

occurred which has put it in the power of the College to carry this into effect, an opportunity which, if now lost, may never recur.

The foundation of an institution of this nature would tend to raise England to the scientific position held by France and Germany, would create a body of men anxious to devote themselves to scientific work, would be in accord with the best wishes of the donor, and would place the Royal College of Surgeons of England amongst the foremost institutions of Europe.

The President and Council would be adding much to their honour if, when an endeavour is being made to strengthen the Empire by a consolidation of the Colonies, they founded an Institute in the mother country which should draw to it students from all parts of her Majesty's dominions.

Dr. Wilks, F.R.S., 72, Grosvenor Street, has acted as secretary.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

A QUARTERLY meeting of the Council was held at the College on Thursday last. The minutes of the Extraordinary Council held in December last were read and confirmed.

The Council, on the recommendation of the Museum Committee, resolved to purchase for the museum the collection of Entozoa, made by the late Dr. T. Spencer Cobbold, and the manuscripts relating thereto.

It was announced that one essay had been received for the Jacksonian Prize.

An analysis of the circular-letter sent to the Fellows for the purpose of ascertaining their feeling regarding the election of members of Council by the Fellows and Members of the College was submitted, and is as follows:—

CIRCULAR TO FELLOWS.

Analysis of Answers.

Number of circulars sent out	...	...	...	987
Answers received	...	...	...	706
Difference	...	...	...	281
Returned through Post for various reasons	...	...	...	21
Unanswered...	...	...	...	260

From the 706 answers, 6 must be deducted as giving no decision one way or the other.

Of the remaining 700 answers, it was stated that in reference to—

Question (a)—In your opinion, should Members of the College be allowed to vote for Fellows as Members of the Council? The numbers were:—

Fellows voting "No"	...	...	...	419
Fellows voting "Yes"—				
Answers unqualified...	...	...	...	181
Answers qualified	...	...	...	95
Total Fellows voting "Yes"	...	...	...	276
Majority for "Noes"	...	...	...	143

And that in regard to—

Question (b)—In your opinion, should Members of the College be eligible for seats on the Council? The numbers were:—

Fellows voting "No"	...	...	...	526
Fellows voting "Yes"—				
Answers unqualified	...	...	...	84
Answers qualified	...	...	...	88
Total Fellows voting "Yes"	...	...	...	172
Majority of "Noes"	...	...	...	354

It was resolved that the Committee on Charters and By-Laws be requested to send in a further report as soon as possible in reference to the proposed changes of charters and by-laws.

Professor HUMPHRY's resignation as a member of the Court of Examiners was received and accepted, to take effect from after the Pass Examination for the Membership now taking place. The election of a successor to him will take place at the next ordinary meeting of Council.

Mr. F. A. FISHER, who had been called on to explain certain advertisements by him, in compliance with the conditions of the Council, undertook to cease from issuing advertisements and publications in violation of the by-laws, and on this understanding the Council took no further action in the matter.

A letter, received from the Metropolitan Counties Branch of the British Medical Association, was read, communicating the resolutions passed at a meeting of that body held at the School of Mines on December 3rd last (the proceedings of which were published in the *BRITISH MEDICAL JOURNAL* of December 11th, page 1185), and it was resolved that the President of the Branch be informed that the letter had been laid before the Council.

The important memorial printed above, in relation to the disposition of the funds accruing to the Council by the Erasmus Wilson bequest was received, and it was resolved that they be informed that the disposal of the funds was already under the consideration of a committee of the Council, to which the memorial will be referred.

Sir SPENCER WELLS moved, and Mr. JONATHAN HUTCHINSON seconded, the following resolution, which was carried by 11 to 8:—"That, although the Council are not prepared to give effect to the recommendation contained in the first resolution carried at the meeting of the Fellows and Members held at the College on November 4th, 1886—the Council are prepared to act upon the second resolution, so far as to appoint a small committee to confer on the subjects of the first resolution with representatives appointed by the Association of Fellows and the Association of Members."

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 19th day of January next, at 2 o'clock in the afternoon.

Tuesday, January 18th, 1887.—Scientific Grants Committee, 5.30 P.M.—Committee on Work of Collective Investigation, 6.30 P.M.—

Wednesday, January 19th, 1887.—Arrangement Committee for Dublin Meeting, 9.30 A.M.—Arrangement Committee for Annual Meetings, 10.30 A.M.—Journal and Finance Committee, 11.30 A.M.

FRANCIS FOWKE, *General Secretary.*

161A, Strand, December 16th, 1886.

BRANCH MEETINGS TO BE HELD.

GLoucestershire BRANCH.—The next ordinary meeting will be held at the Gloucester Infirmary, when Dr. Batten will give his presidential address, on Tuesday, January 18th, at 7.30 P.M.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will be held, by the kind invitation of Dr. Mickle, at Grove Hall, Bow, on Thursday, January 20th, at 8.30 P.M. The chair will be taken by Cornelius Garman, Esq. Dr. Mickle will demonstrate a number of patients illustrating various forms and phases of insanity and general paralysis of the insane. Dr. C. R. Walker will show a patient suffering from locomotor ataxy, with perforating ulcer of the foot.

OXFORD AND DISTRICT BRANCH.—The next general meeting will be held on Wednesday, January 26th, 1887. Members who wish to read papers or show cases are desired to send notice of such intention to one of the honorary secretaries, on or before January 18th.—Dr. DARESHIRE, 60 High Street, Oxford; W. L. MORGAN, Esq., 42, Broad Street, Oxford.

DUBLIN BRANCH.—The annual meeting of this Branch will be held in the Hall of the King and Queen's College of Physicians in Ireland on Thursday, January 27th, at 4 P.M. The President, Dr. Grimshaw, will give an address on the State in its Relation to Medicine.

NORTH OF IRELAND BRANCH.—A meeting of the above Branch will be held in the Belfast Royal Hospital on Thursday, January 27th, at 12 noon. Members who may be willing to contribute papers or read notes of cases are requested to notify same to JOHN MOORE, M.D., Honorary Secretary.

SOUTH EASTERN BRANCH: WEST KENT DISTRICT.—The next meeting of the above District will take place at St. Bartholomew's Hospital, Chatham, on Friday, February 18th. 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 January 20th. Further particulars will be duly announced.—A. W. NANKIVELL, Honorary Secretary, St. Bartholomew's Hospital, Chatham.

HEALTH OF FLORENCE.—The sanitation of Florence, which has been most unfavourably commented upon, in a series of articles in a contemporary, is to be thoroughly inspected and reported upon by a skilled English sanitary engineer; and Dr. Baldwin, of Florence, has started a subscription-list for the purpose.

HOSPITAL AND DISPENSARY MANAGEMENT.

CANTERBURY DISPENSARY.

THE report presented at the fiftieth annual meeting of subscribers to the Canterbury Dispensary showed that, during the existence of the dispensary, 76,210 persons had been attended; nearly 90 per cent. had been visited at their homes. It was recommended that a gratuity of £50 should be presented to the medical officer, Mr. George Rigden, by the governors, in consideration of his fifty years' service. The adoption of the report was moved by the Dean of Canterbury.

A VICTORIA JUBILEE NURSING INSTITUTE.

At Taunton, on Saturday, a largely attended county meeting was held, under the presidency of the Earl of Cork and Orrery, Lord Lieutenant, for the purpose of promoting a movement in connection with the Taunton and Somerset Hospital, to commemorate Her Majesty's jubilee. It was resolved to raise a special fund of £10,000, to be applied in establishing a building to be called the Victoria Jubilee Nursing Institute, in building a children's ward, and in extending the out-patients' department, all of which the medical staff regard as of urgent importance. The sum of nearly £2,500 was subscribed in the room, including £500 given by Dr. Liddon on the condition that £5,000 be raised, and £500 by Dr. Kelly under similar conditions.

