

ASSOCIATION INTELLIGENCE.

COUNCIL.

NOTICE OF MEETING.

A MEETING of the Council will be held in the Council Room, Exeter Hall, Strand, London, on Wednesday, the 20th day of January, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary.*

161A, Strand, December 17th, 1885.

NOTICE OF QUARTERLY MEETINGS FOR 1886.

ELECTION OF MEMBERS.

ANY qualified medical practitioner, not disqualified by any by-law of the Association, who shall be recommended as eligible by any three members, may be elected a member by the Council or by any recognised Branch Council.

Meetings of the Council will be held on January 20th, April 14th, July 14th, and October 20th, 1886. Candidates for election by the Council of the Association must send in their forms of application to the General Secretary, not later than twenty-one days before each meeting, namely, March 25th, June 24th, and September 30th, 1886.

Candidates seeking election by a Branch Council should apply to the secretary of the Branch. No member can be elected by a Branch Council, unless his name has been inserted in the circular summoning the meeting at which he seeks election.

FRANCIS FOWKE, *General Secretary.*

COLLECTIVE INVESTIGATION OF DISEASE.

INQUIRIES are in progress on the subjects of

DIPHTHERIA,

ACUTE RHEUMATISM,

OLD AGE,

CANCER OF THE BREAST.

Memoranda on the above, and forms for recording individual cases may be had on application.

It is requested that returns on Acute Rheumatism be sent in at as early a date as possible, as the printing of the Tables is in progress.

The greater part of the "Old Age" form may be filled in by a non-medical person, if necessary.

THE ETIOLOGY OF PHTHISIS.—Continuation of inquiry. The Committee will be glad to receive the names of gentlemen willing to engage in joint investigation of any of the following points in relation to the origin of cases of Phthisis;—(a) The influence of residence and occupation; (b) the previous state of the patients' thoracic organs and general health; (c) heredity and communication. Full particulars will be sent on application.

THE CONNECTION OF DISEASE WITH HABITS OF INTEMPERANCE.—Additional replies are earnestly requested on the schedule issued with the JOURNAL of May 8th, 1885. Copies of the schedule may be had at once on application.

The Committee is also glad to receive reports of cases of the following conditions, memoranda and forms for which have been prepared, and may be had on application. PAROXYSMAL HÆMOGLOBINURIA, ALBUMINURIA IN THE APPARENTLY HEALTHY, SLEEP-WALKING, ACUTE GOUT, and special forms of PUERPERAL PYREXIA.

The "Sleep-walking" form may be filled in by a non-medical person if necessary.

PROGNOSIS IN HEART-VALVE DISEASE, based on an examination of cases in which the lesion has existed for an unusual length of time without producing serious symptoms; THE EXTREME DURATION OF INFECTIOUSNESS IN INFECTIOUS DISEASES. The Committee has proposed these two subjects for future inquiry, and has referred them to the Branches of the Association, in accordance with its regulations, with a view to preliminary discussion during the present year. The inquiry-papers, to be subsequently issued, will be based upon the information afforded in the preliminary discussions conducted by the Branches.

Application for forms, memoranda, or further information, may be made to any of the Honorary Local Secretaries, or to the Secretary of the Collective Investigation Committee, 161A, Strand, W.C.

* * * The COMMITTEE earnestly requests EARLY replies to the International Inquiry paper on the Geographical Distribution of certain diseases, at present being circulated in the Branches of the Association.

BRANCH MEETINGS TO BE HELD.

SOUTH INDIAN BRANCH.—Meetings are held in the Medical College, Madras, on the first Friday in the month, at 4.30 P.M. Gentlemen desirous of reading papers or exhibiting specimens are requested to communicate with the Honorary Secretary.—J. MAITLAND, M.B., Honorary Secretary, Madras.

EAST ANGLIAN BRANCH: ESSEX DISTRICT.—The next meeting of the above district will be held, by invitation of Dr. Amsden, at the Essex County Asylum, Brentwood, on Wednesday, January 27th, 1886, at 2.30 P.M. Previously to the business of the meeting, Dr. Amsden has kindly offered to escort the members round some of the wards of the asylum. Dr. Elliston, President of the Branch, will preside. Programme and Business Agenda:—1. To arrange the place and date of the next meeting, and to nominate a member of the district, resident in or near such place of meeting, to take the chair thereat, provided the President of the Branch does not attend. 2. To elect an honorary secretary for the year 1886. The following papers have been promised:—1. On the Administration of Medicines by Injection into the Rectum, by the President. 2. On Fits, by W. B. Hadden, Esq., M.D., of St. Thomas's Hospital, London. 3. The Treatment of Acute Mania by Hyoscyamine, by G. Amsden, Esq., M.B., Medical Superintendent, Essex County Asylum. 4. The Necessity of a Medical Defence Fund in connection with the British Medical Association, by J. Sinclair Holden, Esq., M.D., Sudbury. 5. Dr. Hadden will exhibit some sections showing Naked-eye Changes in the Spinal Cord, and some drawings of Brain and Cord Diseases. Gentlemen intending to be present, or wishing to read a paper, or show a case, are requested to communicate with the Honorary Secretary not later than January 25th.—WM. THOS. JACKMAN, Honorary Secretary, Coggeshall, Essex.

SOUTHERN BRANCH.—The next meeting of the South Wilts District will be held at the Angel Hotel, Salisbury, on Wednesday, January 20th, at 2 o'clock. Luncheon will be provided at 1 o'clock at 3s. 6d. a head, not to include wine. Members intending to be present are requested to communicate with the Honorary Secretary, H. J. Manning, Laverstock, Salisbury.

DUBLIN BRANCH.—The ninth annual general meeting of the Dublin Branch will, by kind permission of the President and Fellows, be held on Thursday, January 28th, at 4 P.M., in the Hall of the King and Queen's College of Physicians, Kildare Street. The officers and Council for the ensuing year will be elected by ballot, and any other necessary business transacted. Dr. E. H. Bennett, President-elect, will deliver the annual address. The annual dinner of the Branch will be in the College Hall, at 7 P.M., on the day of the meeting. Dinner-tickets for members who purchase their tickets on or before Wednesday, the 27th instant, 17s. 6d.; for members purchasing their tickets after that date, and for guests, £1.—RICHARD A. HAYES, M.D., Honorary Secretary and Treasurer, 56, Merrion Square South, Dublin.—January 6th, 1886.

