

ASSOCIATION INTELLIGENCE.

COUNCIL.

NOTICE OF MEETING.

A MEETING of the Council will be held in the Council Room of the Association, at No. 429, Strand (corner of Agar Street), London, on Wednesday, the 17th day of April next, at 2 o'clock in the afternoon.

The following Committees will also meet:—

Tuesday, April 16th, 1889.—Premises Committee, 4.30 P.M.—Special Journal and Finance Committee, 5.30 P.M. *Wednesday, April 17th, 1889.*—Journal and Finance Committee, 11.0 A.M.

FRANCIS FOWKE, *General Secretary.*

April, 1889.

NOTICE OF QUARTERLY MEETINGS FOR 1889.
ELECTION OF MEMBERS.

MEETINGS of the Council will be held on April 17th, July 10th, and October 16th, 1889. 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, June 20th, and September 26th, 1889.

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

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

FRANCIS FOWKE, *General Secretary.*

COLLECTIVE INVESTIGATION OF DISEASE.

THE series of Maps forming the Report of the Collective Investigation Committee on the GEOGRAPHICAL DISTRIBUTION OF RICKETS, ACUTE RHEUMATISM, CHOREA, CANCER, AND URINARY CALCULUS are deposited in the Library of the Association, and are open to the inspection of members. A descriptive commentary appeared in the JOURNAL of January 19th, 1889.

An inquiry into the ORIGIN AND MODE OF PROPAGATION OF EPIDEMICS OF DIPHTHERIA is in progress.

Memoranda and forms for communicating observations may be had on application to the Secretary of the Collective Investigation Committee, 429, Strand, W.C.

GRANTS FOR SCIENTIFIC RESEARCH.

THE Scientific Grants Committee of the British Medical Association desire to remind members of the profession engaged in researches for the advancement of medicine and the allied sciences, that they are empowered to receive applications for grants in aid of such research. Applications for sums to be granted at the next annual meeting should be made without delay to the General Secretary, at the office of the Association, 429, Strand, W.C. Applications must include details of the precise character and objects of the research which is proposed.

Reports of work done by the assistance of Association grants belong to the Association.

Instruments purchased by means of grants must be returned to the General Secretary on the conclusion of the research in furtherance of which the grant was made.

BRANCH MEETINGS TO BE HELD.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.—The spring meeting of this Branch will be held on Wednesday, April 25th, at Aberdare. Subject for discussion, Sore Throat, introduced by W. Price, M.B., Cardiff. Members wishing to read papers, show cases, specimens, etc., should send title to Dr. Sheen before April 10th.—A. SHEEN, M.D., Cardiff; D. A. DAVIS, M.B., Swansea, Honorary Secretaries.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will be held at the Town Hall, Mare Street, Hackney, on Thursday, April 18th, at 8.30 P.M. A paper will be read by Mr. Watson Cheyne on the Nature and Early Operative Treatment of Tubercular Joint Disease. The paper will be illustrated by numerous diagrams shown through the magic lantern. Visitors will be welcomed.—J. W. HUNT, Honorary Secretary, 101, Queen's Road, Dalston.

OXFORD AND DISTRICT BRANCH.—The next meeting of this Branch will be held on Friday, April 26th, in the Radcliffe Infirmary, at 3 P.M. Gentlemen intending to read papers or show cases are requested to communicate with the Honorary Secretary, W. Lewis Morgan, 42, Broad Street, Oxford, on or before April 12th.—S. D. DARRISHIRE, W. LEWIS MORGAN, Honorary Secretaries.

YORKSHIRE BRANCH.—The spring meeting of this Branch will be held on Wednesday, April 24th, at 3 P.M., in the Board Room of the Huddersfield Infirmary. Members intending to read papers, etc., are requested to communicate with ARTHUR JACKSON, Secretary, Sheffield.

NORTH OF IRELAND BRANCH.—A general meeting of this Branch will be held in the Royal Hospital, Belfast, on Thursday, April 25th, at 4 o'clock. Gentlemen who wish to bring any matter before the meeting will kindly communicate as early as possible with the Secretary, JOHN W. BYERS, M.D., Lower Crescent, Belfast.

SPECIAL CORRESPONDENCE.

BERLIN.

[FROM OUR OWN CORRESPONDENT.]

Treatment of Ileus.—Subphrenic Abscess.—General News.

ON February 27th, Dr. Goldammer, Medical Superintendent of the Bethanien Deaconesses' Institution, delivered an address on Ileus before the Berlin Medical Society. It was based on fifty observations (thirty men and twenty women). Thirty-five of the whole number died and fifteen were cured. With regard to the fundamental condition, accurate statements could be made in thirty-eight cases. In ten cases, there was carcinoma of the colon; in seven, invagination; in six, the cause of the ileus was found to be kinking of the coils of the small intestine, owing to circumscribed peritonitis; in five, it was old cicatricial stricture; in four, volvulus; in two, tubercular peritonitis; in two, internal incarceration. In one case, in which the patient was moribund when admitted, the cause was reduction of a hernia *en masse*, and in one a gall-stone impacted in the small intestine. In all the malignant cases, it was the large intestine that was affected. Rectal cancers were not included. In only two of the ten cases could a tumour be felt in the region of the sigmoid flexure. The seat of the stricture could never be reached from the rectum. In one of these cases the patient was a girl, aged 25; in another a man, aged 26. Of the other cases of chronic stricture of the gut, there were four of old cicatricial stricture of the large and one of the small intestine. In two cases, tubercular peritonitis had led to the matting together of the coils of small intestine and to their adhesion to the abdominal wall, and hence to strangulation. Of the intussusception cases, the affected part was in one the descending colon; in three, the small intestine; in two, there was invagination of the ileum into the colon; whilst one case remained doubtful. In three of these cases a distinct tumour could be felt. In six cases, death occurred after a duration of from four to eight weeks; one case recovered. The volvulus cases, as well as those of internal strangulation, all ended fatally in a few days. The treatment was confined to two things: the exhibition of opium in large doses and rigorous diet. The beneficial effects of opium on the acute symptoms of intestinal occlusion is well known. For this purpose, it should be administered in the largest doses till contraction of the pupil, or less frequently sleep, is induced. If the opium cannot be kept on the stomach, morphine must be given hypodermically. Injections of water or inflation with air should next be tried. In chronic obstruction, a slow passage of fæces may occur when, owing to the stoppage of peristaltic action, the pressure of additional fæces from above against the strictured point is arrested. Of the acute forms of stricture, intussusception is unquestionably benefited by opium. In these cases the imprisoned gut may spontaneously become released. One is often told by such patients that they have had similar attacks before. Every stimulation of peristaltic movement increases the constriction of the invaginated portion of intestine. The same holds good with regard to volvulus and internal strangulation. Here also arrest of peristalsis mostly prevents further filling of the intestine, and makes relief of the obstruction possible. For the release of the upper intestinal

he collaborated with Sédillot. This work reached its fourth edition in 1870.

By his own desire, Legouest was buried without the customary funeral orations.

INDIA AND THE COLONIES.

INDIA.

