

valleys than on hills or mountains, and that the valleys which are traversed by rivers which are subject to seasonal overflow are particularly affected by cancer. The statistics on which these statements rest, are not free from reproach; for they are, for the most part, founded on the deaths which occur in the various districts. It is obvious that, if they are to afford reliable proof, they should refer to the locality in which the first appearance of the disease takes place; for it is notorious that a large number of patients with cancer do not die in their own homes, or in the locality in which the cancer first appeared, but in hospitals or distant towns to which they have resorted for operation or for other treatment. Here, again, the experience of the general practitioner may serve to correct the fallacies of the present statistics and, still more important, to furnish information which general statistics are wholly deficient in. And here, again, it is of the utmost importance that information should be given, not only by those practitioners who see many cases of cancer, but by those who see few or who do not see any. If there are districts in which cancer is never observed, it is of vast importance that they should be known, and that their physical characters should be carefully studied.

The replies to the questions relating to diet, may be open to the objection that the evidence is not so direct as that which relates to inheritance and locality. It must rest, to a large extent, on the statements of the patient or the patient's friends; and, to say nothing of the pleasure or pride which many persons have in declaring that they are very small eaters, and still smaller drinkers, there is such a very wide difference of opinion regarding what may be considered to be large eating and drinking. Still, it is by no means impossible that many practitioners, seeing much of the intimate lives of their patients, may be able to furnish evidence on this point of more value than has hitherto been obtained.

Having in view the steadily increasing death-rate from cancer, and the horrible nature of the malady itself, every question relating to its etiology cannot fail to be of interest. This fact alone should make the present inquiry popular, and the Committee may fairly hope that it will elicit a large number of replies. In order to increase its popularity, and to induce practitioners in all parts of the kingdom to take it up, each one of the three points has been dealt with separately, and the questions relating to each are as few and as simple as possible. Answers will be gladly accepted to any of the three sets of questions separately, and negative evidence is eagerly sought after.

## ASSOCIATION INTELLIGENCE.

### NOTICE OF QUARTERLY MEETINGS FOR 1885: ELECTION OF MEMBERS.

*Regulations for the Election of Members passed at the Meeting of the Committee of Council, October 12th, 1881.*

1. There shall be a standing notice in the JOURNAL every week, of the meetings of the Committee of Council throughout the year; and stating that gentlemen wishing to be elected members of the Association must send in their names *twenty-one days* before the meeting of the Committee of Council at which they wish to be elected.
2. That a list of applicants be in the hands of the Committee of Council *fourteen days* before such meeting of the Committee of Council, and that the Branch-Secretaries be supplied with several copies of the list.
3. That no member be elected by a Branch, unless his name has been inserted in the circular summoning the meeting at which he seeks election.

Meetings of the Council will be held on April 8th, July 8th, and October 14th, 1885. 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, namely, March 18th, June 17th, and September 24th, 1885, 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*.

### BRANCH MEETINGS TO BE HELD.

**THAMES VALLEY BRANCH.**—This Branch will meet on Wednesday, February 25th, at the Griffin Hotel, Kingston-on-Thames. A discussion will take place on Rheumatism, in which the Secretary of the Collective Investigation Committee will take part. Meeting at six, and dinner at seven, o'clock.—A. ROBERTS LAW, *Honorary Secretary*.

**STAFFORDSHIRE BRANCH.**—The second general meeting of the present session will be held at the North-Western Railway Hotel, Stafford, on Thursday, February 26th, 1885. The President, Dr. E. T. Tylecote, will take the chair at 3.30 P.M. Papers will be read by Dr. Reid (Stafford) and Dr. C. Smith (Wolverhampton), and a discussion will take place upon Chorea and Acute Rheumatism. Dr. Isambard Owen (London) will be present at the meeting.—VINCENT JACKSON, *General Secretary*, Wolverhampton, February 2nd, 1885.

**GLOUCESTERSHIRE BRANCH.**—The next meeting of the Branch will be held, under the presidency of Dr. Needham, in the Board-room of the County Infirmary, Gloucester, on Tuesday, February 24th, at 7.30 P.M. This special meeting is called, in pursuance of the resolution passed at the last meeting of the Branch, to consider the present position of the Society, and to receive suggestions for making the meetings more generally interesting to the members.—RAYNER W. BATTEN, G. ARTHUR CARDEN, *Honorary Secretaries*.

**SOUTH-EASTERN BRANCH: EAST AND WEST SUSSEX DISTRICTS.**—A conjoint meeting of the above Districts will be held at the Grand Hotel, Brighton, on Tuesday, March 24th. Charles J. Oldham, Esq., will take the chair. Gentlemen desirous of contributing short papers, or cases, should communicate with the Honorary Secretary, East Sussex District.—T. JENNER VERRALL, 95, Western Road, Brighton.

**METROPOLITAN COUNTIES BRANCH.**—A general meeting of this Branch will be held at the Royal School of Mines, Jermyn Street, on Friday, March 6th, to consider the subject of University degrees for London medical students. A report of the Council on the subject will be presented. The chair will be taken by the president, Mr. Macnamara, at 8 P.M., precisely.—ALEXANDER HENRY, M.D., and W. CHAPMAN GRIGG, M.D., *Honorary Secretaries*.

**NORTH WALES BRANCH.**—The intermediate meeting of this Branch will be held at the Bull Hotel, Llangefni, on Tuesday, March 10th, at 2 P.M. A discussion on "Chorea" will take place, to be opened by Dr. Isambard Owen, of London, and taken part in by Dr. O. T. Williams, Holyhead, and others. Gentlemen desirous of reading papers, or taking part in the discussion, should communicate with the Honorary Secretary at once.—W. JONES-MORRIS, *Honorary Secretary*, Portmadoc.

## BRITISH MEDICAL ASSOCIATION.

### FIFTY-THIRD ANNUAL MEETING.

The Fifty-third Annual Meeting of the British Medical Association will be held at Cardiff, on Tuesday, Wednesday, Thursday, and Friday, July 28th, 29th, 30th and 31st, 1885.

*President:* JAMES CUMING, M.D., F.R.C.Q.C.P., Professor of Medicine in Queen's College, and Physician to the Royal Hospital, Belfast.

*President-elect:* W. T. EDWARDS, M.D., F.R.C.S., Physician to the Glamorgan and Monmouth Infirmary, Cardiff.

An Address in Therapeutics will be delivered by W. Roberts, M.D., F.R.S., Consulting Physician to the Manchester Royal Infirmary.

