

represent the whole of the contributions of the working-men of London to the hospitals. As long as annual subscribers to hospitals received a return in the shape of letters, the Sunday and Saturday funds should also claim such letters. If people who gave the money and received the letters acted as almoners, and saw that the letters were only given to suitable persons, they were doubly doing good. If the expense of raising the Saturday Fund was too high, it should be shown how it could be reduced. The gentleman gave to the fund so as to exercise his bounty and patronage; the poor man, so as to retain his independence.

Mr. BOUSFIELD thought the question of funds very important. They were never more needed than at present. The management of hospitals was more expensive than it used to be, as appliances were more intricate, and fashioned with deeper skill. The two Funds might both be far greater; they were not adequate to the wealth and size of London. Hospital committees must look to the co-operative system in the future; and there ought to be the two funds. There was room for both. Working men should not have to beg for hospital-letters from richer neighbours. The principle that members of the Hospital Saturday Fund Council should have a voice in the management of hospitals should be carried out, if it were possible, with due regard to the efficiency of the hospitals themselves.

Mr. HAMILTON CARR showed that Mr. Brodhurst and Mr. Burt, representative working men, and Mr. Fawcett, who was in thorough sympathy with working men, had all shown their deep sympathy in the Hospital Saturday Fund; this would traverse the statement that the Fund had not gained the sympathy of the working classes.

Mr. FULLER said there were certain points in the management of hospitals which could only be discovered by the working classes; for example, the trouble that sick men and women had in attending out-patients' rooms in the morning. It was a great convenience to be able to attend in the evening. Working men and women could speak to people of their own class more freely than to ladies or gentlemen; and if working men were made visitors to hospitals for six months or a year at the time, and could go in and out when they so desired, it would give working men a much greater confidence in the management of the hospitals.

Mr. ABRAHAM said there were 200 delegates connected with the Hospital Saturday Fund. They had held 150 meetings, which would show what interest they took in this matter. Vast numbers of workshops were represented on the Committee, and the men in these workshops could now obtain letters for hospitals. As to the expenditure, he thought it wonderful that it was not more; it would grow less as time went on.

Mr. DICKINSON said that workmen liked direct representation in the management of all funds which they assisted in collecting; and, as hospitals existed for that class of people, they had great sympathy with all that related to those institutions. People did not always receive the treatment at hospitals which they should have. No people could dispense the hospital letters so carefully to the most deserving recipients as the working men themselves. The councils of the two funds might consult each other with advantage on many points.

Mr. BURDETT, in reply, said that he was in favour of direct subscriptions from the workshops to the hospitals, rather than indirect contributions through an intermediate fund. He thought both classes—the well-to-do and the working men—would greatly benefit by association on a joint committee. The expenses of the Hospital Sunday Fund were low because the agency was voluntary; the same would result if the working men contributed directly to the hospitals. In the workshop the master and foreman should be able to get at the men as the clergymen and churchwardens could get at the congregation in the church. No one doubted that, under the present system of *quid pro quo*, the working men should receive tickets for their contributions in the same proportion as were returned for donations given by rich subscribers; but this advantage could only be obtained by direct subscription to the hospitals from the workshops.

Summing up the debate, the CHAIRMAN said that funds were wanted by all hospitals, and that the contributions to the Hospital Saturday Fund, in an imperfect way, and to some extent, encouraged thrift.

**THE TREATMENT OF LUPUS BY THE GALVANIC CAUTERY.**—M. Besnier states, in the *Paris Medical*, that the galvanic cautery does not produce more scarring than the other methods, when carefully applied to the diseased parts only. The pain is not very severe, and there is no danger of hæmorrhage. M. Besnier thinks that one great advantage of this method is to prevent the auto-inoculation of micro-organisms, which is said to take place occasionally when scarifications are used. Certain cases show that this operation is sometimes followed by the rapid development of tuberculosis in internal organs; and the fact acquires significance when it is remembered that, according to Cornil and others, true lupus is a local tuberculosis of the skin.

## ASSOCIATION INTELLIGENCE.

### NOTICE OF EXTRAORDINARY GENERAL MEETING.

NOTICE is hereby given, that, in accordance with Article 13, an EXTRAORDINARY GENERAL MEETING of Members of the British Medical Association will be held at the Queen's Hotel, Birmingham, on Wednesday, the 28th instant, at Three o'clock in the afternoon:

To consider Requisition, of which the following is a copy.

*To the President and Council of the British Medical Association.*

We, the undersigned, Members of the British Medical Association, request the Council of said Association to forthwith convene in London an Extraordinary General Meeting of the Members of said Association for the following purposes:—

"1. To consider complaints made by Members of the Association of their being deprived by the Journal Committee and the Reform Committee of their right to communicate through the medium of the JOURNAL with their fellow Members concerning questions affecting the rights and privileges of the general practitioners of the Association.

"2. To consider those provisions of the Government Bill, now in the House of Lords, which are alleged by Members of the Association to be detrimental to the interest and welfare of the general practitioners of the Association.

"3. To devise means to remedy, satisfactorily to the Members of the Association, that for which the meeting is convened as above expressed in paragraphs 1 and 2."

The requisition is signed by 53 Members of the Association.

Left at the office by  
GEORGE BROWN,  
JOHN P. HENTSCH,  
R. H. S. CARPENTER,

on this 6th day of May, 1884.

FRANCIS FOWKE, *General Secretary.*

161A, Strand, London, May 13th, 1884.

### NOTICE OF QUARTERLY MEETINGS FOR 1884:

#### ELECTION OF MEMBERS.

MEETINGS of the Council will be held on Wednesday, July 9th, and October 15th, 1884. Gentlemen desirous of becoming members of the Association must send in their forms of application for election to the General Secretary not later than twenty-one days before each meeting, viz., June 20th, and September 25th, 1884, 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.*

### COLLECTIVE INVESTIGATION OF DISEASE.

CARDS for recording individual cases of the following diseases have been prepared by the Committee; they may be had on application to the Honorary Secretaries of the Local Committees in each Branch, or on application to the Secretary of the Collective Investigation Committee.

- |                            |  |
|----------------------------|--|
| I. Acute Pneumonia.        | VII. Puerperal Pyrexia.                    |
| II. Chorea.                | VIII. Paroxysmal hæmoglobinuria.           |
| III. Acute Rheumatism.     | X. Habits of Aged Persons.                 |
| IV. Diphtheria, clinical.  | XI. Albuminuria in the Apparently Healthy. |
| IVa. Diphtheria, sanitary. |  |
| V. Syphilis, acquired.     |  |
| Va. " inherited.           |  |

NOTE.—The further 150 cases of pneumonia asked for by the Committee have now been received, and will be included in the forthcoming issue of the *Record* in July. The Committee hope that cases will still be communicated, as opportunity may occur, with a view to a further report upon the subject in the future.

An inquiry is being now issued concerning the general condition, habits, and circumstances, past and present, and the family history of persons who have attained or passed the age of 80 years.

The replies to this inquiry will be most valuable when given by a medical man; but the questions have been so arranged, that, with the exception of some on the last page, they may be answered by another person. *Partial information will be gladly received.*

Copies of the form and memorandum relating to Aged Persons, printed in last week's JOURNAL, are ready for distribution through the local Secretaries, and will be forwarded to any one who is willing to fill up one or more of the forms, on application by post-card or otherwise to the "Secretary of the Collective Investigation Committee," 161A, Strand, London.

There is also now being issued an inquiry as to the occurrence of Albuminuria in apparently healthy persons.

Applications should be addressed to

The Secretary of the Collective Investigation Committee,  
May 1884. 161A, Strand, W.C.

NOTICE.—The *Life-History Album* prepared by the Collective Investigation Committee is now ready, and can be ordered of all booksellers, price 3s. 6d.

### BRANCH MEETINGS TO BE HELD.

**THE NORTH-WESTERN PROVINCES AND OUDH BRANCH.**—Meetings are held on the first Friday in every month, at half-past nine, after dinner at eight o'clock. Gentlemen wishing to be present are requested to communicate with the Secretaries, Surgeons SHIRLEY DEAKIN and W. A. MORRIS, 8, City Road, Allahabad.

**STAFFORDSHIRE BRANCH.**—The third general meeting of the present session will be held in the Bell Medical Library, Cleveland Road, Wolverhampton, on Thursday, May 29th, at 3 P.M. In connection with the Collective Investigation Committee, a debate will take place upon Puerperal Pyrexia, and the discussion will be commenced by Dr. J. Braxton Hicks, F.R.S., Consulting Obstetric Physician to Guy's Hospital. After the meeting, the members and their friends will dine together at the Star and Garter Hotel, Victoria Street. Tickets (exclusive of wine), 7s. 6d. each.—VINCENT JACKSON, Secretary, Wolverhampton.—May 13th, 1884.

**MIDLAND BRANCH.**—The annual meeting of this Branch will be held in Nottingham on Thursday, July 3rd. Notice of papers, etc., to be sent to the Secretary, LEWIS W. MARSHALL, M.D.