THE DRAINAGE AND WATER-SUPPLY OF BENARES.—Mr. A. J. Hughes, superintending engineer for municipal works of the North-West Provinces and Oudh, has presented a report descriptive of the insanitary state of the city, and containing a scheme for its sewerage, and the introduction of a pure water-supply from the Ganges above the town. Benares is the most sacred city of the Hindus, and attracts many pilgrims to its sacred shrines and bathing places. Like many other resorts of especial sanctity and holiness, the sanitary condition of the city is most deplorable. The present sewers are elongated cesspools or tunnel middens, discharging their foetid filth at or near the bathing-places, and the whole town reeks with stinks and sewer gases. At least half the population drinks well-water from a surface saturated with the filth of centuries. The population is now over 200,000, and the last recorded death-rate was 35 per 1,000, of which 7.5 per 1,000 was from cholera, and 29 per 1,000 from fever, bowel complaints, and preventable causes. Benares is now recognised as one of the permanent homes of cholera, and one of the centres for its spread by means of the flocks of pilgrims who travel to and return from its shrines. Mr. Hughes's scheme provides for the abolition of the old defective sewers, and for the laying of new ones on the most approved modern principles. But in an oriental city there are racial and caste habits and prejudices which do not readily permit of the sudden and wholesale enforcement of rules and regulations, however necessary to the carrying out of a successful sewerage scheme. Consequently, a choice of alternatives must be offered to the inhabitants, in the hope that they will gradually be persuaded to adopt that one which is most conducive to their own health and comfort. If the householder will provide water for flushing purposes, he may connect his own house-drain with the municipal sewer. Otherwise he may dispose of his filth in cesspools; by having it conveyed to street dépôts provided for it; or he may make use of the public latrines provided for the outside public who are not householders. The cesspools are nuisances, and are dangerous from the pollution of the subsoil and well water to which they give rise; but it is found impossible to abolish them, and their use must be tolerated under proper regulations. The rule of not allowing house connections with the sewers to be made unless water is provided for flushing purposes is a very necessary one in a hot climate, for the proper dilution of the sewage must be ensured if nuisance is to be avoided. It is to be hoped that the great advantages of the water-carriage system of excrement disposal will gradually be made manifest to the dwellers in this crowded city, and that the present filth-polluted condition of water, air, and soil may give way to a purer and better state of things. Mr. Hughes anticipates a reduction of the death-rate to 20 per 1,000 after the sewerage and improved water-supply are established. There are many precedents even for this large diminution; but even should it be much less, an enormous saving of life from preventable diseases may be effected—a saving which has already been accomplished in some of the large towns of India, and which has been spoken of as the greatest benefit to our Indian fellow-subjects which English rule has in its power to confer.

HOSPITAL AND DISPENSARY MANAGEMENT.

GLASGOW PUBLIC DISPENSARY.

THIS is an institution which embraces provident features, and was founded to test the acceptability of an institution on such a basis to the poor who were not in receipt of parochial relief. Advice and, if need be, medicine also are given. During the year the total of consultations was 2,630, of which 685 were connected with diseases of the throat and chest, 1,052 of skin and ear, 275 of kidney and urinary organs, and 618 of women and children. The monetary help received from the public was £85, and there is a deficiency of income to meet expenditure of £18 0s. 1d.

UNIVERSITY INTELLIGENCE.

OXFORD.

EXAMINATIONS IN MEDICINE AND SURGERY, 1889.—The Regius Professor of Medicine gives notice that the Final Examination for the Degree of Bachelor of Medicine will commence on Monday, June 10th, at 10 A.M. The Examination for the Degree of Master in Surgery will take place on Thursday, June 20th. The first examination for the Degree of Bachelor of Medicine will commence on Monday, July 1st, at 10 A.M.

EDINBURGH.

GENERAL COUNCIL.—The statutory half-yearly meeting of the General Council of the University of Edinburgh takes place on Tuesday, April 16th, within the University. The subject of the necessary qualifications for appointment to physicianships in the Royal Infirmary and the Dispensaries will again be before the Council, and communications from the managers of these institutions with reference to the matter will be read. It is also to be moved that the hour of meeting of the General Council of the University be in future 3 P.M. instead of one o'clock as hitherto.

GLASGOW.

EXTENSION SCHEME.—While the courses of lectures in the university in the evenings have not been attended by much success, large numbers of students have been enrolled in some of the suburban classes. In the east-end of the city, a course of lectures on English Literature, delivered by Mr. Mortimer Wheeler, M.A., was attended by 97 students, and a similar course at Pollokshields is being attended by 280.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

THE COMPULSORY NOTIFICATION OF INFECTIOUS DISEASES.

SIR,—Dr. Biddle declines to "attempt to verify or overthrow" my calculations of the increase or decrease of scarlet fever in the twenty towns taken separately. He also omits, though he does not say so, to challenge my demonstration that, taking the groups of towns as a whole, the decrease has been greater in notification than in non-notification towns, whether we deal with group death-rates, averages of death-rates, or total deaths. He still passes over in silence the objections to his method, or rather to his conclusions, which I have twice pointed out. I need not, therefore, trespass much further upon your space.

His attempt to impale me upon the "horns of a dilemma," due to his own inclusion of towns whose true statistics are unknown, is ingenious, but will scarcely bear examination. The missing data are for the most part pre-notification data, and could prove nothing for or against notification except by the determination of increase or decrease which I advocate, and Dr. Biddle does not accept. Six out of the seven are notification towns, and I quite agree that "if the death-rates were higher in the first half of the period.....the death-rate which I gave for Group III ought to beraised." In other words, if in these towns it should prove that the scarlet fever death-rate has diminished under notification, Dr. Biddle's method will make the figures look worse for notification than if no reduction had occurred. This "dilemma," or rather fallacy, is a forcible illustration of one of the weak points in his method. Notification ought not to be made responsible for high mortality in years preceding its introduction. When Dr. Biddle demurs to Portsmouth and Sunderland being regarded as notification towns in the 1882-83 period, he surely forgets that for the whole of his 1877-87 period he has included these same towns as examples of notification, notwithstanding the fact that for respectively seven-elevenths and nine-elevenths of that period their notification was non-existent. Of the 1,415 deaths from scarlet fever in Sunderland during the eleven years in question, only forty-three occurred in the two years of notification.

I have been careful to limit my share in this discussion to purely statistical points, but lest silence should seem to give consent, I wish to say in conclusion that I cannot accept Dr. Biddle's

distinction between single and dual notification as one of much real importance. So far as I know, either system becomes in practice notification by the medical attendant. This is certainly the case in Nottingham, which is nominally under the single system. Not one certificate in fifty reaches me through the hands of the householder, as required by the letter of the law. This modification has been adopted voluntarily by the profession, not upon the initiative of the sanitary authority. Personally I am inclined to think that there was some advantage in disarming opposition at the outset by adopting the "single" system, and to this extent I agree with Dr. Biddle in preferring it to the dual form.—I am, etc.,

ARTHUR WHITELEGGE.

Nottingham, April 6th.

OUTDOOR PAUPER LUNATICS.