An Address in Surgery will be delivered by John Marshall, F.R.C.S., F.R.S., Professor of Surgery in University College, and Senior Surgeon to University College Hospital.

An Address in Public Medicine will be delivered by Thos. Jones Dyke, F.R.C.S., Medical Officer of Health, Merthyr Tydvil.

**SECTION A. MEDICINE.**—*President:* S. Wilks, M.D., F.R.S., London. *Vice-Presidents:* T. D. Griffiths, M.D., Swansea; Byrom Bramwell, M.D., Edinburgh. *Secretaries:* W. Price, M.B., Park Place, Cardiff; E. Markham Skeritt, M.D., Richmond Hill, Clifton.

**SECTION B. SURGERY.**—*President:* E. H. Bennett, M.D., President of the Royal College of Surgeons in Ireland, Dublin. *Vice-Presidents:* P. R. Cresswell, F.R.C.S., Dowlais; Edmund Owen, F.R.C.S., London. *Secretaries:* G. A. Brown, M.R.C.S., Tredegar; Thomas Jones, F.R.C.S., 96, Mosley Street, Manchester.

**SECTION C. OBSTETRIC MEDICINE.**—*President:* Henry Gervis, M.D., London. *Vice-Presidents:* S. H. Steel, M.B., Abergavenny; W. C. Grigg, M.D., London. *Secretaries:* A. P. Fiddian, M.B., 6, Brighton Terrace, Cardiff; D. Berry Hart, M.D., 65, Frederick Street, Edinburgh.

**SECTION D. PUBLIC MEDICINE.**—*President:* D. Davies, M.R.C.S., M.O.H., Bristol. *Vice-Presidents:* E. Davies, M.R.C.S. M.O.H., Swansea; J. Lloyd-Roberts, M.B., Denbigh. *Secretaries:* Edward Rice Morgan, M.R.C.S., Morriston, Swansea; Herbert M. Page, M.D., 16, Prospect Hill, Redditch.

**SECTION E. PSYCHOLOGY.**—*President:* D. Yellowlees, M.D., Glasgow. *Vice-Presidents:* G. J. Hearder, M.D., Carmarthen; G. E. Shuttleworth, M.D., Lancaster. *Secretaries:* C. Pegge, M.R.C.S., Vernon House, Briton Ferry, Glamorgan; A. Strange, M.D., County Asylum, Bicton Heath, Shrewsbury.

**SECTION F. OPHTHALMOLOGY AND OTOTOLOGY.**—*President:* Henry Power, M.B., F.R.C.S., London. *Vice-Presidents:* E. Woakes, M.D., London; D. C. Lloyd Owen F.R.C.S., Birmingham. *Secretaries:* J. Milward, M.D., 54, Charles Street, Cardiff; A. Emrys-Jones, M.D., 10, St. John Street, Manchester.

**SECTION G. PHARMACOLOGY AND THERAPEUTICS.**—*President:* T. R. Fraser, M.D., F.R.S., Edinburgh. *Vice-Presidents:* J. Talfourd Jones, M.B., Brecon; W. Murrell, M.D., 38, Weymouth Street, London. *Secretaries:* Evan Jones, M.R.C.S., Ty Mawr, Aberdare; J. H. Wathen, L.R.C.P., Coburg Villa, Richmond Hill, Clifton.

*Local Secretaries:* Alfred Sheen, M.D., Halswell House, Cardiff; Andrew Davies, M.D., Cadiz House, Cardiff.

TUESDAY, JULY 28TH, 1885.

2.30 P.M.—Meeting of 1884-85 Council.

3.30 P.M.—General Meeting. Report of Council and other business. Adjourn at 5 P.M.

8 P.M.—General Meeting. President's Address, and any business adjourned from meeting at 3.30 o'clock.

WEDNESDAY, JULY 29TH, 1885.

9.30 A.M.—Meeting of 1885-86 Council.

11.0 A.M.—Second General Meeting. Address in Therapeutics.

2 to 5 P.M.—Sectional Meetings.

8 P.M.—A *Conversazione* will be given by the President of the Association and the South Wales and Monmouthshire Branch.

THURSDAY, JULY 30TH, 1885.

9.30 A.M.—Meeting of Council.

11 A.M.—Third General Meeting. Address in Surgery.

2 to 5 P.M.—Sectional Meetings.

6.30 P.M.—Public Dinner.

FRIDAY, JULY 31ST, 1885.

10 A.M.—Address in Public Medicine.

11 A.M.—Sectional Meetings.

2 P.M.—Concluding General Meeting.

8 P.M.—Reception by the Mayor of Cardiff.

SATURDAY, AUGUST 1ST, 1885.

Excursions.

#### ANNUAL MUSEUM.

THE nineteenth annual exhibition of objects of interest in connection with medicine, surgery, and sanitary science, will take place in the Public Hall, Queen Street, Cardiff, during July 28th, 29th, 30th, and 31st, 1885. (Floor-space, 9,000 feet.)

The Museum will be divided into the following sections.

SECTION A.—Preparations, diagrams, casts, and models of anatomical and pathological objects, microscopes and microscopical preparations. (Secretary, W. M. Hier Evans, Esq.)

SECTION B.—Surgical and medical instruments and appliances; other instruments for scientific investigation; new medical works. (Secretary, A. Plain, M.B.)

SECTION C.—Foods, drugs, chemicals, and pharmaceutical preparations. (Secretary, Maurice G. Evans, M.D.)

SECTION D. SANITARY SECTION.—1. Books on sanitation. 2. Ambulances and appliances for carrying or moving sick and wounded. 3. Recent improvements in hospital furniture. 4. Personal hygiene, as clothing, beds, educational appliances, domestic appliances, filters, and arrangements for softening water; disinfectants and disinfecting apparatus. (Secretary (1, 2, 3, 4), E. Seward, A.R.I.B.A.) 5. Sanitary appliances, including drawings, models, and apparatus illustrative of the ventilation, lighting, draining, etc., of hospitals, public buildings, and private dwellings. (Illustrations of defects usually found would be of great interest.) (Secretary, E. M. B. Vaughan, A.R.I.B.A.)

In Sections A and D a printed name and description must be attached to each exhibit.

In Sections B and D, and with microscopes in Section A, exhibitors must send a printed list, with the name, number, and price of each article, and a corresponding number on each exhibit.

*Unless these instructions are carried out, the exhibits will be declined.*

*The medical, surgical, and scientific instruments and sanitary appliances must be genuine novelties or improvements on those in common use.*

#### EXHIBITION OF INSTRUMENTS AND APPARATUS.

It is intended to arrange for the exhibition of complete series of instruments, electro-therapeutic apparatus, instruments for physical diagnosis, and appliances relating to sanitary science and public health.