**EAST YORK AND NORTH LINCOLN BRANCH.**—The annual meeting will be held at the Infirmary, Hull, on Wednesday, May 28th, 1884, at 1.30 P.M. Gentlemen who intend to make any communication, or to propose any resolution, are requested to inform the Secretary.—E. P. HARVEY, Honorary Secretary, 17, Brunswick Terrace, Spring Bank, Hull.

**SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT.**—A meeting of the members of the above district will be held at the Castle Hotel, Wellington Square, Hastings, on Tuesday, May 27th, at 3.30 P.M. Dinner at 5.30 P.M.; charge 6s. exclusive of wine. Mr. Kaye Smith of St. Leonard's will take the chair. Dr. Bagshawe will show the following specimens: Tumour of the Cerebellum (Carcinoma); Stricture of the Oesophagus. Dr. R. J. Lee: Eruptions following Vaccination. Henry Juler, Esq.: The Shadow-Test as a means of Diagnosis and Treatment of Errors of Refraction; Specimens of Eyes mounted in Glycerine Jelly. Dr. Moore: Notes of a Case of Spinal Apoplexy. T. Jenner Verrall, Esq.: Notes of a Case of Aphasia following a Blow on the Head. Communications with respect to the reading of papers or cases, or the exhibition of morbid specimens, should be addressed to the Honorary Secretary, T. JENNER VERRALL, 95, Western Road, Brighton.—April 20th, 1884.

**BATH AND BRISTOL BRANCH.**—The sixth ordinary meeting of the session will be held at the Museum and Library, Bristol, on Wednesday evening, May 28th, at half-past seven o'clock, F. Crossman, Esq., President, in the chair. The following communications are expected. 1. Two Cases of Venesection in Heart-Disease: A. J. Harrison, M.B.—2. The Treatment of Croup: F. G. Stevens.—3. A Case of Cerebral Tumour, with Specimens: J. Taylor.—4. Successful Removal of Uterine Fibroma by Abdominal Section. Exhibition of Specimen: F. Stockwell, M.D.—5. On Glaucoma: F. R. Cross, M.B.—6. Exhibition of an Incubator for Infants: C. Elliott, M.D.—E. MARKHAM SKERRITT and R. J. H. SCOTT, Honorary Secretaries.

**METROPOLITAN COUNTIES BRANCH.**—The thirty-second annual meeting of this Branch will be held at the Holborn Restaurant on Tuesday, June 24th, at 5.30 P.M. President: Charles J. Hare, M.D.; President-elect: Charles Macnamara, Esq. Dinner at 7 P.M.; tickets, 7s. 6d. each, exclusive of wine. Early application for dinner-tickets should be made to Dr. Grigg, 6, Curzon Street, Mayfair, W.—ALEXANDER HENRY, M.D., W. CHAPMAN GRIGG, M.D., Honorary Secretaries.

**SOUTH WALES AND MONMOUTHSHIRE BRANCH.**—The annual meeting of this Branch will be held at Cardiff on Thursday, June 26th next; Eben. Davies, Esq., President; A. Sheen, M.D., President-elect. Members wishing to bring forward communications, cases, etc., are requested to send titles to either of the undersigned before June 7th, in order that the same may be inserted in the circulars.—ALFRED SHEEN, M.D., Cardiff; D. ARTHUR DAVIES, M.B., Swansea, Honorary Secretaries.—May 21st, 1884.

**BIRMINGHAM AND MIDLAND COUNTIES BRANCH.**—The annual meeting of this Branch will be held at the Medical Institute on June 19th, at 3.30 P.M.—R. RICHARDS, Secretary.—14, Newhall Street, Birmingham.

### NORTH OF IRELAND BRANCH: GENERAL MEETING.

A GENERAL meeting of this Branch was held in the Board Room of the Belfast Royal Hospital on April 24th. Dr. MACONCHY, Vice-President, occupied the chair, and there were thirty-two other members of the Branch present.

**Homeopaths.**—A circular letter from the subcommittee appointed by the Council of the Association to ascertain the opinion of the Branches with regard to the admission and retention of homeopaths as members of the Association, was brought before the meeting; and, on the motion of Mr. FAGAN (Belfast), seconded by Dr. GRAY (Castellwellan), the following resolution was adopted: "That, while this Branch considers it very undesirable that professing homeopaths be admitted to the Association, they at the same time think that it would

be unwise for the Association to take prominent action in such matters, believing it wiser to leave each case to be dealt with on its merits."

**The Medical Act Amendment Bill.**—The Honorary Secretary submitted a petition in favour of the Medical Act Amendment Bill, which he had received from the Chairman of the Reform Committee, and a letter requesting him to sign the same as a member of the Council of the Association. It was thereupon moved by Dr. BYERS (Belfast), and seconded by Dr. PALMER (Armagh), and passed: "That, owing to the diversity of opinion in this Branch regarding the Medical Bill, no official action be taken in the matter."

**Communications.**—The following communications were read.

1. Dr. St. George (Lisburn) showed two cases of Fracture of the Superior Maxilla, and read notes on the treatment.

2. Mr. Fagan read a short paper on the merits of some of the methods for the Removal of the Tongue, with reports of two cases in which he removed that organ by the scissors.

3. Dr. Byers showed a Child with a large Malignant Abdominal Tumour.

4. Dr. Lindsay (Belfast) read a paper on Hysterical Paralysis, with illustrative cases.

5. Dr. J. W. Browne (Belfast) gave a short account of a case of Inguinal Hernia for which he operated successfully by Banks's method.

6. Dr. Browne also exhibited a patient who received a Gunshot Wound of the Abdomen, followed by a pelvic abscess requiring operation.

### SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.

A MEETING of the above District was held at the West Kent General Hospital, Maidstone, on May 16th; A. H. HALLOWES, Esq., late Honorary Secretary of the District, in the chair.

**Next Meeting.**—It was decided unanimously that the next meeting be held at Rochester at the end of November; Dr. J. J. D. Burns, R.N., to preside on the occasion.

**Election of Honorary Secretary.**—The Honorary Secretary of the District, Mr. A. W. Nankivell, was unanimously re-elected for the ensuing year.

**Communications.**—The following papers were read and discussed.

1. Dr. E. Ground: A case of Diabetes treated mainly with Skimmed Milk.

2. Dr. S. Monckton: On the Application of Electricity in Medical Practice, with Illustrative Apparatus.

Several interesting cases were exhibited to the meeting, and the members and visitors present were conducted round the hospital by the staff.

**Dinner.**—Eighteen members and visitors dined at the Star Hotel.

### SOUTHERN BRANCH: ISLE OF WIGHT DISTRICT.

THE annual meeting of this district society was held at the Sandown Hotel, Sandown, on Thursday, April 24th; present, JAMES NEAL, M.D., President, in the chair, and seven members.

**New Member.**—Mr. T. Ormsby Wiley was elected a member of the Branch.

**The Balance-Sheet** for the last year was presented and passed unanimously, having been previously audited by Dr. Groves.

**Officers.**—Mr. LLOYD proposed, and Dr. PLETTS seconded, and it was unanimously agreed, that Dr. D. Benton be the president-elect. Mr. LLOYD proposed and Dr. GROVES seconded, that Dr. Williamson be Vice-President elect. This was carried unanimously. Dr. GROVES proposed and Dr. PLETTS seconded, that Mr. Green be re-elected Secretary and Treasurer. This was carried unanimously, and expression was given by the members present to their indebtedness to Mr. Green for the very efficient manner in which he had filled those posts for the previous year.

**Representative in the Branch Council.**—Mr. GREEN proposed, Mr. MEERES seconded, and it was resolved: That Dr. Coghill be re-elected.

**Next Meeting.**—Mr. GREEN proposed, Dr. GROVES seconded, and it was resolved: That the next meeting be at Ryde. Mr. BARROW kindly said that if he were at home at the time, and it was not against the rules, he would be pleased to entertain the members at dinner.

THE PRESIDENT gave a detailed statement of the work of the district during the past year, alluding to the various papers, and thanking the members for their courtesy and kindness during his year of office. He then vacated the chair in favour of the new president, Dr. GROVES.

who gave an address on matters of social, general, and political interest to the profession.

*Vote of Thanks.*—Mr. BARROW proposed a vote of thanks to Dr. Neal for the manner in which he had filled the post of president for the past year. This was seconded by Mr. GREEN, who also thanked Dr. Neal for his assistance and courtesy during his year of office, and carried with acclamation.