DR. JAMES MACDONALD, Medical Parochial Officer (Carlisle) writes: In the instructions furnished by the Local Government Board, each poor-law medical officer is requested to make a quarterly report of all outdoor pauper lunatics, so far as he knows them, residing within his district. Printed schedules are supplied him for this purpose, and the items of information desired are specified in tabular form. I wish to ask what is the legal constitution of an outdoor pauper lunatic? In other words, in the event of a case of harmless lunacy, hitherto unreported, coming to the knowledge of a medical officer, what course is he to pursue? May he, on his sole authority, notify the case in his quarterly report, or are the opinion and signature of a justice of the peace also necessary?

* * * We believe the medical officer may include in his list any pauper lunatic not in an asylum, etc., but he must be prepared to make good his assertion that the person so included is really a lunatic, and the guardians are not bound to accept it and pay the fee if they have adequate ground for refusing to accept the statement that so-and-so is a lunatic. It is also obligatory on the medical officer to give notice to the relieving officer if it appears to him that a pauper lunatic ought to be sent to an asylum.

UNQUALIFIED ASSISTANTS.

"M.B." writes, with reference to the letter from "Medicus" which appeared in the JOURNAL of March 23rd, to complain that his opponent uses an unqualified relative to underbid him for clubs and private work, and generally to act as the other practitioner's *alter ego* in his poor-law districts. "M.B." considers that "the implied condemnation of the General Medical Council" is a very weak barrier to oppose to such practices. "Why," he asks, "should the Local Government Board require that their officers shall be duly qualified and registered when the work can be handed over to a man who could not have been himself appointed to the post, and who, by the means referred to, poses before the public as 'parish doctor,' and so produces the belief that he is a duly qualified practitioner of medicine?"

* * * The Local Government Board does not recognise the delegation of poor-law work to an unqualified person. Their general consolidated order distinctly requires the habitual personal performance of his duties by a district medical officer, and it also requires that the nominated deputy, in case of unavoidable circumstances, shall be a legally qualified medical practitioner.

HEALTH OF ENGLISH TOWNS.

DURING the week ending Saturday, April 6th, 5,813 births and 3,712 deaths were registered in twenty-eight of the largest English towns, including London, which have an estimated population of 9,555,406 persons. The annual rate of mortality per 1,000 living in these towns, which had declined in the three preceding weeks from 21.3 to 19.9, rose again to 20.3 during the week under notice. The rates in the several towns ranged from 12.9 in Brighton, 16.3 in Portsmouth, 17.3 in Leicester, and 17.4 in Halifax to 26.4 in Oldham, 27.8 in Manchester, 30.0 in Preston, and 30.6 in Blackburn. The mean death-rate in the twenty-seven provincial towns was 21.5 per 1,000, and exceeded by 2.7 the rate recorded in London, which was only 18.8 per 1,000. The 3,712 deaths registered during the week under notice in the twenty-eight towns included 464 which were referred to the principal zymotic diseases, against 468 and 421 in the two preceding weeks; of these, 175 resulted from measles, 125 from whooping-cough, 48 from scarlet fever, 47 from diphtheria, 21 from "fever" (principally enteric), and not one from small-pox. These 464 deaths were equal to an annual rate of 2.5 per 1,000; in London the zymotic death-rate was 2.3, while in the twenty-seven provincial towns it averaged 2.7 per 1,000, and ranged from 0.5 in Derby, and 0.6 in Huddersfield and in Halifax to 6.5 in Blackburn, 8.0 in Preston, and 9.6 in Bolton. Measles caused the highest proportional fatality in Bristol, Norwich, Manchester, Preston, Blackburn, and Bolton; scarlet fever in Oldham, Blackburn, and Sheffield; whooping-cough in Bolton, Oldham, Bradford, and Preston; and "fever" in Preston. The 47 deaths from diphtheria recorded during the week in the twenty-eight towns included 26 in London, 4 in Salford, 3 in Manchester, 3 in Liverpool, and 2 in Sunderland. No fatal case of small-pox was registered during the week, either in London or in any of the twenty-seven provincial towns; and only 1 small-pox patient was under treatment in the Metropolitan Asylums Hospitals on Saturday, April 6th. These hospitals contained 535 scarlet fever patients on the same date, against 534 and 541 at the end of the two preceding weeks; there were 37 admissions during the week, against 51 and 36 in the two previous weeks. The death-rate from diseases of the respiratory organs in London during the week under notice was equal to 4.4 per 1,000, and was considerably below the average.

HEALTH OF SCOTCH TOWNS.

In the eight principal Scotch towns, 841 births and 558 deaths were registered during the week ending Saturday, April 6th. The annual rate of mortality, which had declined from 25.4 to 22.1 per 1,000 in the three preceding weeks, further fell to 21.8 during the week under notice, but exceeded by 1.5 per 1,000 the mean rate during the same period in the twenty-eight large English towns. Among these Scotch towns the lowest rates were recorded in Greenock

and Aberdeen, and the highest in Paisley and Glasgow. The 558 deaths in these towns during the week under notice included 90 which were referred to the principal zymotic diseases, equal to an annual rate of 3.5 per 1,000, which exceeded by 1.0 the mean zymotic death-rate during the same period in the large English towns. The highest zymotic death-rates were recorded in Dundee and Glasgow. The 293 deaths registered in Glasgow included 29 from whooping-cough, 28 from measles, and 6 from diphtheria. Five fatal cases of whooping-cough occurred in Edinburgh, and 4 in Dundee. The death-rate from diseases of the respiratory organs in these Scotch towns was equal to 4.9 per 1,000, against 4.4 in London.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, April 6th, the deaths registered in the sixteen principal town districts of Ireland were equal to an annual rate of 24.6 per 1,000. The lowest rates were recorded in Wexford and Sligo, and the highest in Armagh and Limerick. The death-rate from the principal zymotic diseases in these towns averaged 1.1 per 1,000. The 174 deaths registered in Dublin during the week under notice were equal to an annual rate of 25.7 per 1,000 (against 26.3 and 27.6 in the two preceding weeks); the rate for the same period being only 18.8 in London and 17.8 in Edinburgh. These 174 deaths included 7 which were referred to the principal zymotic diseases (equal to an annual rate of 1.0 per 1,000), of which 2 resulted from measles, 2 from "fever," and 2 from whooping-cough.

MEDICAL NEWS.

THE Maharajah of Bettiah has subscribed Rs. 10,000 to the Dufferin Memorial Fund.

A VILLAGE Sanitation Bill has been introduced into the Bombay Legislative Council.

DR. LALLEMENT, Professor of Anatomy in the Medical Faculty of Nancy, died recently of apoplexy.

DR. CHANTRAIN, physician in ordinary to the King of the Belgians, died recently.

PROFESSOR VIRCHOW is said to be engaged in rewriting his great work on *Cellular Pathology*.

DUKE KARL THEODOR, of Bavaria (brother of the Empress of Austria), it is stated, is about to establish in Meran (Tyrol) an eye hospital, of which he will act himself as chief surgeon.

SUCCESSFUL VACCINATION.—Mr. Webster Adams, Medical Officer and Public Vaccinator 6th District, Woodbridge Union, has been awarded the Government grant for efficient vaccination.

