

"That local committees should be requested to secure that the medical officers are properly remunerated in cases of premature confinements."

It was resolved to meet again on Tuesday, March 29th, and that an effort should then be made to finish the remaining points of Part 1, so that Part 2, namely, the connection of provident dispensaries with the hospitals, should be taken at the first meeting after Easter.

## ASSOCIATION INTELLIGENCE.

### COUNCIL.

#### NOTICE OF MEETING.

A MEETING of the Council will be held at the Offices of the Association, No. 429, Strand (corner of Agar Street), London, on Wednesday, the 13th day of April next, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary.*

March 14th, 1887.

#### NOTICE OF QUARTERLY MEETINGS FOR 1887.

Meetings of the Council will be held on April 13th, July 18th, and October 19th, 1887. 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 24th), June 23rd, and September 29th, 1887.

FRANCIS FOWKE, *General Secretary.*

### COLLECTIVE INVESTIGATION OF DISEASE.

INQUIRIES are being pursued on the following subjects

DIPHTHERIA, THE ETIOLOGY OF PHTHISIS,

THE VALUE OF HAMAMELIS, THE VALUE OF PURE TEREBENE.

Memoranda on the above subjects, and forms for communicating observations on them, may be had on application.

The Inquiries on OLD AGE, and on the CONNECTION OF DISEASE WITH HABITS OF INTEMPERANCE, are now closed.

Reports are in preparation upon the Inquiries made into ACUTE RHEUMATISM, DIPHTHERIA, and HABITS OF INTEMPERANCE, a full Report on OLD AGE, and a Supplementary Report on PUERPERAL PYREXIA. All the above will be published in the JOURNAL as soon as completed. Tables of the Chorea and Acute Rheumatism cases will be published in separate form.

The Returns made to the GEOGRAPHICAL INQUIRY are being tabulated for report.

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, 429, Strand, W.C.

### BRANCH MEETINGS TO BE HELD.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will be held at the London Hospital on Thursday, April 21st, at 8.30 P.M. The chair will be taken by C. Macnamara, Esq. A demonstration of interesting surgical cases will be given by W. Rivington, Esq., Surgeon to the Hospital. All visitors will be welcomed.—J. W. HUNT, M.D., Honorary Secretary, 101, Queen's Road, Dalston.

YORKSHIRE BRANCH.—The spring meeting will be held at the Queen Hotel, Harrogate, at 3 P.M. on Wednesday, April 27th, 1887. Members intending to read papers are respectfully requested to send in their names at once to ARTHUR JACKSON, Secretary, Sheffield.

SOUTH-WESTERN BRANCH.—Preliminary Notice.—The annual meeting of the Branch will be held at the Athenæum, Plymouth, on Wednesday, May 13th, 1887, under the presidency of Paul Swain, Esq. Members who propose to read papers, or to bring forward communications or motions, are requested to intimate the same to the Honorary Secretary without delay.—P. MAURY DEAS, Honorary Secretary.

### GLASGOW AND WEST OF SCOTLAND BRANCH.

THIS Branch held its annual general meeting on February 11th, in the Western Infirmary, Glasgow. The President-elect, Dr. D. FRASER, of Paisley, was in the chair.

*Surgical Cases.*—When the customary reports had been read and adopted, Professor G. H. B. MACLEOD showed and made some remarks on a number of interesting surgical cases. These included:

1. Two cases of Arthritis Deformans.
2. Malignant Disease of Hip in a lad of 19.
3. Dislocation of Thumb forward; also an instrument of his own invention for reducing Dislocation of the Thumb.

4. Case of Supernumerary Rib, which had been mistaken for Fractured Clavicle.

5. Hilliard's Apparatus for the Treatment of Spinal Disease by Continuous Extension.

6. Case of Enlarged Prostate; Catheter *could*.

7. Cases of Amputation at Shoulder for Small-celled Sarcoma, and of Leg for Epithelioma.

8. Cancer of Face, originating in Lachrymal Duct.

9. Cases in which Cucaïne was used as an Anæsthetic.

10. Calculus having a Hairpin for its Nucleus, from an insane female patient.

11. Calculus which had ulcerated its way from the Female Bladder, escaping by an Abscess in the Perineum.

12. Calculus weighing 6 ounces, removed by Suprapubic Operation.

13. Irrigation Apparatus.

*Medical Cases.*—Professor M'CALL ANDERSON showed and described:

1. A case of Pericardial, Pleuritic, and Peritoneal Effusion.

2. A well-marked case of Purpura Rheumatica.

3. A case of Musical Heart-murmur, Diastolic in Rhythm and Aortic in Origin, heard without the stethoscope and at a distance from the patient.

4. A case of Tinea Favosa Epidermidis.

*Pathological Specimens.*—Dr. JOSEPH COATS showed a series of sixteen preparations illustrating the Pathology of Myoma of the Uterus (Uterine Fibroid), and made some remarks on the subject. These remarks were further illustrated by several microscopic preparations.