JUBILEE MEMORIAL HOSPITAL AT GATESHEAD.

The subscriptions to the building-fund of the proposed Children's Hospital for Gateshead (a memorial of the Queen's Jubilee), already amount to upwards of £1,300. A number of designs for a hospital on the pavilion principle have been received, and are under consideration. The cost of the building and furnishing will be about £5,000; the central portion, which is to be built as early as possible, is to cost about £1,600.

DEAF AND DUMB ASYLUM.

At the annual meeting of the Deaf and Dumb Asylum, held on Monday last at the Cannon Street Hotel, the report presented stated that, as a result of adopting the oral system of teaching the children in the asylum, a serious expenditure had been incurred. At the Margate Asylum for 300 children, a number of additional rooms suitable for small classes were provided, together with new dormitories and other domestic conveniences, as well as a new infirmary. The committee announced that for the future every child in the asylum capable of being so taught would be trained under the oral system. The old and very dilapidated asylum in the Old Kent Road had been demolished, and a new building, capable of holding sixty little children, was nearing completion. In all, 4,763 children had been admitted into the institution.

EDINBURGH ROYAL MATERNITY AND SIMPSON MEMORIAL HOSPITAL.

On February 1st, Dr. Underhill will assume duty, for three months, as Physician on duty at the Royal Maternity Hospital, Edinburgh, in place of Professor Simpson, whose term of office for the present session expires then; while Dr. A. H. F. Barbour will succeed Dr. D. Berry Hart as Assistant-Physician on duty. Messrs. G. N. Sutherland, M.A., M.B., and C.M., and A. Primrose, M.B. and C.M., will act for the next three months as Resident Surgeons, in place of Messrs. Netting S. Fraser, M.B., C.M., and M.R.C.S., and Joseph Tillie, M.B. and C.M., and Scott Scholar, whose term of office has expired.

EDINBURGH FEVER HOSPITAL.

THE report on the Edinburgh Municipal Fever Hospital for the month of December gives a very fair idea of the relative numbers of the various kinds of infectious diseases treated in an institution which is freely open to all in the city, and which have occurred in a municipality where compulsory intimation by the profession has been in force for years. On November 30th, there were 100 inmates—45 adults and 55 children. On December 31st, there were 128 inmates—58 children and 70 adults. These consisted of 15 cases of typhoid fever, one of diphtheria, 92 of scarlatina, 4 of measles, 2 of whooping-cough, 11 of erysipelas, and 3 cases in quarantine. In the report, it was mentioned that £30 15s. had been given by friends of patients treated there.

DUNDEE LUNATIC ASYLUM.

At a quarterly meeting of the Directors of the Royal Lunatic Asylum, held on Monday, the report submitted showed that there were in the asylum 237 pauper patients, and 46 private patients; and that the income (£6,758) for the past six months was £36 in excess of the sum for the corresponding date in the previous year. It was also reported that the amount due to the Bank on the building account for the new asylum at West Green was £53,862. The meeting confirmed the appointment of Dr. James Watson as medical assistant, in place of Dr. Baker, who has received an appointment in the South of England.

PROVIDENT DISPENSARIES AND THE LOWER MIDDLE CLASSES.

DR. ROBERT RENTOUL (78, Hartington Road, Liverpool) writes: In the JOURNAL of January 8th, "M.B." asks for information regarding the above. The question of "wage limit" is a difficult one, and few committees like to discuss it. As the rates of wages vary in the South and Midland Counties, it adds another difficulty. The Manchester Provident Society began with a 30s. wage, but they have now no money limit, but leave the committee and medical men to decide; at the same time, asking others to call their attention to any case of imposition. But it will be found that from 40s. to 45s. is a fair limit. It must be remembered, on the one hand, that as many as six in one family may be bringing in 40s. each; and on the other, that a young man or woman may—when making 50s. weekly—be keeping two old parents. Hence the wide margin for a little worldly common business sense. One of the best plans for stopping abuse is for each "form of application for membership" to be inspected, and signed by the medical man, whom this proposed family wish to be treated by. If he objects to them entering the society, he refuses to sign, and then the committee investigate the case. If the committee agree to pass the family in, then the medical man may refuse to treat them, and if the entire medical staff back each other up, why there the matter ends.

As regards the fees paid, they average thus: Entrance-fee for entire family or single member, 1s.; member's book, 1d.; copy of rules, 1d. (sometimes these are included in entrance fee). Single member, 6d. to 8d.; man and wife, 10d.; each person under 14, 3d. per month. Generally not more than four or five children are paid for, all the others being entitled to benefits. Some object to this, and hold that each child should pay 1d. per week. If there be a family of eight or twelve, this would be too much.

The above fees cover medical treatment and medicines. The Manchester Society charges less, but makes the members pay for medicines—one penny for prescription. This is a good plan in some cases, and when there is a dispenser, but a medical man should not collect coppers. The confinement fee is usually one guinea, including vaccination. For others the vaccination fee varies from 1s. to 2s. 6d. If it be too low, the public vaccinators are robbed of their fees, and bad competition springs up.

The dental fees vary; extractions, scalings and advice, are included in the monthly fees; extraction with gas, 3s. 6d.; with chloroform, 5s.; stopping with amalgam, 1s. 6d. per tooth; stopping with gold, 4s. per tooth; artificial tooth and vulcanite plate, 4s. 6d.

I have not yet been able to draw up, or find, a satisfactory scale of surgical fees, but such should be arranged for at once. In the "club Dr." system, the club pays the medical man as little as possible—from 3s. 6d. to 4s. per member per annum. Then, again, the medical man does as little as he can. The majority of his club cases "cannot be treated properly at home," and so "must go to the hospital." Not being properly paid, he does not operate, and so there is a plan of shirking responsibilities, and throwing it on other shoulders all round.

"M.B." will find that if he makes the members pay weekly, he will have a sorry time. All should pay monthly or quarterly, and in advance. They should be encouraged to do so, by ruling that those who pay monthly, and in advance, will get a discount of 1d. in the shilling, and those who pay quarterly, 2d. This is much better than paying a collector 10 or 15 per cent., or £1 weekly.

One word as to success. It takes 2,500 to 3,000 paying members to make a Provident Society a success. If it be in a village or small town there may not be this number, hence there must be honorary subscribers. In small towns there should always be a cottage home or hospital in connection with the society, the members obtaining special facilities when entering it.

If "M.B." wishes any more information I will give it to him, and if he wishes his provident society to succeed, he must be willing to work it for two or three years without much gain.

It would be better not to talk of the "lower" middle classes, each man who pays his way according to the gifts given him being no lower than his neighbor. Because I may make £1 a week, I am not "lower" than he who makes £10. If medical men are going to give their services to a provident insurance in a manner similar to the Poor Law medical men, and treat members as being low, and paupers, then the provident medical society will not be a success.

INDIA AND THE COLONIES.

INDIA.

SICKNESS AMONG TROOPS AT BURMAH.—A correspondent writing from Kyouske, gives the following facts respecting the large amount of sickness which, in spite of the cold weather, prevails among the Bombay troops in Upper Burma: Out of a total of about 240 men of the 25th B.L.I., in garrison at Kyouske, on November 29th, no fewer than 113 were in hospital with fever. Sixteen of them were so bad that they have left for Mandalay; and the daily sick report gets worse instead of better. The regiment has been six months in the district, and appears to be getting unhealthy. Of the 56 military police at Kumé, there are at times not more than 13 fit for duty, the remainder being in hospital with fever. On November 23rd, a batch of 161

(chiefly Madras troops) left the Mandalay Field Hospitals for the General Hospital, Rangoon.