SPECIAL CORRESPONDENCE.

PARIS.

[FROM OUR OWN CORRESPONDENT.]

The Action of Aceto-phenone.—The Therapeutic Value of Turpentine.—The Literature of Cholera.—French Law on Drugs.—General News.

M. LABORDE has studied the action of aceto-phenone on patients when administered in relatively small doses. M. Dujardin-Beaumetz, in a recent communication to the Biological Society, stated that this substance produces sleep accompanied by vertigo and headache. A cubic centimetre, according to M. Laborde, injected under the skin of a guinea-pig, produced a torpid comatose state, from which the animal did not recover. A dose sufficient to produce sleep results in death. Respiration is rapidly quickened, and becomes irregular; the heart-beats are fewer in number; the animal starts convulsively; it gradually grows colder, and dies. The effect of aceto-phenone on dogs is quite different; hypodermic injections do not produce any effect on them, but if they swallow the solution, vomiting follows. Intravenous injections quickly produce sleep; a cubic centimetre renders the animal anæsthetic, also analgesic, and death ultimately ensues. At the necropsy, congested patches are observed, also blood infiltrated into the renal parenchyma, due probably to a general alteration of the blood. In addition to these symptoms there is a general lessening of blood-tension. Aceto-phenone, called by M. Dujardin-Beaumetz hypnone, always produces local irritation; the nerve nearest the area of injection loses its irritability and its sensibility; the muscles which it supplies lose their contractility. It produces anæsthesia of the cornea when injected between the eyelids, but violent ophthalmia follows. MM. Dubois and Bidaud have observed that aceto-phenone, when administered before chloroform, induces sleep; a four per cent. chloroform mixture is sufficient, otherwise one of eight, ten, or twelve per cent. is necessary. An hour afterwards the animal wakes up, and a fresh injection of hypnone is necessary if it have to be sent to sleep again.

Among the principal objections to the medical use of turpentine, and the bodies extracted from it, are their insolubility in water, their

cities—Copenhagen, Christiania, and Stockholm—the death-rate averaged 18.2, and ranged from 17.3 in Copenhagen to 19.2 in Stockholm; the 45 deaths in Christiania, although only giving a death-rate of 18.8, included 10 from diphtheria and croup, and 4 from scarlet fever. In Paris, the death-rate was equal to 21.4, showing a decline from the rates in recent weeks; the deaths included 35 from diphtheria and croup, 23 from typhoid fever, 22 from measles, and 6 from small-pox. The 166 deaths in Brussels, of which 7 resulted from diphtheria and croup, and 5 from "fever," were equal to a rate of 19.8. In Geneva, the rate did not exceed 15.8, and no zymotic death was reported. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the mean death-rate was 21.7, the highest rate being 21.9 in Amsterdam, where 9 deaths resulted from diphtheria and croup. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 25.4, and ranged from 21.1 and 21.5 in Dresden and Berlin, to 31.1 in Buda-Pesth, and 31.2 in Trieste. Small-pox caused 17 deaths in Vienna and 11 in Buda-Pesth; diphtheria showed the greatest mortality in Berlin, Hamburg, Dresden, and Trieste. The death-rate averaged 25.3 in three of the principal Italian cities, and was equal to 21.1 in Turin, 25.1 in Rome, and 36.5 in Venice; small-pox caused 12 deaths in Venice, and typhoid fever 9 in Turin, 6 in Rome, and 3 in Venice. In four of the largest American cities, the mean recorded death-rate was only 19.2, the rates in the several cities ranging from 15.5 in Baltimore to 21.4 in New York. Diphtheria showed considerable mortality in each of these American cities; and typhoid fever caused 12 deaths in Brooklyn and 10 in Philadelphia.

It appears, from statistics published in the Registrar-General's return for the week ending December 26th, that the death-rate recently averaged 28.7 per 1,000 in the three principal Indian cities; it was 28.9 in Bombay, 27.9 in Calcutta, and 38.6 in Madras. Cholera caused 10 deaths in Calcutta, and diarrhoeal diseases 30 deaths in Calcutta, 31 in Bombay, and 55 in Madras; the mortality from "fever" was very excessive in each of these three Indian cities, but greatest in Madras. According to the most recently received weekly returns, the annual death-rate per 1,000 persons estimated to be living in twenty of the largest European cities averaged 25.1, and exceeded by 3.2 the mean rate during the week in the twenty-eight large English towns. The death-rate in St. Petersburg was 27.5, and showed a further increase upon the rates in recent weeks; the 490 deaths included 62 from diarrhoeal diseases, 22 from scarlet fever, and 18 from "fever." In three other northern cities—Copenhagen, Christiania, and Stockholm—the death-rate averaged 23.2, and ranged from 21.1 in Christiania to 24.2 in Copenhagen; the 52 deaths in Christiania included no fewer than 16 from diphtheria and croup, and 7 from scarlet-fever. In Paris, the death-rate was 23.5, showing an increase upon the rates in recent weeks; the deaths included 45 from diphtheria and croup, 60 from infantile diarrhoea, and 18 from typhoid fever. The 159 deaths in Brussels were equal to an annual rate of 18.9, and included 8 from diphtheria and croup. In Geneva the 26 deaths, of which 4 resulted from infantile diarrhoea, gave a rate of 19.0. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the mean death-rate was 26.3, the rates in the several cities being 23.9 in Rotterdam, 26.3 in the Hague, and 27.0 in Amsterdam; measles caused 18 deaths in Amsterdam, and diphtheria and croup 5 in the Hague, and 12 in Amsterdam. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 25.4, and ranged from 21.2 in Berlin and 22.2 in Dresden, to 30.5 in Prague, and 31.6 in Hamburg. Diphtheria (including croup) showed the greatest mortality in Hamburg, Buda-Pesth, and Berlin. Small-pox caused 11 deaths in Vienna, and 4 in Buda-Pesth. The mean death-rate in three of the principal Italian cities was 25.4, the rate being 23.1 in Turin, 25.1 in Rome, and 32.2 in Venice; small-pox caused 13 deaths in Venice, 2 in Rome, and 2 in Turin; the deaths referred to typhoid fever were 6 in Turin, 5 in Venice, and 4 in Rome. In four of the largest American cities, the recorded rate averaged only 19.6, and ranged from 17.5 in Baltimore to 21.8 in New York. The mortality from diphtheria was excessive in each of these American cities; and typhoid fever caused 15 deaths in Philadelphia and 8 in Brooklyn.