A NEW Russian medical journal, entitled *Medizina*, appeared on March 19th. The editor is Dr. S. M. Wassiljew. It is to be published once a week in June, July, and August, and twice a week throughout the rest of the year.

THE German Anatomical Society will hold its third meeting in Berlin at the beginning of October. The German Ophthalmological Society will meet at Heidelberg from September 13th to 15th.

PRESENTATION.—Dr. P. R. Phillips has been presented with an address and purse of sovereigns by his professional brethren in the counties of Carlow and Kilkenny on his resignation of the Leighlinbridge Dispensary District after thirty-eight years' service.

A PHYSICIAN SELF-IMMOLATED.—Diphtheria has made its appearance in some of the districts in West Middlesex. Among the victims we regret to have to record the tragic death of Mr. C. J. Moore, L.F.P.S.Glas., L.S.A. His child was attacked, and he found it necessary to perform tracheotomy, and it was in sucking the tube, which had become blocked, that he contracted the disease, which terminated fatally not only in his own case, but in that of his child also.

METROPOLITAN ASYLUMS BOARD.—At the first meeting of the newly-formed Board, of which Sir Edwin Galsworthy has been re-elected Chairman, the following returns for the fortnight were presented: 99 cases had come into the four hospitals, in place of 129 in the previous fortnight; 102 had been discharged, leaving 644 under treatment, 17 less than a fortnight ago. Of the whole, 549 were cases of scarlet fever, and 40 of enteric, while 46 were cases of diphtheria, and 3 were cases of typhus. No case of small-pox has been received during the fortnight, but two cases remained under treatment.

A PUBLIC meeting of the Hospital Saturday Fund, in furtherance of the penny-a-week collection, was held on Saturday last at Grosvenor Hall, Buckingham Palace Road, Pimlico, under the auspices of the Chelsea, Hammersmith, St. George's, and West-

minster local committees. The Lord Mayor, who was accompanied by the City Chamberlain and other officials, presided. A resolution was passed pledging the meeting to support the movement, and the hope was expressed that the hospitals would see their way to open their doors to the working classes of an evening. A demonstration on a very large scale also took place at the East End, under the Lord Mayor's presidency, with the same object.

ST. THOMAS'S HOSPITAL.—The prizes for the winter session 1888-9 have been awarded as follows:—The Mead Medal for Practical Medicine, awarded to Mr. S. G. Toller; the Cheselden Medal for Surgery and Surgical Anatomy, awarded to Mr. A. C. Lankester; the Treasurer's Gold Medal for General Proficiency, awarded to Mr. A. F. Stabb. Third year's students: J. J. Perkins, College Prize, £20; W. H. Millar, College Prize, £15; A. King, College Prize, £10; C. P. Lovell, second tenure of Peacock Scholarship, £38 10s. Second year's students: J. H. Fisher, the Musgrove Scholarship, £38 10s; C. S. Wallace, College Prize, £20; W. B. Winston, College Prize, £10. First year's students: Edwin Smith, the William Tite Scholarship, £27 10s.; W. G. Sutcliffe, College Prize, £20; C. Planck, College Prize, £10.

EXAMINING BOARD IN ENGLAND BY THE ROYAL COLLEGES OF PHYSICIANS AND SURGEONS.—The following gentlemen passed the Second Examination of the Board in Anatomy only at a meeting of the Examiners on April 4th, namely:—

R. J. H. Allen; J. B. Byles, and J. C. R. Curtis, Students of University College; G. A. Bowlby, of Trinity Medical College, Toronto; W. Bligh, J. R. R. Pollock, and D. F. Roberts, of Guy's Hospital; G. D. E. Jones, of Middlesex Hospital; C. Hodgson, of St. Thomas's Hospital; J. Mc Neal, and C. S. Simpson, of London Hospital; W. H. Brewer, of Charing Cross Hospital; and M. Cutcliffe, of St. Bartholomew's Hospital.

Passed in Physiology only.

J. Neal, and E. F. Page, of Queen's College, Birmingham; G. W. Robertson, of London and Edinburgh; H. P. Job, of University College; C. G. F. Morice, of Guy's Hospital; W. E. Baker, of London Hospital; A. Graydon, E. P. Isaacs, and H. W. Oborn, of St. Thomas's Hospital; F. Clarke; C. W. H. Newington, J. H. Griffiths, and R. C. Gully, of St. Bartholomew's Hospital.

Passed in Anatomy and Physiology on April 5th.

A. Paine, W. A. Mallam, J. O. Symes, and R. M. Smyth, Students of St. Mary's Hospital; H. R. Smith, of University College; H. J. Jäger, of King's College; C. S. Wallace, of St. Thomas's Hospital; J. B. Byles, and G. Norman, of Westminster Hospital; N. Dowling, of Melbourne, University; F. E. Ingall; H. O. Johnson; H. E. Pace; W. H. Williams, of London Hospital; E. K. Bensley, W. F. Colclough, S. G. Floyd, T. B. P. Davies, and F. W. Wilson, of Guy's Hospital.

Passed in Anatomy only.

W. H. Cooke, of St. George's Hospital; and G. W. Henry, of Bristol School of Medicine.

Passed in Physiology only.

A. E. Armstrong, of Westminster Hospital; G. A. T. Fox, and W. L. Pethybridge, of St. Bartholomew's Hospital; W. E. E. Powles, of London Hospital; and J. S. Tabb, of Charing Cross Hospital.

Passed in Anatomy and Physiology on April 8th.

J. C. Baker, B. G. Seton, J. Smale, and A. C. T. Bois, students of St. Bartholomew's Hospital; J. J. Browne, E. T. B. Hamilton, A. T. Rake, of Guy's Hospital; A. T. G. Bell, E. Cullinan, and H. Wolsey-Lewis, of Westminster Hospital; O. P. Turner, of University College; A. Delve, of University College and Mr. Cooke's School of Anatomy and Physiology; T. F. Cockill and G. Hern, of Middlesex Hospital; E. W. James, of King's College; G. W. Cazalet, of London Hospital.

Passed in Anatomy only.

E. P. Dukes, H. St. J. Fraser, and P. McK. C. Wilmot, of Guy's Hospital; F. E. Easton and J. H. Hobling, of St. Mary's Hospital; E. W. Brimacombe, of St. Mary's Hospital and Birmingham; T. R. H. C. Hicks and A. R. Walters, of London Hospital; C. B. Prall and P. G. Laver, of St. Thomas's Hospital; J. B. Collins, of St. Bartholomew's Hospital; V. G. Drake-Brockman, of Middlesex Hospital; H. H. Mills, of Westminster Hospital; and R. Evans, of University College and Manchester.

Passed in Physiology only.

G. T. Bishop, of Charing Cross Hospital; and R. H. Crowley, of St. Bartholomew's Hospital.

Passed in Anatomy and Physiology on April 9th.