*Election of Office-bearers.*—At the election of office-bearers, Dr. Joseph Coats was chosen President-elect for the year 1887, and Dr. Bruce Goff the Branch's representative on the Council of the Association.

*List of Office-bearers for 1887.*—President: Dr. D. Fraser, Paisley. President-elect: Dr. Joseph Coats. Vice-Presidents: Dr. R. Munro, Dr. James Morton. Representative on the Council: Dr. B. Goff. Honorary Secretaries: Dr. A. Napier, Crosshill, Glasgow; Dr. A. Robertson, 16, Newton Terrace, Glasgow. Ordinary Members of Council: Drs. Macewen, Thomas, Frew, M'Vail, Christie, Willis, M'Laren, Wood-Smith, Goff.

### THE GLOUCESTERSHIRE BRANCH.

*Address by Mr. Jonathan Hutchinson.*—The last meeting was held at the General Hospital, Cheltenham, on Tuesday, March 15th, Dr. Batten (President) in the chair. A letter was read from Mr. Jonathan Hutchinson accepting the invitation of the Branch to give an address at Gloucester on May 17th.

*Conjoint Meeting of Branches.*—Proposed by Dr. E. T. WILSON and seconded by Dr. ROOKE, that a conjoint meeting of Branches be held at Gloucester on May 17th, and that the Bath and Bristol Branch and the Worcestershire and Herefordshire Branches be asked to assist in forming it. Carried.

*New Member.*—Proposed by Dr. WILSON and seconded by Mr. CARDEW, that Mr. Montagu Smith (Cheltenham) be elected a member of the Branch. Carried.

*Payment of Travelling Expenses.*—Proposed by Dr. WILSON and seconded by Mr. GABB, that the travelling expenses of the Branch representatives should be defrayed entirely by the Parent Association.

### ABERDEEN, BANFF, AND KINCARDINE BRANCH.

AN ordinary meeting of this Branch was held at 198, Union Street, Aberdeen, on Wednesday, March 16th, at 8 P.M., the President, Dr. Urquhart, being in the chair.

*Minutes and New Members.*—The minutes of last meeting were read and approved, and Dr. J. W. Mackenzie Gunn (Buxburn), and Dr. Wattie, Greentree Lodge, Echt, were balloted for and unanimously admitted members of the Branch.

*Summer Meeting.*—A letter from the secretary of the Northern Counties Branch, suggesting a conjoint summer meeting at Buckie, was read by Dr. GARDEN, who was instructed to intimate the Aberdeen, Banff, and Kincardine Branch's strong desire to meet them if possible at or near Cullen, which place had been fixed on last year for the 1887 summer meeting.

*Payment of the Travelling Expenses of Branch Representatives.*—A letter from the sub-committee of Council of the Parent Association, appointed to ascertain the wishes of the Branches on this subject, was read, and the secretaries were instructed to intimate in reply that it was the unanimous desire of the Branch that the travelling expenses of its representative should be entirely paid by the Parent Association;

also to furnish the information required by the sub-committee regarding the Branch's annual subscription and financial position.

#### BATH AND BRISTOL BRANCH.

The fourth ordinary meeting of the session was held at the Grand Pump-Room Hotel, Bath, on Thursday evening, March 17th, C. Gaine, M.R.C.S. Eng., President, in the chair. There were also present thirty-one members and one visitor.

*New Members.*—The following gentlemen were elected members of the Association and Branch: Claud Wilson, M.D. (Bath), C. A. Wigan, M.D. (Portishead), W. B. Brown, M.B. (Fishponds), and J. W. White, M.R.C.S. Eng. (Nailsea).

*Travelling Expenses of Branch Representatives.*—At the request of the General Council, the opinion of the Branch was asked with regard to the payment of the travelling expenses of Branch representatives to the four quarterly meetings of the Council of the Association in London. It was resolved thereon:

"That this Branch is content with the existing plan of representatives paying their own travelling expenses for attending the quarterly meetings of the Council of the Association in London."

*Communications.*—Dr. A. W. Fox read notes of two cases of Death from Chorea, which gave rise to a discussion, in which Drs. Spender and Brabazon and Messrs. Mason, Griffiths, Scott, Pagan Lowe, and Gaine took part.—Dr. E. CROSSMAN read a short paper on the Treatment of Burns.—Dr. A. B. BRABAZON gave the notes of Clinical Cases of Forcible Extension of Ankylosed Joints in Rheumatic Arthritis. Dr. Spender and Mr. Green made some observation on this subject.—Mr. C. T. GRIFFITHS read a paper on the Progress of Valvular Disease of the Heart, which gave rise to some remarks from Dr. Skerritt and Mr. Lawrence.

## SPECIAL CORRESPONDENCE.

### PARIS.

[FROM OUR OWN CORRESPONDENT.]