*Antiseptic Tapping.*—Dr. COUSINS made some remarks upon the antiseptic treatment of wounds in general, and in particular on paracentesis by slow evacuation. He described his antiseptic trocar, which is made in several sizes for various kinds of tapping. He condemned rapid evacuation, referring to the dangers connected with it, among which were syncope, and the fear of exciting peritonitis, and exhibited and explained his instrument for tapping by slow evacuation; the operation for which, by his instrument, would occupy three or four hours, with comfort and relief to the patient, and freedom from danger. He advocated the early treatment of these cases by tapping before having recourse to medicines, as valuable time and strength were wasted, and pointed out the ease with which repeated tapplings could be done with permanent benefit to the patient.—Mr. BARROW thought, from a long experience of tapping by rapid evacuation, that there were not the dangers attached to the old system which Dr. Cousins dreaded.—Mr. MEERES had not found dangers with rapid evacuation.—Mr. LLOYD thought faintness a frequent effect under the old plan.—A discussion then took place, in which all the members present took part, and the general opinion seemed to be in favour of Dr. Cousins's plan.—Dr. COUSINS replied.—Mr. BARROW proposed a vote of thanks.

#### EAST ANGLIAN BRANCH: ANNUAL MEETING.

The annual meeting of this Branch was held at the Castle, Colchester, on Thursday, May 15th, under the presidency of Mr. ROBERT FRANCIS SYMONS of Colchester.

*Report of Council.*—The following report of the Branch Council was read and adopted.

"Since the last annual meeting of the Branch, important changes have taken place in the government of the Association. The Council will henceforth manage the general affairs and business of the Association; and by the 17th By-law, Section (A), it will devolve upon you to-day to elect two representatives of the Branch in the Council of the Association.

"The Branch consisted, at Christmas, of two hundred and five members; and there are thirty-nine members of the Association resident in the district who are not members of the Branch. There have been several deaths among our members: Mr. G. W. Petty of Fressinfield, who had been for many years a most regular attendant at our general meetings; and Dr. H. G. Moore of Ipswich (both these members being cut off prematurely, and both leaving large young families); also of Mr. C. G. Marshall of Woodbridge, and Mr. William Edden of Haughley, the latter a very regular attendant at our meetings. Notwithstanding these losses and some withdrawals, the Council are pleased to announce a steady accession of members.

"The Council beg to direct the attention of the members of the Branch, particularly the younger ones, to the establishment of the Medical Sickness, Annuity, and Life Assurance Society, which enables any member of the profession in a state of health to make provision for a weekly payment in case of sickness. By small quarterly payments, a sum varying from £1 1s. to £4 4s. weekly during the continuance of illness will be secured to anyone joining the Society.

"The British Medical Benevolent Fund scarcely receives the support it deserves in East Anglia; nevertheless, through the liberality of some eleven members, the sum of £9 3s. was forwarded last year by the Honorary Secretary.

"The following members of the profession have been elected by the Council members of the Association and Branch: Mr. Stanley Stenton Hoyland, M.R.C.S., L.S.A., of Tower Place, Ipswich; Mr. Robert H. Johnston, of Avoca House, Bungay; Mr. J. A. Horsford, L.R.C.P.Ed., M.R.C.S., Long Melford; Mr. James Unsworth Green, of Alderton, Woodbridge; Mr. R. J. Horn, of Attleborough; Mr. H. B. Vincent, East Dereham.

"The Council recommends the re-election of Mr. George Edward Jeaffreson upon the Parliamentary Bills Committee of the Association.

"The Council recommends that the autumnal meeting be held at Stowmarket, on Thursday, October 2nd; and that the annual meeting be held in 1885 at Ipswich, and that Dr. Elliston be President-elect."

*Representatives in the Council of the Association.*—On the motion of Mr. JEAFFRESON, seconded by Dr. CHEVALLIER, Dr. Elliston (Ipswich) and Mr. T. W. Crosse (Norwich) were elected representatives of the Branch upon the Council of the Association for 1884-85.

*Branch Council.*—The following were elected, in addition to *ex officio* members: F. Bateman, M.D.; E. Barnes, M.D.; E. Crickmay, Esq.; G. E. Jeaffreson, Esq.; G. C. Edwards, Esq.; H. S. Robinson, Esq.; R. V. Gorham, Esq.

*Luncheon.*—The members—upwards of eighty—were entertained at an elegant luncheon by the President.

*President's Address.*—This was listened to with marked attention, and frequently applauded; it inculcated a high moral standard in our relations with the public and in consultation with each other.

*Specimens* of a very interesting character were exhibited by Messrs. H. Lower, F. Taylor, the President, and Mr. Knowsley Thornton.

*Papers.*—The following were read:

1. George Johnson, M.D., F.R.S.: Picric Acid as a Test for Albumen and for Sugar in Urine.

2. Professor G. M. Humphry, M.D., F.R.S.: Inquiry as to Aged Persons.

3. J. Knowsley Thornton, M.B., M.C.: On the Surgical Treatment of Renal Calculi, with Notes on two Cases of Nephro-lithotomy.

4. H. R. L. Veale, M.D., Colchester: On the Treatment of Pleuritic Effusions.

*Collective Investigation of Disease.*—The Honorary Secretaries, Dr. Elliston and Mr. Burton, reported that thirty-two cards had been received in the year, against thirty-four in the previous year.

*The Earthquake.*—Through the kindness of the President, a visit was paid by a large number of members to the scenes of the recent earthquake, who were surprised at the disastrous effects of the shock. The damage to property is estimated at upwards of £100,000. Mr. Hugh Green, surgeon, of West Mersea, is one of the heaviest sufferers.

*Dinner.*—About forty members dined at the Cups Hotel, at 7 p.m.

*Conversations.*—A very agreeable day was ended by a *conversazione* at the Castle, at 9 p.m., to which the members were invited by the President and members of the Colchester Medical Society.

## SPECIAL CORRESPONDENCE.

### LIVERPOOL.

[FROM OUR OWN CORRESPONDENT.]

*The Abattoir Question: the Medical Officer of Health's Report.*—*Recent Reports on Unsanitary Liverpool.*—*The Professorship of Medicine in the University College.*—*The new Society for the Prevention of Cruelty to Children.*—*The new Lying-in Hospital.*—*Horse-Ambulances.*

At a meeting of the Health Committee of the City Council on March 6th, it was decided that a return be prepared by the medical officer of health, showing the death-rate from all causes within a radius of 500 yards of the immediate vicinity of the Liverpool abattoir for ten years past, as compared with a corresponding area in the several other wards of the city. Dr. Stopford Taylor has completed this investigation, and the return was brought before the Council on May 8th. It was proposed at this meeting, but the motion was negatived, that the report be referred back to the medical officer for amendment, on the ground that in it no comparison of the death-rate with corresponding areas in other parts of the city was made, so that there was no means of drawing a comparison. Dr. Taylor, however, affirms in his report that he was unable to define any areas in other wards corresponding with the one around the abattoir. Still, the results of the investigation are very striking. For each of the past ten years, the death-rate per 1,000 within the abattoir area has been greatly in excess of that for the two wards in which the slaughter-houses are situated, and also that for the city as a whole. For instance, in 1874, the death-rate per 1,000 in the abattoir district was 40.5; in Rodney and Abercromby wards it was 24.7; and in the city taken as a whole, 31.9. For 1883 the figures are 32.2, 21.4, and 26.6 respectively. And the average for ten years runs thus: 34, 21.7, and 27.6. The position taken up by the local medical men in this matter of the removal of the abattoirs from the heart of the city does not, at all events in the opinion of common-sense persons, need strengthening. But the figures quoted are remarkable, and strongly confirmatory of the statements made by members of the deputation of medical men that waited upon the mayor some weeks ago.

Some other reports recently issued have been exciting much interest. Last autumn, the medical officer of health and the city engineer were instructed by the council to furnish reports showing, first, the causes of the prevalence of zymotic disease in Liverpool; and, secondly, the steps which have been taken to improve the sanitary condition of the

to contract the disease, unless efficient isolation and disinfection are immediately enforced. It is equally certain that, when the period of incubation is unfulfilled at the time of disembarkation, neither will these persons have been any inconvenience to the ship officials while on board, nor can the most careful examination at quarantine distinguish them from the healthy. They are, therefore, permitted to proceed to their various destinations, there to become centres of possibly indefinite dissemination.

That this actually happens, and frequently, is proved by the fact that almost every appearance of zymotic fever, in any part of the United States, is—as the present outbreak of small-pox at Easton, Pennsylvania—directly traceable to the recent advent of immigrants.

The reasons are not far to seek. The medical officers of steamers are appointed by the owners, without due regard to their fitness for the post, and are dependent for the tenure of their office upon persons whose first, if not only care, is to make the voyage with as little expense and inconvenience as possible; they are not allowed a particle of independent administrative authority in even the most purely sanitary matters, nor are they furnished with the means of combatting disease; and, lastly, many of the vessels employed are so constructed that the isolation of infected persons is absolutely impossible.

