

cutaneous stimulation (*e.g.*, of the skin of the neck by a faradic brush). Regarding this condition, information is needed on several points.

Can this reflex dilatation be always obtained under normal circumstances?

What is the most convenient and efficient means of obtaining it in regard to (*a*) place and (*b*) form of cutaneous stimulation?

Is it true that there is always loss of reflex dilatation when there is loss of reflex contraction?

The pupils are usually small in this condition, but not invariably, and are sometimes not circular. It is desirable to know whether any relation can be traced between the size and shape of the pupils and other symptoms.

It is not uncommon to find, under the conditions in which reflex iridoplegia occurs, that the pupils contract under the influence of light; but immediately, the exposure continuing, dilate again to their former size, often with slight oscillations. Does this condition go on to loss of reflex contraction?

In total paralysis of the internal muscles—ophthalmoplegia interna (Hutchinson)—the pupils are not usually small. What variations in the size of the pupils are met with in this condition?

Regarding the association of these symptoms with spinal disease, it is desirable to know how frequently they are met with in locomotor ataxy and general paralysis of the insane, and in what other spinal diseases they occur.

Both symptoms occur apart from spinal disease, and facts are needed as to the other conditions with which they are associated, and as to their relation to constitutional syphilis. Does ophthalmoplegia interna begin as reflex iridoplegia?

Ophthalmoplegia externa has been shown to depend on nuclear degeneration. There is some reason to believe that reflex iridoplegia and ophthalmoplegia interna depend on a similar degeneration. Pathological observations on the nature of the lesion in these cases are much needed.

### ROYAL COLLEGE OF PHYSICIANS.

At a special meeting of the College held on March 19th, 1883, the use of the College Library was granted to the Medico-Psychological Association for their annual meeting on July 27th. The President, Sir WILLIAM JENNER, addressed the College on laying down his office, and was requested to allow the address to be printed. He was then re-elected. A committee was appointed to watch the progress of the Medical Act Amendment Bill, to take such steps as they may think necessary, and to report from time to time to the College. It was resolved that a Financial Committee be appointed annually, and that they report quarterly to the College on all financial matters.

The following report was adopted.

"The Council, having considered the subject of the investment of the Lambert legacy referred to them by the College, recommend that the proceeds of the legacy, amounting to £1,447 14s. 6d., be invested, together with the interest accruing thereon, in such English Railway Debenture Stock as the bankers of the College may advise. With reference to the other question referred to the Council for their consideration, namely, that 'of explaining the reasons for nominating members for election to the Fellowship,' the Council beg leave to report that they are of opinion that it is not necessary to modify the existing practice, as the claims of every member of the College are always carefully considered in detail before any re-election is made.—WILLIAM JENNER."

## 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., May 21st, and 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.

**SOUTH WALES AND MONMOUTHSHIRE BRANCH.**—The next ordinary meeting will be held at Bridgend, on Wednesday, April 18th. Members desiring to read papers, etc., are requested to send titles to either of the undersigned by the end of March.—A. SHEEN, M.D., Cardiff; D. ARTHUR DAVIES, M.B., Swansea, Honorary Secretaries.

**NORTH WALES BRANCH.**—The thirty-third intermediate meeting will be held at the Castle Hotel, Conway, on Thursday, March 29th, at 12 o'clock (noon). After the meeting, the members and guests will dine together. Notice of papers to be read should be sent to the Honorary Secretary. Agenda.—The subject of the President's Address at the annual meeting will be continued and discussed (*viz.*, Counter-irritation). Paper: Compound Fracture of Skull, etc., by J. F. Griffith, Pen-y-groes. Notice of Motion: "That the subject of Working Men's Clubs be discussed at the Intermediate Meeting."—J. LLOYD ROBERTS, Honorary Secretary.—Denbigh, March 9th, 1883.

**SOUTH-EASTERN BRANCH: WEST SURREY DISTRICT.**—The next meeting will be held at the Bush Hotel, Farnham, on Thursday, March 29th, 1883. Business: Discussion on Collective Investigation of Disease. Elect Secretary for Collective Investigation Committee. Dr. Pearse: Medical Ethics and Fees. Dr. Boxall: Antiseptics in General Practice. Mr. Napper: A Case of Compound Comminuted Fracture of the Skull.—A. ARTHUR NAPPER, Honorary Secretary, Broad Oak, Cranleigh, Surrey.