It appears, from the statistics published in the Registrar-General's return for the week ending January 2nd, that the annual death-rate recently averaged 28.7 per 1,000 in the three principal Indian cities; it was 28.9 in Bombay, 27.9 in Calcutta, and 38.6 in Madras. Diarrhoeal diseases caused 55 deaths in Madras, 31 in Bombay, and 30 in Calcutta, in addition to 10 fatal cases of cholera; "fever" mortality showed the largest excess in Calcutta and Madras. According to the most recently received weekly returns, the annual death-rate in twenty of the largest European cities averaged 25.1, and was slightly below the mean rate during the week in the twenty-eight large English towns. The death-rate in St. Petersburg was 27.3, and showed a slight decline from the rate in the previous week; the 485 deaths included 16 from scarlet fever, 11 from "fever," and 4 from small-pox. In three other northern cities—Copenhagen, Stockholm, and Christiania—the death-rate averaged only 18.6, the highest rate being 20.3 in Stockholm; the 44 deaths in Christiania, giving a death-rate of but 17.9, included 12 from diphtheria and croup, and 5 from scarlet fever. In Paris, the death-rate was 23.6, and scarcely differed from the rate in the previous week; 47 of the deaths resulted from diphtheria and croup, 37 from typhoid fever, and 13 from measles. The 150 deaths in Brussels were equal to a rate of 17.9. In Geneva the 29 deaths, of which 2 resulted from "fever," were equal to a rate of 21.2. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the mean death-rate was 23.9, the rates ranging from 18.1 in the Hague to 27.0 in Rotterdam; in Amsterdam, the deaths included 11 from measles and 8 from diphtheria and croup. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 27.1, and ranged from 21.2 in Berlin and 26.2 in Munich, to 32.2 in Hamburg, 33.7 in Prague, and 35.3 in Trieste. Small-pox caused 18 deaths in Vienna, and 13 in Buda-Pesth; diphtheria caused the greatest mortality in Berlin, Hamburg, and Dresden, and "fever" in Hamburg. The death-rate averaged 23.1 in three of the principal Italian cities, and was 17.6 in Turin, 24.0 in Rome, and 35.7 in Venice; small-pox caused 14 deaths in Venice and 3 in Rome; while 8 deaths from typhoid fever and 9 from diphtheria and croup occurred in Turin. In four of the largest American cities, the recorded rate did not average more than 19.6, and ranged from 16.9 in Baltimore to 22.3 in New York. Diphtheria caused 42 deaths in New York, 14 in Brooklyn, 11 in Baltimore, and 9 in Philadelphia; scarlet fever showed the greatest mortality in Brooklyn.

QUEEN'S COLLEGE, GALWAY.—The following scholarships have been awarded for the session 1885-6 in the Faculty of Medicine: Fourth year, Eaton W. Waters; third year, Henry Smith and J. Stewart; second year, Joseph Eldon and Joseph J. Loftus.

OBITUARY.

JAMES GORDON, M.D.

DR. JAMES GORDON, a well known and much respected practitioner in Old Aberdeen, died on December 23rd, aged 76. He was medical officer of the parish, and had also been Provost of Old Aberdeen. A man of kindly disposition, he was greatly esteemed in the community where he spent the greater part of his days. He took a keen interest in church matters, being a zealous member of the Free Church.

MEDICAL NEWS.

SOCIETY OF APOTHECARIES OF LONDON.—The following gentlemen passed the Examination in the Science and Practice of Medicine, Surgery, and Midwifery, and received certificates to practise, on Thursday, December 31st, 1885.

Christopherson, Cecil, Grove House, Blackheath.
Fellowes, William Edmund, Newcastle-on-Tyne.
Lyndon, Arnold, 186, Adelaide Road, South Hampstead.
Maloney, William Robert Nuttall, Melbourne, Australia.
Young, Charles Wheeler Forrest, 58, the Chase, Clapham Common.

The following passed the Examination in the Science and Practice of Medicine, and received certificates to practise.

Jowers, Reginald Francis, M.R.C.S., 27, Old Steyne, Brighton.
Simcock, George, Mile End, Landport.

MEDICAL VACANCIES.

The following vacancies are announced.

CHELSEA HOSPITAL FOR WOMEN.—Resident Medical Officer. Salary, £60. Applications by January 11th.
EVELINA HOSPITAL.—House-Surgeon and Surgeon for Out-patients. Salary, £70. Applications by January 28th.
FRENCH HOSPITAL AND DISPENSARY.—Qualified Resident Medical Officer. Salary, £60. Applications early in January.
GENERAL LYING-IN HOSPITAL, York Road, Lambeth.—House-Physician. Salary, £50 per annum. Applications by January 11th.
HALIFAX INFIRMARY.—Junior House-Surgeon. Salary, £50. Applications by January 11th.
NORTH-WEST LONDON HOSPITAL, Kentish Town Road.—Dental Surgeon. Applications by January 15th.
PARISH OF LOCHS, Island of Lewis.—Medical Officer. Salary, £150 per annum. Applications by February 1st.
SCARBOROUGH HOSPITAL AND DISPENSARY.—House-Surgeon. Salary, £80. Applications by January 18th.
STAFFORDSHIRE GENERAL INFIRMARY.—House-Surgeon and Secretary. Salary to commence, £100. Applications by January 20th.
THE QUEEN'S HOSPITAL, BIRMINGHAM.—Vacancies for offices of Physician for out-patients, and of Casualty Surgeon. Honorarium, £50. Applications before January 23rd.
WOLSTANTON AND BURSLEM UNION.—Medical Officer. Salary, £25. Applications by January 15th.

