly house-surgeon at Great Ormond Street, and was therefore acquainted with the details of his invention. This acquaintance with details enables me to say authoritatively that the croup kettle, as made by Allen, was not an imitation of any machine then in use at Great Ormond Street.

In my little work on Tracheotomy (published in 1880), when advocating the value of steam, it is stated (page 41) "for this purpose, the ventilating croup-kettle is the most useful. It was made at my suggestion, on the principle of the ingenious 'steam draft inhaler' invented by Dr. Lee; differing from it chiefly in size and in one or two minor points, which, while they render it more convenient as a 'croup kettle', they lessen its value as an inhaler."

In suggesting to Messrs. Allen the kettle as at present made by them, my object was to utilise that which is obviously good in Dr. Lee's inhaler, and to modify, in practical detail, those points which rendered the employment of the inhaler impossible for the croup-bed. Further, I took the earliest opportunity, in my book and elsewhere, of acknowledging the share which belonged to Dr. Lee in the "invention", such as it is. For myself, I have no ambition to become known as an inventor of kettles; neither do I aspire to be considered "either original or ingenious" in this department of work.

During my residence in Great Ormond Street, Dr. Lee's inhaler was frequently used; we did not, however, and could not, use it for the croup-bed. The reason will be apparent to anyone who cares to examine for himself Dr. Lee's instruments as made at the period to which I refer.—Yours faithfully,

ROBERT WM. PARKER.

London, January 29th, 1883.

SIR.—We notice a letter in reference to the above in last week's issue of the JOURNAL. In justice to Mr. Parker, we desire to say that we alone are responsible for the advertisement, and for the use of the term "steam draft kettle"; and we would also say Mr. Parker has no personal interest of any sort whatever in our croup kettle. We are aware that the late Mr. Napier stated that our kettle was an imitation of one in use at the Children's Hospital in Great Ormond Street; this statement, however, is quite inaccurate, as anyone who examines the two articles will at once see.

Though not able to give the date when first introduced, because of the death of the medical man and the break-up of the firm who used to supply them, we should say it is over twenty years since a steam draft inhaler was first introduced, not under that name, but under the simple name of "inhaler"; so the principle of the steam draught has nothing novel about it, even in application in this sense.

In conclusion, we assert that when our first kettle was made, it met a want, and that there was nothing in use at all like it, either at Great Ormond Street or elsewhere. To convince yourself of this, you have only to compare the two instruments together. We further assert that the article now being sold as "Dr. Lee's Steam Draft Kettle" was not made or introduced until after ours, which Dr. Lee carefully inspected on our premises. We have now advertised this article for four years in all the medical papers, so must leave your readers to decide for themselves as to which has the priority.—We remain, your obedient servants,

JAMES ALLEN AND SON.

21 and 23, Marylebone Lane, W., January 30th, 1883.

DR. N. GRATTAN (Oork) wishes it to be stated that the letter concerning the treatment of Gambetta last week referred to in the JOURNAL was not written by him.

A. R.—No legal right whatever.

PRURITUS AFTER HERPES ZOSTER.

SIR.—As I have seen no reply to the question asked on this subject, and as I have been the subject of this itching on more than one occasion, I think perhaps the treatment I adopted successfully to myself may be of use to "Inquirers". The cause of the itching, I believe, is capillary stagnation, and consequent irritation to the peripheral nerves. I therefore bathe the part thoroughly for a quarter of an hour, with water as hot as can be borne, and then rub with a rough towel sharply for about five minutes. This should be done three times a day, or oftener, and I find great benefit result therefrom; in three or four days it is well. Of course the habitual constipation must be attended to. There is always a certain amount of itching after the separation of a scab, due, I think, to the cause already mentioned; if it is not due to this, I do not see how the friction treatment would allay or cure it.—I am, faithfully yours,

Fill, Bristol.

A. H. BOYS, L.R.C.P. Ed., etc.

A MEMBER (Manchester).—No double qualification is necessary for your purpose.

SURPRISED.—The plagiarism is well known, we find, to the author, but he does not desire it to be noticed.

PREVENTION OF SMOKE.

SIR.—I would supplement your letter on the prevention of smoke by the following bits of information gleaned during a year's residence in Canada.

1. The hard coal is broken by machinery, and screened to sizes from a large potato to a bean, to suit the different kinds of furnaces and stoves in which it is to be burned. The same practice should be followed here by the coal-merchants.

2. The bottoms of the grates can be shaken, so that the ashes fall out without the use of the poker.

3. The American self-leader stands about five feet high, and has a reservoir of coal which keeps it going for twelve hours. There is a round grate in the centre full of glowing coals, and you have a full view of it through mica windows. It is simply perfection in a hall, and warms the whole house. Why does not some manufacturer get it over, and make one on the same pattern, instead of supplying the wretched black affairs which are sold at present?

4. The same remark applies to the cooking-stove. I have had experience of Smith and Wellwood's, and have one of Constantine's, but none of them come up to the best American. But I suppose it is the old story. The American seems to be a "Hok creation", but takes all he can find best from everyone else. The Englishman says nothing, but sticks doggedly to his own plan, and will learn from nobody.—Yours, etc.,

Barnstow, January 27th, 1883.

A. W. WALLACE, M.D.

A MEDICAL PRACTITIONER.—There is no legal enactment to prevent anyone from applying a dressing to a wound.

LINED MEAL (FREED FROM OIL) AS A MATERIAL FOR POULTICES.

M. LAILLER (*Répertoire de Pharmacie*) recommends lined meal which has been deprived of its oil as far superior to that which is freshly ground and used in its natural state; his own experience is added to the authority of Deschamps in support of this statement. The latter says: "The oil of the grain is so imprisoned by mucilaginous matter when warm water is added to the lined meal, that no one has ever observed any trace of the oil; neither the linen nor the part poulticed is ever greased." When the oil is present, it quickly becomes rancid, and seriously affects the skin. M. Lailier states that the meal deprived of its oil makes a lighter poultice, retains its heat longer, and is less liable to give out unpleasant odours and cause unpleasant results than one made of oily meal.

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

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BOOKS, ETC., RECEIVED.

The Principal Southern and Swiss Health-Resorts; their Climate and Medical Aspect. By William Maroet, M.D., F.R.S. London: J. and A. Churchill 1883.

Knight's Annotated Model By-laws of the Local Government Board relating to (1) Cleansing of Privies, etc., (2) Nuisances, (3) New Streets and Buildings. London: Knight and Co., Local Government Board Publishers. 1883.

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