

son is not destitute, either wholly or to the extent referred to, that it devolves upon the sanitary authority to deal with the case. However, if hospital provision has to be made, it is preferable that this should be undertaken by the sanitary authority, the guardians of the poor paying the sanitary authority for the maintenance of all patients for which they (as guardians) are responsible. A charge of twenty-five shillings per week each patient is held to be reasonable. Your sub-committee recommend: (1.) That local sanitary authorities be advised that the first and most important precautions against the infection of cholera are such measures as may be found necessary to insure cleanliness, a pure water-supply, and efficient drainage. (2.) That sanitary authorities, poor-law authorities, and infirmary authorities, should together provide sufficient hospital accommodation; and terms be agreed upon beforehand, so that, when admission is sought for a patient, there may be no delay caused by disputes as to who is liable for maintenance charges. (3.) That when the sanitary authority and poor-law authority are different boards, the sanitary authority should undertake the duty of making provision, temporary or otherwise, for the treatment of cholera patients, and receive pauper-patients at a charge to be agreed upon. (4.) That the sanitary authorities represented at the conference be requested to obtain sites, and make arrangements for hospitals, huts, or tents suitable for the reception and treatment of cholera-patients, to be erected in case of need. (5.) Authorities should provide sufficient ambulance accommodation, medical attendance, nursing, medicine, and medical comforts. Lists of the ambulance-stations, of the addresses of medical men volunteering for the cholera-service, and of competent nurses, should be supplied to the local justices, the police, relieving officers, etc. (6.) That sanitary authorities should provide houses of detention for the temporary lodging of persons apparently in health who may be removed from houses in which cholera has appeared, such persons to be maintained by the sanitary authority for so long as it may be deemed desirable to keep them under supervision. (7.) That all common lodging-houses and tenements occupied by tramps and vagrants, should be systematically and regularly inspected, and the keepers of the same instructed to report immediately to the sanitary authority any case of suspected cholera. (8.) That initial cases of suspected cholera be made the subject of investigation at a biological laboratory; also that inquiries be made of some of the teachers of biology and pathology in the principal medical schools in the kingdom, as to whether they would be prepared to instruct medical officers of health in Koch's method of examining water, cholera discharges, etc., and the time required for such course of instruction; also that inquiries be made if any of the said teachers would be prepared to receive samples of water and cholera discharges for examination at their laboratories, and the cost of examining and reporting on the same.

Dr. A. RANSOME moved that the report be adopted and circulated.—Dr. J. MARTIN seconded the resolution, and it was passed.

On the motion of Dr. J. TATHAM, seconded by Mr. ARMISTEAD, the Subcommittee was reappointed, with instructions to call a meeting of the General Committee in the event of any special need arising for combined action in respect of cholera precautions.

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 14th day of April next, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary.*

161A, Strand, March 25th, 1886.

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 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,
THE VALUE OF HAMAMELIS.

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 as early as possible, as the printing of the Tables is in progress.

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.

A general inquiry into THE THERAPEUTIC VALUE OF HAMAMELIS has now been issued. A report will be made to the Section of Therapeutics in the annual meeting.

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. Arrangements have also been entered into with the Section of Medicine of the Annual Meeting of 1886 to hold a discussion upon "Cases in which Disease of the Heart-Valves has been known to exist for upwards of five years without causing serious symptoms;" and with the Section of Public Health to hold a discussion on "The Duration of Infectiousness." The former discussion will be opened by Sir Andrew Clark, Bart., the latter by Mr. Arthur Ransome. The inquiry-papers, to be subsequently issued, will be based upon the information afforded in these Branch and general discussions.

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.

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.

WEST SOMERSET BRANCH.—The spring meeting of this Branch will be held at the Railway Hotel, Taunton, on Thursday, April 15th, at 5 o'clock; dinner at 5.30. Discussion: Do you consider the Antiseptic Dressing of Wounds Advantageous in Country Practice? Election of a representative of the Branch on the Council.—W. M. KELLY, M.D., Honorary Secretary, Taunton.

BORDER COUNTIES BRANCH.—The spring meeting will be held at the Commercial Hotel, Dumfries, on Friday, April 9th. The chair will be taken by the President at 3 P.M. Dr. Thomson, of Dumfries, will introduce a discussion on Brain-Surgery. Dr. Campbell Garland will read notes of Four Abdominal Cases of interest. Dr. Eaton (Cleator Moor) will read Illustrations of the Origin of certain Zymotic Diseases in an isolated house. Intimations of papers and specimens should be sent to the undersigned. Dinner at the hotel, 5s. a head, at 6 P.M.—HENRY A. LEDIARD, Honorary Secretary, 41, Lowther Street, Carlisle.

NORTH OF ENGLAND BRANCH.—The spring meeting will be held at Roker, on Wednesday, April 21st. Members intending to read papers, show specimens, etc., are requested to communicate with the Honorary Secretary (Dr. DRUMMOND, Newcastle-on-Tyne) as early as possible.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.—The spring meeting of this Branch will be held at Carmarthen, on Wednesday, April 21st next. Members wishing to join the Branch should send in nomination papers by the end of March. Members desirous of reading papers, etc., should send titles to one of the Honorary Secretaries. Further particulars in circulars. Signed, A. SHEEN, M.D., Cardiff; D. ARTHUR DAVIES, M.B., Swansea, Honorary Secretaries.

METROPOLITAN COUNTIES BRANCH : EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will be held at the Hackney Town Hall, on Thursday, April 15th, at 8.30 P.M. Photographs of a Case of Myxedema will be exhibited by Mr. C. R. Walker. A paper on the "Byways of Rheumatism," will be read by Thomas Barlow, M.D., F.R.C.P.—J. W. HUNT, 101, Queen's Road, Dalston, Honorary Secretary.

SOUTH-EASTERN BRANCH.—Notice to Members. Allow me to remind the members of this Branch, "That candidates for the office of representative of the Branch at the Council of the Association, should be nominated, by any two members of the Branch, before April 15th, and their names sent to the Honorary Secretary, who shall issue voting papers to the members of the Branch, who shall then vote for any of the nominated members." The Branch is at present entitled to three representatives, one for each county comprised in the Branch; namely, Kent, Surrey and Sussex.—CHARLES PARSONS, M.D., Honorary Secretary.

SOUTH-EASTERN BRANCH : WEST KENT DISTRICT.—The next meeting of this District will take place at Erith on Friday, April 30th; F. Spurrell, Esq., in the chair. Gentlemen desirous of reading papers or exhibiting specimens are requested to inform the Honorary Secretary of the District, A. W. NANKIVELL, F.R.C.S., St. Bartholomew's Hospital, Chatham, not later than April 15th.

SOUTHERN BRANCH : SOUTH-EAST HANTS DISTRICT MEDICAL SOCIETY.—An ordinary meeting will be held at the Grosvenor Hotel, Queen's Gate, Southsea, on Wednesday, April 7th. The chair will be taken by the President, Surgeon-General J. Lamprey, M.B., at 4 P.M. *Agenda*: 1. Statement of Accounts. 2. Election of Officers. 3. Living Specimens. 4. Pathological Specimens by Surgeon-Major W. Morton Harman, M.B., Dr. C. C. Claremont, Mr. G. H. Snowden, and Mr. P. H. Gardner. 5. Remarks on Hydrocephalus: the President. 6. Microscopic Sections: Dr. F. J. Driver. 7. Case of Monster: Dr. Axford. 8. New Pressure and Torsion-Forceps: Dr. Ward Cousins. Gentlemen who are desirous of introducing patients, exhibiting pathological specimens, or making communications, are requested to signify their intention at once to the Honorary Secretary. Dinner will be provided at 6.30 P.M. Charge 5s., exclusive of wine, etc.—J. WARD COUSINS, Honorary Secretary.