**SHEREPSHIRE AND MID-WALES BRANCH.**—The next meeting of the above District will be held at the Working Men's Hall, Whitechurch, on March 29th, at 3.30 p.m. Dr. Gwynn of Whitechurch kindly invites members to luncheon at the Working Men's Hall prior to the meeting.—EDWARD CURETON, ARTHUR STRANGE, Honorary Secretaries.—Shrewsbury, March 19th, 1883.

## CORRESPONDENCE.

### MEDICAL PROVIDENT SOCIETY.

SIR,—I shall be most happy to enrol myself among the supporters of the proposed Medical Benefit Association. Permit me, however, to invite attention to some important points which appear to have escaped the notice of the projectors of this most excellent institution. That sudden death or accident may unexpectedly cut short the career of a deserving and prosperous practitioner, leaving his wife and children utterly destitute, is unhappily but far too common; such sad cases being almost of daily occurrence; medical men, as a rule, live up to their income (usually a modest one), and really cannot, as a class, be fairly taxed with improvidence. Of course, this contingency may hang over the heads of all, whether members of the British Medical Association or otherwise; and I venture to submit that the very object contemplated by the proposed Medical Provident Society (*viz.*, of offering to the whole medical brotherhood a participation in the benefits arising from such a society) would not be attained were the benefits extended to none but members of the British Medical Association alone. Let me not be misunderstood. I would not, for a moment, suggest that the management of the Society should be taken out of the hands of the British Medical Association; but while leaving, for obvious reasons, its exclusive direction to the Association's members alone, feel con-

## MEDICAL NEWS.

**APOTHECARIES' HALL.**—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, March 15th, 1883.

Smith, John Charles, Gillingham Street, Pinlicko, S.W.  
Williamson, Herbert Holdrich, Mildmay Park, N.

### MEDICAL VACANCIES.

The following vacancies are announced :

- BETHLEM HOSPITAL.**—Two Resident Medical Students. Applications by April 7th.
- BIRMINGHAM AND MIDLAND COUNTIES ORTHOPÆDIC AND SPINAL HOSPITAL.**—Assistant Physician. Applications by April 6th.
- CAPE COPPER MINING COMPANY.**—Assistant Surgeon. Earnings guaranteed, £225 per annum. Applications to the Secretary, 6, Queen Street Place, E.C.
- CHARING CROSS HOSPITAL.**—Assistant Physician. Applications to the Medical Committee by March 24th.
- CHARING CROSS HOSPITAL.**—Assistant Physician-Accoucheur. Applications to the Medical Committee by March 24th.
- CHICHESTER INFIRMARY.**—House-Surgeon and Secretary. Salary, £100 per annum. Applications by April 7th.
- COUNTY LUNATIC ASYLUM, Burntwood, near Lichfield.**—Assistant Medical Officer. Salary, £120 per annum. Applications at once.
- DARLINGTON HOSPITAL.**—Junior House Surgeon. Salary, £100 per annum. Applications to C. T. Aison, Esq., Fairfield House, Darlington.
- GENERAL INFIRMARY, Hertford.**—House-Surgeon and Secretary. Salary £100 per annum. Applications to the Secretary.
- HOLLO AND NORTH ISLINGTON DISPENSARY.**—Surgeon. Application to the Honorary-Secretary, care of Resident Medical Officer, Dispensary, Palmer Road, Holloway, N.
- JOINT COUNTIES ASYLUM, Carmarthen.**—Junior Assistant Medical Officer. Salary, £100 per annum. Applications to the Medical Superintendent by March 30th.
- LIVERPOOL INFIRMARY FOR CHILDREN, Myrtle Street.**—Assistant House Surgeon.
- LIVERPOOL NORTHERN HOSPITAL.**—Assistant House-Surgeon. Salary, £70 per annum. Applications by March 31st.
- MANCHESTER ROYAL INFIRMARY, DISPENSARY, AND LUNATIC HOSPITAL OR ASYLUM.**—Honorary Assistant-Physician. Applications by March 31st.
- ROYAL ACADEMY OF ARTS.**—Professor of Anatomy. Applications to the Secretary, Piccadilly, by March 24th.
- WEST END HOSPITAL FOR DISEASES OF THE NERVOUS SYSTEM, PARALYSIS, AND EPILEPSY, 73, Welbeck Street, W.** Assistant Physician. Applications to P. F. Proctor, Secretary.