VENEREAL DISEASE IN INDIA.—A measure, which will take the place to some extent of the Contagious Diseases Act in Calcutta, is now before the Government of India.

ATTEMPTED MURDER OF SURGEON-MAJOR OLDHAM.—Surgeon-Major Oldham, 1st Goorkhas, and two other members of his family, have, according to a report from Dharmasala, narrowly escaped being murdered by a *khitmatgar*. The ruffian first made an attack on the elder Miss Oldham, whose jaws and neck he cut with a carving-knife; he was, however, checked in his murderous intentions by a younger daughter, who wrenched the knife from his grasp. Seizing another knife, he finally attacked Surgeon-Major Oldham, who, in the scuffle, fell undermost. The other servant fled. The *khitmatgar* was secured and handed over to the police.

SOUTH AFRICA.

ST. JOHN AMBULANCE ASSOCIATION.—An interesting case of "first aid" is reported in the *Cape Mercury* of December 11th. The local secretary of the King Williamstown Centre of the St. John Ambulance Association, Mr. A. J. Fuller, cut his wrist with a chisel from side to side. Just as he was losing consciousness from loss of blood, his son, a certificated pupil, arrived, arrested the bleeding by applying an extemporised tourniquet to the "brachial" artery, and bandaged up the hand in such a manner that, on the arrival of Dr. Ross, two hours afterwards, he stated he could not have done more if he had been present himself on the spot at the time. Another certificated pupil of the same centre successfully set a broken leg, in a country district seven miles distant from any place where the services of a medical man could be obtained.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

CLINICAL STUDY IN THE METROPOLITAN POOR-LAW INFIRMARIES.

At the recent adjourned meeting of the medical superintendents of poor-law infirmaries, held at St. George's Union Infirmary, Fulham Road, Dr. Lloyd in the chair, the following resolutions were adopted moved by Dr. SPENCER, seconded by Dr. NEAL: "That it is desirable that the medical superintendents of the metropolitan infirmaries be authorised to call into consultation a specialist of eminence when the circumstances of any case under their charge may be deemed by them to render such a course advisable. 2. That it is desirable such consultant should receive a fee in each case. 3. That any such consultant called in should be on the permanent staff of a London hospital. 4. To advise in the treatment of cases, and only when they have been called upon to do so by the medical superintendents." Moved by Dr. WEBSTER, seconded by Mr. LUNN: 5. "That it is desirable, in view of the large amount of clinical material in the metropolitan infirmaries, both in the interests of the patients and of medical science, that one or more qualified clinical assistants be appointed in each infirmary, in addition to the present medical staff."

The Commissioner of Sewers, on January 11th, resolved to expend £2,300 in sinking wells to supply artisans' dwellings at the east end of the City with water, as a protest against the extravagant charges of the New River Company.

UN SOUND MEAT: HEAVY PENALTY.

The sanitary authority of Portsmouth summoned, on Wednesday last, a bailliff, who had consigned to market ten pieces of meat unfit for human food. The meat was seized at the railway station and condemned by a medical man and a magistrate. The evidence for the prosecution was that the animals from which the meat had been cut had suffered from fever, probably pleuro-pneumonia. The Bench fined the defendant £100 and costs.

HEALTH OF CORK.

The monthly report for December, presented to the Town Council at a recent meeting, is as follows:

The total number of deaths, including 21 which took place in the workhouse, was 137, of which 7 were due to infectious diseases—namely, typhoid fever, 3 deaths; scarlatina, 2; diarrhoea, 2. The

births registered amounted to 145. The annual mortality calculated on these figures gives a total ratio of 22.22 per 1,000 inhabitants, and an urban death-rate of 18.82. The infant-mortality was 2.2, and 1.1 died from infectious diseases. The birth-rate was 23.52; and compared with the corresponding month of the previous year, the death-rate was lower and the birth-rate higher by about 2 and 5 per 1,000 respectively. During the past month there has been a complete absence of typhus fever from the city, and a marked decrease in the number of typhoid cases returned as compared with the four weeks of the preceding month.

THE DISPOSAL OF PAUPER IDIOTS.

A CASE which recently came before the sitting magistrate at one of the metropolitan police courts illustrates the inadequacy of the present arrangement for dealing with pauper idiots or lunatics, or the defective manner in which they are understood. According to the *Times* report, an application, which in the event was granted, was made to the magistrate to order the medical examination of an idiot boy, with a view to his being placed under proper control in some suitable asylum. The lad had been sent to one of the county asylums. The medical officer there, finding that the case was not an acute one, after some time certified that it was suitable for treatment in the Darent Idiot Asylum, and remitted the patient to the union. There he was placed in the workhouse, on the order of the guardians acting under the advice of their medical officer, and they refused to place the lad in the infirmary or in the Darent Asylum. The lad's father took him home, kept him till "dangerous symptoms" again arose, and then, successively, applied to the guardians, the relieving officer, the magistrate, the Commissioners in Lunacy, and, at their advice, again to the relieving officer, who again brought the case before the magistrate. Without fuller details, we cannot say whether the difficulties raised in this case were justifiable; but if the report is accurate, and does not omit essential points, we do not see why the case should not have been dealt with promptly under 16 and 17 Vict., c. 97, s. 67, and the lad sent to an asylum, if found, on examination, to be a suitable case for admission.

HEALTH OF ENGLISH TOWNS.

DURING the week ending Saturday, January 1st, 5,397 births and 4,374 deaths were registered in the twenty-eight large English towns, including London, dealt with in the Registrar-General's Weekly Return, which have an estimated population of 9,993,817 persons. The annual rate of mortality, which had been 20.7 and 21.5 per 1,000 in the two preceding weeks, further rose during the week under notice to 25.1, and exceeded the rate recorded in any week since March last. The rates in the several towns, ranged in order from the lowest, were as follow:—Blackburn, 16.8; Derby, 17.6; Sunderland, 18.4; Bradford, 19.5; Sheffield, 20.1; Salford, 20.7; Huddersfield, 21.2; Nottingham, 21.3; Leicester, 21.7; Birkenhead, 22.4; Birmingham, 22.9; Bristol, 22.9; London, 23.9; Brighton, 24.2; Bolton, 24.4; Portsmouth, 24.9; Leeds, 28.5; Plymouth, 29.3; Preston, 29.9; Wolverhampton, 30.7; Oldham, 30.8; Hull, 31.1; Newcastle-upon-Tyne, 31.6; Norwich, 31.7; Manchester, 32.3; Liverpool, 32.4; Cardiff, 35.2; and the highest rate during the week, 36.0 in Halifax. The death-rate in the twenty-seven provincial towns averaged 26.1 per 1,000, and exceeded by 2.2 the rate recorded in London, which, as before stated, did not exceed 23.9 per 1,000. The 4,374 deaths registered in the twenty-eight towns during the week under notice included 537 which were referred to the principal zymotic diseases, against 386 and 434 in the two preceding weeks; of these, 244 resulted from measles, 90 from whooping-cough, 50 from scarlet fever, 56 from "fever" (principally enteric), 36 from diarrhoea, 30 from diphtheria, and one from small-pox. These 537 deaths were equal to an annual rate of 3.1 per 1,000. The zymotic rate in London during the week under notice was equal to 2.6 per 1,000, while in the twenty-seven provincial towns it averaged 3.5, and ranged from 0.0 and 0.9 per 1,000 in Derby and Brighton, to 5.3 in Halifax, 6.5 in Wolverhampton, and 7.2 in Leeds. The deaths referred to measles, which had been 141 and 182 in the two preceding weeks, further rose to 244 during the week under notice, and were proportionately most numerous in Newcastle-upon-Tyne, Halifax, Leeds, and Wolverhampton. The 90 fatal cases of whooping-cough showed a further increase upon recent weekly numbers, and caused the highest death-rates in Sunderland, Manchester, Oldham, and Huddersfield. The deaths from scarlet fever, which had been 77 and 71 in the two previous weeks, rose again to 80, and caused the largest proportional fatality in Salford, Newcastle-upon-Tyne, Bradford, and Manchester. The fatal cases of fever, which in the three preceding weeks had declined from 50 to 34, rose again during the week under notice to 56, and caused the highest rates in Portsmouth, Preston, Norwich, and Cardiff. The 36 deaths from diarrhoea differed but slightly from recent weekly numbers. The 30 fatal cases of diphtheria were within one of the number in the previous week, and included 9 in London, 5 in Portsmouth, 3 in Birmingham, 3 in Wolverhampton, and 2 in Newcastle-upon-Tyne. Small-pox caused one death in Portsmouth, but not one in London, or in any of the twenty-six other large provincial towns; and no small-pox patients were under treatment in any of the Metropolitan Asylum Hospitals during the week ending Saturday, January 1st. The death-rate from diseases of the respiratory organs in London during the week under notice was equal to 7.2 per 1,000, and slightly exceeded the average. The causes of 129, or 2.9 per cent. of the 4,374 deaths registered during the week in the twenty-eight towns were not certified, either by registered medical practitioners or by coroners.