OXFORD AND DISTRICT BRANCH.—The next meeting will be held at the Radcliffe Infirmary, Oxford, in the afternoon of Wednesday, April 28th. Members are asked to send to the Honorary Secretaries notice of any business, cases, or papers, or candidates for election, on or before Monday, April 19th. Advantage will be taken of the meeting to present Dr. Tuckwell with a testimonial. There will be a dinner at 5s. a head (exclusive of wine) after the meeting.—Honorary Secretaries, Dr. DARBLISHIRE, W. L. MORGAN, Esq., Oxford.

STAFFORDSHIRE BRANCH : GENERAL MEETING.—The second general meeting of this session was held at the North-Western Railway Hotel, Stafford, on Thursday, February 25th, 1886: present, Mr. J. T. HARTILL, President, in the chair, and twenty members.

Communications from Secretary.—Mr. VINCENT JACKSON informed the meeting that, in connection with the Collective Investigation Committee, and on behalf of the International Medical Congress, he had sent to each member a circular in which information was requested upon the frequency of the following diseases in the various districts in which the members lived: namely, Rickets, Acute Rheumatism, Chorea, Cancer, and Urinary Calculus. A slip advocating the claims of the Medical Sickness, Annuity, and Life-Assurance Society had also been posted to every member. A letter from the East Anglian Branch was read, and a resolution they submitted for the consideration of the Staffordshire Branch was, upon the proposition of Dr. ARLIDGE, unanimously agreed to.

New Members.—The following members of the Association were balloted for as members of the Branch: Dr. J. C. Waddell, Longton; Dr. A. Exham, Market Drayton; Mr. W. F. Fletcher, Uttoxeter; Mr. Gosse, Eccleshall; Mr. J. Kenny, Leek; Mr. A. V. Griffiths, Fenton; Dr. A. Macindoe, Willoughbridge, Market Drayton; Mr. T. Ridley Bailey, Bilston; Mr. C. R. Bamford, Uttoxeter; Dr. E. J. Leapingwell, Butler's Hill, Cheadle; Dr. F. Miles Blumer, Stafford.

The Royal Medical Benevolent College.—A letter from the Secretary of the above mentioned College was read, acknowledging the receipt of a donation of five guineas; and stating that, by giving five guineas more, votes for life would be conferred on some named individual, or votes for twenty years, to be exercised by any office-bearer of the Branch for the time being. It was resolved: That the donation to the Royal Medical Benevolent College, Epsom, be increased to ten guineas.

Hare-Lip : Strong Family-History.—Dr. E. T. TYLECOTE showed a male infant, six months old, suffering from double hare-lip, and cleft hard and soft palate. The resulting deformity gave the infant a most repulsive appearance. Dr. Tylecote narrated a family-history of both parents, carefully prepared. No other deformity had been known on either side; but this was the second child suffering from hare-lip. The mother stated that, when not more than six weeks advanced in pregnancy with the first child thus deformed, she received a severe mental shock through seeing a man disfigured by hare-lip. Dr. Tylecote, however, ascertained that her father had three first cousins,

brothers, each having this deformity. The first five children of the same parents were living, and free from deformity.

Multiple Lipoma.—Dr. ARLIDGE exhibited a specimen of the somewhat rare disease, multiple subcutaneous fatty tumour, occurring in a healthy young farmer, referred to him by his usual medical attendant. A number of similar tumours were distributed over the forearms and the thighs. The largest specimen exhibited measured three inches by two, and was situated over the radial aspect of the left forearm.

Calculi.—Mr. VINCENT JACKSON exhibited a collection of ninety-six calculi, removed from the bladders of men, women, boys, and girls, by eighty-eight operations, either of lithotomy, or lithotripsy, or lithectomy. The collection represented, the exhibitor observed, a considerable amount of surgical work and much anxiety, but, fortunately, a large measure of success.

Salivary Calculus.—Mr. J. T. HARTILL exhibited a large salivary calculus, recently removed.

Papers.—The following were read.

Mr. F. Marsh: *On the Use of Kocher's Method of Reduction of Subcoracoid Dislocation of the Humerus.*

Dr. Gibson: *Notes on a Case of supposed Perforating Ulcer of the Foot: with Specimen.*

The Removal of Vesical Calculi from Boys and Male Infants.—In referring to cases of small stones in the bladder of boys, Mr. Vincent Jackson, who read this paper, said that the question of the method of their removal was supposed to be settled, but lately the subject had been revived by Professor Annandale, who suggested suprapubic lithotomy for this purpose; and he described a rather elaborate way of performing the operation. This operation was hardly capable of general application—certainly not in male infants; and the same remark applied to ordinary lithotomy. The alternative proceedings were perineal lithotomy, lateral or median. These operations were not devoid of special risk; and, as they seemed too severe for the purpose, Mr. Jackson suggested perineal median cystotomy as sufficient. The only instruments entering the bladder would be a grooved staff, a small-sized director (not essential), and a pair of forceps, with which the stone was seized and extracted. Afterwards, the bladder should be carefully explored by a sound before the patient was sent to bed. The duration of cure was less than after lateral lithotomy, but much longer than after lithotomy.

NORTH OF IRELAND BRANCH : GENERAL MEETING.—A GENERAL meeting of the Branch was held at the Belfast Royal Hospital, on Wednesday, February 10th. In the absence of the President, Dr. Kidd, of Ballymena, Dr. GRAY, of Castlewellan, occupied the chair. There were 31 members of the Branch present at the meeting.

Vote of Condolence.—A resolution of condolence and sympathy with Mrs. Charles, on the death of her husband, the late Dr. D. A. Charles, of Cookstown, was unanimously adopted by the meeting.

Patients.—The following were shown.

1. Dr. St. George (Lisburn) exhibited a patient who had been treated by him for compound compressed and comminuted fracture of the skull. He trephined, and reimplanted the trephined portion with excellent result.

2. Dr. St. George showed a patient, the subject of inguinal hernia, who had been successfully treated by him by Spanton's method for radical cure. He also exhibited a patient with a congenital defect of the iris.

3. Dr. O'Neill (Belfast) showed three patients whom he had treated by a dental splint, for fracture of the lower jaw.

4. Dr. O'Connell (Belfast) exhibited a patient with gangrene of the finger and wasting of the arm, depending on an intra-thoracic growth.

5. Dr. O'Neill also showed a man with femoral aneurysm, whom he had successfully treated by compression of the external iliac artery.

6. Mr. Fagan (Belfast) showed a patient on whom he had ligatured the subclavian artery for a large axillary aneurysm. The pressure of the tumour had caused paralysis and wasting of the arm, which still remained.

7. Mr. Fagan also exhibited a patient in whom he ligatured the brachial artery for traumatic aneurysm, and another with an aneurismal varix below Poupart's ligament, which resulted from a punctured wound of the thigh.

Inhaler.—Dr. Thomson (Omagh) exhibited an improved combination ether and chloroform inhaler, which he had himself invented.

Ophthalmic and Aural Operations.—Dr. McKeown, at the Ulster Eye, Ear, and Throat Hospital, operated on several cases of cataract by his injection method, in presence of a number of members who had been invited. He also showed his method of incising the membrana tympani for disease of the middle ear.

may be allowed in this world but that one magnificent engine of doing good, the teaching of Christianity; and we seem actually jealous and hurt when its healing influence is brought to beds of sorrow and suffering.

Let us examine this silly word "sectarian" a little more closely. Most hospitals have a chapel and a chaplain. Is it "sectarianism" to have only one form of service in the chapel, or ought the mode of worship to be changed as the Sundays come round? Is the minister to be by turns Roman, English, Wesleyan, Congregationalist, Baptist? Our union workhouses and prisons have chapels and chaplains, nearly all belonging to the Church of England; are they, therefore, "sectarian" institutions?

At the Royal ceremony, last week, of laying the foundation-stone of the Medical Examination Hall, a prayer was offered by the Archbishop of Canterbury. Was this a "sectarian" proceeding?