Facilities will also be afforded, when requested, for the display of instruments and apparatus in action.

CATALOGUE.—It is intended to print a catalogue of the exhibits in the Museum, and lithograph-plan. Descriptions should be sent in as early as possible, not later than June 20th, 1885.

TO ADVERTISERS.—The catalogue of the Museum will be one of the best advertising mediums of the day. The following will be the scale of charges for advertisements: One page, £1; half-page, 12s. 6d.; quarter-page, 7s. 6d.

TO EXHIBITORS.—All expenses of carriage to be prepaid, and all risks to be borne by the exhibitors; but the committee will exercise every care of the articles entrusted to them. A card bearing the name and address of the exhibitor, with the name of the instrument, etc., to be enclosed in each package, ready to be fixed on the outside of the exhibit.

All communications with reference to the museum and advertise-

ments for the catalogue to be addressed (prepaid) to C. E. HARDY-MAN, Esq., 42, Crockherbtown, Cardiff.

#### GLASGOW AND WEST OF SCOTLAND BRANCH: ANNUAL MEETING.

THE annual meeting of the Branch was held in the Western Infirmary, Glasgow, on Saturday, January 31st; Dr. MUNRO, of Kilmarnock, the President, in the chair. There was a good attendance of members.

*President's Address.*—Dr. MUNRO delivered an address on the Scientific Basis of Medicine. He began by referring to the old superstitions as to disease and its causation and treatment, and quoted an interesting passage from Adamnan's *Life of St. Columba*, in which the freedom of Scotland from the plague which prevailed in England was attributed to the presence of the saint. The witch-mania, the belief in the philosopher's stone and elixir vitæ, and homœopathy, were also commented on. The changes which set in with the revival of learning were noticed; and the President proceeded to delineate the scientific principles underlying the medical art, and linking its various instruments and appliances with the ascertained truths of natural science. He summed up in the following conclusions.

1. The keen, persevering, critical, and deep insight cultivated by trained observers, in the study of natural phenomena, and their bearing on the various phases of organic life, is fast extending to medical science; and already, not only have its methods of investigation been improved and extended, but many of its antiquated cobwebs have been brushed aside. Hence, many of the past medical landmarks, though professedly founded on observation confirmed by experience, and backed by the authority of great names, have been found, when subjected to the searching light of modern research, to have no foundation in fact, and are consequently rejected. All the phenomena of disease are connected with material causes; and must, therefore, be referred to the same biological laws which regulate organic life in health. Diseases are as much the product of natural laws as health.
2. One of the first fruits of this far-reaching philosophy is the foundation of the science of preventive medicine, which aims at the discovery and destruction of the physical causes of disease, as it were, in embryo; and the benefit already conferred on humanity by its legislative enactments, in the actual saving of life, is incalculably greater than all the other achievements of scientific medicine; and yet it is the one department of the medical profession whose students are most neglected, and for whom there is no adequate remuneration.
3. The special province of the physician, however, is not the prevention of disease, but its treatment. This necessitates, as a mere preliminary step, not only an accurate knowledge of the normal phenomena of the human body, its cellular, nutritive, and chemo-vital processes, and the functions of its various organs, and how far the operation of one organ relieves that of another, but also a corresponding acquaintance with the abnormal symptoms excited by the various diseases, their primary causes, progress, duration, and natural termination, the therapeutic and physiological action of drugs, and the processes by which poisonous and foreign elements are eliminated out of the system. The object of all treatment is to assist the curative efforts of nature; and the prudent physician must be rationally satisfied, under the full light of scientific investigation, that his plan of interference is not opposed to that of nature, or, if so, that it is superior to it, and will be for the ultimate good of the sufferer. Treatment may be directed towards a variety of objects, as the removal of causes, palliation of suffering, establishment of favourable hygienic conditions, and the stimulation of the function of one organ, or the abatement of that of another, etc., according to circumstances. One poisonous element is removed through the skin, another through the lungs, kidneys, or bowels, and a third may be counteracted or destroyed by drugs. The discovery of remedial agents is greatly assisted by a knowledge of the nature and properties of the injurious substances to be removed; hence the trial of suggested remedies, within safe limits, is to be commended in proportion to their scientific reasonableness. As an illustration, we would say that experiments, directed towards the discovery of a remedy for small-pox, would be more likely to be successful now than when we were ignorant of the fact that this disease is due to a specific micro-organism. Without, therefore, altogether rejecting this suggested, or rational, form of empiricism, it must be acknowledged that, to whatever extent it may be carried, all treatment founded upon it should ultimately be explained by natural laws. 4. If it be true that scientific medicine is dependent on our knowledge of the laws and phenomena of the immediate and collateral sciences which regulate human life, it follows that the field of action for medical practitioners is almost illimitable. It not only affords abundant scope for all kinds of manipulative research in physiology, pathology, and therapeutics, but involves the consideration of logical

deductions requiring the exercise of the highest intellectual faculties. To ascertain and describe the exact influence of a given drug on a highly developed organism, like the human body, is, in my opinion, one of the most profound problems that can be submitted to the ingenuity of man. The power of observing correctly is a logical faculty which, when applied to the complex phenomena of life in health or disease, requires much training, knowledge, and experience. To a marked defect in medical education on this point, and the proverbial proneness on the part of the public to believe in sensational cures, must be ascribed most of the defects, pretensions, impostures, and quackery still prevalent in the medical profession.

*Communications.*—The following communications were made:

1. Dr. A. Patterson showed Photographs of interesting Surgical Cases; also rare specimens of Calculi, and a case of Malignant Disease of the Testicle and Spermatid Cord, etc.

2. Dr. H. Cameron spoke on the Operative Treatment of Empyema, and showed some cases, and also some cases of Psoas Abscess connected with disease of the vertebrae in the adult, cured and in process of cure.

3. Professor G. Buchanan's house-surgeon showed a case of Hermaprodism, on which an operation had been performed.

4. Professor Gairdner showed a well marked case of Leprosy. The case was one of peculiar interest, the tubercular, macular, anæsthetic, and mutilating forms being well illustrated in the patient.

*Dinner.*—Thirty-one members dined together at McLean's Hotel.

*Report of Council.*—From the reports of the Secretary and Treasurer, the Branch appears to be in a flourishing condition, there having been, during the year, a considerable number of new members added to the roll.

## SPECIAL CORRESPONDENCE.

### CAIRO.

[FROM OUR OWN CORRESPONDENT.]