In the twenty-eight large English towns, including London, dealt with in the Registrar-General's weekly return, which have an estimated population of 9,245,099 persons, 6,000 births and 4,690 deaths were registered during the week ending Saturday, January 8th. The annual rate of mortality, which had been 20.7, 21.4, and 25.1 per 1,000 in the three preceding weeks, further rose during the week under notice to 26.5, and exceeded the rate recorded in any week since March last. The rates in the several towns, ranged in order from the lowest, were as follow:—Sunderland, 15.7; Derby, 17.2; Nottingham, 18.3; Brighton, 18.9; Portsmouth, 18.9; Hull, 20.4; Sheffield, 21.4; Birkenhead, 23.5; Blackburn, 23.7; Birmingham, 24.4; Leicester, 24.4; Salford, 25.8; London, 26.3; Bradford, 26.3; Wolverhampton, 26.5; Oldham, 26.8; Cardiff, 26.9; Huddersfield, 27.2; Bristol, 27.3; Bolton, 28.3; Liverpool, 28.8; Preston, 29.6; Halifax, 30.3; Norwich, 31.5; Newcastle-upon-Tyne, 33.2; Leeds, 34.0; Manchester, 36.4; and the highest rate during the week, 40.6 in Plymouth. In the twenty-seven provincial

towns the death-rate averaged 26.6 per 1,000, and slightly exceeded the rate recorded in London, which, as before stated, was 26.3 per 1,000. The 4,690 deaths registered in the twenty-eight towns during the week under notice included 235 which were referred to measles, 81 to whooping-cough, 63 to scarlet fever, 47 to "fever" (principally enteric), 28 to diarrhoea, 21 to diphtheria, and not one to small-pox; in all, 475 deaths resulted from these principal zymotic diseases, against numbers increasing from 336 to 537 in the three preceding weeks. The zymotic death-rate was equal to 2.7 per 1,000. In London the zymotic rate did not exceed 2.1, while in the twenty-seven provincial towns it averaged 3.2 per 1,000, and ranged from 0.2 and 0.4 in Nottingham and in Brighton, to 5.4 in Manchester, 6.4 in Leeds, and 7.0 in Newcastle-upon-Tyne. The fatal cases of measles, which had risen in the three preceding weeks from 141 to 244, declined during the week under notice to 235; this disease caused the highest death-rates in Manchester, Newcastle-upon-Tyne, and Leeds. The deaths referred to whooping-cough, which had been 54, 75, and 90 in the three preceding weeks, declined again to 81, and were proportionally most numerous in Oldham and Plymouth. The 63 fatal cases of scarlet fever showed a decline of 17 from the number in the previous week and caused the highest death-rates in Norwich, Liverpool and Bristol. The deaths referred to "fever," which had been 34 and 56 in the two preceding weeks, declined during the week under notice to 47, and caused the highest proportional fatality in Preston. The 28 fatal cases of diarrhoea showed a further decline from recent weekly numbers. The deaths referred to diphtheria, which had declined in the three preceding weeks from 37 to 30, further fell to 21, a lower number than in any week since August last; they included 9 in London, 2 in Bristol, 2 in Manchester, and 2 in Preston. No fatal case of small-pox occurred during the week under notice, either in London or in any of the twenty-seven provincial towns, and no small-pox patients were under treatment in any of the Metropolitan Asylum hospitals during the week ending Saturday, January 8th. The death-rate from diseases of the respiratory organs in London during the week under notice was equal to 9.0 per 1,000, and considerably exceeded the average. The causes of 120, or 2.6 per cent. of the 4,690 deaths registered during the week in the twenty-eight towns were not certified, either by registered medical practitioners or by coroners.

HEALTH OF SCOTCH TOWNS.

In the eight principal Scotch towns, having an estimated population of 1,283,977 persons, 813 births and 641 deaths were registered during the week ending Saturday, January 1st. The annual rate of mortality, which had increased from 22.0 to 26.3 per 1,000 in the three preceding weeks, declined during the week under notice to 26.0, but exceeded by 0.9 per 1,000 the mean rate for the same period in the twenty-eight large English towns. Among these Scotch towns, the rate was equal to 16.4 in Perth, 18.5 in Leith, 19.9 in Aberdeen, 21.8 in Dundee, 22.5 in Edinburgh, 22.5 in Paisley, 24.6 in Greenock, and 32.9 in Glasgow. The 641 deaths registered during the week under notice in these Scotch towns included 21 which were referred to whooping-cough, 16 to measles, 13 to diarrhoea, 12 to scarlet fever, 10 to "fever," and 1 to diphtheria; in all, 73 deaths resulted from these principal zymotic diseases, against 75 and 63 in the two preceding weeks. These 73 deaths were equal to an annual rate of 3.0 per 1,000, which slightly exceeded the average rate during the same period in the twenty-eight large English towns. The highest zymotic rates in the Scotch towns during the week under notice were recorded in Leith, Paisley, and Glasgow. The deaths referred to whooping-cough, which had been 19 and 15 in the two preceding weeks, rose again during the week under notice to 21, of which 18 occurred in Glasgow. The 16 fatal cases of measles showed a further increase upon recent weekly numbers, and were all recorded in Glasgow. The 13 deaths from diarrhoea slightly exceeded those recorded in the two previous weeks. The fatal cases of scarlet fever, which had declined from 25 to 13 in the four preceding weeks, further fell during the week under notice to 12, and included 5 in Glasgow and 5 in Dundee. The 10 deaths referred to fever exceeded by 6 the number in the preceding week, and included 3 in Glasgow, and 2 in Greenock. The fatal case of diphtheria occurred in Leith. The death-rate from diseases of the respiratory organs in these Scotch towns was equal to 7.5 per 1,000, against 7.2 in London. As many as 88, or 13.7 per cent. of the 641 deaths registered during the week in these Scotch towns were uncertified.