Let me assure Dr. Potter and his allies, that it is they who are making religion a "militant theologian," instead of a "ministering angel," and that the "strife" is excited by no one but themselves. It is time to say plainly, that the spirit with which they approach this subject must be resisted in the name of liberty and freedom.—Your obedient servant,

A HOSPITAL PHYSICIAN.

THE CHAIR OF PHYSIOLOGY IN ABERDEEN.

SIR.—Kindly correct a mistake in the JOURNAL. I have never offered myself as a candidate for Aberdeen, nor am I at present one. I shall be much obliged if you will give this prominence.—Yours sincerely,

JOHN B. HAYCRAFT.

Birmingham.

MANURE-HEAPS, AND THEIR RELATION WITH DIPHTHERIA.

SIR.—I was very interested to see in the communication published in the JOURNAL of March 20th, from your Paris correspondent, some remarks upon the relationship of diphtheria to manure-heaps. He says:—"M. Ferraud, in an article published in the *Lyon Medical*, for March, traces some relation between manure-heaps and epidemics of diphtheria." I remember, when resident at the Children's Hospital, being struck with the frequency with which children were brought to us from mews, suffering from diphtheria. In these cases, the families occupied the rooms over the stables. So noticeable was this connection, that I mentioned the point in a paper on diphtheria, that was published in the *Medical Times and Gazette*, February 24th, 1883. Not only did the children suffer from diphtheria, but we had reason to believe that the dogs and cats that frequented the mews also suffered in the same way. We tried to obtain the bodies of some of the cats that died of throat-affections, but never succeeded; therefore, we were unable to confirm our opinion.

Some districts of London were entirely free from diphtheria, while others afforded numerous examples of the disease. It would be interesting to know whether the localities that experienced immunity are deficient in their number of mews and manure-heaps. It would also be interesting to know if any others of your numerous readers have ever noticed such relationship between diphtheria and stable-refuse, as is referred to in this letter.—I am, sir, yours faithfully,

W. E. STEAVENSON, M.D.

INDIA AND THE COLONIES.

INDIA.

THE WATER-SUPPLY OF MADRAS, AND CHOLERA.—Dr. Furnell, the Surgeon-General at Madras, lately delivered an address on cholera and water; and, from the figures relating to the town of Madras which he produced, it is clearly proved that in Madras, as in Calcutta, the introduction of a supply of good drinking-water has an immediate effect upon the ravages of cholera. For many years before the introduction of the Red Hill water-supply into Madras, the number of deaths from cholera annually amounted to hundreds, and too frequently to thousands; but from the year 1872, when the water-supply was first opened, there has been a very large reduction in the mortality, one year being absolutely free from the disease, and in three others the deaths being five, six, and two respectively. Of course, during the famine years, there was a large increase in the fatal cases of cholera, caused by the migration into the town of many poor half-starved creatures, who had no strength left to resist the disease. But, as soon as the famine was over, the rate of mortality again fell to below 100 per annum; and, during the last four years, when there has been a severe epidemic of the disease throughout the greater part

of the Madras Presidency, the average number of deaths had not exceeded 250 per annum. The greater part of these deaths also, it is known, took place in those parts of the town which had not had benefit of the Red Hill's water-supply; and Dr. Furnell, therefore, urges the necessity of extending the water-supply to these localities.

MEDICO-LEGAL AND MEDICO-ETHICAL.

To CORRESPONDENTS.

OUR correspondents are reminded that prolixity is a great bar to publication; and, with the constant pressure upon every department of the JOURNAL, brevity of style and conciseness of statement greatly facilitate early publication. We are compelled to return, and hold over a great number of communications, chiefly by reason of their unnecessary length.

* * An unbiased consideration of the alleged facts detailed in Dr. P.'s letter, leaves no doubt upon our mind that the young surgeon, if correctly reported, in so acting, and "calling in another surgeon to assist him, without any consultation with, or even acquainting Dr. P. about the matter," committed a grave and regrettable breach of professional rule against his much senior brother-practitioner. Further comment is, in our opinion, unnecessary, inasmuch as the case, as related, conveys its own condemnation.

NEW PRACTICES, AND COURTESY CALLS ON PRACTITIONERS.

SIR.—I intend to set up in practice in a large town, where there are a considerable number of medical men, so many, that I cannot well call on all of them. What is the best way to do? I think of calling on those in the immediate neighbourhood of my house, and a few of the principal medical men in the town; namely, those who are attached to the town hospital. Please let me know your ideas on this matter, and oblige, yours truly,

ZETA.

* * "Zeta" will do well to be guided by the principle laid down in the following rule, which appears in the *Code of Medical Ethics* (published by Messrs. Churchill), page 90, rule 2. "In towns of not exceeding 35,000 inhabitants, and containing some thirty, more or less, medical men, a preliminary visit of courtesy should be paid to each several practitioner, but in those in which the preceding numbers are much exceeded, the call or visit may very fairly be limited to such practitioners as live within a radius of (say) half a mile, or less, according to the nature and population of the locality; while in London and other large and densely populated cities, the area of call must necessarily be very circumscribed, and, in a great measure, left to the judgment and discretion of the intending practitioner himself, or of a local professional friend. As a safe and simple guide, however, in either or in any case, the extreme area of call for such initiating visits may, perhaps, be sufficiently defined by a circle, comprising within its space some thirty practising members of the faculty."

UNQUALIFIED ASSISTANTS.

J. B. F. writes: Mr. Allbutt's over self-assertiveness induced him to miss the points in dispute. These I take to be: that the dispensaries in question should not be carried on by unqualified assistants, however highly esteemed, but under the direct personal attention of qualified proprietors; and that, consequently, the fees at the dispensary should be such as will be not only within the ability of the patients to pay, but equally within the self-respect of a professional man to take; and that these fees should be graduated, as far as practicable, to the assumed position (income) of the patients.

I made no reference to the out-door attendance, but solely to the dispensary, and the relative work done there. Now, what are Mr. Allbutt's fees, or those of his unqualified assistant, for advice and medicine there? This is a mere question of fact, and one not to be dealt with by generalities. My knowledge of these dispensaries warrants my former assertion that, generally, they are simply shops for selling physic and cheap doctoring. Whether Mr. Allbutt's branch at Hunslet be a favourable exception to these, remains to be shown by the necessary evidence.

It is much to be feared that "united action" among the local practitioners, suggested by your working man correspondent last week, would, in the face of the existing strong competition, be found impracticable.

ATTENDANCE ON DECEASED PARTNER'S WIDOW.

A CORRESPONDENT writes:—In 1875, I purchased a half share of a practice, for £1,000. In 1881, my partner died, and I was compelled to buy the remaining half share (by the articles of partnership). The total practice cost me over £2,100. My partner left his widow his house and grounds, and several thousand pounds' worth of real and personal estate. Her friends also are wealthy people. She has since married, and lives in the country, at a "Manor House." It taxed my earnings heavily to pay the last premium, and the executors charged 5 per cent. on the amount remaining unpaid. Do you think that it would be courteous on my part to expect to be paid for my professional services? intimated that it would, but the widow was indignant. Of course, I refer only to attendance on herself and children, during her widowhood.

* * We would refer "F.R.C.S.Eng." to the following rule, extracted from the new edition of the *Code of Medical Ethics*, page 53, Section 2, rule 1, from which he will find that, under the circumstances related, he is fully justified in charging for professional attendance on the widow and her children. "All legitimate practitioners of medicine, their wives, and children, while under the paternal care, are entitled (not as a matter of right, but) by professional courtesy, to the reasonable and gratuitous services—railway and like expenses excepted—of

ceding weeks, were 32 during the week under notice. The 20 deaths referred to diphtheria exceeded by 2 the number in the previous week, and included 14 in London and 2 in Birmingham. The fatal case of small-pox was recorded in Blackburn; no death from this disease was recorded during the week under notice in London. The number of small-pox patients in the Metropolitan Asylum Hospitals, which had been 7 at the end of the two preceding weeks, were again 7 on Saturday, March 26th; two new cases were admitted to these hospitals during the week, against 1 in the previous week. The death-rate from diseases of the respiratory organs in London during the week under notice was equal to 11.5 per 1,000, and very considerably exceeded the average. The causes of 137, or 2.7 per cent., of the 5,101 deaths registered in the twenty-eight towns were not certified, either by registered medical practitioners or by coroners.