*Infectious Pneumonia.*—*Treatment of Diphtheria.*—*Spontaneous Fracture in Infantile Paralysis.*—*Poisoning by Bismuth used as a Surgical Dressing.*—*Improved Uterine Injector.*—*Instrument for Removing Sutures.*

At the Société Médicale des Hôpitaux, M. Sevestre recently read an interesting paper on a form of infectious broncho-pneumonia of rheumatic origin, seen in ill-fed children in the Salle des Sevrés at the Hôpital des Enfants Assistés. The onset of the disease is marked by gastro-intestinal disturbance and fetid diarrhoea. This is followed by fever, occasional vomiting, dry but infrequent cough, dyspnoea, crepitant and sub-crepitant râles. The affection occurs under two forms: one mild and seldom met with; the other characterised by dryness of the tongue and serious typhoid symptoms, complicating the ordinary phenomena of pneumonia. In the latter form, simple erythema, or pemphigoid vesicles are sometimes observed on the skin in cases which afterwards terminate fatally. *Post-mortem* examination reveals red patches in the large and small intestines, with marked tumefaction of Peyer's patches. The mesenteric glands are congested, and hæmorrhage occasionally takes place. Patches of broncho-pneumonia are discovered, and the bronchial lymphatics and glands are congested. There is fatty degeneration of the liver. M. Sevestre is of opinion that poisoning by fecal matter is the cause of the broncho-pneumonia and of the infectious symptoms. He prescribes calomel at the outset, and subsequently naphthaline. M. Hayem considered that if the blood of the children were examined in order to discover if there were an increase of blood-fibrin, it might be decided whether this broncho-pneumonia was a simple inflammation or an infectious fever.

Among new suggestions for the treatment of diphtheria recently made, may be mentioned M. Delthi's plan of fumigation with oil of turpentine and coal tar; that of M.M. Renou and Bouchard with carbolic, salicylic and benzoic acids; M. Moty's treatment with powdered camphor; and M. Bitterlin's antiseptic vapour of a solution of alcohol and carbolic, salicylic, and thymic acids. The success of these methods, however, has not been particularly brilliant. Another new plan of treatment, based upon antiseptic principles, has just been proposed by Dr. Brondel, of Algiers. It consists in the exhibition of benzoate of soda, to which is added sulphide of calcium, either in syrup with or without carbolic acid, or in granules of one centigramme. At first, a tablespoonful of a 150-gramme mixture, contain-

ing 4 to 5 grammes of benzoate of soda, according to the age of the child, is given every hour; sulphide of calcium is given at the same time, either in granules or in syrup. Finally a 10 per cent. solution of benzoate of soda is sprayed into the throat every half hour, day and night, together with the continuous application of the vapour of carbolic acid, and of the oils of eucalyptus and turpentine. This medication is supplemented by a strengthening diet, composed of beef-tea, eggs, and underdone meat, if the state of the throat permits; tonics such as arseniate of strychnine, quinine, aconitine, or antipyrin are given at the same time. In addition to this, the windows are opened and the linen disinfected. Under this treatment, the false membranes become pale, lose their consistence, and disappear, leaving the parts underneath cicatrised. M. Brondel has treated two hundred cases in this manner during the last five years, and has not lost a patient. M. Barbot has tried Renou's treatment for diphtheria, with great success. During a period of three years he has treated 51 cases of diphtheria with 48 recoveries. The details of the plan are as follows. On a petroleum stone is placed an earthen pot, full of boiling water, into which is put a tablespoonful of Renou's solution (containing carbolic, salicylic, and benzoic acid) every two hours for adults, and every three hours for children from 1 to 10 years. The room is kept at a constant temperature of 20° to 25° C. (68° to 77° F.), or still higher, if possible. If the room is large, the patient's bed is surrounded with sheets nailed to the floor, thus forming a small room, in which a high temperature can easily be maintained. The patient's throat is never touched. He is fed with roast meat, boiled eggs, soups, milk, and good wine. It is stated that 94 per cent. of the lighter cases are cured by this treatment.

Comparatively little attention has hitherto been given to the trophic disturbances which occasionally occur in a limb affected with infantile paralysis. M. Paul Berbez, in the *France Médicale* of February 10th, describes the case of a girl, aged 18, suffering from atrophic infantile paralysis, whose left arm was several times the seat of spontaneous fracture. Some near relations of the patient had been attacked with convulsions, followed by paralysis. At the age of 3, her left arm became suddenly paralysed; it became thin and wasted, but grew in length with the rest of the body. Atrophy came on in five or six days. Three years before coming under notice, the patient struck her arm against a staircase. The blow was slight, but the humerus was broken transversely below the surgical neck. Consolidation was effected in about three weeks with the aid of a sling. Five months later, a slight fall caused a fracture of the middle portion of the humerus. Consolidation was rapidly effected. In thrusting the arm into her sleeve, the patient broke it a third time. The arm measured six centimetres in circumference, and had the appearance of a rounded stick. The forearm was flat, and rather larger than the arm. The hand was atrophied, and remained in the position of supination. The first phalanges of the fingers were extended, the others were flexed. There was no cutaneous lesion. The shoulder was atrophied, the bones projecting on all sides. The patient could hardly move the shoulder, and could not flex the forearm; electricity caused a few contractions in the biceps. After a course of massage, the patient was able to bend her fingers slightly, and to use her hand to some extent.