### MEDICAL APPOINTMENTS.

- BERRY, Other Windsor, M.R.C.S.Eng., L.S.A.,** appointed Surgeon to the V Division of the Metropolitan Police, *vice* Walter Chapman, F.R.C.S., resigned.
- BUSH, J. Paul, M.R.C.S.Eng.,** appointed House-Surgeon to the Bristol Royal Infirmary.
- COX, R. F., M.R.C.S.,** appointed Resident Medical Officer to the Westminster General Dispensary.
- CUSACK, R., L.R.C.S.I.,** appointed Medical Officer to the Cashel Union.
- EVANS, J. Fenton, M.B.,** appointed House-Physician to the Bristol Royal Infirmary, *vice* J. P. Bush, M.R.C.S.Eng.
- MACBRYAN, H. C.,** appointed Assistant Medical Officer to the Middlesex County Lunatic Asylum.
- MORRISON, J. T. J., B.A.Cantab., M.R.C.S.Eng.,** appointed House-Surgeon to Guy's Hospital.
- MOYNAN, W. M.D.,** appointed Assistant Medical Officer to the Wonford House Hospital for the Insane, *vice* S. S. Noakes, L.R.C.P., resigned.
- MURRAY, H. M., M.B.,** appointed Medical Registrar to the Charing Cross Hospital.
- OGLE, C. J., M.R.C.S.,** appointed Administrator of Anesthetics to the Metropolitan Free Hospital.
- ORFORD, J., M.R.C.S., L.R.C.P.Lond., L.S.A.,** appointed Senior House-Surgeon to the Metropolitan Free Hospital, *vice* W. Alpin, M.R.C.S., L.R.C.P., resigned.
- OWEN, R., L.R.C.S.,** appointed Resident Assistant Medical Officer to the West Derby Union.
- POWER, J. C., M.B.Camb., M.R.C.S., L.R.C.P.Lond.,** appointed Assistant House Surgeon to the Metropolitan Free Hospital, *vice* S. Butterworth, M.R.C.S.Eng., M.R.C.P.Edin.
- STANLEY, L. P., L.R.C.S.,** appointed Medical Officer to the Athlone No. 2 Dispensary District, *vice* H. H. Langstaff, M.B., deceased.
- STORRAR, W. M., L.R.C.S.,** appointed Junior House-Surgeon to Carlisle Dispensary, *vice* F. Shearer, M.B., resigned.
- TISDALL, J. J., L.R.C.S.,** appointed Resident Assistant Medical Officer to the West Derby Union.
- WHITLOCK, A. W. F., L.R.C.S.,** appointed Medical Officer to the Walsingham Union, *vice* R. H. Foot, M.D.