HEALTH OF SCOTCH TOWNS.

During the week ending Saturday, March 5th, 823 births and 614 deaths were registered in the eight principal Scotch towns, having an estimated population of 1,263,977 persons. The annual rate of mortality, which had been 22.3 and 23.5 per 1,000 in the two preceding weeks, further rose last week to 24.9, but was 1.7 per 1,000 below the average rate in the same period in the twenty-eight large English towns. Among these Scotch towns, the rate was equal to 17.1 in Aberdeen, 17.4 in Dundee, 20.9 in Greenock, 22.5 in Edinburgh, 24.4 in Leith, 22.5 in Paisley, 30.1 in Glasgow, and 31.1 in Perth. The 614 deaths registered during the week under notice in these Scotch towns included 43 which were referred to the principal zymotic diseases, against 46 and 51 in the two preceding weeks; of these, 19 resulted from whooping-cough, 7 from "fever," 7 from diarrhoea, 4 from scarlet fever, 3 from measles, 3 from diphtheria, and not one from small-pox. These 43 deaths were equal to an annual rate of 1.7 per 1,000, which was 0.6 below the average zymotic death-rate during the same period in the twenty-eight large English towns. The highest zymotic rates during the week were recorded in Edinburgh, Paisley, and Glasgow. The fatal cases of whooping-cough, which had been 13 and 19 in the two preceding weeks, were again 19 during the week under notice, of which 17 occurred in Glasgow. The 7 deaths referred to different forms of fever showed a slight further increase upon recent weekly numbers, and included 4 in Glasgow. The 7 fatal cases of diarrhoea were considerably below those returned in recent weeks, and included 3 in Edinburgh. The deaths from scarlet fever, which had been 5 and 6 in the two preceding weeks, further declined last week to 4, of which 3 occurred in Glasgow. The 3 fatal cases of measles were all recorded in Edinburgh; and of the 3 deaths referred to diphtheria, 2 were returned in Dundee and 1 in Aberdeen. The mortality from diseases of the respiratory organs in these Scotch towns during the week under notice was equal to 7.2 per 1,000, against 9.4 in London. The causes of 73, or 11.9 per cent., of the 614 deaths registered during the week in these Scotch towns were uncertified.

MEDICO-PARLIAMENTARY.

HOUSE OF LORDS.—Tuesday, March 30th, 1886.

Lunacy Acts Amendment Bill.—In Committee (on recommittal) on this Bill, the Lord CHANCELLOR moved to leave out subsection 1 of Clause 27, and to insert a provision that, except in certain cases, no order should be made for the reception of a lunatic, as a single patient in the house of a medical practitioner, except by the judge in lunacy. The exceptions allowed were in the case of persons who should, by the medical certificates accompanying the orders for their reception, be certified to be suffering from unsoundness of mind of a temporary character, or from decay of mind in old age, or who should be desirous of voluntarily submitting to care and treatment.—The Earl of SELBORNE agreed to the proposal, and the amendment was added to the clause.—On Clause 42, the Lord CHANCELLOR proposed to insert, at the beginning of the clause, subsections relating to licences to private asylums. He said he believed that the system of private asylums was a bad and mischievous one, and he hoped the effect of the Bill would be gradually to extinguish that system. But they must not go faster than the public were prepared for; and he had, therefore, determined to preserve all vested interests. He proposed that, if the commissioners or justices were of opinion that a licensed house had been well conducted, they might, on the expiry of the licence, renew it to the licensee or his successor. He also proposed that a licence might be given for a new house, built to take the place of a licensed house, if the commissioners or justices were of opinion that it would be as well suited for the purpose as the old house.—The amendments were agreed to.—Lord GRIMTHORPE moved the omission of the clause, contending that no case had been made out against the keepers of private asylums, and that those asylums cured 50 per cent. more patients than the public ones. Their lordships ought not to believe all they read in novels, in reference to wicked doctors and the management of private asylums.—The Lord CHANCELLOR pointed out that the late Lord Shaftesbury, who had passed half a century in the closest attention to this subject, held to the last that the system of proprietary houses was a bad one, which ought to be entirely replaced by a public asylum system.—The Earl of MILLTOWN and Lord CRANDROCK were in favour of the clause being retained in its present shape.—Lord GRIMTHORPE withdrew his motion, and the clause was agreed to.—The Bill passed through Committee.

Idiots Bill.—This Bill was read a second time, on the motion of the Lord CHANCELLOR, who said that he had taken the clauses from the Lunacy Bill, and that he was glad to believe the measure gave satisfaction.

HOUSE OF COMMONS.—Tuesday, March 30th, 1886.

Criminal Lunatics.—In answer to Mr. MORGAN HOWARD, Mr. CHILDERSON said: Having satisfied myself that the four men—Strain, Wilson, Longman, and Jarvis—ought not properly any longer to be treated as criminal lunatics in Colney Hatch Lunatic Asylum, I ordered their discharge, in the exercise of a discretion which has been vested in the Secretary of State by the Act of 1884. The effect of their discharge will be, as the hon. member's question infers, to throw the cost of their maintenance on to the local funds. There will be no Treasury contribution, as there are no sentences to expire, none of these persons having been convicted, but having all become lunatic before they were tried.

Mr. MORGAN HOWARD, Q.C., has taken charge of, and introduced into Parliament, a Bill of the Medical Alliance Association, for the amendment of the Penal Clauses of the Medical Act of 1858.

NAVAL AND MILITARY MEDICAL SERVICES.

THE NAVY.

Fleet-Surgeon W. J. EAMES has been promoted to be Deputy Inspector-General of Hospitals and Fleets. Mr. Eames entered as Surgeon, February 14th, 1856; became Staff-Surgeon, June 30th, 1863; and Fleet-Surgeon, November 2nd, 1877. In 1860-62, he was Surgeon to the *Bloodhound* in the expedition up the Niger, during which he had to contend with a severe epidemic of yellow fever; he was also at the attack on Porto Novo, on the West Coast of Africa.

Surgeon FRANCIS WILLIAMSON died at St. Leonard's-on-Sea on the 16th instant, in his thirty-third year; he joined the Royal Navy as Surgeon, September 30th 1870, but retired August 19th, 1882.

Dr. J. G. M'KENDRICK, F.R.S., has been appointed Honorary Staff-Surgeon to the Clyde Brigade of the Royal Naval Artillery Volunteers.

The following appointments have been made at the Admiralty during the past week:—JOHN LAMBERT, Fleet-Surgeon, to the Royal Victoria Yard, Deptford; ROBERT NELSON, Fleet-Surgeon, to the *Ajaz*; JOHN O'CALLAGHAN, Surgeon, to the *Irreconcileable*; CHARLES B. A. E. CHAMBERLAIN, Surgeon, to the *Martin*; JOHN S. FOGERTY, M.D., Surgeon, to the *Seaflower*; ROBERT HICKSON, Surgeon, to the *Svalk*; GEORGE D. TREVOR ROPER, Surgeon, to the *Neutilus*; JOHN LOWNEY, Surgeon, to the *Liberty*; and OCTAVIUS S. FISHER, Surgeon, to the *Pilot*; W. W. JACKSON, Surgeon, to the *Comus*.

Assistant-Surgeon R. J. LAWSON, M.B., C.M., late of H.M.S. *Triumph*, died on the 23rd March at Edinburgh. Mr. Lawson entered the Royal Navy as Assistant-Surgeon, August 28th, 1882.