*The Egyptian Sanitary Service.—Drainage of Cairo.—The Victoria Hospital.—Ovariectomy.—Visit of Dr. Farquharson, M.P.*

As I foreboded in my last letter, Dr. Sandwith has been obliged to resign his appointment of Subdirector of the Egyptian Sanitary Service. Pressure was brought to bear upon him from high quarters, and obstacles were thrown in the way of every administrative action which he undertook, so that he found it useless to retain his post. He will remain in Cairo, and continue his private practice. He has been succeeded by Surgeon-Major H. R. Greene, who has had considerable experience in sanitary administration in India and elsewhere. He came from Wady Halfa to take his new appointment. Surgeon-Major Greene has a good knowledge of written Arabic, which he will find invaluable in the difficult post on which he has just entered. No other changes in the *personnel* of the service have yet been made, but there will probably be some before very long. It is indeed reported that Ismail Pasha Yousey is discontented with his new post of Director of the Service, and intends to leave it as soon as he can. Who will succeed him is mere matter of conjecture, but it is at least certain that there is no Egyptian suitable for the post. It may be questioned whether there is any need for two directors. Probably much more reform would be achieved if the English director were alone, but such a simple and inexpensive mode of administration cannot be hoped for under the present control.

A commission is shortly to sit on the subject of the drainage of Cairo. The difficult problem of what to do with the ancient and almost sacred "khalig" will be the primary subject of consideration. The khalig is a deep canal, dry in summer, which carries Nile water across the elevated part of Cairo during the inundation. It receives the drainage of the houses it passes in its course, and is, consequently, little better than an open, almost currentless, sewer. Its yearly cutting, at the rising of the Nile, is the subject of a popular festival, at which, for many centuries, a virgin victim used to be sacrificed. It has been proposed, on one hand, to cover it in, and, on the other, to keep it permanently dry, and convert it into a road. The former plan would be too expensive, and the latter would interfere with national prejudice. As regards the general question of removal of sewage, there is no doubt that no system of drainage will be successful, and that the system of dry removal is the only one suitable to the peculiar conditions of Cairo. The commission originates with the department of Public Works, of which Colonel Moncrieff is head. Dr. Chaffey Bey and Mr. Hooker represent the Sanitary Service, a third member is a French engineer, and a fourth the subgovernor of Cairo. To the commission itself we can take no exception, but the question

occurs, Will anything be done in consequence of it? Surgeon-Major Greene has a scheme for providing all the provincial mosques with a double system of removal of sewage, the dry part being carried away to sewer-farms, the wet being allowed, as now, to sink into the ground, or run off into canals and pools. It is to be hoped that funds may be found for carrying out this and other reforms. Unfortunately, the surplus £10,000 which stood over from a previous year, and was to have been applied to reforms during this year, has been lost to the Sanitary Service through not having been appropriated before the close of last year. This is another illustration of the haphazard way in which Egypt is at present ruled.

The new Victoria Hospital, supported by the communities of the four Protestant nations—England, Germany, Switzerland, and the United States—is completed, but has not yet been formally opened. It is nursed by the Kaiserswerth Protestant Sisterhood, which institution refuses to allow any but Protestants to be members of committee of the hospitals it takes in charge. By inadvertence, several Roman Catholics were appointed on the committee of the Victoria Hospital, and only recently did it become known that their appointment was against the rules. Although their retiring was not insisted on, much ill-feeling was aroused by the knowledge of the intolerant regulation. An amateur musical and operatic performance was about to be given at the time, and the proceeds were to have been devoted to the Victoria Hospital; but, on account of this unfortunate misunderstanding, they were diverted to the native hospital. The performance was very successful, and it is expected that more than £500 will be handed over the Kasr-el-din Hospital.

Mr. Milton, the resident medical officer, recently performed ovariectomy at this hospital. The operation was done under full antiseptic precautions, and appeared to be wholly successful. The patient rallied, and was doing well for two or three days, when she unexpectedly died. *Post mortem*, all the parts involved by the wound were found to be doing well; but a nest of lumbricoid worms was found in another part of the peritoneal cavity, which had set up peritonitis, from which, presumably, the patient died. No aperture was found through which the worms might have perforated the bowel.

Dr. Farquharson, M.P., has been visiting Egypt for the last three or four weeks. He will reach England in time for the opening of Parliament. He will have much to tell the Government of the sanitary requirements of this country.

### PARIS.

[FROM OUR OWN CORRESPONDENT.]

*Deoxidising Blood in Living Animals.—Acids and Hæmoglobin.—The Influence of Sex on Caries of the Teeth.—The Depopulation of France.—Food.—Cremation.*

IN 1868 Claude Bernard attempted to determine whether, by injecting pyrogallic acid into the blood, its oxygen was removed. In 1868 M. Personne asserted that pyrogallic acid is toxic. Since then, some German authors have made the same assertion. Quite recently, M. Quinquand has made a series of experiments which lead him to conclude that oxygen can be removed from blood, but has not yet arrived at an appreciation of the process by which this modification in the constitution of the blood is effected. At the necropsy of the animals, the viscera are observed to be brown in colour. Claude Bernard erroneously believed that the lungs only presented this alteration, which he attributed to the contact of the pyrogallic acid with the air. In fact, all the organs present these lesions when the necropsy is effected in a vacuum. This pathological condition provokes a series of symptoms: the temperature is lowered, the pulse is quicker, respiration is more hurried, then becomes irregular, and presents all the variations which characterise Cheyne-Stokes respiration. The entire mass of blood is methæmoglobinised. Carbonic acid does not accumulate, there is less of it produced. If the blood be analysed, before and after it passes into the capillaries, it is easily ascertained that a much smaller quantity than usual of oxygen is used in oxidising the blood, and a much smaller quantity of carbonic acid is given off; the nutrition of the substance of the tissues is impaired.

M. Loze and M. Brouardel, in a communication to the Biological Society, on the destruction of hæmoglobin by carbonic acid, stated that, if a certain quantity of blood be submitted to the influence of a current of carbonic acid, the respiratory capacity is greatly lessened. There is evidently a partial destruction of hæmoglobin. When the acidity of carbonic acid is increased, the phenomena are still more pronounced.

own observation in this union, I believe the guardians would have a candidate, even if one of the appointments were offered without any salary—so long will the salaries be absolutely inadequate. Again, if a practitioner take such an appointment unwittingly, his plain duty is, if he find the salary inadequate, to resign, not to neglect the paupers.