MEDICAL APPOINTMENTS.

BIDEN, Charles W., L.R.C.P.Lond., M.R.C.S.Eng., late House-Surgeon, appointed Resident Obstetrical Officer to Charing Cross Hospital, *vice* W. H. Haw, M.R.C.S.Eng.
FARRER, George A., M.R.C.S.Eng., of Brighouse, Yorkshire, appointed a Certifying Surgeon under the Factory and Workshops Act, *vice* Robert Farrar, M.R.C.S.Eng., M.R.C.P.Ed., resigned.
FOOKS, Henry, M.R.C.S.Eng., L.S.A.Lond., appointed House-Surgeon to Charing Cross Hospital, *vice* F. O. Stedman, M.R.C.S.Eng., L.S.A.
FREEMAN, C. Delamark, L.S.A.Lond., appointed House-Physician to Charing Cross Hospital, *vice* H. O. Grenfell, L.S.A.
HEWITT, Frederic W., B.A., M.B.Cantab., Anaesthetist to Charing Cross Hospital, appointed Assistant Anaesthetist to the Dental Hospital of London.
LYNES, John, M.R.C.S.Eng., L.S.A.Lond., appointed House-Surgeon to Charing Cross Hospital, *vice* C. W. Biden, L.R.C.P.Lond., M.R.C.S.Eng.
NORTON, R. R., L.R.C.P., M.R.C.S., appointed Medical Officer of Tottenham Edmonton Dispensary, *vice* J. Bunting, M.R.C.S., L.S.A., resigned.
STEDMAN, F. Osmund, M.R.C.S.Eng., L.S.A.Lond., late House-Surgeon, a House-Physician to Charing Cross Hospital, *vice* W. T. Wallington.
SYKES, E. J., M.D., C.M. Edin., appointed Medical Officer of Tottenham Edmonton Dispensary, *vice* J. Bunting, M.R.C.S., L.S.A., resigned.
WALTERS, F. Rufenacht, M.D., B.S.Lond., F.R.C.S.Eng., appointed Surgeon to the Westminster General Dispensary, *vice* Dr. J. H. resigned.

THE Middlesborough Guardians have increased the salary George Longbotham, the medical officer to the workhouse, from to £225 per annum.

BIRTHS, MARRIAGES, AND DEATHS.

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

MARRIAGES.

PESKETT-PESKETT.—On December 29th, 1885, at St. Mary's Church, Leyton, Essex, by the Rev. Alfred Peskett, M.D., assisted by the Rev. Charles Edmunds, Vicar-designate of All Saints, Arthur William Chalmers Peskett, M.A., M.B.Cantab., son of the late William Peskett, M.D. (Surgeon-Major, Indian Army) to Edith Jane, younger daughter of Alfred Peskett, M.D., Leyton, Essex.

TIDY-CORBETT.—At St. John's Church, Peshawur, on December 7th, 1885, by the Rev. Charles Gillmore, assisted by the Rev. Worthington Jukes, Major Arthur Grey Tidy, of the Dorsetshire Regiment, second son of the late General Thomas Holmes Tidy, to Ethel Cochrane, younger daughter of Deputy Surgeon-General W. H. Corbett, Medical Staff.

DEATHS.

HAZEL.—On January 3rd, at 71, Oakley Square, N.W., George Hazel, M.R.C.S.Eng., aged 64 years.

HILL.—On November 5th, at his residence, No. 2, Oxford Street, Oldham, Robert Bryden Hill, M.D., B.Sc.Edin., aged 32.

KING.—On January 2nd, suddenly, at No. 6, Albion Street, Hull, Kelburne King, M.D., F.R.C.S., Surgeon to the Hull Royal Infirmary.

PAGE.—At St. Ann's, Carlisle, on January 5th, 1886, William Bousfield Page, F.R.C.S., J.P. Cumberland, in his 69th year.

SCOTFIELD.—On January 2nd, at his residence, 19, Grosvenor Street, Bath, of angina pectoris, W. J. J. Scotfield, M.R.C.S., F.L.S., formerly of Birmingham, and recently of Hampstead, aged 56.

PHYSICAL EDUCATION AT HAWARDEN.—On December 31st, 1885, a lecture on "Healthful Exercises" was given in the Boys' School, Hawarden, to the members of the Hawarden Young Men's Society (of which the Rev. Stephen E. Gladstone, Rector of Hawarden, is the President), by Mr. Alexander, Director of the Liverpool Gymnasium. Mr. H. J. Gladstone, M.P., presided; and the company included the Right. Hon. W. E. Gladstone, M.P., and Mrs. Gladstone, and several members of the family; the Rev. E. C. Wickham, Head Master of Wellington College; etc. The lecturer delivered a short address, in which he contrasted the education given in English and Continental schools. Dwelling on the benefits of a thorough gymnastic training, he advocated the use of very light apparatus, as tending to more effectually develop the trunk of the body; and deprecated overdevelopment of the limbs, as taught by the foreign systems. He alluded to the influence of physical training upon the national character, and urged that it should have a place in our system. The various systems were ably represented by the lecturer's pupils, with vocal and instrumental accompaniments. At one point, the lecturer demonstrated the strength of the fingers by raising his body from the ground by a suspended ring until level with the chin, and also the still more surprising feat of raising and holding the body in a horizontal position by the aid of one finger alone. The chairman, in proposing a vote of thanks, alluded to the benefits that he had received from his gymnastic training at Oxford. Mr. W. E. Gladstone personally thanked Mr. Alexander for his interesting lecture, and alluded to the interest which he felt in anything that pertained to the physical well-being of the community.

AMBULANCE TEACHING IN COLLIERY DISTRICTS.—Attention is called by Surgeon-Major Hutton to the necessity of having at every colliery an ambulance class for instruction in first aid to the injured. In a letter which he has addressed to the daily press, calling attention to the fact that at the Taylor Pit, near Wigan, which on Tuesday last was the scene of a serious colliery explosion, many of the workmen had attended the classes of the St. John Ambulance Association, and were able to render useful and valuable assistance in the way of dressing the burns, and rendering the poor fellows comfortable until the arrival of the medical men. This want becomes the more apparent when it is considered that in ten years ending with 1884, out of 11,165 deaths that occurred, 2,562 were due to explosions, while 4,532 were due to falls of roofs and sides, and 4,021 to other causes.