H. Tinley, H. M. Richards, W. H. B. Stoddart, and G. A. Watson, students of University College; A. S. Blackwell, H. J. Walton, J. P. S. Ward, A. N. Weir, R. M. West, C. E. Wheeler, and N. O. Wilson, of St. Bartholomew's Hospital; W. H. D. P. d'Esterre, J. R. Evans, A. G. Hinks, and F. J. Worth, of St. Mary's Hospital; W. A. Bowring, J. E. Harris, W. Potter, and W. P. Purvis, of St. Thomas's Hospital; E. Huntley and A. W. Sheen, of Guy's Hospital; W. Evans, of London Hospital; and H. A. Hinge, of St. George's Hospital.

Passed in Anatomy only.

T. Shütte, of St. Bartholomew's Hospital; F. W. Gange, of University College; H. S. Wild, of St. George's Hospital; C. W. R. Banham, of London Hospital; F. Knapton, of St. Mary's Hospital; T. D. Manning, of Guy's Hospital; A. A. McKinnon, of King's College; R. F. Chance, of St. Thomas's Hospital; G. C. W. Williams and W. Pell, of St. Thomas's and Mr. Cooke's School of Anatomy and Physiology.

Passed in Anatomy only on April 10th.

N. F. Kendall, S. R. Lister, C. F. Wightman, and J. Williamson, Students of St. Bartholomew's Hospital; E. Green, of King's College; H. M. Abel, of St. Thomas's Hospital; H. M. Weaver-Bridgman, of St. George's Hospital; V. H. Barr, of Guy's Hospital; W. H. Morgan and G. M. P. Nellen, of Middlesex Hospital; L. C. Brohier, of Ceylon and Mr. Cooke's School of Anatomy and Physiology; R. D. Cox, of St. Mary's Hospital; S. G. Felce, of Cambridge and St. Mary's Hospital; F. J. A. Baldwin, A. D. Davies, and J. P. Jones, of London Hospital.

Passed in Physiology only.

C. G. L. Dähne, H. O'N. Frases-Luckie, W. G. West, J. A. T. White, and C. A. Worth, of St. Bartholomew's Hospital; M. B. Foster and E. Parsons, of Charing Cross Hospital; J. H. Bicket and E. T. P. Eames, of London Hospital; R. E. P. Squibbs, of Middlesex Hospital; H. J. Frederick, of St. Thomas's Hospital; J. V. Pratt, of University College; and S. Croneen, of Guy's Hospital.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following gentleman, having passed the necessary examination in Surgery, and having obtained a medical qualification, was, at the quarterly meeting on April 11th, admitted a Member of the College: F. F. Jones, L.S.A., Woodborough House, Bristol.

ROYAL COLLEGE OF SURGEONS IN IRELAND: DENTAL EXAMINATION.—The following gentlemen have been admitted Licentiate in Dental Surgery of the College.

John Charters Birch, Victor Massey Crosse, Henry Williams Messenger, John George Wallis, and Walter Williams.

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.—At the monthly meeting, on April 5th, the following candidate, having complied with the by-laws relating to Membership, pursuant to the provisions of the Supplemental Charter of Victoria, dated December 12th, 1878, was duly enrolled a Member of the College.

Surgeon-Major Henry Cramer Guinness, Army Medical Staff, a Licentiate in Medicine of the College since 1859.

At a special examination held on March 14th, 1889, the Diploma of Midwife and Nurfender was granted to Mrs. Edith Beavis and Miss Annie Hunt.

MEDICAL VACANCIES.

The following Vacancies are announced:

BIRMINGHAM GENERAL DISPENSARY.—Resident Surgeon. Salary, £150 per annum, with extras, furnished rooms, etc. Applications by May 8th to the Secretary.

BOROUGH OF BLACKBURN.—Medical Officer of Health. Salary, £500 per annum. Applications by April 24th to W. E. L. Gaine, Esq., Town Clerk, Town Hall, Blackburn.

BRIGHTON, HOVE, AND PRESTON DISPENSARY.—Two House-Surgeons. Salary, £140 per annum, with apartments, etc. Applications by April 27th to the Assistant Secretary.

BRISTOL GENERAL HOSPITAL.—Surgeon. Applications by April 17th to the Secretary.

CHELTEMHAM GENERAL HOSPITAL.—Assistant House-Surgeon. Salary, £40 per annum, with board and apartments. Applications by April 18th to Lieut.-Colonel Croker-King, Honorary Secretary.

CLINICAL HOSPITAL FOR WOMEN AND CHILDREN. Manchester.—House-Surgeon. Salary, £30 per annum, with apartments and board. Applications by May 1st to Mr. Hubert Teague, Secretary, 38, Barton Arcade, Manchester.

COUNTY COUNCIL, County of London. Medical Officer of Health. Salary, £1,000 per annum. Applications by April 20th to the Acting Clerk of the London County Council, Spring Gardens, S.W.

CRITCHTON ROYAL INSTITUTION, Dumfries.—Junior Medical Assistant. Salary, £100 per annum. Applications to the Medical Superintendent, Dr. Rutherford.

DENBIGHSHIRE INFIRMARY, Denbigh.—House-Surgeon. Salary, £85 per annum, with board and lodging. Applications to the Secretary.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E.—Resident Clinical Assistant. Board and lodging. Applications by April 25th to the Secretary.

GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road, N.—House-Physician. Salary, £50 per annum, with board and lodging. Applications by April 26th to the Secretary.

GROVE HALL ASYLUM, Bow, E.—Assistant Medical Officer. Salary, £120 per annum, with board and lodging. Personal application to be made at the Asylum.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton. Assistant, Resident Medical Officer. Salary, £50 per annum with board and residence. Applications by April 17th to the Secretary.

KENT AND CANTERBURY HOSPITAL.—Assistant House-Surgeon and Dispenser. Salary, £50 per annum, with board, lodging, etc. Applications by April 17th to the Secretary.

LAMPETER UNION.—Medical Officer, Medical Officer of Health, and Public Vaccinator. Salary, £40 per annum, and vaccination and extra fees. Applications by May 2nd to D. Lloyd, Esq., Clerk, Lampeter.

MONTROSE ROYAL LUNATIC ASYLUM.—Junior Assistant Medical Officer. Salary, £100 per annum, with board and lodging. Applications to Dr. Howden, Medical Superintendent.

ROYAL ISLE OF WIGHT INFIRMARY, Ryde.—House-Surgeon and Secretary. Salary, £50 per annum, with board, lodging, etc. Applications by April 22nd to the Secretary.

SCARBOROUGH FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Resident Medical Officer. Salary, £200 per annum, with fees and residence. Applications by April 13th to Hugh Watson, Esq., St. Mary's Walk, Scarborough.

SALFORD ROYAL HOSPITAL.—Honorary Assistant House-Surgeon. Applications by April 15th to the Secretary.

STAFFORDSHIRE COUNTY LUNATIC ASYLUM, Stafford.—Junior Assistant Medical Officer. Salary, £100 per annum, with apartments, and board. Applications to the Medical Superintendent.

TORBAY HOSPITAL AND PROVIDENT DISPENSARY, Torquay.—House-Surgeon and Dispenser. Salary, £80 per annum, with board and lodging. Applications by May 20th to W. H. Kitson, Esq., Honorary Secretary, Shipway, Torquay.