It must not be assumed that newly fledged practitioners are to blame; and, as an encouragement to them to avoid the common fallacy that such appointments are advantageous, I would say that, so far as my observation goes, the most successful practitioners are those who have done without such aids to practice. I could say the same of clubs at two shillings and sixpence per member; and in these instances, as well as in union appointments, I have stood aloof, and witnessed my seniors rush in.

Let the profession look these questions fairly in the face, and recognise that help must come from within, not from without. Let all those who recognise their appointments to be such that they must neglect their duties to the sick, or be out of pocket, summon up their courage, and take the proper course of resigning. Let those just entering the profession have the opportunity of learning from the example of their seniors that such appointments are not worth seeking; then there would be some probability that the guardians would raise their salaries, the clubs their sick-pay.

Holding appointments without sufficient direct remuneration leads to various shifts and subterfuges being adopted to make up the deficiency indirectly; and supplying paupers with medical necessities at the expense of a voluntary charity is an instance in point.

The remedy is, I fear, out of reach of all my energy; therefore, it is not possible for me to adopt your suggestion.—I am, yours, etc., W. B. W.

#### OPERATIONS ON PAUPERS.

SIR.—As a district medical officer to a union, I had lately to remove a malignant growth from the lip of an old man—a permanent pauper. I sent a bill for a guinea to the guardians. I had a reply to the effect that "they could not see their way to pay me the amount."

Will you, sir, kindly say whether I did right in sending such a charge? and whether the guardians should not pay me, counting the operation as being one of the unscheduled ones of the by-laws of the Local Government Board?—Yours truly, MEDICAL OFFICER.

\*.\* We consider that it was an injudicious procedure on the part of our correspondent to have sent a claim of £1 ls. for the operation referred to, as it will be found, by reference to the ninth edition of *Glen's Consolidated Orders*, p. 164 that operations involving as much, if not more, trouble at the time, and subsequently, are specially excepted from all payment. The proper course to follow when any operation has been performed, not scheduled in the list (*vide* page 163) is to send to the board a description of the operation, and of the difficulty (if any) experienced in the performance of the same, and to ask whether the board will, under the circumstances, grant a fee. It would then be competent for the guardians to allow the same, subject to the approval of the Local Government Board, without whose sanction the auditor would surcharge the guardians. This has been done by the auditors of the Central Department, as we know from experience, and therefore the local board gave the only reply they were empowered to make, when a bald claim had been made upon them.

ALPHA.—I. It would be your duty, on request from the guardians, to report to the medical officer of health all cases of infectious disease occurring in your practice as poor-law medical officer. As regards your private practice, compliance with the guardians' request would, of course, be a matter for your own discretion.

2. We think that our correspondent should claim £1 ls. for attendance, and also travelling-expenses.

ENTERTAINMENT AT THE WESTMINSTER WORKHOUSE.—Our contemporary, the *Westminster and Lambeth Gazette*, in its issue of the 14th instant, describes an entertainment that was given by Dr. Joseph Rogers, the Medical Officer of the Workhouse of the Westminster Union, assisted by Mrs. Rogers and friends, to the aged inmates of that establishment. The entertainment consisted of comic and other readings, of music, and singing—the latter being of a high order, as several artists had voluntarily lent their aid. The large dining hall, capable of accommodating some hundreds, was completely filled, the audience consisting of the inmates, the members of the board, and many friends. At the meeting of the board of guardians on the 13th instant, the entertainment was referred to, when it was proposed, and unanimously carried, "That the best thanks of the guardians be, and are hereby, accorded to Dr. Joseph Rogers, Mrs. Rogers, and the ladies and gentlemen who assisted them, for their great kindness in providing an entertainment for the inmates of the Poland Street Workhouse on Wednesday, the 11th instant, and which was so heartily appreciated and enjoyed by them." Although the provision of such an entertainment does not come within the obligations of a medical officer, we commend Dr. Rogers's action to gentlemen holding similar appointments. The medical officer is almost the only official who can, if he be so inclined, mitigate the hard and dreary lot of the inmates of a workhouse, many of whom have become such through no fault of their own, but solely through the pressure of unavoidable circumstances.

## HOSPITAL AND DISPENSARY MANAGEMENT.

### BELFAST ROYAL HOSPITAL.

THE annual meeting of this charity was held on November 17th, the Mayor (Sir David Taylor) presiding. The committee's report showed that the hospital was never in a more efficient condition, the number of patients treated in the wards and at the extern department being much in excess of the number ever hitherto treated. But this increased demand on the hospital had told considerably on the funds. At the beginning of the last financial year, there was a balance against the hospital of £724 18s. 4d. This deficit has increased to the sum of £1,791 10s. 1d. during the present year. It is hoped, however, that the bazaar, which will shortly be held, and which is being most warmly taken up by all classes in the community will wipe out this deficiency. During the past year, there has been a considerable falling off in the amount received from bequests and donations, and a slight decrease on that received from general subscriptions, and at the church collections; while, on the other hand, there has been a substantial increase on the amount subscribed by the working-classes. This sum, in the past year, amounted to £1,692. The Hospital Saturday annual collection, which was started for the first time on last August, promises to be a substantial means of raising funds for the institution. The medical staff reported that one hundred and sixty-eight students had attended the hospital during the winter and eighty-eight during the summer months. This decrease was accounted for by the new regulations of the Royal University.

## MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, February 12th, 1885.

MacGillycuddy, Neill, University College.  
Maude, Arthur, St. Bartholomew's Hospital.

### MEDICAL VACANCIES.

The following vacancies are announced.