HOW TO TAKE A PILL.—It is very common for patients, especially women, to say that they cannot swallow pills, as they "go the wrong way," or "stick in their throat." A useful suggestion has been made by Dr. Samuel E. Wells, of Maryland, U.S.A., who observes that the common habit of throwing the head backward, and endeavouring to swallow the pill in that position, is often accountable for the difficulty; for if, while eating food, the head is thrown back, some difficulty in swallowing will be experienced. He therefore directs patients, when swallowing a pill, to look downwards—for instance, to keep the eyes fixed on the toes; and he finds that this simple manœuvre is commonly attended with success.

LONDON SANITARY PROTECTION ASSOCIATION.—At a meeting of the Council of this Association, held last Friday at their offices, 1, Adam Street, Adelphi, Mr. E. B. Ellice Clark, M.Inst.C.E., was appointed Consulting Engineer to the Association, in succession to the late Professor Fleming Jenkin. The Association, which has been in existence now five years, consists of more than 1,000 members, amongst its numbers being many of our most eminent surgeons and physicians, and by no means a small sprinkling of well known engineers and architects. Each member has the sanitary arrangements of his house carefully examined and tested by one of the Associations' engineers at frequent intervals.

FISHERMENS' VIEW OF RIVER POLLUTION.—The conservators of the Yorkshire Fishery District, in their annual report, state that it is patent and notorious that all our large rivers are becoming more and more the sewers of every description of pollution, and the evil will never be remedied until the health of the population dwelling on its banks is seriously affected by the miasma. They trust that the new Parliament about to assemble will shortly give attention to the adoption of such measures as will tend materially to lessen the evils of river pollution.

DONATIONS AND BEQUESTS.—The London Temperance Hospital has received £500 from a benefactor whose name is not given, "instead of a legacy."—Dr. William Augustus Guy has bequeathed £250, and a moiety of the "residue" of his real and personal estate after the death of his wife, to the King's College Hospital Convalescent Institution, and £250 to King's College Hospital.—The Norfolk and Norwich Hospital has received £100 under the will of Mr. Robert Edwards Butcher.—Mrs. West Braman has given £50 to the Kent County Ophthalmic Hospital, Maidstone.

FLATULENT DISTENSION.—Dr. Wands, of Indianapolis, states that he has found the following simple mixture, originally recommended by Dr. Brown, and highly praised by Dr. Charles D. Meigs, very useful in flatulent distension, after abdominal operations. One ounce of manna and one drachm of aniseed, infused in eight fluid ounces of water; the infusion, after standing for half an hour, is strained, and four drachms of carbonate of magnesia added. A wineglassful of the mixture is ordered to be taken every three hours until the bowels act.

REMOVAL OF A BROKEN PESSARY.—A woman having broken a glass pessary in the vagina, and a severe vaginitis having been set up by the fragments comminuted by the efforts at removal, Dr. Lewis (*Coll. and Clin. Record*, U.S.A.), threw into the vagina, by means of a syringe, a mixture of plaster-of-Paris, and after two or three days removed the mass, the solidified mixture having fixed in it the various pieces of glass.

UNIVERSITY OF CORDOVA.—The following appointments have been made to the new Free University of Cordova:—*Rector*: Don Angel de Torres. *General Secretary*: Don José Calderon. *Dean of the Faculty of Medicine*: Don Leon Torrellas. *Secretary*: Don Manuel Lopez Comas. *Dean of the Faculty of Pharmacy*: Don F. de Borja Pavon. *Secretary*: Don Enrique Villegas.

TREATMENT OF THE PAROXYSMS OF WHOOPING-COUGH.—To cut short the paroxysm in whooping-cough, Professor Da Costa recommends the inhalation of—R Sodii bromidi, gr. xx; ext. belladonnae fluidi gtt. ij. The spray to be inhaled just prior to occurrence of the paroxysm. In the interval, quinine should be pushed up to the point of tolerance.

IN MEMORIAM.—Old patients and friends have raised a memorial to the late Mr. W. Ebdon, of Haughley, Suffolk, who died in 1884, by recasting the tenor bell of the church, at an expense of about £30. In addition to the old inscription, the following has been added:—"This bell was recast in memory of W. Ebdon, surgeon, forty-three years resident in this parish."

PUERPERAL ANTISEPSIS.—The subject chosen by the last-elected member of the Barcelona Medical and Chirurgical Academy, for his inaugural discourse, was Puerperal Antisepsis. The substances he advises are bichloride of mercury, sulphate of copper, oxygenated water, and carbolic acid. In addition to these, he mentions biniodide of mercury, which he thinks likely, on further trial, to prove the most efficacious of all.

MEDICAL MAGISTRATES.—Mr. Howel Rees, of Cwmanman, Carmarthenshire, has been placed on the Commission of the Peace for the county of Glamorgan.—Mr. Robert N. Robson, M.R.C.S.Eng., has been placed on the Commission of the Peace for the city of Durham.

OPERATION DAYS AT THE LONDON HOSPITALS.