Deputy Inspector-General THOMAS STRATTON, M.D., died very suddenly, on the 16th March, at Stoke Damerel, in his 70th year. Dr. Stratton's commissions bore date:—Surgeon, December 19th, 1837; Staff-Surgeon, January 30th, 1847; Fleet-Surgeon, May 13th, 1850; and Deputy Inspector-General of Hospitals and Fleets, June 6th, 1857. He served in the Lakes during the Canadian rebellion in 1838, and was employed in the Canadian Immigrant Fever Hospital in 1847-48.

Surgeon E. H. BEAMAN, of the Lancashire Hussars, has resigned his commission, which dates from April 6th, 1869.

Surgeon E. G. PURCELL, of the 3rd Middlesex Volunteers, is granted the honorary rank of Surgeon-Major.

Mr. A. F. TRAIL, M.B., is appointed Acting Surgeon to the 3rd (the Buchan) Volunteer Battalion of the Gordon Highlanders (late the 3rd Aberdeen Volunteers).

Mr. J. D. JEFFREY has been appointed Acting Surgeon to the 1st Berwick Volunteers.

Captain E. S. WARBURTON is appointed Acting Surgeon to the 2nd Glamorgan Volunteers.

Surgeon JOHN BURNS, of the 3rd Lancashire Volunteers, is granted the honorary rank of Surgeon-Major.

Acting Surgeon W. T. ANGOVE has resigned his appointment in the 6th Suffolk Volunteers, which he joined, July 7th, 1883.

Surgeon and Honorary Surgeon-Major CHARLES HITCHCOCK, M.D., of the 2nd Wilts Volunteers, has resigned his commission, with permission to retain his rank and uniform.

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, March 25th, 1886.

Avarne, Arthur Blair, 46, King Henry's Road, Regent's Park, N.W.
Aston, William, Ivy House, Codsall, near Wolverhampton.

Harvey, Thomas Richard Aloysius, M.R.C.S., Australia.

Sealy, Francis Marmaduke, Gosherton Vicarage, Spalding.

MEDICAL VACANCIES.

The following vacancies are announced.

BETHLEHEM HOSPITAL.—Two Resident Medical Students. Applications by April 10th.

BOURN UNION.—Medical Officer and Public Vaccination. Salary, £25, and extras. Applications to J. L. Bell, Board Room, Bourn.

BRIGHTON AND HOVE LYING-IN INSTITUTION.—House-Surgeon. Salary, £120. Applications, by April 2nd, to the Secretary.

CITY OF ABERDEEN.—Medical Officer of Health. Salary £300. Applications by April 14th, to W. Gordon, Town House, Aberdeen.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST. Victoria Park, E.—Resident Clinical Assistant. Gratuity, £20. Applications by April 6th to T. Storrar Smith, 24, Finsbury Circus, E.C.

COVENTRY UNION DISTRICT.—Medical Officer. Salary, £63. Applications to W. H. Harris.

ESSEX AND COLCHESTER GENERAL HOSPITAL.—Physician. Applications by April 7th.

FLINTSHIRE DISPENSARY.—House-Surgeon. Salary, £100. Applications by April 7th.

GATESHEAD DISPENSARY.—Assistant-Surgeon. Salary, £120. Applications by April 12th to J. Jordan, Newcastle-on-Tyne.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST. Brompton. Resident Clinical Assistant. Applications by April 17th, to Henry Dobbin.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST. Brompton. Physician. Applications to Henry Dobbin.

HULL ROYAL INFIRMARY.—Honorary Assistant Medical Officers. Applications by April 3rd.

HULL ROYAL INFIRMARY.—Ophthalmic Surgeon.—Applications by April 3rd.

LEICESTER INFIRMARY AND FEVER HOUSE.—House-Surgeon. Applications by April 6th to T. A. Wykes.

LONDON SCHOOL OF GYN.ECOLOGY.—Clinical Assistants. Applications to the Honorary Medical Secretary.

LONDON TEMPERANCE HOSPITAL. Hampstead Road. Registrar and Chloroformist. Salary, £50 per annum. Applications by April 12th, 1886.

METROPOLITAN LUNATIC ASYLUM.—Assistant Medical Officer. Salary, £100 per annum. Applications to Lockhart Symes, Esq., 7, Furnival's Inn, Holborn.

NORTH CAMBRIDGESHIRE HOSPITAL. Wisbech.—House-Surgeon. Salary, £130. Applications by April 18th to W. E. Schofield.

NORTH LONDON HOSPITAL FOR CONSUMPTION. Hampstead, N.W.—Resident Medical Officer. Salary, £40 per annum. Applications by April 17th to L. Hill, 216, Tottenham Court Road, W.

SHEFFIELD GENERAL INFIRMARY.—Assistant House-Surgeon. Salary, £80 per annum. Applications by April 5th to G. H. Day.

SHEFFIELD GENERAL INFIRMARY.—House-Surgeon. Salary, £120 per annum. Applications by April 6th to G. H. Day.

SOWERBY BRIDGE LOCAL BOARD.—Medical Officer of Health. Applications by April 6th, to Godfrey Rhodes, Solicitor, Sowerby Bridge.

ST. PANCRAS NORTHERN DISPENSARY.—Physician and Surgeon Accoucheur. Applications by April 6th, to H. P. Bodkin.

SUNDERLAND HOSPITAL FOR SICK CHILDREN.—Honorary Surgeon. Applications to Secretary, before April 8th.

UNIVERSITY OF MELBOURNE.—Chair of Chemistry. Salary, £750 per annum. Applications to Robert Murray Smith, Victoria Office, 8, Victoria Chambers, Westminster.

YORK COUNTY HOSPITAL.—Two Honorary Medical Officers. Applications by April 6th, to R. Holby.

WILLITON UNION. Somerset.—Medical Officer and Public Vaccinator. Salary, £80 and extras. Applications by April 12th to W. H. White.

MEDICAL APPOINTMENTS.

AGANOR, M. S. P., M.B., C.M.Ed., appointed House-Surgeon to Gray's Hospital, Elgin, N.B.

BEAVERS, E. A., appointed Consulting Dental Surgeon to the Radcliffe Infirmary.

CLENDINNEN, J. George, L.R.C.S.I., reappointed for three years Medical Officer to the Sedgley No. 3 District, Dudley Union.

EDGELOW, Percy, M.R.C.S.Eng., L.R.C.P.Ed., appointed House-Surgeon to St. Peter's Hospital.

EVANS, Thomas Melariethon, M.R.C.S., L.S.A., late Senior Assistant Surgeon, appointed Surgeon to the Hull Royal Infirmary.

HABGOOD, William, L.R.C.P.Lond., M.R.C.S., L.S.A., appointed Resident Clinical Assistant to St. Luke's Hospital, London.

HUMPHREYS, Charles E., M.R.C.S., L.S.A.Lond., appointed Medical Officer, Public Vaccinator, and Medical Officer of Health for the Llanfair district of the Llanfyllin Union, vice Parry Jones, M.D., resigned.

HUTTON, H. R., M.A., M.B.Cantab., appointed Honorary Physician to the Accouts Hospital.

JONES, Hugh Edward, M.R.C.S.Eng., L.R.C.P.Lond., appointed House-Surgeon to the Liverpool Eye and Ear Infirmary.

LIESCHING, C. E., M.R.C.S., L.R.C.P.Lond., appointed House-Surgeon to the Stroud General Hospital.

MACGS, William Adolphus, L.R.C.P.Lond., M.R.C.S., L.D.S., appointed Dental Surgeon to the North-West London Hospital.

NICHOLSON, Robert Hicks Bouchier, M.R.C.S., L.S.A., late Assistant-Surgeon, appointed Surgeon to the Hull Royal Infirmary.

REID, Irvine K., M.B., C.M.Aberd., appointed House-Surgeon to the West Norfolk and Lynn Hospital.