- ATCHAM UNION.—Medical Officer and Public Vaccinator. Salary, £50 per annum. Applications to J. Everest, St. John's Hill, Shrewsbury.
- BATH GENERAL OR MINERAL WATER HOSPITAL.—Resident Medical Officer. Salary, £100 per annum. Applications by March 5th.
- BELMULLET UNION.—Medical Officer, Knockmalower Dispensary. Salary, £110 per annum, and fees. Applications to D. O'Connell, Honorary Secretary, Kilcommon Lodge, Belmullet, up to February 28th.
- BIRMINGHAM BOROUGH ASYLUM.—Resident Clinical Assistant. Applications to E. B. Whitcombe, Superintendent.
- DEWSBURY AND DISTRICT GENERAL INFIRMARY. — House-Surgeon. Salary, £100 per annum. Applications by March 3rd.
- FEMALE LOCK HOSPITAL, Westbourne Green.—House-Surgeon. Salary £100 per annum. Applications by February 21st.
- GENERAL HOSPITAL, Birmingham.—Assistant Physician. Applications by February 28th.
- HALIFAX INFIRMARY AND DISPENSARY.—Junior House-Surgeon. Salary, £50 per annum. Applications by March 26th.
- METROPOLITAN CONVALESCENT INSTITUTION, Walton-on-Thames. — Medical Officer. Salary, 70 guineas per annum. Applications to Mr. Charles Holmes, 32, Sackville Street, W., by March 2nd.
- MILE-END OLD TOWN GUARDIANS OF THE POOR.—Medical Superintendent. Salary, £250 per annum. Applications by February 25th.
- NAVAN UNION.—Medical Officer, Navan Dispensary. Salary, £155 per annum and fees. Election on February 25th.
- NORTH DEVON INFIRMARY, Barnstaple.—House-Surgeon. Salary, £100 per annum. Applications by March 7th.
- ROYAL ALBERT HOSPITAL, Devonport.—Resident Medical Officer. Salary, £200 per annum.
- SHEFFIELD PUBLIC HOSPITAL AND DISPENSARY.—Assistant House-Surgeon. Salary, £65 per annum. Applications to the Honorary Secretary to the Medical Staff by March 3rd.
- STROUD GENERAL HOSPITAL.—House-Surgeon. Salary, £80 per annum. Applications to John Libby, Honorary Secretary, New Mills, Stroud.
- UNIVERSITY OF GLASGOW.—Examiners in Physiology and Pathology, Medicine and Clinical Medicine, Surgery and Clinical Surgery. Fee, £40 per annum. Applications by March 2nd.
- WESTERN GENERAL DISPENSARY, Marylebone Road.—Junior House-Surgeon. Salary, £63 per annum. Applications by February 28th.
- WINDSOR ROYAL INFIRMARY.—Dispenser. Salary, £35 per annum. Applications by March 4th.
- YORK COUNTY HOSPITAL.—Honorary Physician. Applications by March 7th.

## MEDICAL APPOINTMENTS.

- BLUMER, W. Percy, F.R.C.S.E., appointed Honorary Surgeon to the Sunderland and North Durham Eye Infirmary, *vice* E. Allan Maling, M.R.C.S., J.P., resigned.
- HARDYMAN, Charles E., F.R.C.S. Ed., appointed Surgeon to Her Majesty's Prison at Cardiff, *vice* H. J. Paine, M.D., resigned.
- HARRIS, Thomas, M.D. Lond., appointed Assistant-Lecturer and Demonstrator in Pathology at the Owens College, Manchester, *vice* Robert Maguire, M.D. Lond., M.R.C.P., resigned.
- LEE, Charles G., M.R.C.S., L.R.C.P. Lond., appointed Honorary Surgeon, Liverpool Eye and Ear Infirmary, *vice* T. Shadford Walker, M.R.C.S., made Honorary Consulting Surgeon.

## 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.

## BIRTH.

WRIGHT.—On the 15th instant, the wife of Francis James Wright, M.D., of Northumberland House, Finsbury Park, N., of a son.

## MARRIAGE.

LLOYD-ROBERTS—PARRY-JONES.—On the 12th instant, at St. Mary's Church, Denbigh, by the Rev. J. Myddleton-Evans, Vicar of Esholt, Yorks., uncle of the bride, the Rev. Edward Roberts, vicar of Harborne, Staffordshire, uncle of the bridegroom, and the Rector of Denbigh, John Lloyd-Roberts, President-elect of the North Wales Branch, and Vice-President of the Public Health Section of the Association, second son of the late Rev. R. J. Roberts, rector of Ysceiog, and formerly rector of Denbigh, to Margaret, eldest daughter of the late J. Parry-Jones, Esq., of Plas Clough, Denbighshire.

## DEATH.

GOUGH.—On the 16th instant, at Epsom, Sergeant D. Gough, in his 67th year; for twenty-seven years Drill-master at the Royal Medical College, Epsom.

CARBOLIC ACID INJECTION OF PILES.—Dr. Wm. F. Fleet writes to the *Therapeutic Gazette*, that he has been using the hypodermic treatment for piles for the past four or five years, and with universal success. The second case he had was a physician from Middlesex County, Virginia. He attacks only one pile, and where there are five or six piles, it sometimes happens they are relieved by injecting every alternate one; but it is safest to attend to each one in turn, and thus effect the entire removal of all. In this case, the patient had had a bad prolapsus of the rectum, and had used sundry instruments and appliances to remedy his trouble, but none of them afforded him any relief. The rectum was promptly relieved at the last operation, and he returned home at the expiration of a week a sound man, so far as his piles and prolapsus of the rectum were concerned. He reported himself about twelve months afterwards as still relieved, with no return whatever of hæmorrhoids or prolapsus. In very large tumours, it may be necessary to inject them two or three times before the circulation is cut off. Dr. Fleet varies his prescription a little, according to the case for treatment.

THE Derby guardians have increased the salary of Dr. Charles A. Greaves, Medical Officer to the Workhouse, from £105 to £125 *per annum*.

THE Earl of Harrowby has been re-elected President of the Staffordshire General Infirmary, Stafford.

## MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

- MONDAY.—Royal College of Surgeons of England, 4 P.M. Professor Frederick Treves: On the Anatomy of the Peritoneum and Intestinal Canal in Man. —Medical Society of London, 8.30 P.M. Dr. Felix Semon: Electric Illumination of Different Cavities of the Human Body (Mouth, Pharynx, Larynx, Nose, Ear, Vagina, Rectum); Faradisation, Galvano-cauterisation, and Electrolysis by Means of Pocket-Accumulators, chargeable at Home. Mr. Hurry Fenwick: Cucaïne in Vesico-urethral Practice.
- TUESDAY.—Royal Medical and Chirurgical Society, 8.30 P.M. Dr. Ormerod: On Hereditary Locomotor Ataxy. (Some cases will be exhibited to illustrate Dr. Ormerod's paper.) Dr. Samuel West: Fatal Hæmoptysis: the Statistics of the last Fifteen Years of the Chest Hospital, Victoria Park, with Remarks upon Profuse Non-Fatal Hæmoptysis.
- WEDNESDAY.—Royal College of Surgeons of England, 4 P.M. Professor Frederick Treves: On the Anatomy of the Peritoneum and Intestinal Canal in Man. —Hunterian Society. Dr. Pye-Smith: Presidential Address. Dr. Stephen Mackenzie: On the Connection between Erythema Nodosum and Rheumatism.
- FRIDAY.—Royal College of Surgeons of England, 4 P.M. Professor Frederick Treves: On the Anatomy of the Peritoneum and Intestinal Canal in Man. —Clinical Society of London, 8.30 P.M. Dr. Hughes Bennett: A Case of Locomotor Ataxy, without Disease of the Posterior Columns of the Spinal Cord. Dr. Seymour Taylor: A Case of Arrested Rickets. Mr. Charters Symonds: A Case of Nephrolithotomy. Mr. Henry Morris: A Case of Nephrolithotomy. Dr. Hadden: A Case of Obliterative Disease of Vessels (living specimen). —Quekett Microscopical Club, 8 P.M. Mr. Buffham: On the Conjugation of *Rhabdarea Arcuatum*.