During the week ending Saturday, January 8th, 869 births and 746 deaths were registered in the eight principal Scotch towns, having an estimated population of 1,290,000 persons. The annual rate of mortality, which had been 26.2 and 25.6 per 1,000 in the two preceding weeks, rose again to 29.9 during the week under notice, and exceeded by 3.4 per 1,000 the mean rate for the same period in the twenty-eight large English towns. Among these Scotch towns, the rate was equal to 18.7 in Leith, 21.1 in Perth, 24.0 in Greenock, 25.3 in Aberdeen, 26.5 in Edinburgh, 27.3 in Dundee, 35.0 in Glasgow, and 40.2 in Paisley. The 746 deaths registered during the week under notice in these Scotch towns included 94 which were referred to the principal zymotic diseases, against 63 and 73 in the two preceding weeks; of these, 27 resulted from whooping-cough, 18 from diarrhoea, 17 from measles, 13 from scarlet fever, 12 from diphtheria, 7 from "fever," and not one from small-pox. These 94 deaths were equal to an annual rate of 3.8 per 1,000, which exceeded by 1.1 the mean zymotic death-rate during the same period in the twenty-eight large English towns. The highest zymotic rates in the Scotch towns during the week under notice were recorded in Aberdeen, Paisley, and Glasgow. The fatal cases of whooping-cough, which had been 15 and 21 in the two preceding weeks, further rose to 27, of which 18 occurred in Glasgow, 3 in Edinburgh, and 3 in Paisley. The 18 deaths referred to diarrhoeal diseases considerably exceeded the average. The fatal cases of measles, which in the four preceding weeks had steadily increased from 5 to 16, further rose during the week under notice to 17, of which 16 occurred in Glasgow. The 13 deaths from scarlet fever showed a slight increase upon the number in the preceding week, and included 9 in Glasgow and 3 in Edinburgh. The fatal cases of diphtheria, which had been 7 and 1 in the two previous weeks, rose to 12 during the week under notice, of which 7 were recorded in Glasgow and 4 in Edinburgh. The death-rate from diseases of the respiratory organs in these Scotch towns was equal to 8.9 per 1,000 during the week, against 9.0 in London. The causes of 98, or 13.1 per cent., of the 746 deaths registered in these Scotch towns were uncertified.

HEALTH OF IRISH TOWNS.

In the week ending Saturday, January 1st, 1887, 561 deaths were registered in the sixteen principal town-districts of Ireland. The average annual death-rate represented by the deaths registered was 33.8 per 1,000 of the population. The deaths registered in the several towns, alphabetically arranged, corresponded to the following annual rates per 1,000: Armagh, 25.8; Belfast, 32.0; Cork, 34.4;

Drogheda, 33.8; Dublin, 36.3; Dundalk, 13.1; Galway, 23.5; Kilkenny, 25.4; Limerick, 40.5; Lisburn, 9.7; Londonderry, 35.7; Lurgan, 10.3; Newry, 21.1; Sligo, 19.2; Waterford, 53.3; Wexford, 42.8. The deaths from the principal zymotic diseases in the sixteen districts were equal to an annual rate of 2.8 per 1,000, the rates varying from 0.0 in nine of the districts to 19.6 in Londonderry; the 20 deaths from all causes registered in that district comprising 10 from measles and 1 from diarrhoea. Among the 136 deaths from all causes registered in Belfast are 4 from scarlatina, 1 from whooping-cough, 2 from simple continued fever, 2 from enteric fever, and 3 from diarrhoea; and the 53 deaths in Cork comprise 2 from enteric fever and 1 from diarrhoea. In the Dublin Registration District, the births registered during the week amounted to 210, and the deaths to 257. The deaths represent an annual rate of mortality of 38.0 in every 1,000 of the estimated population; omitting the deaths of persons admitted into public institutions from localities outside the district, the rate was 36.3 per 1,000. Twenty-three deaths from zymotic diseases were registered, being 1 over the number for the preceding week, but 9 below the average for the corresponding week of the last ten years; they comprise 11 from scarlet fever (scarlatina), 1 from cerebro-spinal fever, 4 from enteric fever, 2 from diarrhoea, 2 from erysipelas, etc. Fifty-three deaths from diseases of the respiratory system (including 35 from bronchitis and 9 from pneumonia or inflammation of the lungs) were registered, being 15 over the number for the preceding week, but 7 under the average for the fifty-second week of the last ten years. The deaths of 18 children (including 9 infants under 1 year old) were ascribed to convulsions. Seven deaths were caused by apoplexy, 3 by epilepsy, 11 by other diseases of the brain and nervous system (exclusive of convulsions), and 18 by diseases of the circulatory system. Phthisis or pulmonary consumption caused 28 deaths, mesenteric disease 4, and cancer 3. Nine accidental deaths and 1 case of homicide were registered. In 42 instances, the cause of death was "uncertified," there having been no medical attendant during the last illness.

MEDICAL NEWS.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following gentlemen passed their Primary Examination in Anatomy and Physiology at a meeting of the Board of Examiners in Anatomy and Physiology on January 8th, and when eligible will be admitted to the Pass Examination, namely:

J. S. McGowan, R. E. Lord, and F. W. Begbie, students of Owens College, Manchester; P. B. Morris, of Liverpool; D. R. P. Stephens, of Cambridge University School of Medicine; W. J. Haslett and J. D. Wynne, of Dublin; J. H. Leadbeater, of Charing Cross Hospital; C. J. Girling, of Guy's Hospital.

Passed in Anatomy only.

L. W. Westall, of St. Bartholomew's Hospital; R. C. Rankin, of Liverpool; W. Bott, of Birmingham; J. Lupton, of Owens College, Manchester; F. Cole, of Melbourne University.

Passed in Physiology only.

G. Sidley, of Owens College, Manchester; J. H. Dawber, of Middlesex Hospital; J. Slatter, of Charing Cross Hospital; and W. J. B. Robinson, of London Hospital.

Passed on January 10th in Anatomy only.

T. H. Leggett, of St. Bartholomew's Hospital.

Passed in Physiology only.

R. W. Logan, of St. Thomas's Hospital, and C. T. Standing, of King's College.

Passed on January 11th in Anatomy only.

H. W. C. B. Cave, H. Vermaak, of Birmingham; R. B. Morris, R. H. Read, G. S. Pope, F. W. A. Stolt, of Owens College, Manchester; P. E. Davies, of Liverpool; A. H. Wilson, of Harvard; A. F. McVety, and W. F. Cory, of Kingston, Canada; H. P. Johnson, of Cambridge; R. A. Cleveland, of University College; A. W. Lyons, of King's College.

Passed in Physiology only.

A. L. Chignell and W. Hichens, of London Hospital; W. F. W. Wilding and T. Eytton-Jones, of Liverpool; A. M. Ewing, of Toronto; A. H. Barstow and L. Robinson, of Leeds; G. R. Figg, of Owens College, Manchester; H. G. L. Allford and W. J. Rugg, of King's College; A. S. Phillips, of St. Thomas's Hospital; F. S. D. Hogg, of St. George's Hospital; C. T. Bowen, of St. Bartholomew's Hospital.

SOCIETY OF APOTHECARIES OF LONDON.—The following gentleman passed the examination in the Science and Practice of Medicine, Surgery, and Midwifery, and received a certificate to practise on Thursday, January 6th, 1887.

Strickland, Percy Charles Hutchison, M.R.C.S., 11, Eldersly Grove, West Dulwich.

MEDICAL VACANCIES.

The following vacancies are announced.

BEDFORD GENERAL INFIRMARY AND FEVER HOSPITAL.—Resident Surgeon. Salary, £100 per annum, with apartments and board, etc. Applications by February 3rd to the Secretary.