A recent example is, from many points of view, interesting. A steamer, belonging to one of the reputedly safest transatlantic lines, arrived at this port some months ago, having on board a saloon-passenger suffering from small-pox; and, shortly after arrival, another case was discovered among the steerage passengers. The vessel was granted *pratique*, discharged her passengers, returned to England, and in due course arrived here again, with another consignment of passengers, and another case of small-pox; this time a steward who had served on the ship during the previous voyage, but who only developed symptoms of the disease thirty-two days after the removal of the former cases. There are persons, and in authority, satisfied with the assumption that cases of infectious disease following thus closely one upon another are unfortunate coincidences, for which no one may be held responsible. In the public interest, more careful inquiry would seem to be desirable. The interval of time precludes the possibility of this steward having been directly infected by either of the previous cases, or during his former stay in this city. It seems improbable that he contracted the disease from an independent source at Liverpool, since small-pox was not prevalent there. Remaining, is the choice of two equally unpalatable solutions; either the steamer was inefficiently disinfected after the removal of the first cases, and variolous germs surviving not less than sixteen days after the supposed disinfection (?) infected this man during the latter days of the eastward passage; or there were a succession of small-pox cases on board this vessel which were not recognised, or were intentionally concealed from the health-officer of this port and from the public.

A visit to the ship strongly confirmed the last supposition. The hospitals for infectious disease were situated, not upon the upper deck, but between the decks, in the forward part of the vessel, opening off, and ventilated exclusively into a covered-in passage, running through the first-class saloon the entire length of the vessel. In fact, if the builders had set themselves the task of constructing and locating these hospitals so as to disseminate throughout the inhabited parts of the steamer every germ of infection coming from within, such an end could scarce have been more skilfully attained. And this is not an isolated instance of the total disregard of sanitary law upon ocean steamships.

Within five months, dating from January 11th, 1882, no fewer than twenty vessels infected with small-pox entered the port of New York. Upon four only was even partial quarantine enforced. The remaining sixteen were granted *pratique* as soon as the passengers and crews had been vaccinated. No doubt it was better to vaccinate than do nothing; but, under the circumstances, vaccination cannot be regarded as affording protection, since it is admitted that it does not even modify small-pox previously contracted, unless it has been so timed that the maturation of the vaccine-vesicles shall precede the period of variolous invasion.

The order by which the surgeons of transatlantic steamers are required to vaccinate the steerage-passengers within twenty-four hours after starting is practically ignored, seldom complied with during the period specified, and, when attempted, with what results may be judged from the report of the health-officer. One surgeon reported 200 vaccinations, of which not one proved to be successful, another 250 with but two successes, and so on. But even if this order was carried out to the letter, it would be at best but a choice of evils, and I think the wrong one. That the medical officer of a crowded steamship should neglect other more pressing duties to vaccinate steerage-passengers during the first day, or even days, of the voyage, would be manifestly inexpedient for the general welfare. On other grounds, it would be

both cruel and unscientific—cruel, as disturbing unnecessarily persons already miserable, many of whom would be in the throes of sea-sickness, and might claim at least to be let alone; unscientific, and calculated to discredit this most valuable of prophylactics, as challenging an epidemic of erysipelas under conditions combining to favour its development and spread.

Thus is quarantine administered in the United States, and thus is the country sown broadcast with infection which will assuredly one day take root and prosper.

Is it wise to wait until the panic of that day shall call forth extreme precaution in measures repressive of convenient travel and healthful immigration? Surely it were better, since the Board of Trade neglects its manifest duty, that Congress should now, by moderate legislation, guard the country against pestilence, and insure the protection of intending citizens during the ocean transit.

These ends will be attained by (1) requiring all persons coming to the United States to show evidence of having been vaccinated not less than fourteen days previous to embarkation; (2) by insisting that ocean steamships shall provide proper hospital accommodation, and necessary assistance for the care of the sick; (3) by establishing a competent service of marine medical officers who, being independent of interested influences, and responsible to Government alone for the discharge of their duties, and intelligent co-operation with the quarantine authorities, will be a guarantee that the laws should be observed throughout the voyage.—I am, sir, your obedient servant,

J. A. IRWIN, M.A. Cantab., M.D. Dub., etc., late Hon. Physician to the Manchester Southern Hospital for Women and Children.

363, Fifth Avenue, New York.

#### THE COUNCIL OF THE COLLEGE OF SURGEONS AND REFORM.

SIR,—It is quite impossible that the controversy between the Council and the great body of the Fellows of the Royal College of Surgeons can remain where it is. As the mover of the resolutions which were carried at the late meeting, and which have since been so ignominiously ignored by the Council, I feel bound to take further action. I propose, therefore, at once to place myself in communication with the Fellows, in order that some united action may be decided upon.—

Yours faithfully,  
PAUL SWAIN, F.R.C.S.  
17, The Crescent, Plymouth, May 17th, 1884.

## INDIA AND THE COLONIES.

### WEST AFRICA.

THE WEST AFRICAN COLONIAL SERVICE.—Is this service a sufficiently attractive one in point of present emolument and future pension to attract medical men whose fortunes are not desperate? Are the prospects such as in any adequate degree to counterbalance the notoriously execrable and fatal climate of the West Coast of Africa? What are the inducements offered? The highest rate of pay to which a colonial surgeon, in the worst climate in the world, can hope to attain, is £500 *per annum*; and, before this salary is reached, six years of dreary service must be spent in the dismal region known as the "white man's grave." This is a rate of remuneration below that of all officials in other departments, even of the junior officers in the administrative ranks of the colonial service. As regards pension regulations, all branches of the West African colonial service seem to be on much the same footing. We have often had occasion to comment unfavourably on the deceptive wording of the official memorandum placed in the hands of candidates for Her Majesty's Indian Medical Service, and we take some credit to this JOURNAL for having shamed the authorities of the India Office into withdrawing that document, which deceived so many, and substituting another which does not speak with a double meaning. A trap, similarly baited, seems set for candidates for colonial employment, and many have been caught in it. The announcement of which complaint is made appears to be to the following effect (we quote from a well informed correspondent of the *Globe*, himself a sufferer). 1. Officers serving on the West Coast of Africa will be eligible for pensions after a minimum period of service of seven years instead of ten years, inclusive of leave. 2. At the age of 55, officers can claim pensions, or can be compulsorily retired. This notification, it appears, has had the effect of tempting men to risk health and life in that deadly climate. It is not stated that a pension at the end of seven years is only given when the applicant's health is so shattered that he is incapable of service there, or elsewhere; but, in practice,

this is the meaning of the cunningly worded promise: What the chances are of a man in such a climate surviving to enjoy a pension at the age of 55, is not a difficult calculation. In point of fact, we believe that the Colonial Office has been challenged to name three of its white officials who have enjoyed, or are enjoying, a pension on the fifty-five years of age engagement. The pension-rules of the West of Africa Colonial Office are regarded by those whom they concern as framed with the express intention of being mere traps for the unwary. The demands of colonial servants in that pestiferous climate are modest enough, and are thus formulated. 1. They ask that the Government will make it possible to obtain a pension after a reasonable period of service in these trying climates, and that the possession of irretrievably injured health shall not be a *sine quâ non* thereto. 2. They ask that the age-qualification, which is a cruel mockery, be abolished, and that a fair pension be made a certainty after ten, twelve, or fifteen years' service. The Colonial Office may be well assured that if these modest and just demands are granted, the climate will still sufficiently protect the colonial treasuries against the expenses of an extravagant pension-list.

We cannot promise colonial surgeons who have committed themselves to service in the West Coast of Africa that the Colonial Office will be induced by any representations of ours to do them tardy justice; but the voice of this JOURNAL is far-reaching, and we can and do raise a note of warning to intending candidates for such employment. We can do something to "stop the supplies;" and the Colonial Office should be made aware that other hard taskmasters have been starved into compliance with the claims of right and justice.

## MEDICO-LEGAL AND MEDICO-ETHICAL.

### HOUSE-DRAINAGE.

THE question of the liability of a landlord for defective drainage to a dwelling-house has recently been occupying the attention of Lord Coleridge and a special jury. As the case is not yet concluded, we abstain from offering any opinion upon the merits; but, leaving them aside, the case appears of public interest on other grounds. The undisputed facts appear to be that, in October, 1880, the plaintiff, Mr. Vassie, became tenant of a new house just erected by the defendant, Mr. Baker, in Sterndale Road, Hammersmith; and that the defendant then told the plaintiff that "the drainage was in perfect condition," that "all the sanitary arrangements were of the most approved character," and that "it was impossible to have a house with better drainage." Mr. Vassie occupied the house up to May, 1883, when his children became ill; and on investigation it was found that sewage-matter had escaped from the drains and saturated the soil under the house, so as, in the opinion of several medical men, to render the house uninhabitable. Mr. Vassie left the house, and brought the action to recover damages caused to himself and his family by reason of the unhealthy condition of the house. The defendant denied that the drains were in any way defective in construction, and attributed the escape of sewage to a breakage for which he was not responsible. Numerous witnesses were called on both sides, and the verdict of the jury as to the cause of the escape, which admittedly existed, has yet to be given.