SALTER, John R., M.B.Lond., M.R.C.S.Eng., L.S.A., appointed Medical Officer to the Sudely and Capel District of the Tonbridge Union, vice Caleb Gargory, M.R.C.S.Eng., L.S.A., retired. [This appointment was incorrectly given in the JOURNAL of February 20th.]

SCHOFIELD, Gerald, appointed Resident Surgeon and Dispenser to the Great Yarmouth Hospital.

SHERBURN, John, M.B., C.M., M.R.C.S., late Assistant-Surgeon, appointed Surgeon to the Hull Royal Infirmary.

THOMAS, Hugh, M.R.C.S.E., L.S.A., appointed Honorary Surgeon to the Birmingham Lying-in Charity.

BIRTHS, MARRIAGES, AND DEATHS.

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

BIRTHS.

BLACKMAN.—On March 30th, at Poplar House, Portsmouth, the wife of Josiah George Blackman, M.R.C.S.Eng., L.S.A.Lond., of a son.

DEATH.

CESAR.—On March 20th, whilst staying with his brother at High Road, Tottenham, Henry Augustus Caesar, L.R.C.P.Ed., etc., eldest surviving son of the late Henry Augustus Caesar, M.D., F.R.C.S.I., aged 50.

CHESTERFIELD HOSPITAL.—The Duke of Devonshire has been elected President of the Chesterfield and North Derbyshire Hospital for the ensuing year.

POISONED BY MISADVENTURE.—A case of poisoning by misadventure has occurred at Kensington to a coachman, aged 67, who, it transpired at the inquest, had been suffering from bronchitis, for which he had been in the habit of taking a cough-specific, and using a liniment on his throat and chest. Both bottles, it was stated, were kept side by side; and the wife of the deceased, who was short-sighted, had, in the early morning, given the deceased a dose from the bottle containing the liniment. Evidence was given to the effect that the specific was covered by a fawn-coloured wrapper, which made it scarcely distinguishable from the liniment. The medical evidence was to the effect that the cause of death was collapse from taking liniment composed of strong ammonia, chloroform, and soap. It was stated that the deceased and his wife had lived on the most affectionate terms. A verdict of "Death from misadventure" was returned.

HYGIENIC DRESS AND FASHION.—The subject of hygienic dress is receiving renewed attention by the Rational Dress Society, under the presidency of Viscountess Harberton; and, at a recent meeting of this society, at the Westminster Town Hall, it was decided to promote, as far as possible, the wearing of dresses by which "no internal organ can be injured, no muscle cramped, no movement of the body impeded, and to which the wearer may add as much grace and beauty as her own good taste may direct." It is satisfactory to see that a vigorous protest is made against, among other things irrational and detrimental to health, boots and shoes with narrow heels, and tight-fitting bodices.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8.30 P.M. Dr. John Lowe: Traumatic Hydrocephalus.—Odontological Society of Great Britain, 8 P.M. Communications are promised by Drs. Joseph Walker; G. Cunningham, Cambridge; and J. H. Redman, Brighton; Messrs. C. S. Tonks, F.R.S., W. A. Maggs, Walter Coffin, S. J. Hutchinson, C. J. Boyd Wallis, F. Henri Weiss, E. G. Betts, J. H. Mummery, and A. S. Underwood.

TUESDAY.—Pathological Society, 8.30 P.M. Mr. Roger Williams: Acute Nephritis in Lambs. Dr. G. N. Pitt: Hydatid of Liver imbedded in Syphilitic Deposit. Dr. Sainsbury: Valvular Obstruction of Ureter. Dr. Price, Reading: Embolism of Abdominal Aorta. Dr. Turner: Septic Aortitis. Mr. Sydney Jones: 1, Malformation of Foot; 2, Peculiarly Shaped Calculi (Card.). Mr. Lockwood: 1, Congenital Fatty Tumour from Sole of Foot; 2, (for Mr. W. Adams): Fatty Tumours from Palm of Hand. Dr. Sharkey: 1, Meningeal Haemorrhage; 2, Phthisis commencing at Base of Lung (Card.); 3, Stenosis of Mitral, Tricuspid and Aortic Valves (Card.). Dr. Carrington: Double Intestinal Stricture. Dr. Pyc Smith: Cystic Teratoma from an Infant (Card.). Mr. Lunn and Mr. Larder: Aortic Aneurysm (Card.). Dr. S. Taylor: Cerebral Tumour (Card.). Mr. E. H. Fenwick: Stone Impacted in Prostatic Urethra (Card.).

WEDNESDAY.—Obstetrical Society of London, 8 P.M. Specimens will be shown by Dr. W. S. A. Griffith and others. Papers.—Dr. Matthews Duncan: On Contraction, Inhibition, and Expansion of the Uterus. Dr. Coates: A Case of Labour in a Primipara Suffering from Mitral Disease. Dr. Amand Routh: A Case of Serous Peritonitis. Dr. Champneys: Note on the Artificial production of so-called Lymphatic Varix.

THURSDAY.—Ophthalmological Society of the United Kingdom, 8.30 P.M. Living and Card Specimens at 8 P.M. Adjudged discussion on Mr. Priestley Smith's Paper. Mr. W. H. Jessop: A New Pupilometer: on Herpes Frontalis Affecting the Eye. Mr. W. Lang: A New Microtome. Dr. L. Werner: On Vitreous Infiltration of the Retina, and Central Guttate Choroiditis. Mr. R. Bradenell Carter: Two New Forms of Perimeter. Mr. W. Spencer Watson: Haemorrhagic Glaucoma treated by Trephining. Mr. G. E. Walker: Glaucoma treated by the use of Convex Glasses. Mr. Edgar A. Browne: Wound of one Eye, followed almost immediately by Iritis Serosa in the other; Water-Colour Drawing by a Colour-Blind Artist.

FRIDAY.—Clinical Society, 8.30 P.M. Dr. Stephen Mackenzie: On Erythema Nodosum, especially dealing with its Connection with Rheumatism. Dr. Samuel West: On some peculiar Cases of Pneumothorax. Mr. Walsham: A Case of Lithotomy at a Single Sitting, in a boy aged 10. Dr. Carrington: A Case of Rheumatic Hyperpyrexia. Mr. Bellamy: Enormous Vascular Growth of the Upper Extremity in a Child (Living Specimen).

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., 1.30; Skin, Tu., 1.30; Dental, Tu. Th. F., 1.30.
KING'S COLLEGE.—Medical, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., M. W. F., 1.30; Eye, M. Th., 1 Ophthalmic Department, W., 1; Ear, Th., 2; Skin, Th.; Throat, Th., 3; Dental, Tu. F., 10.
LONDON.—Medical, daily, ex. 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; Skin, Th., 9; Dental, Tu. F., 9.
MIDDLESEX.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; o.p., W. S., 1.30; Eye, W. S., 9; Ear, Th., 2; 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., 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., 0.30; o.p., M. Th., 9.30; Eye, Tu. F., 9.30; Ear, W. S., 9.30; Throat, M. Th., 0.30; 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., except Sat., 1.30; Ear, M. Th., 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. 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.

QUERIES.

MR. T. WHITTINGTON (Neath) asks: What fee is the regular medical attendant allowed to charge in consultation? Is it one guinea, or double the ordinary visiting fee?

THE BACTERIUM TREATMENT OF PHthisis. SPES asks for information on the "bacterium termo" treatment of phthisis. He would like to know the method of treatment, where the "bacterium termo" is to be obtained, and anyone's experience who has tried it.

** We have asked Dr. C. T. Williams for his opinion on the subject. He writes as follows: I have no personal experience of the bacterium termo treatment of phthisis, but am not yet satisfied with the evidence of its power of destroying the bacillus tuberculosis. My experiments confirmed those of Malassez and Vignal, that the bacillus tuberculosis is remarkably tenacious of life, and can be detected in sputum, and tubercular organs, which have been kept for weeks, and even months, in which putrefactive bacilli, including the bacterium termo, are also present. However, I have never tried it on the living body, as Cantani did. The best plan for your correspondent "SPES" to follow, is to write to Professor Cantani at Naples, who will, I doubt not, furnish him with the particulars he desires, and give him directions as to the preparation of the bacterium termo solution. Particulars of the one used by Dr. Talama, of Pisa, are to be found in the *London Medical Record*, November 16th, 1885.