BIRMINGHAM GENERAL HOSPITAL, Jaffray Suburban Branch.—Resident Medical Officer. Salary, £150 per annum, with board, etc. Applications by January 29th to Henry Fox, Esq., R.N.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—Resident Clinical Assistant. Applications by January 15th to the Secretary, 24, Finsbury Circus, E.C.

CHELSEA HOSPITAL FOR WOMEN, Fulham Road, S.W.—Assistant Physician. Applications by January 31st to the Secretary.

CHORLEY DISPENSARY.—House-Surgeon and Apothecary. Salary, £130 per annum, with house. Applications by January 20th to B. Stanton, Esq., 14, High Street, Chorley.

EAST SUFFOLK HOSPITAL, Ipswich.—House-Surgeon. Salary, £100 per annum, with board, etc. Applications by January 26th to the Secretary.

ENNISCORTHY UNION.—Medical Officer, Ferns Dispensary. Salary, £100 per annum, and fees. Applications by January 22nd to Robert Lett, Esq.

ESSEX AND COLCHESTER HOSPITAL.—Physician. Applications to the Secretary.

FLINTSHIRE DISPENSARY.—House-Surgeon. Salary, £100 per annum, with furnished house, etc. Applications by January 25th to the Secretary, Bagdet Street, Holywell.

GREAT NORTHERN CENTRAL HOSPITAL, Caledonian Road, N.—Surgeon. Applications by January 26th to the Secretary.

LAMPETER UNION.—Medical Officer. Salary, £30 per annum, and fees. Applications by January 27th to D. Lloyd, Esq.

MALDON UNION.—Medical Officer and Public Vaccinator. Salary, £65 per annum, and extras. Applications by January 15th to A. C. Freeman, Esq.

NATIONAL ORTHOPEDIC HOSPITAL.—Surgical Registrar and Anæsthetist. Applications by February 1st to the Secretary.

NORTH-WEST LONDON HOSPITAL, Kentish Town Road.—Assistant Resident Medical Officer. Applications by January 17th to the Secretary.

NORTH LONDON HOSPITAL FOR CONSUMPTION, Hampstead and London. Resident Medical Officer. Salary, £40 per annum. Applications by January 17th to the Secretary, 216, Tottenham Court Road.

RETFORD DISPENSARY.—Surgeon. Salary, £120 per annum, with rooms, coals, gas, and attendance. Applications to the Secretary, West Retford Rectory, Retford.

SCARBOROUGH HOSPITAL AND DISPENSARY.—House-Surgeon and Acting Secretary. Salary, £50 per annum, with board and lodging. Applications by January 20th to the Medical Staff.

ST. PANCRAS AND NORTHERN DISPENSARY.—Honorary Physician. Applications by February 13th to H. P. Bodkin, Esq., 23, Gordon Street, Gordon Square, W.C.

SEAMENS' HOSPITAL, Greenwich, S.E.—House-Surgeon. Salary, £50 per annum, with board, etc. Applications by January 22nd to the Secretary.

UNIVERSITY OF EDINBURGH.—Examiner in Clinical Medicine. Salary, £75 per annum, and extras. Applications by January 17th, 1887, to the Secretary.

UNIVERSITY OF EDINBURGH.—Examiner in Surgery. Salary, £75 per annum, and extras. Applications by January 17th, 1887, to the Secretary.

UNIVERSITY OF EDINBURGH.—Examiner in Materia Medica. Salary, £75 per annum, and extras. Applications by January 17th, 1887, to the Secretary.

UNIVERSITY OF EDINBURGH.—Examiner in Physiology. Salary, £75 per annum, and extras. Applications by January 17th, 1887, to the Secretary.

UNIVERSITY OF EDINBURGH.—Examiner in Pathology. Salary, £75 per annum, and extras. Applications by January 17th, 1887, to the Secretary.

WORCESTER GENERAL INFIRMARY.—House-Surgeon. Salary, £100 per annum, with board and residence. Applications by February 7th to the Secretary.

MEDICAL APPOINTMENTS.

BLUETT, George Mallack, M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Physician to the General Lying-in Hospital, York Road, Lambeth, *vice* W. G. Holloway, M.B. Cantab., resigned.

CALDER, Mr. Frank, appointed Medical Tutor to the University College, Bristol, *vice* W. C. Lysaght, L.R.C.P., M.R.C.S., resigned.

CURRIE, George Burnett, M.A., M.B., C.M. Abdn. Univ., appointed to be District Medical Examiner of Recruits for the Army and Militia, *vice* Dr. Mackie, deceased.

DAMIAN, F. G. Claxton, M.R.C.S. Eng., L.R.C.P. Lond., L.S.A., appointed House-Surgeon to the Grimsby and District Hospital.

DIGHTON, Adair A., L.R.C.P., L.R.C.S., appointed Honorary Medical Officer to the Branch Dispensary of the Cheltenham General Hospital and Dispensary.

GORDON, Robert, M.B., C.M. Ed., appointed Honorary Medical Officer to the Sidmouth Cottage Hospital.

HACKETT, Harry Eugene, L.R.C.P. Lond., M.R.C.S. Eng., appointed Medical Officer and Public Vaccinator to the Gorton District of the Chorlton Union, Manchester, *vice* R. E. Hammond, L.R.C.P., M.R.C.S., resigned.

HOPKINS, Thomas, M.B., B.Ch. Dubl. Univ., has been appointed House-Surgeon to Sir Patrick Dun's Hospital, Dublin.

HUMBLE, George A., M.D., M.R.C.P., appointed Physician to the Spanish Mutual Benevolent Society of Viedma, Patagones, Argentine Republic, South America.

PERCIVAL, A. S., M.R.C.S., appointed Resident Clinical Assistant to the Hospital for Consumption, Brompton, *vice* Mr. S. S. Sprigg, resigned.

REYNOLDS, G. H., M.B., C.M., appointed Junior Assistant Medical Officer to the Hospital for Insane, Barnwood, *vice* F. Silva White, M.R.C.S., L.S.A., resigned.

THORNTON, Bertram, M.R.C.S., L.R.C.P. Lond., appointed Surgeon to the Royal Sea-bathing Infirmary, Margate, *vice* Dr. T. Smith Rowe, appointed Consulting Surgeon.

MANCHESTER MEDICAL SOCIETY.—List of officer-bearers for 1887. *President*, James Hardie, M.D.; *Vice-Presidents*, Charles James Cullingworth, M.D., Julius Dreschfeld, M.D., James Ross, M.D., Alfred William Stocks; *Treasurer*, Charles Edward Glascott, M.D.; *Secretary*, Frederick Armitage Southam, M.B., 242, Oxford Road, Manchester; *Members of Committee*, James Brassey Brierley, M.D., William Edward Burnett, James Fielden Howard, M.D., William N. Maccall, M.D., Frederick Melland, Frederick Morrish Pierce, M.D., Thomas Carlton Railton, M.D., George James Robertson, M.B., William Japp Sinclair, M.D., George Arthur Wright,

M.B., William Yeats, M.D., Alfred Harry Young, M.B. The above, with the past Presidents of the Society and two representatives of the Council of the Owens College, form the Committee. *Library Committee*, Abraham Matthewson Edge, M.D., Abraham Emrys-Jones, M.D., Siegmund Moritz, M.D., James Ross, M.D., William Yeats, M.D.; *Auditors*, James Niven, M.B., Simeon Holgate Owen, M.D.

REGISTRATION OF SANITARY PLUMBERS.—On Saturday, January 8th, plumbers from Folkestone, Salisbury, Cardiff, Colchester, Leeds, and various districts of London, attended at the City and Guilds' Technical Institute, Finsbury, to undergo practical examination, in order to qualify themselves for registration. The examination included pipe-bending, joint-making, the formation of roof-gutters, cisterns, etc. After practical examinations in these branches, the candidates were required to answer questions prepared by the Board of Examiners, and directed to testing the candidates' knowledge of materials, construction, and sanitation. The candidates on this occasion were chiefly journeymen.