In the course of the case, it was stated that the drains were laid without any supervision from the local authority or district-surveyor, although a foreman from the local board of works was present at the time when the drains were connected with the sewer. At that time, however, the rest of the drains were covered in, and the foreman could not have seen that they were properly constructed and laid, even if he had been inclined to take the trouble. The Metropolitan Acts provide that the local authority shall not allow houses to be erected except in accordance with plans as to various matters, one of which is drainage. In this case, plans had presumably been deposited as required; but, according to the evidence, no effective superintendence was given by the district-surveyor during the progress of the works. We do not know whether this statement is accurate, or whether the official in question did everything that it was possible for him to do; but we fear that, in many cases, small houses are run up in London suburbs and elsewhere without sufficient care being taken to see that the requirements prescribed by law or by the by-laws of local authorities are properly complied with. In the matter of drainage, even more than in the actual building of a house, these requirements, which are not generally too strict, ought to be carried out. Landlords are in the habit of pointing to deposited plans and to the requirements of local authorities, to satisfy intending tenants that sanitary matters have been properly attended to. The tenant can get his own architect

or surveyor to advise as to the general soundness of a building, but without digging them up it is impossible thoroughly to examine drains, and he must, to a considerable extent, judge of them from what he is told. When official surveyors omit to see the way in which drains are laid and jointed, while they have the opportunity of doing so before they are covered in, they incur a very serious moral responsibility. As at whist, the player who allows his partner to revoke is said to be as much to blame as the partner himself; so, in matters like this, the surveyor who passes bad workmanship is as guilty as the builder who scamps his work. In this country, business is conducted on the theory that men in an official position do the work for which they are appointed; and the presumption is generally justified by experience. Where we know that it is the duty of a district-surveyor to see that certain plans have been followed and certain conditions observed, we believe that he has done so; and we take it for granted, until the contrary is shown, that houses newly erected in a given district have been built according to the rules there in force. If evidence similar to that given in the case of Vassie v. Baker be often forthcoming, confidence in local authorities will be shaken, and the public will demand a further security against unfit houses being built or inhabited. At present, in case of new houses, we trust in great measure to the local authorities, who can forbid a house being inhabited until it is properly constructed; the owner is under no obligation to his tenant, except on the ground of contract or of misrepresentation. If the powers and responsibility of the local authorities be found to be inefficient, and houses be constructed so as to be poison-traps, without the district-surveyors detecting the fact, this might have to be altered. It would not, however, be easy to impose a general duty of looking after the sanitary conditions of dwelling-houses on any one except the local authorities and their officers; and we must hope that the doubts as to their efficiency, which are called forth by the evidence recently given, will remain the exception and not the rule, and that new houses, built under the sanction of local authorities, may generally be trusted to be fairly well drained.

### AN ADVERTISEMENT.

SIR.—The following advertisement was cut out of the *Belfast Evening Telegraph* of the 12th instant. "Medical Notice.—Dr. Smith's Registered Cephalotribes, beautifully finished and nickel-plated, can be obtained at the Carlisle Circus Apothecaries' Hall, Belfast." The medical profession of this town naturally look with suspicion upon advertisements such as this, which show prominently forth a local doctor's name without any other reasonable object. Who among the public wants to purchase cephalotribes? And when a medical practitioner requires one (which, I am happy to say, is extremely rare) he knows where to get it.—I am, etc.,  
SIGMA.

\*.\* To advertise a cephalotribe, in a newspaper, attaching a medical man's name thereto, is not warranted by either propriety or necessity.

## HOSPITAL AND DISPENSARY MANAGEMENT.

### THE SALOP AND MONTGOMERY ASYLUM.

IN the annual report of this asylum, which has just been issued, the Committee of Visitors express their high appreciation of the services of Dr. A. Strange, the medical superintendent. The asylum contained at the close of last year 673 patients; the recoveries during 1883 were at the rate of 28.1 per cent. of the admissions, and the deaths at the rate of 8.2 per cent. of the total number under treatment. Dr. Strange in his report refers to a remarkable case of suicide which occurred last year. A female patient, who was convalescent and on the point of discharge, when returning from chapel one evening, drowned herself in the ornamental water in front of the asylum, simply because she lacked courage to face the world again. In commenting on this case, the Commissioners in Lunacy hint that the ornamental water should be abolished; but the wisdom of this recommendation may well be called in question. If the water be really in such a position as to invite suicidal attempts, and to be a constant source of anxiety to the officers, then no doubt, it should be drained away; but if not, why should that which may have been a source of pleasure to thousands be removed because of one misadventure? It is easy to understand that a lake or pond, if suitably constructed and placed in the grounds of an asylum, may, as in a public park, afford much and varied gratification, and it is not difficult to perceive that if all possible sources of danger are to be kept beyond the reach of suicidal patients, they will have to be placed in strait-waistcoats and confined in padded rooms. As regards the grounds of an asylum, all possibly poisonous shrubs or trees, such as yews, laburnums, privets, would have to be cleared away, because the suicidal patients might eat their leaves or fruit. All gravel and pebbles would have to be raked up because the suicidal patients



11 fatal cases of small-pox and 3 of typhoid fever were reported. The 114 deaths in Lisbon, including 3 from diphtheria and 2 from typhoid fever, were equal to a rate of 29.2. In four of the largest American cities, the rate averaged only 21.9, ranging from 19.8 in Philadelphia to 24.2 in New York. In Philadelphia, 16 fatal cases of scarlet fever and 14 of typhoid fever were reported, although the death-rate, as above stated, did not exceed 19.8 per 1,000.

## MEDICAL NEWS.

**ROYAL COLLEGE OF SURGEONS OF ENGLAND.**—The following gentlemen passed their primary examinations in anatomy and physiology at a meeting of the Board of Examiners on the 17th instant, and, when eligible, will be admitted to the pass-examination.

Messrs. H. D. Mason, N. D. Best, A. W. Thompson, and E. F. Pratt, students of the Birmingham School of Medicine; N. T. S. Aveline, of the Bristol School of Medicine; J. H. Lightbody, of the Liverpool School of Medicine; E. R. Lyth, A. Green, and E. J. Booth, of the Newcastle School of Medicine; J. W. Stanforth, and J. A. Ridal, of the Sheffield School; G. A. Webster, of the Cambridge School; and H. de C. Woodcock, of the Leeds School.

Eleven candidates, having failed to acquit themselves to the satisfaction of the Board of Examiners, were referred to their anatomical and physiological studies for three months.

The following gentlemen passed on the 19th instant.

Messrs. W. Aston, A. D. Miller, F. A. P. E. Phillips, J. Westwood, and J. M. Eshardt, of the Birmingham School; S. Roberts, of the Dublin School; J. H. Johnson, and W. B. Slynan, of St. Bartholomew's Hospital; H. B. W. Paige, of the Newcastle School of Medicine; R. Dane, of the Middlesex Hospital; C. G. Jackson, of the Leeds School of Medicine; W. J. Neale, of the Liverpool School of Medicine; and G. W. Caswell, of University College.

Ten candidates were referred for three months.

The following gentlemen passed on the 20th instant.

Messrs. H. H. Norton, and P. L. Nettleship, of St. Mary's Hospital; A. A. Howell, of the London Hospital; A. H. Johnston, M. E. A. Wallis, and G. M. Jones, of Guy's Hospital; E. Knight, of University College; E. W. Morris, of St. Thomas's Hospital; C. P. Bullock, of St. Bartholomew's Hospital; and C. W. Edwards, of the Middlesex Hospital.

Thirteen candidates were referred for three months, and one for six months.

The following gentlemen passed on the 21st instant.

Messrs. J. F. Bridgwood, G. F. Rymer, E. Moss, J. L. Roberts, H. E. Vincent, students of Guy's Hospital; C. H. Dixon, of St. Mary's Hospital; C. J. Holton, and J. Melhuish, of University College; C. H. Hands, and A. D. Southit, of St. Bartholomew's Hospital; J. H. Cox, of the London Hospital.

Twelve candidates were referred for three months, and one for six months.

**APOTHECARIES' HALL.**—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, May 15th, 1884.

Docker, Edward Scott, 2, Clarendon Villas, Barnes.  
Frye, Joseph Henry, 66, Old Kent Road, S.E.  
Gray, John Power William, 24, Barnsbury Park, N.  
Jones, Harry Shirley, Oak Hall, Bromsgrove.  
Syrée, Anton Hugh, Canterbury.

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

Kearney, James, Queen's College, Galway.  
Wallington, William Tratman, Charing Cross Hospital.

**KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.**—The following Licentiates in Medicine of the College, having complied with the by-laws relating to membership, pursuant to the provisions of the Supplemental Charter of December 12th, 1878, have been duly enrolled members of the College.

J. B. Barry, Lic. Med. 1870, Kilbeggan, co. Westmeath; M. J. O'Connor, Lic. Med. 1877, Sydney, New South Wales.

At the usual monthly examinations for the licences to practise Medicine and Midwifery, held on Monday, Tuesday, Wednesday, and Thursday, May 5th, 6th, 7th, and 8th, the following candidates were successful.

For the Licences to practise Medicine and Midwifery:—H. T. Baylor, Fermoy; M. A. Dutch, Crewe; F. C. Evans, Ballynahinch, co. Down; J. W. Grene, Dalkey, co. Dublin; T. A. Guinness, Kilburn, London, N.W.; M. McGeorge, Newry, co. Down; M. Macnamara, Limerick.