M. P. Dalché recently brought a case of poisoning by subnitrate of bismuth dressings under the notice of the Société de Médecine Légale de France. A woman, aged 30, was under the care of M. Peyrot for two burns. One of these was of the third degree, and extended from the lower angle of the shoulder-blade to the gluteal region, occupying the entire width of the back. The other was a large burn on the left arm. On September 26th these wounds were dressed with subnitrate of bismuth. The dressing, though changed every second day, became very offensive. The general condition of the patient had been improving; but on October 11th the throat became sore, and she complained of dysphagia. False membranes of a white colour were seen on the palate, the uvula, and the tonsils. On October 13th the patches had spread; the mucous membrane round them was black; and the edge of the gums of the lower jaw was rough, and dark brown in colour. There was also a patch of false membrane on a base of blackened mucous membrane on the lower lip. The general condition was, however, still good, and there was no albumen in the urine. A few days later the breath became offensive, and there was gangrene of the palate. On the 26th the patches above described had partly disappeared, but there was a burning sensation under the tongue. There was violent diarrhoea and continual vomiting. Some patches of false membrane on the buccal surface of the cheeks had a rough black edge. The bismuth dressing was then given up. Up to November 1st, vomiting, diarrhoea, and hiccough persisted, and there was albumen in the urine. On November 5th there was pain along the œsophagus. Several of the patient's teeth became loose. In spite

higher judicial authority had declared the decision of the magistrates to be erroneous.

**HAMPSTEAD.**—*Small-pox and the Hampstead Hospital.*—In order to show the healthy condition of Hampstead during the year 1885, Dr. Gwynn goes at considerable length into the statistics for London, quoting freely from the Registrar-General's returns. The death-rate was 11.5 per 1,000, the lowest but one on record, and an improvement on that for 1884, which was 12.5. This was, no doubt, due to the low birth-rate, which was considerably below that of the whole metropolis, inasmuch as the mortality of young children is always relatively high. There were 134 deaths from zymotic diseases, being equal to a death-rate of 1.4 per 1,000. Measles caused 20 deaths, against 4 in 1884. Scarlet fever has shown a steady decline in Hampstead for some years; of the 19 deaths registered from this disease, only 4 were those of Hampstead parishioners. Dr. Gwynn attributes this decrease to improved isolation. The epidemic of small-pox which broke out in May, 1884, did not terminate until July, 1885, when the possible danger of the small-pox hospitals becoming centres of infection began to be recognised, and it was resolved to remove all cases of small-pox to the hospital-ships at Long Reach, unless the condition of the patients at the time of removal was such that the journey down the river would be dangerous to life, or prejudice the patient's chance of recovery. This step was further followed by the closing of the North-Western Hospital against the reception of small-pox patients on July 23rd. The closing of the hospital marked the termination of the epidemic in Hampstead, for after that date no case occurred. Dr. Gwynn quotes several authorities in support of his opinion that the hospitals of the Asylums Board, "in their present shape, continue to cause an increase of small-pox in their several neighbourhoods."

**KENSINGTON.**—*Comparison of Zymotic Mortality, 1859-70 and 1871-82.*—The years 1885 and 1886 were, according to Dr. T. Orme Dudfield's reports, fairly healthy ones in this district, but not so healthy as the two preceding ones, the death-rates being 16.1 per 1,000 in 1885, and 15.9 in 1886, compared with 15.5 and 15.1 in 1883 and 1884 respectively. The mortality from the principal zymotic diseases was below the decennial average in both years. In 1885, small-pox mortality was just average, that of scarlet fever less than an eighth of average; diarrhoea was below average, and typhoid fever less than half average. The mortality from whooping-cough was below, and that from diphtheria slightly above, the average. There was no death from typhus or from simple continued fever. In 1886, small-pox, typhus fever, and simple continued fever were entirely absent as factors in the Kensington mortality, and measles, scarlet fever, whooping-cough and diarrhoea were considerably below the average, the only disease showing an excess of fatality being diphtheria, the number of deaths (30) being 10 in excess of the corrected decennial average. One hundred and eighty cases of small-pox were recorded during the year, and in 1885 the deaths were 25, but there were only 3 cases (and 1 death) in 1886. An interesting comparison is made by Dr. Dudfield of the statistics of twenty-four years in respect of the zymotic diseases. Comparing the number of deaths in the first half period (1859-70) with those of the second half period (1871-82), when the district had the advantage of hospital accommodation, he shows an increase in the number of deaths from small-pox and whooping-cough only, and assigns various causes for this result. So highly does he value the provision of hospital accommodation, that he ranks it chief among the causes in the decline of the death-rate, which fell from 3.6 per 1,000 in 1859-70, to 2.8 per 1,000 in 1871-82. It would be idle to attempt to make an abstract of Dr. Dudfield's most excellent and complete reports. They constitute a compendium of the general sanitary history of the year.