**HEALTH OF FOREIGN CITIES.**—It appears from the statistics, published in the Registrar-General's return, for the week ending the 10th instant, that the death-rate recently averaged 36.3 per 1000 in the three principal Indian cities; it was 33.2 in Bombay, 36.0 in Calcutta, and 39.4 in Madras. Small-pox caused 88 deaths in Bombay and 8 in Madras, while 38 fatal cases of cholera were recorded in Calcutta; "fever" showed the largest proportional fatality in Calcutta. According to the most recent weekly returns, the average annual death-rate per 1000 persons estimated to be living in twenty-two of the largest European cities, was 28.9, and was no less than 5.9 above the mean rate in the twenty-eight large English towns during the week. The death-rate in St. Petersburg was 40.3, and showed an increase upon the high rate in the previous week; the 718 deaths included 33 from diphtheria, 23 from enteric fever, and 14 from small-pox. In three other northern cities—Copenhagen, Christiania, and Stockholm—the death-rate averaged 25.9, ranging from 18.3 in Christiania to 28.4 in Copenhagen; measles caused 14 more deaths in Stockholm, and whooping-cough 6 in Copenhagen. The death-rate in Paris was equal to 26.5, and showed a further decline from the rates in recent weeks; the deaths included 46 from diphtheria and croup, 29 from typhoid fever, and 10 from small-pox. The return from Brussels showed a death-rate of 25.0, the deaths including 5 fatal cases both of small-pox and "fever." The rate in Geneva did not exceed 20.1. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the mean death-rate was 27.5, the highest rate being 29.8 in Rotterdam; small-pox caused 3 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 29.3, and ranged from 23.1 and 24.7 in Dresden and Berlin, to 32.7 and 34.8 in Munich and Prague. Small-pox caused 3 deaths both in Vienna and Buda-Pesth; diphtheria showed fatal prevalence in most of these German cities. In three of the principal Italian cities, the death-rate averaged 30.6, and ranged from 28.3 in Turin to 33.3 in Venice. Small-pox caused 2 deaths in Turin, and diphtheria 6 in Rome. The death-rate was equal to 21.2 in Philadelphia, and 26.1 in Baltimore. Small-pox caused 61 deaths in Baltimore, and typhoid fever 11 in Philadelphia. Diphtheria showed fatal prevalence in both these American cities.—The statistics for the week ending March 17th, show that the death-rate recently averaged 35.9 per 1000 in the three principal Indian cities; it was equal to 34.9 in Bombay and 39.9 in Madras. Small-pox caused 94 deaths in Bombay and 7 in Madras; "fevers" were most fatal in Madras. According to the most recent weekly returns, the average annual death-rate, per 1000 persons estimated to be living in twenty-three of the largest European cities, was 29.9, and was no less than 5.4 above the mean rate last week in twenty-eight of the largest English towns. The death-rate in St. Petersburg was equal to 41.8; the 744 deaths included 14 fatal cases of small-pox and 19 of scarlet fever. In three other northern cities—Copenhagen, Stockholm, and Christiania—the death-rate averaged 23.7, and ranged from 9.4 in Christiania to 28.6 in Stockholm; measles and scarlet fever each caused 5 of the 36 deaths in Stockholm. The death-rate in Paris was equal to 28.1, and the deaths included 38 from diphtheria and croup, 30 from typhoid fever, and 13 from small-pox. The 205 deaths in Brussels included 5 fatal cases of small-pox, and were equal to a rate of 25.2. The rate in Geneva did not exceed 19.3. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the death-rate ranged from 15.9 in the Hague to 34.9 in Rotterdam, and averaged 27.1; small-pox caused 6 deaths in Rotterdam, and diphtheria 4 in Amsterdam. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 29.8, ranging from 24.9 and 25.6 in Dresden and Berlin, to 37.6 both in Prague and Trieste. Diphtheria showed fatal prevalence in most of these German cities, especially in Dresden and Berlin. The mean death-rate in three of the principal Italian cities was equal to 30.5, the highest rate being 31.0 in Rome; scarlet fever caused 3 deaths in Turin. In four of the largest American cities, the mean death-rate was 24.4; the rate ranged from 20.7 in Philadelphia to 25.3 in New York. Small-pox caused 25 deaths in Baltimore and 6 in Philadelphia. Scarlet fever and diphtheria showed fatal prevalence in most of these American cities.

**MR. JESSE GOULDSMITH,** of Rowell Hall, has offered to give £1,000 in cash to the Trowbridge Cottage Hospital, or to erect a new building. The committee have gratefully accepted the latter offer, and plans are to be prepared immediately.

**MEDICAL MAGISTRATES.**—Dr. James Yates has been placed on the commission of the peace for Oldham, and Mr. William Berry for Wigan.

## OPERATION DAYS AT THE HOSPITALS.

<b>MONDAY.</b>	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.
<b>TUESDAY.</b>	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.
<b>WEDNESDAY.</b>	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.
<b>THURSDAY.</b>	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.
<b>FRIDAY.</b>	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.
<b>SATURDAY.</b>	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.

<b>CHARING CROSS.</b>	Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; Skin, M. Th.; Dental, M. W. F., 9.30.
<b>GUY'S.</b>	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.
<b>KING'S COLLEGE.</b>	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.
<b>LONDON.</b>	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.
<b>MIDDLESEX.</b>	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.
<b>ST. BARTHOLOMEW'S.</b>	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.
<b>ST. GEORGE'S.</b>	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.
<b>ST. MARY'S.</b>	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. Th., 1.30; Throat, M. Th., 1.45; Dental, W. S., 9.30.
<b>ST. THOMAS'S.</b>	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.
<b>UNIVERSITY COLLEGE.</b>	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.
<b>WESTMINSTER.</b>	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.