MONDAY.....	10.30 A.M.: Royal London Ophthalmic.—1.30 P.M.: Guy's (Ophthalmic Department); and Royal Westminster Ophthalmic.—2 P.M.: Metropolitan Free; St. Mark's; Central London Ophthalmic; Royal Orthopaedic; and Hospital for Women.—2.30 P.M.: Chelsea Hospital for Women.
TUESDAY	9 A.M.: St. Mary's (Ophthalmic Department).—10.30 A.M.: Royal London Ophthalmic.—1.30 P.M.: Guy's; St. Bartholomew's (Ophthalmic Department); Royal Westminster Ophthalmic.—2 P.M.: Westminster; St. Mark's; Central London Ophthalmic.—2.30 P.M.: West London; Cancer Hospital, Brompton.—4 P.M.: St. Thomas's (Ophthalmic Department).
WEDNESDAY ..	10 A.M.: National Orthopaedic.—10.30 A.M.: Royal London Ophthalmic.—1 P.M.: Middlesex.—1.30 P.M.: St. Bartholomew's; St. Mary's; St. Thomas's; Royal Westminster Ophthalmic.—2 P.M.: London; University College; Westminster; Great Northern Central; Central London Ophthalmic.—2.30 P.M.: Samaritan Free Hospital for Women and Children; St. Peter's.—3 to 4 P.M.: King's College.
THURSDAY	10.30 A.M.: Royal London Ophthalmic.—1 P.M.: St. George's.—1.30 P.M.: St. Bartholomew's (Ophthalmic Department); Guy's (Ophthalmic Department); Royal Westminster Ophthalmic.—2 P.M.: Charing Cross; London; Central London Ophthalmic; Hospital for Diseases of the Throat; Hospital for Women.—2.30 P.M.: North-west London; Chelsea Hospital for Women.
FRIDAY	9 A.M.: St. Mary's (Ophthalmic Department).—10.30 A.M.: Royal London Ophthalmic.—1.15 P.M.: St. George's (Ophthalmic Department).—1.30 P.M.: Guy's; Royal Westminster Ophthalmic.—2 P.M.: King's College; St. Thomas's (Ophthalmic Department); Central London Ophthalmic; Royal South London Ophthalmic; East London Hospital for Children.—2.30 P.M.: West London.
SATURDAY	9 A.M.: Royal Free.—10.30 A.M.: Royal London Ophthalmic.—1 P.M.: King's College.—1.30 P.M.: St. Bartholomew's; St. Thomas's; Royal Westminster Ophthalmic.—2 P.M.: Charing Cross; London; Middlesex; Royal Free; Central London Ophthalmic.—2.30 P.M.: Cancer Hospital, Brompton.

HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

CHARING CROSS.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; Skin, M. Th., 1.30; Dental, M. W. F., 9.

GUY'S.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. 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., 3; 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. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopaedic, M., 2.30; 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; 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., 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; Obstetrics, 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. C., 9.15.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8.30 P.M. Clinical Evening. Living Specimens at 8 o'clock. Mr. A. Boyce Barrow: Cases of Varicocele treated by Excision. Dr. Isambard Owen: Case of Recovery from Albuminoid Disease. Dr. C. E. Beevor: Cases of Athetosis. Mr. Walter Pye: Case of Diffuse Lipoma.—Odontological Society of Great Britain, 8 P.M. Casual communications by Messrs. Field, A. S. Underwood, S. J. Hutchinson, and D. Hepburn. President's Valedictory Address.

TUESDAY.—Royal Medical and Chirurgical Society, 8.30 P.M. Mr. Gostling: On the Increase in Number of White Corpuscles in the Blood in Inflammation, especially in those Cases accompanied by Suppuration. Dr. Mitchell Bruce and Mr. Bellamy: On a Case of Removal of a Tumour from the Roots of the last Cervical and first Dorsal Nerves.

WEDNESDAY.—Obstetrical Society of London, 8 P.M. Specimens will be shown by Dr. John Phillips and others. Dr. Hernan: On the Production of the Shape of the Oblique Pelvis of Naegele. Dr. Braithwaite: A Case of Extra-uterine Gestation treated by Laparotomy, in which the Placenta never came away. Mr. Knowles Thornton: A Case of Removal of both Ovaries during Pregnancy. Dr. Lewers: A Case of Circumscribed Sarcoma of Uterus and Vagina.—Epidemiological Society of London, 8 P.M. Discussion on Dr. Edwards's paper on the Report of the German Vaccination

Commission.—Royal Microscopical Society, 8 P.M. Mr. G. F. Dowdeswell On the Microbe of Chicken-Cholera. Mr. A. H. Bennett: Fresh-Water Algae of the Lake-District. Mr. J. W. Stephenson: On Central and Oblique Light in Resolution.—Hunterian-Society, 8 P.M. Dr. Stephen Mackenzie: On Tetany. Dr. Carrington: Cases illustrating the Treatment of some of the Complications of Acute Rheumatism.

FRIDAY.—Society of Medical Officers of Health, 7.30 P.M. Dr. Swete: The Suction of Sewer-Gas into the Water-Supply a Fertile Cause of Enteric Fever.

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.

BAD DEBTS.

SIR,—The grievance ventilated by "Victimised," in the JOURNAL of December 10th, must be felt more or less by every general practitioner, in whatever class of society his practice may lie; and, accordingly, it is the interest of every one to attempt to find a remedy.

There undoubtedly exists, in every rank of society, a certain number of people who systematically attempt to evade payment for medical attendance; generally by changing their medical attendant when they have incurred considerable liabilities to him; sometimes, especially in London and other large towns, by changing their residence to another district, and leaving no address at which they may be found.

In some cases, there can be no valid objection to summoning such persons for the debt in the county court, a process which can be adopted at no great cost, and with very little personal trouble, by means of an agent. In others, when for various reasons such a procedure may be inadvisable, one must fall back upon the help of one's brother practitioners in organising some united action. The scheme of an association for the whole of London, with a committee to inquire into individual cases, seems to be rather cumbersome, and probably rather expensive. A more effective method seems to me to be the formation of local associations for different districts in London and throughout England. Each association would embrace all the practitioners willing to join it in the district; and, as the cost would be very little, and every one would benefit by the action of the association, there would be no reason why every practitioner in each district should not become a member. Each local association would have as secretary one of its members; and it would be the duty of each member to forward to the secretary every quarter, or every half year, the names and addresses of every person in the district whom he considered a defaulter to himself. Every quarter or half year the secretary would collate, and print for private circulation among the members, the names and addresses of defaulting residents, with the name of the practitioner to whom such person was indebted; and every member would undertake not to attend professionally any person who was a defaulter in respect of any other member. To avoid unpleasantness, every communication to such persons would be made officially through the secretary; and there might be a committee to whom defaulters could appeal if they desired. The cost of administering such an association would be very small; it would be limited to the printing, quarterly or half yearly, of a list of names and addresses, and a certain amount of stationery and stamps; which, divided among all the members, would mean a very small annual subscription. And, if well administered, it would conduce largely to the entire abolition of bad debts. Of course, the scheme is only traced in outline in this letter, but there would be no difficulty in filling in the details of the working of such associations; in London, some method of interchange between the different associations would be necessary.—I am, yours, etc,

ALBERT WESTLAND.