## MEDICAL NEWS.

**SOCIETY OF APOTHECARIES OF LONDON.**—The following gentlemen, having satisfied the Court of Examiners as to their knowledge of the Science and Practice of Medicine, Surgery, and Midwifery, received certificates entitling them to practise as Licentiates of the Society on March 24th, 1887:

Carter, Robert James, 194, The Grove, Camberwell, S.E.  
Jeck, Cyril William, 30, Hildrop Road, Camden Road, N.

**A ROYAL CONCERT.**—The Princess of Wales, accompanied by the Princesses Louise, Victoria, and Maud of Wales, visited the Brompton Hospital on March 25th, and honoured the patients and nurses by taking part in a concert.

At Gonville and Caius College, Cambridge, the Shuttleworth scholarship for proficiency in botany and comparative anatomy has been awarded to Francis Henry Edgworth, B.A., scholar of the College. The scholarship, which is of the annual value of £60, is tenable for three years, and is open to medical students of the University of not less than eight terms' standing.

**HOSPITAL SATURDAY FUND.**—At a meeting of the delegates of this fund, held on Saturday last, it was reported that as the result of the first year of the Surgical Appliance Committee 540 persons had been supplied with surgical instruments at an average cost of 10s., the attendance recorded being 695. The delegates agreed upon a grant of four per cent. for the purchase of appliances for requirements of the present year.

**RINDERPEST IN BESSARABIA.**—A telegram from Bucharest, under date of March 30th, states that a strict cordon has been established on the Roumanian frontier to prevent the importation of cattle from Bessarabia, where the rinderpest is very prevalent.

**THE CENTENARIAN "MAID OF KENT."**—Miss Catherine Heathorne, "The Maid of Kent," who resides at Week Street, Maidstone, celebrated her 103rd birthday on March 25th. She was in excellent health, and received several presents and congratulations upon the occasion.

**THE BARONESS BURDETT-COUTTS** has accepted the presidency, and Mr. Burdett-Coutts, M.P., the office of treasurer, of the Committee of the Ladies' Jubilee Hospital Fund for North London.

**ST. JOHN AMBULANCE ASSOCIATION.**—Two courses of lectures for the employees of the Metropolitan Railway Company, conducted by Surgeon-Major Platt, V.M.S. Corps, have been attended by 107 of the servants of the company.

**THE Medical Staff Corps** will take part in the operations of the camp which will be formed at Strensall, near York, in the months of May, June, and July.

A new day nursery or *crèche* and mission buildings, recently erected in East Street, Baker Street, were opened on March 30th by Princess Mary, Duchess of Teck.

**PHARMACEUTICAL SOCIETY OF GREAT BRITAIN.**—A public dinner, in aid of the benevolent fund of this Society, will be held at the Freemasons' Tavern on May 17th.

**DR. EDWIN HAWARD** has been elected a Vice-President of the North London Hospital for Consumption at Hampstead.

**DR. G. HALES PARRY** has been for the third time awarded the grant from the Local Government Board for the Docking Workhouse and District for successful vaccination.

**PROFESSOR MICHAEL FOSTER** has been appointed the representative of the Cambridge University on the Council of the Marine Biological Association.

**MEDICAL MAGISTRATE.**—The Lord Chancellor has added the name of Sir James Sawyer, M.D., to the Commission of the Peace for the Borough of Birmingham.

## MEDICAL VACANCIES.

The following vacancies are announced.

**BIRMINGHAM GENERAL HOSPITAL.**—Resident Surgical Officer. Salary, £130 per annum, with board, etc. Applications by April 2nd to Henry Fox, R.N.

**BRADFORD INFIRMARY AND DISPENSARY.**—House-Surgeon. Salary, £110 per annum, with board, etc. Applications by April 5th to the Secretary.

**BRIDGE UNION, Canterbury.**—Medical Officer. Salary, £30 per annum, and fees. Applications by April 6th to Allen Fielding, Esq.

**CHELSEA HOSPITAL FOR WOMEN,** Fulham Road.—Honorary Physician. Applications by April 9th to the Secretary.

**FARRINGTON GENERAL DISPENSARY AND LYING-IN CHARITY,** 17, Bartlett's Buildings, Holborn, E.C.—Honorary Physician. Applications by April 14th to the Honorary Secretary.

**GLOUCESTER COUNTY ASYLUM.**—Assistant Medical Officer. Salary £105 per annum, with board, etc. Applications by April 6th to the Medical Superintendent.

**HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST,** Brompton. Resident Clinical Assistant. Applications by April 16th to the Secretary.

**KENT COUNTY LUNATIC ASYLUM,** Barming Heath, near Maidstone.—Assistant Medical Officer. Salary, £120 per annum, with board, etc. Applications by April 4th to F. R. Howlett, Esq., 9, King Street, Maidstone.

**LONDON TEMPERANCE HOSPITAL,** Hampstead Road, N.W.—Senior House-Surgeon. Salary, £52 10s. per annum, with board, etc. Applications by April 2nd to the Secretary.

**PADDINGTON GREEN CHILDREN'S HOSPITAL.**—House-Surgeon. Salary, £80 per annum. Applications by April 16th to the Secretary.

**QUEEN'S JUBILEE HOSPITAL,** Gloucester Terrace, Queen's Gate, S.W.—Registrar and Anaesthetist. Applications by April 5th to the Secretary.

QUEEN'S HOSPITAL, Birmingham.—Obstetric and Ophthalmic House-Surgeon. Applications by April 23rd to the Secretary.

QUEEN'S JUBILEE HOSPITAL, Gloucester Terrace, Queen's Gate, S.W.—Surgeon. Applications by April 5th to the Secretary.

ROYAL COLLEGE OF PHYSICIANS, Edinburgh.—Superintendent of the Laboratory. Salary, £200 per annum. Applications by April 10th to Dr. Gibson.

ROYAL GENERAL DISPENSARY, Bartholomew Close, London, E.C.—Resident Medical Officer. Salary, £130 per annum. Applications by April 18th to the Secretary.

### MEDICAL APPOINTMENTS.

BRADSHAW, Thomas R., M.D., B.A., appointed Honorary Physician to the Stanley Hospital, Liverpool.

CANDLER, Wallace, M.R.C.S., L.R.C.P., appointed Resident Clinical Assistant to the East London Hospital for Children, *vice* W. H. Smart, M.R.C.S., resigned.

CRISP, John, M.R.C.S., L.R.C.P.Lond., appointed Resident Assistant House-Surgeon to the Derbyshire General Infirmary, *vice* J. Acton Southern, M.R.C.S., L.R.C.P., L.S.A., resigned.

DOYLE, Henry M., M.R.C.S., L.S.A., appointed Receiving Room Officer to the London Hospital.

GILLARD, Richard, M.R.C.S., L.S.A., appointed Medical Officer and Public Vaccinator to Ugborough and North Huish, Totnes Union.

LEWIS, Percy G., M.R.C.S., L.S.A., appointed Junior House-Physician to the Royal Hospital for Diseases of the Chest, *vice* W. J. Best, M.R.C.S., L.S.A., resigned.

LYON, T. G., M.A., M.D., M.R.C.P., M.R.C.S., appointed Assistant Physician to the North-West London Hospital, *vice* John Shaw, M.D., resigned.

PECK, E. G., M.A., M.R.C.S., appointed Medical Officer to the Chelsea Hospital for Women, *vice* Septimus Sunderland, M.D., M.R.C.S., L.R.C.P., resigned.

PHILLIPS, Edward England, L.R.C.P.Edin., M.R.C.S.Eng., L.S.A.Lond., re-appointed Medical Officer of Health for the Southend Urban Sanitary District for three years, and for the Rochford Rural Sanitary District for one year.

POWER, D'Arcy, M.A., M.R.Oxon., F.R.C.S.Eng., appointed Surgeon to the Metropolitan Dispensary, Fore Street, E.C., *vice* Alban Doran, F.R.C.S.Eng., resigned.

RUDD, C. F., M.R.C.S., L.S.A., appointed Medical Officer of Health to the Small-burgh Union Rural Sanitary Authority, *vice* J. S. Clowes, Esq., resigned.

SHAW, John, M.D., appointed Obstetric Physician to the North-West London Hospital.

### MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—MEDICAL SOCIETY OF LONDON. Sir Dyce Duckworth: A Case of Ulcerative Endocarditis. Mr. R. W. Parker: On the Alleged Dangers of Starch-containing Foods during the Period of Infancy. Dr. Whipple: A Case of Exfoliating Eruption of the Tongue.

ODONTOLOGICAL SOCIETY OF GREAT BRITAIN, 8 P.M. Casual communications by Messrs. J. Ackery, F. Henry Weiss, Boyd Wallis, C. V. Cotterell, S. J. Hutchinson, W. Harrison, and J. Penfold. Mr. F. Newland Pedley: On the Pathology of Pyorrhoea Alveolaris.

TUESDAY.—SOCIETY FOR THE STUDY AND CURE OF INEBRIETY, 4 P.M. Annual meeting. Dr. Norman Kerr: Presidential address on the Pathology of Inebriety.