MEDICAL APPOINTMENTS.

BRYAN, C. F., M.R.C.S.Eng., L.S.A.Lond., appointed Certifying Factory Surgeon, Leicester, *vice* C. R. Crossley, M.R.C.S.Eng., L.S.A.Lond., resigned.

BURDWOOD, J. W., L.F.P.S.Glasg., L.M., L.S.A.Lond., reappointed Medical Officer of Health to the Bourne Rural Sanitary District.

DAVIES, W., L.R.C.P., L.R.C.S.Eng., appointed Honorary Medical Officer to the Moors Side District of the Chorlton-upon-Medlock Dispensary.

GOODFELLOW, Thos. A., M.R.C.S., L.R.C.P., appointed Junior House-Surgeon to the Salford Royal Hospital.

HARING, Nathan C., M.R.C.S., L.S.A., appointed Honorary Medical Officer to the Chorlton-upon-Medlock Dispensary for the district of Rusholme.

JEEVES, J., M.R.C.S.Eng., L.R.C.P.Lond., appointed Junior Assistant House-Surgeon to the Sheffield Public Hospital and Dispensary, *vice* J. D. Wynne, M.B., B.Ch., M.R.C.S.Eng., resigned.

LAFFAN, J. T., L.R.C.S., appointed Resident Medical Officer and Public Vaccinator, Bunbury, and Medical Officer to the Blackwood District, Perth, Australia.

MORGAN, F. W. G., M.B., C.M.Eng., appointed Dispensing Surgeon to the Bradford Infirmary and Dispensary, *vice* J. Metcalfe, L.R.C.P., L.R.C.S.Eng., resigned.

O'MEEHAN, J. A., L.R.C.S., appointed Resident Medical Officer and Public Vaccinator, York, Perth, Australia, *vice* Dr. J. R. M. Thomson, resigned.

PASTEUR, William, M.D., appointed Assistant Physician to the Middlesex Hospital, W.

SELLS, H. T., L.R.C.P.Eng., M.R.C.S.Eng., appointed Medical Officer of Health to the Northfleet District, *vice* Dr. Crook, resigned.

SMITHSON, A. E., M.B., appointed Assistant House-Surgeon to the Royal Berks Hospital, *vice* R. T. Gravely, resigned.

TAYLOR, H. H., F.R.C.S., appointed Resident Medical Officer to the Hospital for Consumption, Brompton, *vice* H. D. Waugh, M.D., resigned.

WALKER, J. B., M.D., appointed Medical Officer of Health to the Golcar Combined District (Colne District), *vice* J. MacLinton, M.D., B.Sc.

WALKER, J. S. A., M.B., appointed Assistant House-Surgeon to the General Hospital, Birmingham, *vice* E. B. Hill, M.R.C.S., L.S.A.

WARNER, F. A., F.R.C.S.Eng., M.R.C.S., L.R.C.P.Lond., appointed Surgical Registrar and Anaesthetist to the National Orthopaedic Hospital, *vice* H. Hoole, M.D., resigned.

DIARY FOR NEXT WEEK.

SATURDAY.

(April 13th.)

MEDICAL SUPERINTENDENTS' SOCIETY, Paddington Infirmary, 285, Harrow Road, W., 3 P.M.—Cases: 1. Choroiditis Diseminata (ophthalmoscopic case). 2. Hysteria in the Male (two cases). 3. Deformities resulting from Gonorrhoeal Rheumatism. 4. Facial Paralysis. 5. Myxoedema in the Male (two cases of). 6. Arthritic Amyotrophy. 7. Ichthyosis Sebacea. 8. Other cases of Skin Disease (remarks by Dr. Colcott Fox). 9. Pyo-Salpinx—Abdominal Section. Others if time. 4.30. Papers: Dr. T. E. Hillier: On Five Cases of Chronic Cardiac Disease attended with Delirium. Dr. T. D. Savill: On Hysterical Spinal Disease.

MONDAY.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—The following cases will be shown. Dr. C. Theodore Williams: (1) An Anomalous Case of Aortic Aneurysm; (2) Contraction of Double Cavities in a Case of Advanced Phthisis. Dr. Beevor: (1) Unusual Eruption in a Patient taking Bromides; (2) Case of Pseudo-hypertrophic Paralysis in an Adult. Mr. Haslam: Case of Epithelioma of Face after Operation. Mr. John Holm: (1) Case of Lateral Curvature of Spine; (2) Case of inequality in Length of Arms. Cases from Dr. West and others.

TUESDAY.

PATHOLOGICAL SOCIETY OF LONDON, 8.30 P.M.—Mr. Targett: Diffuse Calcification of Liver. Mr. Sutton: Specimen of Sporadic Cretinism. Mr. Bowlby: (1) Organs and Parasites from a Case of Bilharzia; (2) Rectal Papilloma from the same case. Mr. Shattock: Histology of Eburnated Bones in Osteo-arthritis. Dr. Goodhart: (1) Case of Cancer of stomach; (2) Case of Cirrhosis of Liver. Dr. Robinson: Cysticercus Cellulose from Human Muscle. Mr. Doran: Sequel to Case of Primary Cancer of Fallopian Tube, reported in Vol. 39 of *Pathological Transactions*. Mr. Croke: Unilateral Interstitial Nephritis caused by Pressure (1) upon Ureter, (2) upon Hilus. Card Specimens.—Dr. Robinson: Duct Cancer of Breast. Dr. Fenwick: Misplaced Kidney. Dr. Omerod: (1) Hemorrhagic Sarcoma of Abdominal Viscera; (2)

Pericellular Cirrhosis of Liver in Infant. Dr. Hebb: (1) Cord in Infantile Palsy; (2) Tumour of Skin. Mr. Turner: The Parts after Inguinal Colotomy.

WEDNESDAY.

ROYAL METEOROLOGICAL SOCIETY (25, Great George Street, Westminster), 7 P.M.—Dr. Robert Lawson: On the Deaths caused by Lightning in England and Wales from 1852 to 1880. Mr. F. C. Bayard: The Diurnal Range of the Barometer in Great Britain and Ireland. Mr. A. W. Clayden: Note on a working Model of the Gulf Stream.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 5s. 6d., which should be forwarded in stamps with the announcement.

BIRTHS.

LIMONT.—On April 4th, at 3, Eldon Square, Newcastle-on-Tyne, the wife of James Limont, M.A., B.Sc., M.B., M.R.C.P., of a daughter.

LOMAX-SMITH.—On April 5th, at 37, Gloucester Street, South Belgravia, S.W., the wife of Montagu Lomax-Smith, M.R.C.S., of a son.

ROTHERA.—On April 7th, at Beeston, Notts, the wife of Frank Rothera, M.D., M.R.C.S., of a son.

MARRIAGE.

THOMAS—SCATLIFF.—On April 4th, at Clapham, S.W., J. Telfer Thomas, L.R.C.P.L., M.R.C.S., son of Captain Thomas, of Tregenna, Camborne, to Florence Gertrude, youngest daughter of the late John Parr Scatliiff, M.D., of Sloane Street and Clapham Common.