<b>TUESDAY.</b>	Royal Medical and Chirurgical Society, 8.30 P.M. Mr. Herbert Page On Subperiosteal Hemorrhage, probably Scorbutic, of Three Long Bones, in a Rickety Infant. Dr. T. Barlow: Cases of So-called Acute Rickets in Children. Combination of Rickets and Scurvy.
<b>WEDNESDAY.</b>	Hunterian Society, 3 P.M. Mr. Rivington: Case of Removal of Loose Cartilage from the Knee-Joint. Mr. Charters J. Symonds: On the Use of Martin's Bandage in the Treatment of Synovitis; and Case of Peculiar Eruption on Sole of Foot, probably due to Congenital Syphilis. Dr. Port: Case of Mediastinal Tumour.
<b>FRIDAY.</b>	Clinical Society of London. Mr. R. W. Parker: Contused Wound of the Thigh and Leg; Gangrene of the Limb; Death. Mr. Spencer Watson: On a Case of Tetanus. Mr. Howard Marsh: Tetanus following Laceration of the Toes, and persisting Forty Days; Recovery after Syme's Amputation. Mr. Barwell: On the Removal of Large Portions of the Upper Lip, without Deformity of the Face. Mr. H. Marsh will exhibit a Case of Ostitis Deformans.

## 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.

## THE PROPOSED TESTIMONIAL TO DR. A. H. JACOB.

SIR,—It has recently been suggested in your columns, as well as by direct communications with myself, that the profession—especially the Poor-law medical officers of Ireland—should offer to me some substantial expression of their appreciation of the services which, in years past, I have been able to render in defence of their interests. I have, hitherto, thought it best to abstain from public notice of this very kind suggestion, but, as it is again renewed, I feel that I ought to interpose before further action is taken.

I am greatly gratified with the assurances which I have received that my public work is considered worthy of recognition; and this appreciation of my humble efforts is an encouragement to perseverance, for which I warmly thank those who have spoken so kindly of me; but I must, nevertheless, deprecate (at least for the present) any further movement in the direction of a testimonial to me. I feel that I have not yet legitimately earned the esteem or gratitude of my profession, and that my work in their behalf is not yet nearly complete. If I should be able to continue, for some years to come, to do battle for their rights as public servants, and to labour with energy toward raising the educational and social status of the profession in Ireland, I may, some day, hope to deserve the thanks of my brethren; but, as it is, I am too young, both in years and in service, for any public recognition of my work.

The success of the movement for securing adequate pensions for Poor-law medical officers, to which I have gladly devoted myself, is, I am glad to think not far distant; and I have every hope that other objects, almost as important, for which my co-agitators have worked with me in years past, are likely to follow. Until the campaign is over, it is too soon to think of rewards.—Yours, etc.,

ARCHIBALD H. JACOB, M.D., F.R.C.S.I.

23, Ely Place, Dublin, February 28th, 1883.

## SAD CASE OF A SURGEON'S WINDOW.

SIR,—In closing my appeal fund on behalf of Mrs. Stephens, may I acknowledge the receipt of the following sums: Dr. Gardiner, £1; T. Smith, Esq., £2 2s.; "Beta," £1 1s.; Mr. and Mrs. Corban, £2 2s., and warm thanks from Mrs. Ireland. Mrs. Stephens desires to express with me her sincere thanks to all those who so kindly have assisted her in her afflicted state.—I am, sir, your obedient servant,

R. G. SALMOND, Secretary.

Clapham Rise, S.W., February 21st, 1883.

## A CAUTION.

SIR,—The other evening, a man came to my surgery, stating that he was the agent for a local directory, and that, in the coming issue of it, a list of medical men practising in the district was being made. On my telling him that I supposed my name would be in it, he informed me that a charge was made for inserting names. I replied that I was prevented from paying for anything of the sort, by the unwritten law of the profession. He suggested that I should subscribe for two or three copies of the directory, and then my name would be inserted. I immediately showed him the door.

May I ask you whether I was right? for I find that all the medical men in the neighbourhood have done as the man suggested—viz., either paid, or subscribed for copies.—I am, sir, yours truly,

ETIQUETTE.