PATHOLOGICAL SOCIETY OF LONDON, 8.30 P.M. Mr. Hutchinson, junior: Alveolar Ulceration in a Child: General Tuberculosis. Dr. Joseph Coats: 1. Hypertrophic Goftra with Secondary Tumours in Bones of Skull. 2. Tumour of Pineal Gland. Mr. Lawson Tait and Mr. Doran: Specimens illustrative of Chronic Inflammatory Disease of the Uterine Appendages. Mr. Bowlby: Congenital Dislocation of Hip. Mr. Lunn: Disease of the Humerus. Dr. Hale White: Meningeal Hemorrhage with Secondary Degeneration of Spinal Cord. Dr. Pitt: Carcinoma of Spine and Liver. Card Specimens—Dr. Hale White: 1. Peripheral Neuritis. 2. Distention of Ureter and Hydronephrosis of One Side Secondary to Urethral Stricture. Mr. Shattock: Two Specimens of Osteomalacia showing Metaplasia of the Osseous Substance into Fibrous Tissue. Mr. Lockwood: Fetus showing Absence of Margin of Acetabulum and other Abnormalities. Dr. Turner: Congenital Stricture of Jejunum. Mr. D'Arcy Power: Sequel to Case of Endosteal Sarcoma. Dr. Thin (for Dr. B. Rake): Drawings of Leprosy Bacillus. Mr. F. W. Clark: Acute Pericarditis.

WEDNESDAY.—OBSTETRICAL SOCIETY, 8 P.M. Specimens will be shown by Dr. M. Handfield-Jones and others. Dr. Champneys: The Third Stage of Labour—(1) the Separation of the Placenta; (2) the Expulsion of the Placenta. Dr. Matthews Duncan: Hemorrhagic Parametritis.

THE PARKES MUSEUM OF HYGIENE, 5 P.M. Mr. J. Bailey-Denton: Metropolitan Sewage Disposal.

### 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.

#### BIRTHS.

DAVIES.—On March 25th, at Snainton, Yorks., the wife of H. Havelock Davies, M.B. Edin., of a daughter (stillborn).

MACLEOD.—At the East Riding Asylum, Beverley, on March 28th, the wife of M. D. Macleod, M.B., of a daughter.

### 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 Orthopedic; 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 Orthopedic.—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.—8 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., 8.

GUY'S.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu. F., 12.30; Skin, Tu., 12.30; Dental, Tu. Th. F., 12.

KING'S COLLEGE.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. S. 2; o.p., M. W. F., 12.30; Eye, M. Th., 1; Ophthalmic Department, W., 1; Ear, Th., 2; Skin, Th., 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; Orthopedic, M., 2.30; Dental, Tu. F., 9.

ST. GEORGE'S.—Medical and Surgical, M. Tu. F. S., 1; Obstetric, Tu. S., 1; o.p., Th., 2; Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopedic, W., 2; Dental, Tu. S., 9; Th., 1.

ST. MARY'S.—Medical and Surgical, daily, 1.45; Obstetric, Tu. F., 9.30; o.p., M. Th., 9.30; Eye, Tu. F., 9.30; Ear, W. S., 9.30; Throat, M. Th., 9.30; Skin, Tu. F., 9.30; Electrician, Tu. F., 9.30; Dental, W. S., 9.30.

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

UNIVERSITY COLLEGE.—Medical and Surgical, daily, 1 to 2; 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., 8. 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, 439, Strand, W.O., London; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, Strand, W.O., 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, 429, Strand, W.O.

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.

## A CONSULTING-ROOM THIEF.

DR. A. E. T. LONGHURST writes: As a hint to my professional brethren, I send a line to say that a man called at my house about three o'clock yesterday afternoon, and asked if I was in; my servant saying no, he asked when I was expected; on being told in about half an hour, he said he would wait, was shown in, and took up the newspaper to read. In a very short time he was seen by my servant leaving the hall, saying he would call again, having a little business to transact. I need hardly say he did not, having taken with him my pocket-case and a binaural stethoscope, together valuing £4 to £5. He was of middle height, dark complexion, about 40 years of age, and called himself "Mr. Kerr."

## A NEW FIELD FOR WOMEN.

THE *Cumberland Pacquet* announces the death of a Mr. George Dennison, who is described as a "celebrated bone-setter." "Deceased's skill as a bone-setter, and indeed that of his father before him, was," our intelligent contemporary continues, "generally acknowledged; and it is no exaggeration to say that he had successfully treated some hundreds of cases, many of them of a difficult character. Deceased will be a much-missed man, but his mother, who has had thirty years' practical experience in bone-setting, and who has actually been attending to her son's business during his illness, intends to follow up the profession which has for so many years been carried on by her deceased son and her husband. The latter is now too old and feeble to work himself."