DEATH.

MILL.—At Halford, Shipston-on-Stour, April 2nd, at the residence of her mother, Etty Frederica, the beloved wife of W. Mill, Esq., M.R.C.S., L.R.C.P., aged 25 years.

OPERATION DAYS AT THE LONDON HOSPITALS.

MONDAY......10 A.M.: Royal London Ophthalmic.—10.30 A.M.: Royal Free (Ophthalmic Department).—1.30 P.M.: Guy's (Ophthalmic Department); Royal Westminster Ophthalmic.—2 P.M.: Central London Ophthalmic; Hospital for Women; Royal Orthopaedic; St. Mark's; London.—2.30 P.M.: Chelsea Hospital for Women.

TUESDAY......10 A.M.: Royal London Ophthalmic.—1.30 P.M.: Guy's; Royal Westminster Ophthalmic; St. Bartholomew's (Ophthalmic Department); St. Mary's.—2 P.M.: Cancer Hospital, Brompton; Central London Ophthalmic; London; Westminster.—2.30 P.M.: St. Mark's; West London.—4 P.M.: St. Thomas's (Ophthalmic Department).

WEDNESDAY....10 A.M.: National Orthopaedic; Royal London Ophthalmic.—11 A.M.: St. Mary's (Orthopaedic).—1 P.M.: Middlesex.—1.30 P.M.: Royal Westminster Ophthalmic; St. Bartholomew's; St. Thomas's.—2 P.M.: Central London Ophthalmic; Great Northern Central; London; Royal Free University College; Westminster.—2.30 P.M.: St. Peter's; Samaritan Free Hospital for Women and Children.—3 to 4 P.M.: King's College.

THURSDAY......10 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.: Central London Ophthalmic; Charing Cross; Hospital for Diseases of the Throat; Hospital for Women; London; University.—2.30 P.M.: Chelsea Hospital for Women; North-West London.

FRIDAY......9 A.M.: Metropolitan; St. Mary's (Ophthalmic Department).—10 A.M.: Royal London Ophthalmic.—10.30 A.M.: Royal Free (Ophthalmic Department).—1.15 P.M.: St. George's (Ophthalmic Department).—1.30 P.M.: Guy's; Royal Westminster Ophthalmic.—2 P.M.: Central London Ophthalmic; East London Hospital for Children; King's College; London; St. Thomas's (Ophthalmic Department).—2.30 P.M.: West London.

SATURDAY......9 A.M.: Royal Free (Department for Diseases of Women).—10 A.M.: Royal London Ophthalmic.—1 P.M.: King's College.—1.30 P.M.: Royal Westminster Ophthalmic; St. Bartholomew's; St. Thomas's.—2 P.M.: Cancer Hospital, Brompton; Central London Ophthalmic; Charing Cross; London; Middlesex; Royal Free; University.

HYGIENE IN GERMANY.—The fifteenth meeting of the German Association of Public Hygiene will be held at Strassburg from September 14th to the 17th. After an introductory address on sanitary administration in Alsace-Lorraine, there will be a discussion on the Imperial regulations for the maintenance of dwelling-houses in a healthy condition, with reference to the recommendations of the special committee of the Frankfurt meeting on that subject. The following subjects will also be considered: Railway Hygiene in its Relation to Travellers; the Prevention of Pulmonary Phthisis; Convalescent Establishments; Cooling Chambers in Slaughter Houses; Flower Gardens in Cities.

communicating agent—at any rate, in such a condition, I should not feel at all comfortable at sea with a cabin companion in advanced consumption.

If medical men would only think what a frightful thing it is to get rid of dying patients by subjecting them to the misery of a long sea voyage, legislation on the subject would scarcely be called for. As it is, the only measures at all practicable must deal with passengers before they leave port, as, once at sea, things go on in a humdrum fashion, and any suggestion is then, as a rule, met by ill-will. Certainly consumptive patients ought to have cabins to themselves, but I scarcely see how this can be efficiently carried out without medical certificates as to health or disease, and even with these I am afraid there would be much trouble relative to whether a person was suffering from tuberculosis or not.

HOW TO AVOID DANGER FROM POISONS.

W. W. H. writes: As we continually hear of accidents occurring from patients taking lotions or liniments, which are frequently poisonous, instead of their proper medicine, allow me to suggest a plan for the greater safety of patients, which is a very simple one, and one which has never failed with myself. All mixtures are sent out in "flats," lotions and gargles in "direct squares," and liniments in "octagons." By this simple method it will be seen that mixtures intended for internal administration are in different shaped bottles to the applications that are not intended to be swallowed, so that by the sense of touch the patient may at once detect his mixture or his lotion, or may direct his attendant to whichever shaped bottle he requires. I use the following sizes in "flats" as being the most useful—6, 4, 3, 1, 1½, and 1 ounce, the two last being marked in teaspoons, the rest in six parts. As regards children's medicines, I have given up the old-fashioned custom of using "vials," as they are so apt to roll, and do not make nearly so neat a parcel as the "flats"; and, owing to the very variable size of ordinary teaspoons, it is better to have the bottles divided by marks, which I find usually very correct. Coloured bottles are useless in the dark, and are generally expensive.

LECTURES D. OUT-PATIENT PRACTICE.

"A FINAL MAN," dating from Glasgow University, writes to complain that the out-patient department of the Western Infirmary, which is connected with the University, is open from 2 P.M. onwards; but, as a rule, all the patients have been seen and are away by 3 o'clock. During this hour Professor Leishman meets his class of midwifery (a fourth-year's class), and, consequently, men of that, the "final year," are cut off from all possibility of gaining practical experience in the everyday ailments and diseases which they, as medical men, will so largely meet in private practice. To remedy this great defect the students, through their representative council, sent a petition to the Senate and Professor Leishman asking them to alter the hour of meeting from 2 P.M. to 12 noon, when final men are disengaged, and so permit of their attending the out-patient department. A reply was received declining to accede to this request.

PRONUNCIATION OF CASCARA SAGRADA.

MR. HENRY TAYLOR (Guildford) writes: As I hear many people pronounce the word *cascara* with the accent on the second syllable, I conclude that it is not generally known that the word is Spanish, with the accent on the first syllable, and means bark, its diminutive being *cascarilla*. *Cascara sagrada* is the "sacred bark," so-called from its excellent medicinal properties.

ERRATUM.—The suggestion under the head of "Insurance of Children," attributed to Dr. North in our last week's issue, was made by the President of the Yorkshire Association of Medical Officers of Health, Dr. Mitchell Wilson.