For the Licence to practise Medicine only:—E. W. Barnes, Liverpool; W. Clifford, Thomastown, Kilmallock; E. J. Minchin, Dublin; T. Perse, Wexford.

For the Licence to practise Midwifery only:—R. A. Barber, M.D.R.U.I., Poynzpass, co. Armagh; C. H. Maher, Sydney, New South Wales; P. O'Gorman, M.D.R.U.I., Bilston, Staffordshire.

**UNIVERSITY OF DURHAM.**—*Easter Term, 1884.*—At the First M.B. Examination for Degrees in Medicine and Surgery, the following satisfied the Examiners.

*Second Class Honours, in Order of Merit.*—A. Hardwick, P. P. Manning, E. S. Gooddy.

*Pass List, in Alphabetical Order.*—W. M. A. Anderson, F. Bass, W. Biggam, A. F. Bradbury, H. E. Brodrick, J. W. Dalglish, A. C. Dove, A. J. Gregory, F. W. E. Hare, M.R.C.S., E. L. Hickey, J. L. T. Jones, W. Lansdale, E. R. Lyth, A. J. H. Montague, C. P. O'Connor, E. Phillips, A. G. C. Pocock, H. Renney, J. N. Richardson, M.R.C.S., W. F. Steele, E. S. Sugden, B. G. Sumpter, C. P. Walker, A. Whyte.

*Re-examination in Chemistry only.*—T. Harling, H. B. W. Plummer, C. F. Rumbold, E. B. Sugden.

*Re-examination in Botany only.*—G. Cranstoun, H. W. Cross, H. Rayner, M.R.C.S.

*The following passed in Anatomy, Physiology, and Chemistry.*—W. J. Essery, R. P. Mitchell.

*The following passed in Anatomy, Physiology, and Botany.* H. S. Baumgartner, C. F. L. Dixon.

At the Examination for certificate of proficiency in Sanitary Science, the following satisfied the Examiners.

J. A. Simoens, M.D., F. J. Walker, M.R.C.S.

## MEDICAL VACANCIES.

The following vacancies are announced.

**BIRMINGHAM AND MIDLAND FREE HOSPITAL FOR SICK CHILDREN.**—Acting Physician. Applications by June 4th.

**BOROUGH HOSPITAL, Birkenhead.**—Honorary Surgeon. Applications to W. W. St. George, Esq., 11, Holly Bank Road, Clifton Road, Birkenhead, by May 27th.

**CHESTER GENERAL INFIRMARY.**—Visiting Surgeon. Salary, 80*l.* per annum. Applications by May 30th.

**CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST.**—Resident Clinical Assistant for six months. A gratuity of 20*l.* is usually awarded. Applications to the Secretary, 24, Finsbury Circus, E.C., by May 31st.

**DENBIGHSHIRE INFIRMARY, Denbigh.**—House-Surgeon. Salary, 85*l.* per annum. Applications by June 5th.

**EAST SUSSEX, HASTINGS, AND ST. LEONARD'S INFIRMARY.**—Assistant-Physician. Applications by June 10th.

**FLINTSHIRE DISPENSARY.**—House-Surgeon. Salary, 100*l.* per annum. Applications by June 11th.

**GENERAL HOSPITAL, Birmingham.**—Resident Assistant Surgical Officer. Salary, 70*l.* per annum. Applications by May 31st.

**GENERAL INFIRMARY, Northampton.**—Surgeon. Applications by June 10th.

**GREAT NORTHERN CENTRAL HOSPITAL, Caledonian Road, N.**—Ophthalmic Surgeon. Applications by June 2nd.

**GUEST HOSPITAL, Dudley.**—Resident Medical Officer. Salary, 120*l.* per annum. Applications to Mr. E. Poole, Secretary, by June 4th.

**HARTLEPOOL FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.**—Medical Officer. Applications to T. Tweddell, Commercial Terrace, West Hartlepool.

**HOSPITAL FOR DISEASES OF THE THROAT, Golden Square.**—Resident Medical Officer. Salary, 50*l.* per annum; after one year's service, raised to 100*l.* Applications by May 29th.

**HOSPITAL FOR SICK CHILDREN, 49, Great Ormond Street, W.C.**—Junior Resident Medical Officer. Salary, 50*l.* per annum. Applications by May 26th.

**LIVERPOOL INFIRMARY FOR CHILDREN, Myrtle Street.**—Assistant House-Surgeon for six months. Applications to H. R. Robertson.

**NORWICH FRIENDLY SOCIETIES' MEDICAL INSTITUTE.**—Three Medical Officers. Salary, 200*l.* per annum each. Applications to H. B. Mitchell, Ivy House, Lady Lane, Norwich, by May 31st.

**OWENS COLLEGE, Manchester.**—Lecturer in Dental Surgery. Applications by June 16th.

**OWENS COLLEGE, Manchester.**—Special Lecturer in Dental Mechanics and Dental Metallurgy. Applications by June 16th.

**PARISH OF CANISBAY, Caithness.**—Medical Officer. Applications to Peter Keith, Esq., Barrigill Castle by Wick, by May 31st.

**PUBLIC DISPENSARY, 59, Stanhope Street, Clare Market.**—Dispenser. Salary, 5*l.* per month. Applications to the Secretary, 48, Chancery Lane, E.C., by May 24th.

**QUEEN CHARLOTTE'S LYING-IN HOSPITAL, Marylebone Road, N.W.**—Resident Medical Officer. Applications by May 30th.

**QUEEN'S COLLEGE, Birmingham.**—Professor of Anatomy. Salary, 262*l.* 10*s.* per annum. Applications by June 30th.

**ROYAL COLLEGE OF SURGEONS OF ENGLAND.**—Four Examiners in Medicine from the Fellows of the Royal College of Physicians of London. Applications by May 31st.

**ROYAL COLLEGE OF SURGEONS OF ENGLAND.**—Two Examiners in Midwifery, either from the Fellows of the College or from the Fellows of the Royal College of Physicians of London. Applications by May 31st.

**ROYAL UNITED HOSPITAL, Bath.**—Resident Medical Officer. Salary, 100*l.* per annum. Applications by May 30th.

**SHEFFIELD FRIENDLY SOCIETIES' MEDICAL INSTITUTION.**—Chief Medical Officer. Salary, 200*l.* per annum. Applications to Mr. George Abbott, Secretary, 9, St. James Row, Sheffield.

**ST. GEORGE'S HOSPITAL MEDICAL SCHOOL.**—Pathologist and Teacher of Histology. Salary, 100*l.* per annum. Application to W. Wadham, M.D., Dean.

**SUNDERLAND INFIRMARY.**—Senior House-Surgeon. Salary, 100*l.* per annum. Applications by June 2nd.

**TOWN OF CALCUTTA.**—Health Officer. Salary, Rs. 1,250 per month. Applications to the Secretary to the Municipality, Calcutta, by July 15th.

**TUNBRIDGE WELLS BENEFIT SOCIETIES' MEDICAL ASSOCIATION.**—Resident Medical Officer. Salary, 200*l.* per annum. Applications to Mr. J. Wallis, 26, Newcomen Road, Tunbridge Wells, by May 29th.

**UNIVERSITY COLLEGE, Liverpool.**—Professor of Medicine. Applications to the Dean by Saturday, May 24th.

### MEDICAL APPOINTMENTS.

**ABERCROMBIE, J., M.D.**, appointed Assistant-Physician to the Hospital for Sick Children, 49, Great Ormond Street, *vice* O. Sturges, M.D.

**BOYD, S., M.B.**, appointed Surgeon to the Paddington Green Children's Hospital.

**COYLE, E., L.F.P.S.G.**, appointed Superintendent of the Outdoor Visiting Department to the Anderson's College Dispensary, Glasgow, *vice* J. Houston, L.F.P.S., resigned.

**ERSKINE, J., M.B.**, appointed Surgeon for Diseases of the Ear to the Anderson's College Dispensary, Glasgow, *vice* T. Barr, M.D., resigned.

**FOXWELL, A., M.B.**, appointed Resident Registrar and Pathologist to the General Hospital, Birmingham, *vice* B. C. A. Windle, M.D.

**GOSTLING, J. H., M.R.C.S.**, appointed Resident Medical Officer to the Morpeth Dispensary, *vice* J. E. Paton, resigned.

**HUGGARD, W. R., M.D.**, appointed Assistant-Physician to the West End Hospital, 73, Welbeck Street, *vice* H. Tibbitts, M.D., resigned.

**JONES, H. L., M.R.C.S.**, appointed Assistant House-Surgeon to the St. Bartholomew's Hospital, Chatham, *vice* G. Welch, L.R.C.P., resigned.

**LAURENT, E., M.B.**, appointed Resident Clinical Assistant to the Hospital for Consumption and Diseases of the Chest, *vice* J. E. Kershaw, M.R.C.S.

**MACDONALD, J., M.B.**, appointed Junior House-Surgeon to the Carlisle Dispensary, *vice* W. M. Storrar, M.B., resigned.