STAMMERING.

A CORRESPONDENT writes to us on this subject. We must refer him to the JOURNAL, February 6th, p. 278, February 20th, p. 374, and February 27th, p. 431. Our correspondent would like to know if any qualified medical gentleman treats stammering and stuttering as a speciality.

UNQUALIFIED DENTISTS ON A HOSPITAL STAFF.

A CORRESPONDENT asks: 1. Is there any instance of a public hospital having on its staff a dental surgeon not possessing a diploma? 2. Would the interests of a public hospital suffer in the eyes of the medical profession, and of the public, by the admission of such a dental surgeon to be a member of the staff?

PRACTICE IN WESTERN AUSTRALIA.

A MEMBER writes: I should feel very thankful if any of your readers could give me some information about practice in Western Australia: what parts of the colony afford the best openings at present, and what capital would be necessary for the purpose of starting in practice? Are drugs easily obtainable; also furniture and a residence? Would it be advisable to take out drugs and furniture? In what part would the climate be most suitable for a person whose lungs are slightly affected?

BIMECONATE OF MORPHINE.

SYNTAX writes: Will you kindly inform me concerning the liquor morphine bimeconate of the new *British Pharmacopœia*, whether it be incompatible in a mixture with acids or alkalies? And will you also be good enough to tell me of any "table of incompatibilities" which may be published, and which may be relied on?

** Alkalies would precipitate the morphine; acids would probably form a combination with the morphine, and set meconic acid free, but no precipitate would occur, except in concentrated solutions. We do not know of any table of incompatibilities, but most of them are given in the *Companion to the British Pharmacopœia*.

PRACTICE IN SWITZERLAND.

ALPHIA writes: Could you, or any of your readers, kindly inform me what are the chances of a well qualified English medical man, who speaks German, doing a fair practice in one of the Swiss health-resorts? Is it necessary to obtain a Swiss diploma in order to practise in Switzerland?

ENGLISH PRACTITIONERS IN FRANCE.

M.D. EDIN. asks for information concerning the regulations and qualifications necessary to enable an English medical man to practise in France.

** Our correspondent's best plan will be to write to the Dean of the Faculty of Medicine in Paris for a copy of regulations bearing on the subject.

PURE TEREBENE.

DR. C. W. B. MACAULEY, First Lieutenant and Assistant-Surgeon, United States Army, of Camp, Poplar River, Montana, United States, writes:—In the BRITISH MEDICAL JOURNAL for December 12th, 1885, I saw an article on "Pure Terebene," by Dr. Murrell. All he mentioned of the mode of preparing it was, that it was formed by the action of sulphuric acid on turpentine. I have been unable to find, in any of the books at my command, a more precise, or in fact, any description of the process.

The lowest temperature at this place last winter (1884-85), was 62.7°; the lowest this winter has been 49.1°. In the last twenty-four hours, the thermometer has fallen about forty degrees. These extremes, and great variability, are conducive to bronchitis of all kinds. Fourteen per cent. of the command were, at one time, on the sick-list from bronchitis. I have a case of chronic bronchitis in hospital now. For this man's sake, I write to ask if you will be kind enough to publish, at an early date, a detailed account of Dr. Murrell's method of making "pure terebene."

** The method of preparing "Pure Terebene" is fully described in the BRITISH MEDICAL JOURNAL, of February 6th. It can be obtained from most of the leading chemists in New York, and other large cities in America.

A MEMBER would be greatly obliged to any gentleman who has passed the Sanitary Science Diploma of Cambridge, if he would give particulars of best books to read, stiffness of examination, etc.

Z asks as to the best books to read for the final F.R.C.S.Eng.

ANSWERS.

C. A. W. will find the list of books recommended to be read for the Sanitary Science Certificate of the University of Cambridge, in the BRITISH MEDICAL JOURNAL, for September 12th, 1885, page 510.

VARIX OF THE VULVA.

R. C. writes: I am inclined to question the advisability of keeping a woman, who is suffering from varix, in bed for two or three months prior to her confinement. The relief gained at the seat of the varix would not be a sufficient compensation for the disturbance set up in the alimentary tract. And again, I think "Inquiries" would find that most of his patients, especially among the poorer classes, would object to the prolonged rest.

Next to "rest" in bed, our professors would tell us that support to the tumour is indicated. In a case which I had a few months ago, I took the elliptical guard which is supplied with the vaginal tube of a Higginson's enema-apparatus, had it well padded with boracic lint (which should be changed frequently), and fastened over the varix, like an ordinary pad for prolapsus uteri. The patient applied this support every morning, and, after using it for two months, said that it had been a great comfort to her, and she could do without it. She has since been confined, and the varix has disappeared.

A MEMBER would do well to instruct a solicitor to attend before the magistrate in question. A reference to the *Medical Register* would probably be satisfactory.

JUNIOR MEMBER.—The object in view is one with which we fully sympathise, and will keep in view; but we do not think that it can be realised in the precise manner suggested.

J. W. A.—We have made inquiries. It is not published, but probably may be.

MONDAY.—Professor Paul Broca died on July 8th, 1880.

PERMANENT DEVELOPMENT OF THE FACIAL MUSCLES.

F.R.C.S.—The facial muscles could certainly be developed by exercise. Faradisation would be beneficial, should atrophy have occurred, provided that the cause of the atrophy has been removed. Injection of irritants would be quite unjustifiable. It would excite inflammation of the muscle, followed by loss of function and atrophy. Consult Darwin, *On the Expression of the Emotions*.

R.—We regret to say we have no information on the subject.

NOTES, LETTERS, ETC.

BAD TIMES.

CANTAB writes:—May I call attention to an injustice to which the profession is liable? At the present time, when everyone feels, to some extent, the existing depression, medical men have in many cases to reduce their fees or make bad debts. Some people, however, who are called upon to reduce their expenditure, think proper to begin by cutting down their doctor's fees. A few days ago, a lady, who attends at my consulting rooms for a special complaint, requested to be seen twice for her usual fee of £1 1s., saying that X, a well-known medical man, who attends Royalty, attended her family for £1. I happen to be in a position to make inquiries, and find that she is decidedly wealthy, with town and country establishments, etc., and altogether quite of the last class of person who ought to pay reduced fees. Unless medical men will combine against this form of cheating, rather than compete for the patient, the profession is likely to suffer a great injury.

ASEPTIC CATHETER FOR WASHING OUT THE BLADDER.

MR. W. J. PENNY (Clifton) writes:—In his communication to the JOURNAL of March 13th, Dr. Foulis very candidly admits the point to which I called attention on February 27th, that his "apparatus does not entirely guard against the admission of air, which may enter the bladder when urine ceases to pass from the end of the instrument, before the tap, allowing the antiseptic solution to flow, is turned on."

If we could trust our patients not to cough, or sneeze, or forcibly strain with sudden relaxation, the simplest appliance, an ordinary catheter and a syringe, would be sufficient to prevent the entrance of air into the bladder; but, as I implied in my last letter, the elaborate apparatus, devised by Dr. Foulis, does not guard against such accidents, and therefore is very little better.

The double-current catheter, with siphon apparatus attached to one orifice, more effectually guards against such accidents. If the patient coughs, the urine is ejected from one orifice; and, on relaxation of the pressure, the antiseptic fluid takes its place, without fear of air entering the bladder at the same time.

If Dr. Foulis will experiment with an accurately fitting plug, or press his finger firmly on the orifice, he will find that the fluid does not escape from the closed pipette catheter.