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

Dr. Bedford, Edinburgh; W. J. Cameron, M.B., Melbourne; Mr. Adams Frost, London; Dr. Robert Barnes, London; Medical Staff; Dr. L. Cane, Peterborough; Dr. S. Thomson, London; Mr. Kelly, London; Dr. C. R. Drysdale, London; Mr. F. Treves, London; Dr. Duffus, Glasgow; Dr. F. H. Spencer, Wexford; Dr. A. Ambrose, Buckhurst Hill; Mr. R. Steward, Eastbourne; Mr. W. J. Penny, London; Dr. Major Greenwood, London; Mr. H. L. Jones, Bristol; Mr. J. Wickham Barnes, London; Mr. E. G. Archer, Brandon; Mr. T. Moynihan, Belfast; Dr. Sykes, Moxborough; Mrs. S. Theobald, Leicester; Mr. W. Ogle, Derby; W. C. Wicks, M.B., Newcastle-on-Tyne; Mr. H. W. McConnell, Barnstaple; Mr. W. W. Pike, Curragh Camp; Mr. H. Michie, Nottingham; Dr. P. B. Smith, Aberdeen; One Abroad; Dr. A. Goubaroff, Moscow; Look Out; Surgeon-General W. A. Thomson, Simla; Dr. T. Linn, Paris; C. W. R. Wynne, M.B., London; Dr. W. Webb, Wicks; Mr. J. Hinton, Warminster; Dr. Mickle, London; Mr. W. Rivington, London; Mr. R. White, Marden; Mr. H. Maturin, Winchfield; Dr. John Reid, Melbourne; Dr. McCalman, Oporto; Mr. H. W. Allingham, London; Dr. Dedieu, Paris; Dr. C. J. White, Bournemouth; The Secretary of the British Gynaecological Society, London; Dr. Thin, London; Mr. C. F. Bryan, Leicester; Mr. R. C. Harrison, Ealing; Our Berlin Correspondent; Dr. John Johnston, Bolton; Mr. Towers-Smith, London; Dr. James Rankin, Kilmarnock; Dr. A. Whitelegge, Nottingham; A Member; The Regius Professor of Medicine, Oxford University; Dr. B. Howard, London; Dr. J. W. Byers, Belfast; F. P. Nichols, M.B., Alderney; Mr. M. C. Brown, Andover; Mr. A. Westland, London; Mr. L. M. Griffith, Clifton; Dr. Thomas Laffan, Cashel; Miss Beachcroft, Brighton; Mr. Collins, London; Mr. T. D. White, London; Mr. E. Hare, Bath; Mr. W. Adams, Ipswich; Mr. W. Stoney, Dublin; Mr. H. C. Burdett, London; Observer; Mr. C. M. Jessop, London; A. D. Keith, M.B., Aboyné; Dr. G. Reid, Stafford; Mr. J. W. Davies, Ebbw Vale; Mr. H. Taylor, Guildford; Mr. A. E. Godfrey, Northampton; Dr. J. Milward, Cardiff; Mr. S. Plowman, London; Mr. W. Roger Williams, London; Mr. H. A. Latimer, Swansea; M. F.

Alcan, Paris; Dr. C. J. Renshaw, Ashton-upon-Mersey; Mr. A. W. Scatiff, London; Surgeon S. Hayman, Southsea; Mr. G. Neves, Chatham; Dr. W. W. Hardwicke, Dovercourt; Miss Lillett, Portsmouth; Dr. J. MacLintock, Bradford; Mr. F. Wright, Stamford Bridge; Dr. Saundby, Birmingham; Mr. J. S. Wilkinson, Oakengates; Mr. James Craig, Llandudno; Mr. C. Estcourt, Manchester; Mr. C. S. Loch, London; Dr. Louis Parkes, London; Dr. C. R. Illingworth, Accrington; Mr. A. Andrews, London; Dr. J. Mackenzie Booth, Aberdeen; Dr. G. F. Inglott, Malta; Mr. A. W. Sinclair, London; Dr. Ferran, Barcelona; W. R. Rice, M.B., Coventry; Dr. H. S. Purdon, Belfast; Mr. H. V. Freeman, Pangbourne; Dr. E. Gumpert, Manchester; The Press Cutting Agency, London; Dr. A. H. Lewers, London; Mr. R. Haggard, Hull; Mr. H. S. Little, Reading; Dr. A. C. Dixey, Mentone; Mr. J. Poland, London; G. A. Pirie, M.B., Manchester; Mr. W. A. Ellis, London; Mr. C. G. Brown, Goole; Dr. W. Woodward, Worcester; Messrs. Romeike and Curtice, London; Dr. A. James, Edinburgh; M.B.; Mr. Arthur Price, St. Davids; Dr. H. D. Littlejohn, Edinburgh; Mr. R. C. Owen, Kendal; Mr. D. Lloyd, Lampeter; Mr. E. G. Brown, Eby; Dr. Tatham, Salford; Mr. C. B. Thurman, Wakefield; Mr. J. M. Chadwick, St. Neots; Mr. C. Day, Malvern; Dr. C. Stawell, Bagnalstown; Dr. Willoughby, London; Mr. P. Jakins, London; M. L. Pasteur, Paris; Dr. Norman Kerr, London; Dr. E. D. Whittle, Brighton; J. A. Matson, M.B., Liverpool; Mr. Page, London; Mr. W. J. Coryn, London; Our Glasgow Correspondent; Mr. A. Stewart, Inverness; Mr. A. Campbell, Campbeltown; Mr. J. Limont, Newcastle-on-Tyne; Dr. J. W. Moore, Dublin; Dr. J. H. Benson, Dublin; Dr. Cranston Charles, London; Mr. C. Feyer, London; Mr. H. Gravelly, St. Clears; Messrs. C. J. Van Houten and Co., Weesp, Holland; B. S. Cowen, M.B., Moffatt; Mr. D. H. Gabb, Hastings; Mr. A. H. S. Todd, Monkstown; Mr. W. Thwaites, Bristol; Surgeon R. H. Clement, London; Mr. G. Rendle, London; Mr. K. W. Ingleby-Mackenzie, Ryde; Mr. E. G. Annis, Lincoln; Mr. T. A. Goodfellow, Hatherlow; Mr. F. Marsh, London; Mr. W. V. Cardew, Croydon; Dr. S. W. Smith, Cheltenham; Dr. Arlidge, Stoke-on-Trent; Mr. Cartwright, Oswestry; Dr. W. J. R. Knight, Cookstown; Dr. Walmsley, Manchester; Messrs. Digby and Long, London; Mr. G. E. Perry Birmingham; Dr. W. Bode, Bad Nauheim; Mr. W. T. Elliott, Birmingham; Mr. A. W. Lightbody, London; etc.

BOOKS, ETC., RECEIVED.

What shall we have for Breakfast? By Agnes C. Maitland. London: John Hogg. 1889.
General Index to the Glasgow Medical Journal, from its beginning in 1823, to 1888. Prepared by Malcolm M'Murich, M.A., M.B. Glasgow: A. Macdougall. 1889.
A Journal of the Great Plague of Marseilles in the Year 1720. By Edward Evan Meeres, M.D. London: Simpkin, Marshall and Co. 1889.
Knight's Guide to the Arrangement and Construction of Workhouse Buildings. London: Knight and Co. 1889.
Man and His Maladies, or the Way to Health. By A. E. Bridger, B.A., M.D. London: John Hogg. 1889.
Lectures on the Errors of Refraction. By Francis Valk, M.D. New York and London: G. P. Putnam's Sons. 1889.
The Insane in Foreign Countries. By William P. Letchworth. New York and London: G. P. Putnam's Sons. 1889.

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