## CRAMP.

SIR,—In answer to "Query," I would suggest raising the head of his patient's bed seven or eight inches; not by multiplying pillows, for this is useless, but by placing a large book under the top part of the bed, so as to make the whole an inclined plane, the object being to give fuller play to the circulating fluid. Doubtless, the reason why women suffer so much more from cramp than men is because their daily lives are much more sedentary. When men rest, they throw themselves into an arm-chair, and stretch their limbs out to their fullest extent. Women, on the other hand, almost invariably sit with their bodies in a series of right angles, thus checking in a measure the circulation through the vessels of their system, congesting the portal veins, and causing general nerve-irritation. I find a pill at bedtime of iodoine, and camphor, useful after the digestive organs have been attended to; but I should like to have a few hints myself as to the more permanent relief of hereditary cramp, for this is a complaint for the cure of which one can get but little "kudos" from grandmothers, mothers, and daughters.—I remain, sir, yours faithfully,

HARVEY J. PHILPOT.

19, Finsbury Circus, E.C.

## THE SALICYLATES IN PNEUMONIA.

SIR,—In the treatment of pneumonia, I have found the salicylate of soda very useful. I have used it in all the stages, and have found that the powerful diaphoresis which it produces relieves the breathing, cleans the tongue, restores the secretion of the nasal mucous membrane, and promotes sleep. In some cases, the inflammation rapidly subsides under its influence. It is sometimes necessary to combine a little digitalis and ammonia with the salicylate, owing to its depressing action upon the heart.—I am, sir, yours faithfully,

C. R. ILLINGWORTH, M.B.

Clayton-le-Moors, Lancashire, February 23rd, 1883.

## HOW INFECTION IS SPREAD.

SIR.—At the meeting of the Westminster Sanitary Association, Mr. Ernest Hart, and also, I believe, other speakers, alluded to the practice of allowing healthy children to be exposed to infection from measles, scarlatina, whooping-cough, etc., where the actual patient had only a mild attack. This practice was spoken of as being one followed by ignorant people of the Mrs. Gamp order, who were under the impression that it being a necessity for all children to have such complaints, they had better catch a "good sort." I should like to say that Mrs. Gamp's is not the only class that still holds this opinion; for I know of a case during the past year in which, one child out of five having a slight attack of scarlatina, the medical attendant advised that they "might as well all have it, and get it over." Not only was this done, but two gentlemen in the house who were with the sick children, nursing and playing with them, went to town daily by train, and even to places of public amusement, while the fever was in the house. The medical man in this case is the local officer of health; so, of course, he cannot be an ignorant person; and no harm followed in that house.

I fear Mr. Hart might find fault with the notion of taking a family of children for their first airing after an attack of measles into Whiteley's, at the busiest part of the day; but it has been done, and not by an ignorant person. —I am, sir, yours obediently, M. A.

London, S.W., February 26th, 1883.

## THE DOCTOR'S CARRIAGE.

SIR.—Having had a somewhat unpleasant experience of the mode of carriage-keeping mentioned by a member, I would give him the same advice as *Punch* gave to persons about to marry—"Don't!" Rather sell the carriage, and hire the whole from a jobmaster; but, if a member be unwilling to sacrifice so much, I would earnestly advise him to procure from the jobmaster an undertaking, in writing, of all responsibility with regard to accidents; also on no account to employ the same coachbuilder as the jobmaster employs; and, lastly, to give a written intimation to the coachbuilder that he (the member) will not be responsible for any repairs, unless he sends a written order for them to be done. If "A Member" would care for my reasons for this advice, I should be pleased to give them in a private letter to him.—Yours obediently, C. A.

## GUIDE TO THE MEDICAL SERVICE.

SIR.—Will you allow me to inquire, through your columns, if there be any guide to the public services, other than the Army, Navy, and Indian Medical Services? I allude to the Insane Asylum Service, the Colonial Medical, and Emigration Medical Service; the Local Government Medical, and Sanitary Medical Service; service with the P. and O., and the various shipping companies; mining appointments, etc. The information may, of course, be obtained by applying to the several offices concerned; and, some of it, by looking into Churchill's *Medical Directory*. But, if there be no special guide to them all, I venture to think that one, to include the Army, Navy, and Indian Services, might be prepared, with advantage to the medical public.—Yours faithfully, CHAS. R. FRANCIS.