**MCDONALD, Frederick J., L.R.C.S.I., L.M., L.K.Q.C.P.I.**, appointed Medical Officer to No. 6 District of the Stow Union, *vice* Sherrington A. Gilder, L.R.C.P.London, L.S.A., resigned.

**MAUDE, A., M.R.C.S.**, appointed Resident Clinical Assistant to the Hospital for Consumption and Diseases of the Chest.

**MORRISON, J. T. J., M.B.**, appointed Resident Surgical Officer to the General Hospital, Birmingham, *vice* H. G. Barling, M.B.

**NIAS, J. B., M.B.**, appointed Honorary Physician to the Western General Dispensary.

**PRITCHARD, T., M.D.**, appointed Resident Medical Officer to the Grantham Friendly and Trade Societies Medical Institute, *vice* G. Cuffe, M.D.

**SUTTON, H. M., M.R.C.S.**, appointed Junior Resident Medical Officer to the Great Northern Central Hospital, *vice* N. B. Gandevia, M.R.C.S.

**TATHAM, C. T. W., M.R.C.S.**, appointed Assistant Medical Officer to the Warneford Asylum, Oxford, *vice* J. F. Mackenzie, L.R.C.P., resigned.

**TILLEY, W. J., M.R.C.S.**, appointed Assistant House-Surgeon to the Devonshire Hospital, Buxton, *vice* A. C. Buist, M.B.

**UHTHOFF, John C., M.D.Lond., F.R.C.S.Eng.**, appointed Assistant-Surgeon to the Sussex County Hospital, *vice* H. Couling, F.R.C.S.Eng., resigned.

**VOSS, H. V., M.R.C.S.**, appointed Resident Assistant Medical Officer to the White-chapel Union.

### BIRTHS, MARRIAGES, AND DEATHS.

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

#### BIRTHS.

**COGHILL.**—At Colombo, on April 11th, the wife of J. D. M. Coghill, M.D., Medical Inspector, Ceylon Civil Service, retired, of a daughter.

**FRASER.**—On April 17th, at 7, Lower Church Road, Weston-super-Mare, the wife of Greime B. Fraser, M.R.C.S.Eng., of a daughter.

**LOWTHER.**—On the 9th instant, at Fernleigh, Grange-over-Sands, the wife of Richard Lowther, M.D., of a son.

#### DEATHS.

**SMITH.**—On the 11th instant, at Ambleside, George Francis Kirby Smith, F.R.C.S., of Northampton, aged 37 years.

**SPENCER.**—On the 12th instant, at his residence, Whitechurch, Bucks, from an apoplectic seizure, Charles Spencer, M.R.C.S., in the 73rd year of his age.

**UNIVERSITY COLLEGE FACULTY OF MEDICINE.**—The Earl of Kimberley presided, on May 22nd, at the distribution of the prizes to the successful students. Entrance exhibitions of £80 each were gained by Mr. E. B. Hastings of Huddersfield, and Mr. G. E. Rennie of Sydney; and an exhibition of £40, by Mr. C. H. Fernau of Buenos Ayres. The Atchison Scholarship (£59 *per annum* for two years), and the Bruce medal, were awarded to Mr. J. H. E. Brock of Madras. Medals and certificates were given to a large number of students in practical surgery, anatomy, physiology, chemistry, medicine, surgery, zoology and comparative anatomy, clinical medicine and surgery, and dental surgery; among those who obtained gold medals being Mr. H. P. Dean, Mr. O. K. Williamson, Mr. E. H. Thane, Mr. H. R. Woolbert, Mr. W. A. Savage, of London; Mr. C. J. Arkle of Liverpool; and Mr. J. R. A. Bennett of Lydford. The report, which was submitted by the Dean, stated that, during the past year, 370 students had attended the classes of the Medical Faculty of the College and the practice of the hospital; 93 of them were new students. The Earl of Kimberley said that, in his capacity of Secretary for India, he had been very glad to hear students from Benares and Madras mentioned with considerable honour.

### 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. T., 1.30; Obstetric, M. W. F., 1.30; Eye, M. Tu. Th. F., 1.30; 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. S.; 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, Th., 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., M. Th., 9.30; Eye, Tu. F., 9.30; Ear, W. S., 9.30; Throat, M. Th., 9.30; Skin, Tu. F., 9.30; Electrician, Tu. F., 9.30; Dental, W. S., 9.30.

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

**UNIVERSITY COLLEGE.**—Medical and Surgical, daily, 1 to 2; Obstetric, M. Tu. Th. F., 1.30; Eye, M. Tu. Th. F., 2; Ear, S., 1.30; Skin, W., 1.45; S., 9.15; Throat, Th., 2.30; Dental, W., 10.30.

**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.

### OPERATION DAYS AT THE HOSPITALS.

**MONDAY**..... St. Bartholomew's, 1.30 P.M.—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**..... St. Bartholomew's, 1.30 P.M.—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.—Chelsea Hospital for Women, 2 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.

### MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

**TUESDAY.**—Royal Medical and Chirurgical Society, 8.30 P.M. Dr. G. E. Herman: An Average or "Composite" Temperature-chart of Small-pox. Dr. G. W. Cayley and Mr. A. Pearce Gould: Gangrene of the Lung treated by Drainage; Recovery. Dr. Cecil Y. Biss: On the Treatment of Pus-secreting Basic Cavities of the Lung by the Method of Paracentesis and Free Drainage.

### 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.

In order to avoid delay, it is particularly requested that all letters on the editorial business of the JOURNAL should be addressed to the Editor at the office of the JOURNAL, and not to his private house.

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.

## RESULT OR COINCIDENCE?

SIR,—I wish to know if the following somewhat desirable result of treatment has been observed in other cases where syrupus ferri et quiniæ hydrobromas cum strychnia (Fletcher) has been prescribed.

Mr. J. H., aged 50, suffering from dyspepsia, loss of appetite, and the symptoms frequently observed in subjects who are often on the verge of delirium tremens, came to me on April 27th last, and asked for some tonic medicine. He said the loss of appetite for food was what he chiefly complained of, and that he felt in a very weak state, a short walk or any slight exertion making him feel tired and (to use his own words) "good for nothing." I prescribed the above medicine in drachm doses, three times a day.

Now comes the unlooked-for result. He had been an habitual smoker of the strongest black tobacco, but since taking the syrup has felt no desire whatever to smoke, and attributes it entirely to the medicine. This case of course is hardly a fair one to judge by, being only a short time under treatment.

It would, however, be very interesting to ascertain if this effect (if it be one) has been noticed in other similar cases.—I remain, yours truly,  
COOLE ABBEY, FERMoy, IRELAND. HENRY W. PEARD, M.B.

## CHLOROFORM NARCOSIS DURING SLEEP.

SIR,—It is probable that the house-surgeons of hospitals would be able to give a good deal of information on this subject. While acting in that capacity at the Surgical Hospital, Stockton-on-Tees, I have on several occasions induced chloroform narcosis without awakening the patient. I never tried it on adults, as my object was to avoid the struggling and crying usual in children when chloroform is given. I have only distinct recollections of three cases which occurred last year, and as I only did it as a matter of convenience, I should not be surprised if some unsuccessful cases have escaped my memory.

In one case a child, about eight years old, suffering from very extensive burns, I twice chloroformed during sleep previously to dressing the burns.

Case 2 was a child of about four years, in whom I produced anaesthesia previously to lithotomy.

In case 3, where the leg had been amputated at the hip-joint, I administered chloroform before the first dressing without awaking the child, aged 8, who was of an exceedingly nervous disposition. The chloroform was in each case given very gradually, and on a towel. There are two or three remarks to be made on these cases, four in all. 1. The patients were all children. 2. They were all, more or less, out of health, but, on the other hand, from the nature of the ailment, they were none of them sound sleepers, and the anaesthetic was given during daylight, in a large ward. With regard to the time occupied, I do not think that more than ten minutes was required to produce anaesthesia; indeed, I believe it was probably less, but then the subjects were children, and more or less debilitated. I have once or twice given chloroform to an adult previously to an operation who was insensible from shock caused by injury; but this hardly bears on the question, and I quite think that it would probably be found much more easy of accomplishment in the young than in adults.—I am, etc.,

E. GORDON-HULL, M.D. Dubl. Withern, Lincolnshire.

RUS should apply to one of the medical agents for the information he requires. We cannot answer the question.

## THE UNION OF WOUNDS AND FRACTURES IN OLD PERSONS.

SIR,—Having seen a letter from Professor Humphry in the BRITISH MEDICAL JOURNAL of the 17th instant, in which he states he is anxious to obtain evidence relative to the "union of wounds from operations or otherwise inflicted," on old persons, probably the following case may be of interest to him.