MEDICAL MAGISTRATE.—At the last Quarter Sessions for Carlisle, Dr. Barnes took the oaths as a Justice appointed by the Lord Chancellor. Dr. Barnes took an influential part in founding the Border Counties' Branch of the British Medical Association. He was the first and a most energetic secretary of the branch, and its eighth president. He originated the Hospital Sunday movement in Cumberland, whereby the medical charities in the county have received an aggregate sum of nearly £19,000.

JUBILEE HOSPITALS.—A suggestion, which has met with a good deal of favour in Folkestone, is, that the Queen's jubilee should be commemorated in that town by the foundation of a hospital.—In Carnarvon, a cottage hospital, which is said to be sadly wanting in that town, would it is thought form a fitting memorial of the jubilee.

SURGICAL INSTRUMENTS IN JAPAN.—From the report of the Austro-Hungarian Consul at Yokohama, it appears that, as a result of the presence of German instructors there, surgical instruments are imported exclusively from Berlin.

DR. MILES, of the Manchester Royal Eye Hospital, has been elected a Vice-President of the ophthalmic section of the International Medical Congress, Washington.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—MEDICAL SOCIETY OF LONDON, 8.30 P.M. Dr. J. Langdon Down (Second Lettsomian Lecture): On some of the Mental Affections of Childhood and Youth.

TUESDAY.—PATHOLOGICAL SOCIETY, 8.30 P.M. Address by the President. Mr. Fenwick: Section of Hypertrophied Bladder from a case of Stricture. Dr. Handford: Patty Tumour of Heart. Dr. Ord: Spontaneous Disintegration of Vesical Calculus. Dr. Sharkey: Infantile Paralysis of long standing. Mr. Bland Sutton: Diseases of Genito-Urinary Organs of Animals. Mr. D'Arcy Power: A Neglected Point in the Pathology of Colles' Fracture. Card Specimens: Dr. Handford: Specimens of (Esophageal Disease. Dr. Sharkey: Syphilitic Arteritis. Dr. Maudsley: Ulceration of Trachea, with perforation of Aorta. Dr. B. O'Connor: Mediastinal Tumour.

WEDNESDAY.—ROYAL METEOROLOGICAL SOCIETY, 7 P.M. Ordinary Meeting. Hon. Ralph Abercromby: On the Identity of Cloud Forms all over the World; and on the General Principles by which their indications must be read; and On the Cloud to which the name "Roll-Cumulus" has been applied. These papers will be illustrated by pictures thrown on the screen by a lime-light lantern. At 8 P.M. the Annual General Meeting. Address by the President, Mr. W. Ellis, F.R.A.S.

THURSDAY.—HARVEIAN SOCIETY OF LONDON, 8 P.M. Annual General Meeting. Election of officers. President's Address. *Conversazione*. PARKES MUSEUM OF HYGIENE, 5 P.M. Mr. M. Ogle Tarbotton: Engineering and Architecture in relation to Sanitary Science.

FRIDAY.—SOCIETY OF MEDICAL OFFICERS OF HEALTH, 7.30 P.M. Dr. C. E. Saunders: Legislation for the Purification of Rivers, and its failure.

BIRTHS, MARRIAGES, AND DEATHS.

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

BIRTH.

HILLS.—On December 27th, 1886, at Carlton House, Prince of Wales Road, Battersea Park, S.W., the wife of A. Phillips Hills, M.R.C.S.E., F.S.Sc., of a daughter (Lorna).

MARRIAGE.

CREERY—STIRLING.—On January 6th, at St. John's Church, Killowen, Coleraine, by the father of the bridegroom, assisted by the Rev. James Stewart, rector of the parish, John Tate Creery, M.B., second son of the Rev. Canon Creery, Rector of Kilmore, co. Down, to Julia Mary (May), only child of the late Major Thomas Stirling, H.M. 64th Regiment.

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, daily, 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, 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, Tu., 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, Tu., 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., 1.30; Skin, W., 1.30; Throat, Tu. F., 1.30; Children, S., 1.30; 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, M., 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.

MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT UNDER ANY CIRCUMSTANCES BE RETURNED.

QUERIES.

R. H. B. writes: I should be obliged if you could inform me through your JOURNAL when we may expect the Apothecaries' Society to begin giving a surgical diploma? Also whether, after passing the examination, the successful candidate will be able to add anything further to his name than L.S.A. as at present? Also what the fee will be?

* * * It is impossible at present to give a definite reply to the questions contained in our correspondent's letter, but it is probable that we may be able to do so in the course of next month.

Mr. A. L. N. JOHNSON (Leicester) writes: Can you inform me if there are any large hospitals in England where lady probationers are taken without the payment of a preliminary fee?

DR. ARTHUR HANDS (Clyde House, Heath Town) asks where he can procure the latest and best Manual on transfusion of blood.

ANSWERS.

J. H. J.—We have taken steps to procure for our correspondent the information desired, which will be duly forwarded to him.

THE FREE-MARTIN.

MR. C. ROBERTS writes: Dr. Edward Jenner, writing to the Rev. Dr. Worthington under the date of April 5th, 1810, says: "Pray don't part with your *free martin*. It will be a beautiful animal, and docile and useful in your fields as the ox. I have dissected many; but why this mingling of the sexes should arise under such circumstances eludes all my guesses. I was the first who made the fact known (some thirty years ago) to Mr. Hunter." This does not give a clue to the origin or meaning of *free martin*; but it carries the subject further back than Dr. Masterman's note, and points to Gloucestershire as the part of the country where it is in use, and where its origin may probably be traced. I do not remember to have heard the word used in Yorkshire.

YELLOW FEVER.

SURGEON M. J. KNIGHT, M.S. (Meean Meer, Punjab), writes to ask from what books and sources (English or foreign) he can obtain the latest and completest information as to the "Causation and Prevention of Yellow Fever."

* * * The literature of yellow fever is enormous. The following are the chief writers on this disease: Cullen, Chisholm, Blane, Wood, Tommasini, Cleghorn, Lind, Alison, Craigie, Martin, Hirsch, Arnold, Jackson, Moseley, Macdonald (in Russell Reynolds' *System of Medicine*), Downes (in *Naval Reports*), Blair, McWilliam, the great work by De la Roche, Rush of Philadelphia. The latest "view" on the causation of yellow fever is that which has been worked out by Dr. Charles Creighton, on the basis of Andraud's observations on the origin of the disease from the excretions of negroes in slave-ships. Creighton's paper appeared in the *North American Review*. A summary of it will be found in Aitken's *Doctrine of Evolution in its Application to Pathology*, and in Professor Maclean's Lectures on Tropical Diseases.

DETECTION OF TUBERCLE BACILLI.