Belsize Park, N.W.

A CENTENARIAN.

SIR,—The following instance of extreme old age may interest some of your readers. On November 9th last, died H. P., said to be 109 years of age by his wife's children; and when registering the death, his granddaughter insisted that age being entered. However, in several conversations which I had with the old man, he invariably stated that he was just 18 years of age; of the great rebellion, namely, 1798. This would bring his age 88 years exactly.

The old man retained all his faculties to the last; and, though the last two years of his life, proudly boasted that he had a ounce of "doctor's medicine" in his life. That H. P. was a ordinary vitality is proved by the following fact. Twenty years younger of 85 or so, whilst returning home one winter evening he was set upon and beaten by some rowdies, and left lying on his back, his head being so frozen to the road that it had to be cut off. This terrible exposure did not cause him any subsequent inconvenience; according to his own statement, he went about his work as usual, nothing had happened. Strange to say, he had not a grey hair on his head, etc.,

Sunnymount, Whitecross, County Armagh.

A. G. Y.

DR. IMLACH'S CASE OF PREGNANCY IN DOUBLE UTERUS.

SIR,—As the patient with pregnancy and double uterus on whom Dr. Imlach performed hysterectomy with such signal success was sent into hospital by me, and I assisted at the operation, I think it my duty to protest against Dr. Steele's criticism which you published on November 14th. Dr. Steele admits that he was not present at the operation. He must also admit that he received an invitation, and that it was his duty to have been present. It is easier to play the part of candid critic after the event than to assist in the work of the hospital, but even that part should be played fairly.

While the patient was under my care, I became convinced by careful examination that natural labour was an impossibility, for the pelvis was completely blocked by an immovable tumour, and the cervix was beyond reach. My opinion was that the obstruction was a fibroid tumour, and I placed her under the care of Dr. Imlach, fully expecting that Porro's operation was necessary, and for the diagnosis to be further confirmed by more than myself. In consultation, Dr. Imlach, without disagreeing with my diagnosis, said that we should not exclude the possibility of the tumour being a dermoid ovarian cyst pressed down into the pelvis; with this probability I acquiesced. I may here add that all those who were present at the operation agree with me that Dr. Imlach's account published in the JOURNAL of October 10th is fair and accurate. The case was not "mistaken as one for ovariectomy," and the suggestion that "hysterectomy might have been resorted to on a subsequent occasion" was not needed, as Dr. Imlach performed it to prevent a fatal termination by hæmorrhage or septicæmia.—Yours faithfully,

JOHN BUTLER EDIS,
Honorary Assistant Surgeon, Hospital for Women,
Liverpool.

169, Islington, Liverpool.

PURE TEREbene.

SIR,—Any scale into which Dr. Murrell, as a therapist, throws the weight of his authority, deserves professional attention. I have used pure terebene pretty freely for two years at least, and, from my experience, my opinion of its value corresponds almost exactly with Dr. Murrell's. Year after year only adds to my belief that, in giving opiates for cough, etc., we are adhering to a barbarism in medical art, the like of which we have often thrown aside in other diseases during recent years.

Dr. Bond, at page 1184, tries to entangle his "patent terebene," wherein there is much untransformed oil of turpentine, with pure terebene; but, for medical purposes, I would strongly counsel the use of the latter and not the former. In phthisical diarrhoea, and in some cases of dysentery, the impure terebene seems to me (perhaps from its astringency), preferable. In pharyngeal, in laryngeal, and in several thoracic troubles, I use terebene as a "dry" inhalation. As its volatility is almost equalled by that of encalyptol, I usually combine the two, for no other reason than the hope that one may confound an enemy against which the other may be powerless.

As humanity dislikes being muzzled with inhalers, London dog fashion, throughout daytime, this remedy by my plan is at work chiefly when the patient is in bed. A square foot of Gamgee absorbent-cotton is placed upon the reversed portion of the bed-coverings, or at the edge of the pillow; upon this two or three teaspoonfuls of the mixture are sprinkled on retiring, and repeated when necessary. The repetition is, however, seldom required, except in cases of severity, before early morn. The patient, by this mode, is in no ways hampered; he is constantly inhaling a stimulating expectorant with an agreeable balsamic odour; above all, he is always in a fairly aseptic atmosphere. In no ailment is terebene more obviously beneficial than in phthisical dyspnoea, though, of course, towards the end of some cases nothing avails, not even nitrite of amyl capsules.

We are told that carbolic acid does not volatilise freely. That may be; nevertheless, for the requirements of the physician it is, as a dry inhalation, of noticeable service. Let me, to give point to this fact, cite a case.

Last year I attended a man who was suffering severely from bronchiectasis. The malodorous atmosphere of his bedroom was unbearable. One tablespoonful of carbolic acid was poured every six hours upon gauze-cotton, which was placed on the floor at his bedside. In a short time his attendant ceased complaining, his friends visited him freely, and he began to regain condition and strength.—Yours faithfully,

The Bar House, Beverley.

LIPPITUDO.

A CORRESPONDENT, in a recent number of the JOURNAL, asks advice as to the treatment of ophthalmia tarsi, the lippitudo of old writers. The plan I have found most useful in chronic cases, and also in granular lids of long standing, is to evert the lids and scarify the lining membrane very thoroughly with a sharp lancet.

For the succeeding twenty-four hours, they should be bathed frequently with a weak lotion of boroglyceride and water (1 drachm to 2 ounces), after which it is well either to blow on to the diseased surface a little very finely levigated alum daily, or to paint the lids every night with a little of the yellow oxide of mercury ointment (3 grains to 3 drachms), using benzoated lard in preference to vaseline, which often irritates. On no account apply nitrate of silver, and avoid tobacco-smoking. Ophthalmia tarsi, or blepharitis, usually begins as eczema, and when at the commencement should be treated as such; but even these recent cases are generally benefited by copious and frequent bathing with warm water and boroglyceride. When the lids are granular, they should, after free scarification, be gently rubbed once a day with the mitigated sulphate of copper; and, of course, in every case, all irritating eyelashes should be carefully pulled out.