Clapham Common, S.W., February 24th, 1883.

\*"We are not aware that there is any such guide."

## VEGETARIAN COOKING.

SIR.—In reply to "F.R.S.E." in your last issue, I shall be glad to forward him or any other gentleman one of our penny cookery-books on receipt of a couple of postage stamps. It contains over ninety receipts, and is very useful to ordinary mixed feeders, since it shows how many tasty dishes can be prepared without meat. There is a large book on the subject, called *Vegetarian Cookery*, by a lady, price 3s. 6d., which can be got from the Secretary, Vegetarian Society, 56, Peter Street, Manchester.

I should be very glad if any brother medicals who have tried vegetarianism will write me and give me the results of their experiments.—Yours truly, 2, Kingsland Road, E., March 9th, 1883. T. R. ALLINSON, L.R.C.P.Ed.

## SPERMATORRHOEA.

We have received several replies to the question asked by "Adrift."

Dr. W. J. ADAM (Bigger) recommends the following prescription, which he learnt from the late Dr. Warburton Begbie. R. Liquoris strychnie 5i; acidi phosphorici dil. 5iv; tinct. cardam. comp. 3vi; infusum calumbæ ad 5viii. Half an ounce morning and evening, in a little water, before food.

Dr. W. SMYTH (Banbridge) suggests dilute phosphoric acid, 20 minims; succus belladonnæ, 5 minims; liquor strychnie 5 minims; infusion of calumba or of gentian one ounce. To be taken morning and midday, and one-fiftieth of a grain of atropia every night at bedtime. The latter he administers in the form of pill, as manufactured by Richardson and Co. of Leicester. As aids to success, he recommends sponging the body with tepid water night and morning, and afterwards rubbing well with a soft fluffy towel. The patient should lie on a hard mattress, with the head high; avoid lying on the back; rise early in the morning, and empty his bladder; and take a fair amount of walking exercise every day. The bowels must be kept regular with two drachms of Rochelle salts in a tumblerful of water, two or three times a week.

## REGISTERED RIGHTS.

SIR.—Mr. Rhodes has been made to pay the penalty of his audacity, and will probably find it a powerful stimulus towards obtaining a diploma giving him the "right" to practise. It is hard upon the poor that they should have to submit to treatment from unskilled hands; and, as the Act professes to protect the public as well as the registered practitioners, I think that the latter, who employ the unqualified assistant, exceed their "right," and ought, also, to be made to sing *peccavi*.—Your obedient servant, O.

## CONDENSED MILK AND OPERATIONS ON THE EYE.

SIR.—How Mr. Adams could have arrived at the idea that I "attribute cataract in children to excess of sugar," I should be glad if he would explain; for what I stated in my letter of February 17th was, "for this (the condensed milk) was undoubtedly the cause (not of cataract) but of failure (of the operation) in this poor child." It is Mr. Adams that makes "unfounded assertions," when he puts things forward that I have not stated.

In answer to Dr. Lees, there was no rickets or congenital syphilis, and the child was apparently well nourished, and fit in every way for operation.—Yours obediently, EDWARD M. OWENS.

The Hydropathic Establishment, Leamington.

## HYPERIDROSIS.

SIR.—Your correspondent "M.D." will, I think, find the following pill efficacious: Atropiæ sulph. gr. 1/16; camphor gr. 1/16; zinc oxidi gr. 1/16; to be taken twice or thrice daily.—I am, etc., H. A. L.

## FLATULENCE.

SIR.—I have found the sulpho-carbolate of soda, in twenty-grain doses, give relief in some cases. Ten minims of tincture of nux vomica may be added, twice or three times a day.—I am, etc., A MEMBER.