J. WILSON HAMILL, M.D., writes: "M. B.," in your issue of January 1st, enquires the best and easiest way of staining bacilli in phthisical sputum. To reply briefly, I may say that your correspondent will find the following one of the most satisfactory methods, as well as one of the quickest. The preparation may be completed by it in two or three hours. The sputum is spread as a thin layer on the cover-glass, which may be done by pressing two covers together, with the particle of sputum between them. These are separated, and the cover with the thin coating of sputum upon it is to be passed several times through the flame of a spirit-lamp, to dry and set the bacilli. The next step is to colour the preparation, and for this object there is a choice of staining fluids; but I think "M. B." will get the best results by using the ordinary magenta solution, the formula of which is: magenta crystals, grammes 2; aniline, cc. 3; alcohol, cc. 20; aq. dist., cc. 20. A few drops of this solution should be poured into a watch-glass, and the cover-glass floated on it for about half-an-hour, after which it is washed thoroughly in distilled water, to remove redundant stain, and then in a mixture of pure nitric acid and distilled water (1 to 4), in which it should be allowed to remain for a few minutes. This clears the stain away from all parts but the bacilli. Redundant water is drained off by the use of blotting-paper, and by immersion in pure alcohol, and the cover-glass is then gently dried. "M. B." will not find it essential to stain the ground of the preparation, although this procedure improves the appearance of the slide: a blue ground throws up the red bacilli into much more beautiful relief. The cover is then cemented to the slide in the usual way, either dry or in Canada balsam.

With regard to the objective necessary to detect the tubercle bacillus, I do not think "M. B." will obtain satisfactory results with anything lower than a $\frac{1}{4}$ -inch of our English makers. Even with this power, an achromatic condenser is a great aid, and with lower powers than this it is a necessity. In the use of higher powers, I think many fail to detect the bacilli, through mounting the preparation on the slide, and then using a too thick cover-glass and a thick layer of cement, through which it is impossible to get the focus. This is obviated by using a very thin cover, to which the sputum has been attached. It is also important to be certain that the expectoration comes from the lungs, and is not the ordinary mucus from about the fauces. "M. B." should also remember that the tendency of all stains is to fade after a longer or shorter period, so that, if he examine his slide a few months after mounting it, he may be unable to find a trace of a bacillus.

ALOPECIA.

M. D. writes: In your issue of the January 1st, "Alopecia" makes enquiries regarding the serviceability of lanoline (Liebreich) in "premature decay of the hair, or what is generally known as baldness." If I mistake not, Professor Fränkel, of Berlin, found lanoline of extreme service, where there were atrophic tendencies of the skin, while Dr. Lassar has referred to the advantages lanoline affords in treatment of the hair. Both a lanoline cold-cream and a lanoline pomade are now prepared, either of which should prove of value in treating baldness and alopecia. I would suggest olei cadini, 1 part, to lanoline 4 parts. Dr. Steven found a "cold-cream" curative in seborrhoea capitis (*Deutsche Med. Wochenschrift*), and the new basis for ointments seems to have given some very excellent results in other affections of the scalp as well.

NOTES, LETTERS, ETC.

UNQUALIFIED ASSISTANTS.

C. H. M. writes: As an unqualified assistant, permit me to thank Mr. Napper for his very able letter on this subject, which expresses the convictions of many medical men of long experience and good repute. I am glad to see that such gentlemen are voluntarily coming to the front to speak the plain truth with regard to a body of men of whom it has lately been the fashion to speak disparagingly. I am also glad to see that the assistants themselves are beginning to demand that consideration which is due to them from the profession. Medical men have called this class of assistant into existence for their own convenience, and it is only just that they should make some provisions for them and their families, instead of trying to ostracise them suddenly.

Of course there are assistants and assistants, and it is the doings of a few of the proprietors of many-branched dispensaries and their assistants that has brought disgrace upon not only assistants, but the medical profession generally. The General Medical Council has already, I believe, distinguished between assistants proper, under the direction and supervision of their principal, and those without such supervision. In the latter case, the fault lies more with the employer than the employed.

Mr. Napper's list of desirable qualifications in an assistant is very good; but one other must be added—temperance, without which all other qualifications are useless.

There is precedent enough in the history of the medical profession for providing for those who have already been assistants for some time; at the same time, a plain warning could be given to other young men before they, too, get caught in the trap, as they generally become assistants when they are too young to see their danger.

Now that the general practitioners have direct representation on the General Medical Council, a register of assistants should be prepared, as suggested by "M.R.C.S." in the JOURNAL of November 27th. Newly-qualified men would have nothing to lose, but everything to gain, by this arrangement.

I would like to see an association of unqualified assistants, to be called, say, "The Medical Assistants' Association," and would be glad to share the initiatory work in forming it, if any others show themselves willing to do the same. Perhaps my remarks may bring one or two to the front.

RIGHT-ANGLE TRACTION FOR SUB-GLENOID DISLOCATIONS.

W. J. PEACOCK, L.R.C.S.I., L.K.Q.C.P.I., etc. (240, St. George's Road, Bolton), writes: Seeing some cases reported in the JOURNAL of the above mode of reduction in shoulder-dislocation, I thought I would try right-angle traction on a case I was called to see some days ago, during the absence of the principal, Dr. Macfie.

The patient was a woman well advanced in life, being close on seventy. She fell on her shoulder, during the late frost, and sustained the aforesaid injury. Medical advice was not sought for ten days. After the lapse of these days, she presented herself at the surgery, and I immediately diagnosed sub-glenoid dislocation. I tried the older methods of procedure without success. Then I determined on trying right-angular traction, which succeeded immediately, with very little force needed. I strongly recommend the mode of procedure in all similar cases.

THE RIDDELL FUND.

Amount already acknowledged	£	s.	d.
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Dr. Whitwell, Shrewsbury	1 1 0
Dr. Fegan, Blackheath	1 1 0
M. D., Torquay	1 1 0
W. S.	0 10 0
	0 3 6

Mr. Wickham Barnes, 3, Bolt Court, Fleet Street, wishes to inform intending subscribers to this Fund that the list will close on January 19th.

SCARLET FEVER IN WIMBLEDON AND MERTON.

MR. LENNOX BROWNE writes that, on January 3rd, he was consulted by a lady, aged 45, who, being a governess, had abruptly terminated a visit to Wimbledon on the previous Saturday, on the alarm that some of the inmates of the house in which she was staying had been attacked by the epidemic. He says: I found her suffering from very slight inflammation of the fauces, but with a temperature a fifth of a degree below normal. I, therefore, had no hesitation in then and there giving a certificate that she had no sign of scarlet fever, and I felt justified in assuring her that there was not the least likelihood of an attack. I advised her, however, to wait in town for a week. On Wednesday, the 5th, the temperature was still low, and pain, with a slight swelling, was felt under the angle of the jaw; although there was no rash, I gave the opinion, again in writing, that the patient was suffering from rheumatism. This being communicated to her friends in Wimbledon, she learns that other cases supposed to be scarlet fever are now discovered to be of the same nature, one of the doctors said to have been attacked being of this number. Nevertheless, as a result of the statements in the public and medical press, this lady is placed in the position of being obliged to resign her appointment rather than re-enter a family with such an onus of responsibility. It will be interesting to learn how many cases there really are of scarlet fever amongst the "300 reported to have developed since Christmas."

I should be glad to be informed how long an interval should elapse before a patient recovered from rheumatism may mix with others. No work that I have consulted gives information on this point. The incubation period is, I believe, very much shorter than that generally stated in books.

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

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BOOKS, ETC., RECEIVED.

A Manual of Obstetrics. By F. A. King, M.D. Third Edition. London: J. and A. Churchill. 1887.
Diseases of Bones and Joints. By C. N. Macnamara, F.R.C.S. Third Edition. London: J. and A. Churchill. 1887.
Treatise on the Principles and Practice of Medicine. By A. Flint, M.D., LL.D. London: J. and A. Churchill. 1887.
Retrospect of Medicine. By James Braithwaite, M.D. London: Simpkin, Marshall and Co. 1887.
The Bovine Prescriber. By J. B. and A. Cresswell. London: Baillière, Tindall and Co.
A Junior Course of Practical Zoology. By A. Milnes Marshall, M.D., M.A., F.R.S., assisted by C. Herbert Hurst. London: Smith, Elder and Co.

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