John Carroll, aged 91, residing in Collooney, fell out of his bed, one night last June, on the edge of a Dutch oven, and received a very serious wound, over four inches long, on the left side of his head. I saw him two hours after the accident in a very weak state from shock and loss of blood. The wound was gaping in its entire extent, the bone stripped of the periosteum, and slightly depressed at one point about the centre of the wound. I drew the edges of the wound together, put on a compress saturated with "Friar's Balsam," and placed a tight bandage over all. On the fourth day the wound looked healthy, healing by granulation, and was dressed with carbolic oil. On the eighth day the old man was "himself again," and able to go out. He gave me a most graphic account of how he saw a gentleman in the yeomanry-service shot down by the French in 1798 at a place some miles distant from this village, and how the "poor young gentleman's" father was 'tuk' prisoner by the 'furners' when trying to rescue his darlin' son. My old patient was then six years old, and was being carried on his mother's back to an inland village for safety, when they came on the scene. I may mention that three years ago the old man met with some very rough treatment in a fight after a fair, and I then dressed a very nasty scalp-wound for him, the result of a blow from a 'blackthorn.' The old man is still alive, but suffering from senile dementia.—I am, sir, yours faithfully,

JOHN MOLONY, Surgeon and Physician.

Collooney, Co. Sligo, May 19th, 1884.

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

Dr. Markham Skerritt, Bristol; Mr. C. J. Marsh, Yeovil; Mr. T. Yarr, Langley Park, Durham; Dr. T. Dutton, Twickenham; Our Belfast Correspondent; Mr. F. J. McNaught, Walsham-le-Willows; Messrs. Cassell and Co., London; Dr. E. J. W. Hicks, Grafton Yarmouth; Mr. J. A. Hutchinson, Newcastle-on-Tyne; Mr. G. Hardy, London; Mr. C. T. Dent, London; Mr. W. Richardson, Reading; Mr. W. C. Ormond, Bath; Mr. Thomas Ryan, London; Dr. A. Chadwick, Heywood, Manchester; Mr. R. R. Lloyd St. Albans; Mr. J. Campbell, Elcheater, Newcastle-on-Tyne; Mr. J. F. Fowler, Durham; Mr. John Molony, Collooney, co. Sligo; Mr. Joseph Lewis, Birmingham; Messrs. Cook and Townshend, Liverpool; Mr. George Eastes, London; Our Glasgow Correspondent; Our Dublin Correspondent; Mr. T. Bell, Uppingham, Rutland; Mr. J. Vesey Fitzgerald, London; Mr. Aydon Smith, London; Mr. C. G. Wheelhouse, Leeds; Mr. Lloyd-Roberts, Denbigh; Dr. J. Rogers, London; Mr. T. Jenner Verrall, Brighton; Mr. B. H. L. Stevens, London; Mr. Shirley F. Murphy, London; Dr. J. C. Uthoff, Brighton; Mr. C. E. Cassal, London; The Secretary of the Royal Medical and Chirurgical Society, London; Our Edinburgh Correspondent; Mr. T. M. Stone, London; Mr. F. J. Reilly, London; Messrs.

Birmingham and Co., London; Dr. Robertson, Kimberley; Mr. J. Farrant Fry, Swansea; Mr. C. J. Symonds, London; Dr. Vintras, London; Dr. D. A. MacCarthy, Bridport; Mr. Jasper Pretty, Haughley; Mr. Geo. Gardner, Rochester; M.D.; Dr. Lownds, Egham Hill; Mr. F. C. Fisher, King's Langley; Mr. Richard L. B. Head, Wimbledon; Dr. Lucius Holland, Newcastle-on-Tyne; Dr. Collier, Hastings; Mr. Roger Williams, London; Mr. A. Tanes, Midnapore, Bengal; Mr. MacLean, Leatherhead; Mr. W. F. Phillips, Andover; Mr. H. Claud Lisle, Nantwich; Mr. A. W. Nankivell, Chatham; Dr. L. W. Marshall, Nottingham; Messrs. Burroughs, Wellcome and Co., London; Mr. J. Johnston, Bradford; Mr. J. Oswald Lane, Northampton; Dr. A. Wright, London; Mr. R. Delaney, West Bromwich; Dr. J. L. Crombie, North Berwick; Mr. Clark Bell, New York; Mr. Paul Swain, Plymouth; Mr. D. Crawford, London; Dr. M. Collins, Nottingham; Dr. C. Parsons, Dover; Mr. A. Finegan, Morpeth; A Town Surgeon; Mr. W. L'Heureux Blenkarne, Buckingham; A Member; Dr. W. Buchanan, Chatham; Mr. Norman Porritt, Huddersfield; Mr. H. J. Young, Erdington, Birmingham; Our Liverpool Correspondent; Mr. Paul, Liverpool; Mr. N. E. Davies, Sherborne; Our Birmingham Correspondent; Mr. J. R. West, Dublin; Our Aberdeen Correspondent; Dr. Leslie Maturin, Dublin; Dr. MacLennan, Widnes; Mr. E. S. Machin, Birmingham; Mr. J. Byrne, London; Dr. W. Wilson, Pendleton, Manchester; Dr. Champneys, London; Miss E. R. Bishop, London; Dr. C. B. Francis, London; Mr. H. S. Reynolds, Castle Donington; Mr. J. Dixon, Dorking; Mr. S. Benton, London; Dr. W. Donovan, Romsey; Dr. Styrup, Shrewsbury; Mr. G. Brown, London; Dr. P. J. Cremen, Cork; Mr. J. Hough, Cambridge; Mr. G. A. D. Mahon, London; A Relative of the late Dr. Manson, Strathpeffer; Dr. Emrys-Jones, Manchester; Mr. W. D. Wilkes, Salisbury; Dr. Myrtle, Harrogate; Dr. Burdon Sanderson, Oxford; Mr. F. Johnson, London; Dr. Jagielski, London; Dr. Tripe, London; Dr. W. Ewart, London; Dr. H. B. Dow, London; Mr. A. B. Joy, London; Mr. G. B. Fraser, Weston-super-Mare; Dr. J. Oliver, London; Mr. M. D. Makuna, Pontypridd; Mr. Wood, London; The Secretary of the Hospitals Association, London; Mr. R. Alburton, Edinburgh; Dr. Louis Parkes, London; Mr. J. Cockle, London; Mr. Shears, Liverpool; Dr. G. Ernest Herman, London; Our Paris Correspondent; Mr. J. H. Gostling, London; Dr. Myers, London; The Secretary of the Pathological Society; Dr. Moore, Dublin; Mr. C. E. D. Maile, Westbury; Our Dublin Correspondent, etc.

## BOOKS, ETC., RECEIVED.

- On Various Modes of Testing for Albumen and Sugar in the Urine. By G. Johnson, M.D. London: Smith, Elder, and Co. 1884.
- The Student's Guide to Systematic Botany. By Robert Bentley, F.L.S., M.R.C.S. London: J. and A. Churchill. 1884.
- Regional Surgery, Including Surgical Diagnosis; A Manual for the Use of Students. Part II.—The Upper Extremity and Thorax. By F. A. Southam, M.A. London: J. and A. Churchill. 1884.
- Addresses and Exercises at the One Hundredth Anniversary of the Foundation of the Medical School of Harvard University, October 17th, 1883. Cambridge: J. Wilson and Son, University Press. 1884.
- Transactions of the Obstetrical Society of London. Vol. xxv. London: Longmans, Green, and Co. 1884.
- The Charities Register and Digest. Second Edition. With Introduction, by C. S. Loch. London: Longmans, Green, and Co. 1884.
- Transactions of the Epidemiological Society of London. New Series. Vol. II. Session 1882-83. London: David Bogue. 1884.
- Manual of the Diseases of the Ear. By T. Barr, M.D. Glasgow: J. Maclehoose and Sons. 1884.
- The Leamington Waters. By F. W. Smith, M.D. London: H. K. Lewis. 1884.
- Materia Medica and Therapeutics; An Introduction to the Rational Treatment of Disease. By J. Mitchell Bruce, M.A., M.D. London, Paris, and New York: Cassell and Co. 1884.
- A Treatise on Surgery, its Principles and Practice. By T. Holmes, M.A. London: Smith, Elder, and Co. 1884.

## SCALE OF CHARGES FOR ADVERTISEMENTS IN THE "BRITISH MEDICAL JOURNAL."

Seven lines and under	..	..	..	..	..	£0	3	6
Each additional line	..	..	..	..	..	0	0	4
A whole column	..	..	..	..	..	1	15	0
A page	..	..	..	..	..	5	0	0

An average line contains eight words.

When a series of insertions of the same advertisement is ordered, a discount is made on the above scale in the following proportions, beyond which no reduction can be allowed.

For 6 insertions, a deduction of	..	..	..	..	10 per cent.
" 12 or 13 "	..	..	..	..	20 "
" 26 "	..	..	..	..	25 "
" 52 "	..	..	..	..	40 "

For these terms, the series must, in each case, be completed within twelve months from date of first insertion.

Advertisements should be delivered, addressed to the Manager, at the Office, not later than Twelve o'clock on the Wednesday preceding publication; and, if not paid for at the time, should be accompanied by a reference.

Post-Office Orders should be made payable to the British Medical Association, at the West Central Post-Office, High Holborn. Small amounts may be sent in postage stamps.