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

Mr. H. Gillam, Bromyard; Mr. W. B. Wall, Pembroke; Dr. G. H. Batterbury, Wimborne Minster; Dr. R. Kirk, Glasgow; Dr. S. Coupland, London; A Member; Mr. C. F. Jennings, London; Dr. W. A. Greenhill, Hastings; Mr. J. Milne Bramwell, Goole; Dr. Carter, Liverpool; The Secretary of the Harveian Society, London; Mr. E. A. Schäfer, London; Mr. J. Laurence Hamilton, London; Mr. E. Fowler Scougal, Huddersfield; Dr. J. L. Carson, Coleraine; Mr. J. Sumner, Sheffield; Mr. Alex. McC. Weir, Nottingham; Dr. R. Reaves McCosh, Dundee; Messrs. Loefflund and Co., London; Dr. M. Wilson, London; Mr. B. Strachan, Sunderland; Mr. Robert Hamilton, Liverpool; Mr. W. B. Kilburn, West Auckland, Durham; Dr. A. T. Brett, Watford; Dr. Coleman, Surbiton; Mr. H. Turner, Norwich; Mr. G. Hunn, Willenhall; Mr. Jordan Lloyd, Birmingham; Dr. A. Emrys Jones, Manchester; Mr. Wheelhouse, Leeds; Mr. W. Young, London; Mr. Rhys, London; Mr. George Croxton, London; M.D.; Mr. Edward Bartlett, London; Mr. J. Walter Savage, Hastings; Mr. E. Scudamore Angove, Camborne; Mr. W. Kitto Giddings, Calverley, near Leeds; Dr. Edward Leslie, Alton, Hants; Dr. John Johnston, Bolton; Dr. J. G. Parsons, Bristol; Dr. W. A. Bonney, London; Dr. J. W. Langmore, London; Dr. Thomas Sanctuary, Salisbury; Mr. H. G. Gabb, Hastings; Mr. W. Fennell MacCarthy, Worcester; Mr. Henry Stear, Saffron Walden; Dr. John McKendrick, London; Dr. Mahomed, London; Dr. Leech, Manchester; Dr. Jacob, Dublin; Mr. J. Milward, Cardiff; Dr. Andrew S. Currie, Lydney, Gloucester; Dr. Herbert L. Snow, London; Mr. William Fearnsley, London; Dr. Kelly, Taunton; Dr. Casey, Windsor; Mr. J. H. Gornall, Warrington; Dr. C. Swaby Smith, London; Mr. G. J. Mahomed, Bournemouth; Mr. T. F. Naven, Broadstairs; Mr. J. E. Wakefield, London; Mr. Septimus Farmer, Hayle; Mr. T. Garrett Horne, Cardiff; Mr. J. Righam Hill, Royton, Manchester; Dr. Manson Fraser, London; Mr. J. H. Fraser, Birmingham; Dr. Oliver, Newcastle Infirmary; Dr. Robert Renton, Liverpool; Mr. John Kennedy, Elie; Mr. Henry Stubbs, Madeley; Dr. G. Herbert Lilley, Portland; Our Aberdeen Correspondent; Dr. Cocks, Ross; Dr. J. Rogers, London; Mr. J. M. Cotterill, Edinburgh; Dr. G. Beaton, Glasgow; Mr. B. L. Powne, Chard, Somerset; Mr. J. E. Peirce, Redditch; Dr. W. S. Paget, Liverpool; Mr. C. L. Drew, London; Mr. T. R. H. Clunn, Prestwich; Mr. T. Wheeler, Darlington; Mr. J. B. Unwin, Dunchurch; Mr. W. E. Green, Sandown, Isle of Wight; Dr. Fletcher Beach, Darenth; G. C. M. D.; Mr. J. T. Elliott, Smithborough, Monaghan; Mr. G. Eastes, London; Mr. G. W. Isaac, Clifton; Mr. A. Carr, London; Mr. John Kennedy, Elie, Fifeshire; Dr. George Wills, Monmouth; Messrs. D. Radelyffe and Co., London; Mr. Talfourd Ely, London; Dr. Parsons, Dover; Mr. J. Langton, London; etc.

## BOOKS, ETC., RECEIVED.

Auscultation and Percussion, Together With the Other Methods of Physical Examination of the Chest. By Samuel Gee, M.D. Third Edition. London: Smith, Elder, and Co. 1883.

How to Examine the Chest: a Practical Guide for the Use of Students. By Samuel West, M.D. Oxon, M.R.C.P. London: J. and A. Churchill. 1883.

A Practical Treatise on the Diseases of the Skin, for the Use of Students and Practitioners. By James Nevins Hyde, A.M., M.D., London: J. and A. Churchill. 1883.

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