## RAPID STAINING OF THE TUBERCLE-BACILLUS.

HENRY S. GABBETT, M.D., writes: I can strongly recommend the following slight modification of Neelsen's method of staining the tubercle-bacillus in cover-glass preparations. The stain is made by dissolving 1 part of magenta in 100 of 5 per cent. watery solution of carbolic acid, and adding 10 of absolute alcohol. Heat this fluid over a spirit-lamp till steam rises freely. Float the preparation (made in the usual way), cover, and leave for two minutes. Then immerse in a solution of methylene blue in 25 per cent. sulphuric acid (made of a dark blue colour) for one minute, keeping the watch-glass in motion. Finally, rinse the cover-glass in distilled water, dry, and mount in balsam. The whole process occupies about five or six minutes.

Possibly this method may have been already suggested; if so, it has escaped my notice. The only novelty in it is the combination of the decolorising fluid and contrast stain, which are used separately in Neelsen's method. I find the results far better than those obtained by any of the other rapid methods; and Neelsen's carbolic solution of magenta is distinctly preferable to any of the preparations made with aniline.

## JUVENILE INCONTINENCE.

W. would recommend a course of bromide of iron, beginning with 5 grains three times a day, which may be increased during a fortnight to 15 or 20 grains for a short time. The syrup is the best preparation. The patient should sleep in loose flannel drawers, to prevent any chill to the lower part of the body or the thighs.

A triangular blister over the sacrum is a very efficient remedy. Whether the cantharidine has any good effect on the bladder-sphincter, or whether (which I think is the way it acts) it is beneficial by preventing the patient sleeping on the back, is a question. Care should be taken that the bladder is emptied before the patient goes to bed, and again before the house is shut up for the night. I have never known punishments or threats to have any good effect.

## THE EPIDEMIC OF DIARRHŒA.

DR. L. M. SNOW (Brabourne, Kent) writes: I have watched with interest the result of Dr. Kerr's letter in the *JOURNAL* of February 12th, and am surprised that no country practitioners have recorded their experiences, as one would think the epidemic was confined to London. During the last three months I have had an unusually large amount of diarrhœa cases presenting the same symptoms as Dr. Kerr describes, except that the abdominal pain seemed more severe. My cases have been among the small farmers and better class of working people; but I am at a loss to find any cause for the prevalence of the attacks; they are all about three or four miles apart, and consequently all have different milk and water supply, etc. In two or three families, from two to four members in each have been affected, and in two the wife was affected, then the husband, which circumstance seemed to me to point to some infection.

All my cases yielded quickly to dilute sulphuric acid and opium. I have had six or seven cases during the last fortnight, so that the epidemic does not seem over.

## FOREIGN BODY IN THE INTESTINAL CANAL.

MR. CASPAR R. LAURIE (Loughton, Essex) writes: Having noticed two or three cases of foreign body in the intestinal canal lately reported in the *JOURNAL*, I should like to record yet one more, which came under my care a week or two ago. The china leg of a doll, one inch and a half in length, with an angular foot half an inch long, was swallowed by an infant eight months old at 7 A.M.; it was safely passed without pain at 3 A.M. the next day, having been twenty-one hours in completing its journey. As in the other cases, "expectancy" was the only treatment.

## CASE OF SWALLOWING ARTIFICIAL TEETH.

M.D. writes: With reference to Mr. Ackery's letter, a patient of mine recently swallowed a plate (gold, with two teeth), and I immediately adopted a practice recommended to me some years ago by Sir James Paget in a similar case. I made him eat three good-sized slices of bread and swallow four tablespoonfuls of flour and water made into a fairly thick mass. I then administered an emetic, and the teeth returned entangled in the tenacious vomit. I may add that the first case was equally successful, and that something of this sort is habitually done at police-stations when prisoners passing false coins swallow them.

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

Mr. H. A. Allbutt, Leeds; Dr. C. F. Moore, Dublin; Mr. W. J. Penny, Clifton; Sir W. Smart, London; Mr. H. A. Latimer, Swansea; Dr. A. W. Edis, London; Mr. H. A. Reeves, London; Mr. W. S. Manning, London; Mr. O. Hehner, London; Mr. W. C. Wood, Epsom; Mr. J. Whitehouse, Sunderland; Dr. D. A. Fraser, Totnes; Dr. A. Robertson, Glasgow; Mr. W. M. Bristow, New Brighton; Messrs. Grindlay, Groom, and Co., Bombay; Mr. S. Murphy, Lon-

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## BOOKS, ETC., RECEIVED.

Wear and Tear: or Hints for the Overworked. By S. Weir Mitchell, M.D., LL.D. Fifth Edition. Philadelphia: J. B. Lippincott Co. 1887.  
Nervous Diseases and their Diagnosis. By H. C. Wood, M.D., LL.D. Philadelphia: J. B. Lippincott Co. 1887.  
Electrical and Anatomical Demonstrations. By Herbert Tibbits, M.D. London: J. and A. Churchill. 1887.  
Bronchial Asthma. By J. C. Thorowgood, M.D., F.R.C.P. Third Edition. London: Baillière, Tindall, and Co. 1887.

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