There is no necessity "to bend the catheter on itself, or move it about, or turn it upside down," at any rate, until it is in the urethra; and then, if the plug fits accurately, there is no danger of air, laden with mites, entering the instrument.

Dr. Foulis and his friends are fortunate in possessing patients who are not easily alarmed at elaborate appliances.

MATERNAL IMPRESSIONS.

MR. A. LEDLIE (Belfast) writes: About three years ago, I was summoned to see a child that had fallen to the pavement from a window upstairs. The child recovered. About ten months afterwards, I was again summoned to see another child, then about three months old, in a house just opposite that from the window of which the child had fallen. I found this child the subject of very pronounced double congenital talipes equino-varus. The mother (unquestioned) told me that she had seen the child fall from the window, and that, from that moment, she "knew something would be wrong" with her child.

DR. JAMES BRYDON (Hawick) relates the following case. A short time ago, I attended Mrs. C. during her second confinement. After the child was born, the common question, Is it all right? was asked by the mother, and answered in the affirmative. Presently, the nurse discovered that the great toe of the right foot was entirely wanting. The mother then related that, when she was in her fourth month of pregnancy, she dreamed that a rat had bitten off her corresponding toe; and so vivid was the impression that she awoke screaming, and narrated the cause of her fright to her husband, who corroborated her statement. The veracity of both parties is unimpeachable.

THE LATE DR. STORRAR.

A CORRESPONDENT informs us that Dr. Storras was not the first chairman of the Convocation of London University. His predecessor in that office was Dr. C. J. Foster, who was chairman from 1858 to 1863.

DR. R. S. ARCHER (Liverpool) is referred to the standing notices. We regret to be unable to make special conditions.

COMMUNICATIONS, LETTERS, ETC., HAVE BEEN RECEIVED FROM:

MR. J. W. GREENWOOD, Hanley; MR. S. WILSON, London; MR. T. E. PERKS, Nutfield; MONDAY; DR. HAUGHTON, Upper Norwood; DR. WILLoughby, London; DR. MACKENZIE, Glossop; DR. W. E. STEAVENSON, London; DR. TAYLOR, Anerley; MR. H. WELCH, Blackpool; THE SECRETARY OF THE PARKES MUSEUM; MR. J. B. KENNY, Killashandra, County Cavan; MR. W. E. DAVIDSON, London; MISS WHITEHEAD, South Stockton; F.R.C.S.; DR. T. D. ACLAND, London; MR. E. F. S. GREEN, London; DR. JOSEPH COATS, GLASGOW; DR. A. W. EDIS, London; MR. W. H. DATE, MOSLEY; DR. W. OSLER, Philadelphia; MR. W. COX, Cheltenham; DR. A. MONEY, London; DR. H. PAYNE, Ashton-under-Lyne; MR. J. B. HAYCRAFT, Birmingham; DR. B. FOSTER, Birmingham; DR. MEADOWS, London; MR. R. S. ARCHER, Liverpool; DR. T. R. BRADSHAW, Liverpool; MR. M. N. GANDEVIA, Bournemouth; DR. A. STEWART, MANCHESTER; MESSRS. J. BRAINSBY AND SONS, Peterborough; DR. BRADY, Sunderland; MR. W. J. RHODES, Glossop; DR. F. M. PIERCE, Manchester; MR. ROBERT BOWEN, WELINGTON; DR. A. HILL, Cambridge; A HOSPITAL PHYSICIAN; MR. GUBLI, London; MR. S. WILSON HOPE, Petworth; MR. J. A. DOUGLAS, Loughbrickland; MR. J. T. NEECH, OSWESTRY; DR. PATRICK HELSH, London; DR. HITCHCOCK, BOURNEMOUTH; MR. W. E. SACKER, London; MR. F. E. H. DAUNT, DUBLIN; MR. T. N. NASH, DUBLIN; DR. GOWAN, NEWTON; DR. MACLEOD, BEVERLEY; MR. T. A. COLLINSON, CHESTER-LE-STREET; MR. CHAUNCEY PUZEY, Liverpool; MR. VINCENT JACKSON, WOLVERHAMPTON; MR. R. KERSHAW, LONDON; MR. J. W. TAYLOR, BIRMINGHAM; DR. GRANT BEY, CAIRO; MR. W. F. HASLAM, BIRMINGHAM; MR. SIMEON SNELL, SHEFFIELD; DR. MICKLE, LONDON; DR. SCHNEE, NICE; DR. MAXWELL, WOOLWICH; MR. D. DE BERDT HOVELL, LONDON; DR. F. FITCH, KIDDERMINSTER; DR. S. MARTIN, LONDON; DR. E. H. JACOB, LEEDS; SIR EDMUND LECHMERE, LONDON; DR. ABRAHAT, SUNDERLAND; MR. H. PERCY DUNN, LONDON; MR. W. MARTINDALE, LONDON; MR. H. BEHREND, LONDON; DR. R. BARNES, LONDON; DR. TATHAM, WIGAN; DR. ALDER SMITH, LONDON; MR. J. WHITEHOUSE, SUNDERLAND; DR. D. WILLIAMS, LONDON; MR. E. WHITE WALLIS, LONDON; DR. NORRY, LONDON; MR. J. G. CLENDINNEN, COSELEY; DR. W. G. JACOT, BLANDFORD; MR. P. H. SQUIRE, LONDON; MR. J. CONRY, KILKELY; DR. W. A. BRAILEY, LONDON; DR. J. K. SPENDER, BATH; DR. R. WADE SAVAGE, LONDON; OBSERVER; DR. C. J. RENSHAW, ASHTON-UPON-MERSEY; A.; MR. HUGH THOMAS, BIRMINGHAM; MR. G. JACKSON, PLYMOUTH; DR. J. W. MOORE, DUBLIN; DR. STYRUP, SHREWSBURY; DR. TATHAM, SALFORD; M.R.C.S.; MR. GEORGE WELLER, WANSTEAD; DR. J. A. LINDSAY, BELFAST; MR. SHIRLEY MURPHY, LONDON; MR. WILLIAM HALGOOD, LONDON; DR. G. VINCENT, MANCHESTER; MESSRS. CURTIS AND HENSON, LONDON; DR. WOOD, BROMSGROVE; DR. C. R. ILLINGWORTH, ACCRINGTON; TARSUS; MR. J. CROMIN, CORK; MR. C. E. HUMPHREYS, LLANFAIR; DR. THIELE, CHATHAM; DR. IRVINE K. REID, LONDON; MR. T. M. EVANS, HULL; MR. J. DEANS, BOURNEMOUTH; MR. J. RABY, TOTNES; MR. H. HOWGRAVE GRAHAM, LONDON; MR. W. PERKINS, GLASTONBURY; DR. STEELE, LONDON; OUR ABERDEEN CORRESPONDENT; MR. NANKIVELL, CHATHAM; DR. ASHBY, MANCHESTER; OUR EDINBURGH CORRESPONDENT; MR. W. E. SCOTT, LONDON; DR. G. W. THOMPSON, BALLAGH; MR. T. D. RANSFORD, BATH; DR. JAMES MORTON, GLASGOW; MR. WILLIAM ELDER, KIRKCALDY; MR. B. A. DANIELL, ABERAVON, TAIBACH; MR. F. A. FLOYER, LONDON; SECRETARY WESTMINSTER SANITARY AID ASSOCIATION; MR. F. L. RICHARDSON, RHAYADER; DR. R. L. MOORHEAD, CARRINGTON; ETC.

BOOKS, ETC., RECEIVED.

Salammbo, of Flaubert: Englished by M. French Sheldon. London: Saxon and Co. 1886.

St. Thomas's Hospital Reports for 1884. New Series. Vol. xiv. Edited by Dr. Seymour J. Sharkey, and Mr. Francis Mason. London: J. and A. Churchill. 1886.

Representative Men and English Traits. By Ralph Waldo Emerson. Edited by G. T. BETTANY. London: Ward, Lock and Co. 1886.

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