## 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 Orthopedic, 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.—St. Thomas's (Ophthalmic Department), 4 P.M.—Cancer Hospital, Brompton, 2.30 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 Central, 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 Orthopedic, 10 A.M.—King's College, 3 to 4 P.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.—Cancer Hospital, Brompton, 2.30 P.M.

## HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

- CHARING CROSS.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30 Skin, M. Th.; Dental, M. W. F., 9.30.
- GUY'S.—Medical and Surgical, daily, exc. Tu., 1.30; Obstetric, M. W. F., 1.30; Eye; M. 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. 3; Dental, Tu. F., 10.
- LONDON.—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p. W. S., 1.30; Eye, W. S., 9; Ear, S., 9.30; Skin, 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; Orthopedic, 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, W., 2; Throat, Th., 2; Orthopedic, 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., 1.30; Eye, M. Th., 2; o.p., daily, except Sat., 1.30; Ear, M., 12.30; Skin, W., 12.30; Throat, Tu. F., 1.30; 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.

## 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 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. CORRESPONDENTS not answered, are requested to look to the Notices to Correspondents of the following week.

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.

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.



## CROTON-OIL AND CHLOROFORM IN TENIA.

SIR,—I see, in the December number of the *Midland Medical Miscellany and Provincial Medical Journal*, that Dr. Bernard Persh, of the United States Army, is in the habit of prescribing, in obstinate cases of tapeworm, when the usual doses of male fern, etc., have failed, the following remedy, which he states is most efficacious, namely, he suspends one drop of croton-oil and a drachm of chloroform in an ounce of glycerine—this to constitute a dose.

The dose is given in the early morning, no preparatory treatment being required, except half an ounce of rochele salt on the preceding evening. He states he omitted the saline purgative on many occasions, without interfering with the cure. Would any brother practitioner kindly say if he has been equally successful with the above remedy; and if a drachm of chloroform may be safely administered, in the manner described, with impunity? The dose, to myself, seems a large one; but, having a case in which all the usual remedies have failed to effect a happy result, I am anxious to try the new remedy.—I am, sir, yours very truly,

A. B. GREAT-REX, M.D.

Lawton Villa.

\*. The doses of all the remedies included in this prescription seem to be quite large enough. Chloroform, however, is given, in the United States, in much fuller doses than those in which it is commonly prescribed in Great Britain. In one of our best posological tables the dose is set down as from one to ten minims, but much larger doses than a drachm have been administered, without ill effects. Of glycerine, too, the dose is usually stated to be from one to two drachms.

## GERMAN.

SIR,—I am anxious to learn German by self-teaching. I would feel grateful to any member who would kindly recommend the best and quickest method, and also the books recommended.—I am, etc.,

MEMBER.

\*. Although the German language is exceedingly difficult to write correctly, it can be learned for purely literary purposes with comparative facility; and, as a large number of simple words in common use are very similar in English and German, it is not difficult for the Briton to make himself understood, even in remote parts of Germany. The best grammar is that of Otto, where the more difficult rules of syntax are very clearly explained; it contains exercises. Grimm's *Mährchen*, or Popular Fairy Tales, are perhaps the easiest specimens of good literary composition for the beginner. The medical tyro in German should procure a copy of Hyrtl's *Lehrbuch der Anatomie* (Vienna; Braumüller, publisher), and translate passages, with the assistance of Dr. Fancourt Barnes's *German-English Dictionary of Medical Words* (Smith and Elder). Most of the German classics are somewhat difficult; and, although the German daily papers are as a rule highly respectable, they are written in a style unsuitable for the beginner.

## BRITISH MEDICAL BENEVOLENT FUND.

SIR,—I have great pleasure in informing you that a vote of thanks for the services you have rendered to the Fund was unanimously passed at the annual meeting of subscribers.—I am, sir, faithfully yours,

18, Clifton Gardens, W.

EDWARD EAST, Honorary Secretary.

## FOOTBALL: ITS REGULATION AND ABOLITION.

SIR,—In your issue of January 10th, you comment upon the fact that the committee on athletics at Harvard University, U.S., have passed a resolution to request the Faculty to put down football at that place; and then proceed to classify that game with bull-baiting, cock-fighting, etc. I quite agree with you that American football does deserve to rank with these other so-called sports, for the game as at present played there resembles closely that formerly played in the old English villages and country districts before the days of the Rugby Union.

It is essentially different from the game as at present played in this country, and which does not seem to me, I must say, so brutal or rough in its nature as you think. Accidents, of course, do happen, but not more so than in hunting, bicycling, or any other sport. Nearly all the worst accidents happen in games played under the Association rules, and I will grant that the "charging" in that game is dangerous; but with regard to the game under Rugby Union rules, as, for instance, in the annual international match between England and Scotland, I think few finer displays of true athletic power and grace are to be seen anywhere. I do not see where the rules could be amended, nor, indeed, where they want amending; and, finally, I decidedly consider the game "worth the candle."—I am, sir, yours truly,

EWEN GRANT.

15, Pall Mall.