Last year, I had a particularly obstinate case of granular lids in a young Chinese lady, the result of purulent ophthalmia (to which Eastern races are extremely prone), which readily yielded to the above plan, after having for long resisted all other treatment. I need hardly add that there is nothing original in the course suggested, but I imagine, from your correspondent's letter, that it is not universally known.—I am, etc.,

CHARLES E. FITZGERALD, M.D.

Folkestone.

ERRATA.

In the JOURNAL for January 2nd, page 10, column 2, line 25, omit "were," between "its valves," and "closed." In line 40 read "endothelial lining."

A B C.—We see no reason for not charging ordinary fees.

POPULAR PHYSIOLOGY OF THE EYE.

INQUIRER.—Huxley's *Physiology*, published by Macmillan; Helmholtz's *Scientific Essays*, published by Longman; an Address by Sir H. Acland, republished privately.

ANALYSIS OF DRINKING-WATER.

SIR,—Your correspondent, Mr. A. P. Smith, in the JOURNAL of January 2nd, does not state if he wishes for the name of the best work on quantitative or qualitative analysis. If the latter, he will, I think, find all he requires from page 163 to 172 of Wilson's *Handbook of Hygiene*, fourth edition, J. and A. Churchill. For quantitative analysis, he will find Wanklyn's text-book on water-analysis necessary. I may add that the cost of apparatus, etc., for a complete quantitative analysis would be from £15 to £20.—I am, sir, yours truly,

C. E. ABBOTT, M. O. H. Braintree Rural District.

Noel House, Braintree, Essex.

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

Mr. C. E. Abbott, Braintree; Dr. J. Morton, Glasgow; Mr. A. Teevan, Melbourne; Mr. P. Boobyer, Nottingham; Mr. R. F. Owen, Liverpool; Mr. H. J. Manning, Salisbury; Dr. Norman Kerr, London; Mr. W. Thwaites, Bristol; Dr. W. H. White, London; Mr. G. Houlton Bishop, London; Mr. R. L. Swan, Dublin; Our Glasgow Correspondent; Mrs. R. B. Hill, Oldham; Our Aberdeen Correspondent; Dr. Herman, London; Mr. Symonds, London; Dr. Tatham, Salford; Dr. R. Savage, London; Our Dublin Correspondent; Dr. R. T. Cooper, London; Dr. Grant Bey, Cairo; Mr. J. Marshall Lamb, Kudat, North Borneo; Dr. Suckling, Birmingham; Dr. J. W. Langmore, London; Mr. C. G. Wheelhouse, Leeds; Dr. Haughton, London; Mr. Brown, Ealing; Mr. A. Alexander, Liverpool; Mr. Somers, Ratholowney, Ireland; Dr. S. Hamill, Norfolk; Mr. T. B. Moffit, Netley; Mr. J. Pranker, Bath; Mr. Cresswell Rich, Liverpool; Dr. Leslie Phillips, Birmingham; Dr. Bradley, Dudley; Mr. W. Brenton, Adelaide, South Australia; Mr. G. Wasse, North Tawton; Mr. R. Fitzroy Benham, London; Mr. Morratt Baker, London; Mr. G. Buckstone Browne, London; Mr. Carter, Cambridge; Mr. P. W. MacDonald, Dorchester; Mr. J. H. Crocker, Patricroft; Mr. Skene Keith, Edinburgh; Mr. J. W. Jeram, Cosham; Dr. C. Haig-Brown, Godalming; Mr. J. Oliver, London; Sir E. Lechmere, London; Dr. J. H. Thompson, Rome; Mr. W. Allard, Tewkesbury; Mr. E. Atkinson, Leeds; Dr. J. J. Bailey, Marple; Mr. Shirley Murphy, London; Mr. J. M. Booth, Aberdeen; Dr. J. Lindsay Porteous, Kirkcaldy; Dr. Maxwell, Woolwich; Dr. Kingsbury, Blackpool; Mr. Dodd, Tredegar; Dr. D. A. D. Monté, London; Mr. Bateman, York; Mr. C. W. Biden, London; Mr. H. Tomkins, Leicester; Mr. F. Page, Newcastle-upon-Tyne; Messrs. Lane and Brimacombe, Brighton; Mr. G. A. Farrer, Brighouse; Mr. Gascoin, Caerleon; Mr. R. Woodhouse, London; Mr. J. West, London; Dr. E. Seaton, London; Mr. J. Bryden, Hawick; Mr. Davies, Tenby; Dr. Barnardo, London; Mr. P. H. Dawkins, Henley-on-Thames; Dr. J. W. Moore, Dublin; Dr. E. Sykes, Tottenham; The Secretary of the Royal Medical and Chirurgical Society, London; Mr. G. F. Elliott, Hull; Mr. A. De W. Baker, Dawlish; Mr. S. Edwards, London; Our Edinburgh Correspondent; Our Paris Correspondent.

BOOKS, ETC., RECEIVED.

The Medicines and Medicinal Agents of the British Pharmacopœia, 1885, with the Doses and Notes for the Information of Prescribers. By Clay and Abraham, Pharmaceutical Chemists. Liverpool: W. H. Syermain. 1885.

Transactions of the Sanitary Institute of Great Britain. Vol. V. Congress at Glasgow, 1883-84. London: Office of the Sanitary Institute, and W. E. Stanford. 1885.

Cassell's National Library; Warren Hastings. By Lord Macaulay. London, Paris, and New York: Cassell and Co. 1885.

An Introduction to Practical Bacteriology. Based upon the Methods of Koch. By Edgar M. Crookshank. London: H. K. Lewis. 1886.

The Field and Limitation of the Operative Surgery of the Human Brain. By J. B. Roberts, M.D. Philadelphia: Blakiston and Co. 1885.

Reaction of the Substances. By F. J. M. Page. London: H. K. Lewis. 1886.

Transactions of the American Surgical Association. Vol. III. Edited by J. Ewing Mears, M.D. Philadelphia: Blakiston and Co. 1885.

The Light of Life; or, the Secrets of Vegetable and Animal Development. Edited by Joseph John Kain. First Edition. London: Wyrman and Sons. 1885.

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