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

Dr. T. Harris, Oxford; Dr. Dalton, London; The Secretary of the Clinical Society, London; The Secretary of the Royal Medical and Chirurgical Society, London; Our Dublin Correspondent; Mr. J. Vesey Fitzgerald, Birmingham; Dr. J. W. Moore, Dublin; Mr. C. G. Lee, Liverpool; Our Edinburgh Correspondent; Mr. G. C. Karop, London; Our Birmingham Correspondent; Mr. B. Snell, Ashford; Mr. Boyd Joll, Liverpool; Our Aberdeen Correspondent; Mr. R. H. Russell, Shrewsbury; Mr. A. E. Harris, Sunderland; Mr. Jeffreys, Chesterfield; Mr. J. Powell, jun., Weybridge; Mr. G. Stead, Hedsnesford; Mr. W. A. Buchan, Plymouth; Mr. W. S. Wade, Wakefield; Mr. A. Kebbell, Flaxton; Mr. C. E. Hardyman, Cardiff; Mr. C. E. Purslow, Birmingham; Dr. Handfield-Jones, London; Dr. Thorne Thorne, London; Mr. J. H. M. Williams, Southampton; The Honorary Secretary of the Hunterian Society; Messrs. Street and Co., London; Dr. G. K. Poole, Upper Norwood; Dr. Willoughby, London; Dr. E. Hooper May, Tottenham; Dr. Fränkel, Berlin; Mr. George Rendle, London; Dr. J. B. Hamilton, Rathmines; Mr. Morley Douglas, Sunderland; Dr. W. Curran, London; Mr. George Parsons, Hawkshead; Dr. Braidwood, Birkenhead; Dr. Yarrow, London; Our Berlin Correspondent; Mr. J. C. Carden, Milnthorpe; Dr. Macpherson, London; Mr. S. Coates, Ashton-

under-Lyne; The Secretary of the National Food Reform Society; Dr. Norman Kerr, London; Mr. J. C. Voigt, Bury; Mr. A. H. Martin, Evesham; Dr. Whittle, Belfast; Mr. Peter Tytler, Manchester; Our Liverpool Correspondent; Mrs. A. M. L. Potts, London; Mr. H. de Méric, London; Dr. W. Easby, Peterborough; Mrs. Ellen Bownan, Wath-upon-Dearne, Rotherham; Mr. A. Phillips Hills, London; Dr. Lownds, Egham Hill; Mr. J. M. Ferguson, Hounslow; Dr. F. T. Bond, Gloucester; Mr. C. C. Whiteford, London; Mr. James Wilson, Glasgow; Mr. Henry P. Leech, Woolpit; Dr. J. St. John Parsons, Bristol; Mr. H. C. Burdett, London; The Honorary Secretaries of the Hospitals Association; Dr. Danford Thomas, London; Hon. Brigade-Surgeon Stafford, Wexford; Mr. F. C. Bryan, Littlehampton; Dr. B. H. Allen, Hastings; Mr. V. E. Sutcliffe, Bury; Mr. John Welpton, Leeds; Mr. E. Trimmer, London; Mr. Nunn, London; Librarian; Dr. M. Thomas, Glasgow; Mr. Thomas Marsden, Bridgewater; Mr. W. Stainton Stanley, Wellow; Dr. Alfred Wright, London; Our Belfast Correspondent; Mr. C. A. Morton, Carlisle; Mr. Shirley F. Murphy, London; Mr. G. A. Wright, Manchester; Mr. A. C. Maclaren, London; Dr. J. Wilkie Burman, Ramsbury, Hungerford; The Secretary of the National Provident Institution, London; Mr. W. J. Beatty, Stockton-on-Tees; Mr. A. R. McDougall, Chesterfield; Messrs. Essinger and Neuberger, London; Mr. J. Hutchinson, London; Dr. Gairdner, Crieff; Mr. T. R. Weston, Bristol; Dr. Bate, Hackney; Dr. J. Livy, Bolton; Mr. John Heywood, Manchester; Mr. J. G. Marshall, Doncaster; Mr. E. Dwyer Gray, London; Dr. Balhazar Foster, Birmingham; Mr. J. Croft, London; Dr. R. Sinclair, Dundee; Dr. E. Downes, Eastbourne; Messrs. Gilbert, Wood, and Co., London; Dr. Junker, London; Mr. Henry Fox, Bristol; Mr. Arthur J. Barker, London; Dr. Tripe, London; Mr. J. Parry Jones, Denbigh; Miss Haydon, Tiverton; Mr. H. Stewart Jackson, Antigua; Mr. R. D. S. Sweeting, London; Mr. J. Payne Massingham, Woolstanton; Mr. T. D. Cook, Durham; Mr. W. H. Battle, London; Dr. H. L. Snow, London; Mr. John Deans, Boscombe; Mr. James Middleton, Redcar; Dr. Charles Workman, Munich; Mr. Edward Cotterell, Bicester; Messrs. Baillière, Tindall, and Cox, London; Mr. T. Palmer Stephens, Ensworth; Dr. Brailey, London; Mr. Troves, London; Mr. R. F. Woodcock, Wigan; Dr. R. E. England, Dover; Mr. George Eastes, London; Mr. J. Goodwin Shea, Chesterfield; Dr. C. M. Campbell, London; Mr. J. Edwards, Leeds; Mr. John Taylor, Ticehurst; Mr. B. Clarke, London; Dr. Joseph Rogers, London; Dr. Champneys, London; Mr. A. Duke, Dublin; Dr. Walford, Ramsgate; Mr. G. M. Dartnell, Liverpool; Dr. Daly, Pittsburgh; Mr. Horace S. Howell, London; Dr. J. Lindsay Steven, Glasgow; Mr. William Graham, Brussels, Canada; Dr. Myrtle, Harrogate; Mr. E. Bellamy, London; Mr. Makuna, Ystrad, Rhondda Valley; Mr. Barnish, Wigan; Dr. R. W. Batten, Gloucester; Dr. Frances E. Hoggan, London; Dr. Simpson, Aberdeen; Mr. Hinton Bateman, York; Dr. Fussell, Eastbourne; Mr. J. Howell Thomas, Wellingborough; Mr. J. F. Dixon, Bournemouth; Dr. Hull, Alford; Dr. Leslie Phillips, Birmingham; Surgeon-Major MacCormack, London; Mr. W. A. Evans, Manchester; Mr. Lawson Tait, Birmingham; Mr. E. H. Haydon, Tiverton; Mr. R. Smith, Dublin; Mr. Howard Downes, London; Mr. H. C. Linden, Nottingham; Mr. W. E. Hyde, Leominster; Dr. Smith, Pershore; Mr. Alfred Jackson, Market Weighton; Mr. Bernard Roth, London; Our Manchester Correspondent, etc.

## BOOKS, etc., RECEIVED.

- Robert Boyle. A Biographical Sketch. By Lawrence Saunders. London: Gilbert, Wood, and Co. 1885.  
The Training of the Instincts of Love. By F. B. Money-Coutts. With a Preface by the Rev. E. Tring, M.D. London: Kegan Paul and Co.  
On Acne, Acne Rosacea, Lichen, and Prurigo. By Tom Robinson, M.D. London: H. Kimpton. 1884.  
The Elements of Pathology. By E. Rindfleisch, M.D. Translated by W. H. Mercur, M.D. Revised by James Tyson. London: H. Kimpton. 1884.

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

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