

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 10th day of July next, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary*.

June 13th, 1889.

NOTICE OF QUARTERLY MEETINGS FOR 1889.

ELECTION OF MEMBERS.

MEETINGS of the Council will be held on 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.

METROPOLITAN COUNTIES BRANCH (NORTH LONDON DISTRICT).—The annual meeting for the election of officers will be held at the Restaurant of the Zoological Gardens on Saturday, June 22nd. The members and their friends will dine together at 6.30. The President of the Branch, Dr. C. Brodie Sewell, will preside, and will be supported by the President of the Council, Dr. Bridgewater, Dr. Bristowe, C. N. Macnamara, F.R.C.S., Dr. E. Hooper May, W. Adams, Esq., and other members of Council. Tickets 7s. 6d., each, including entrance to the gardens. Morning dress. The band will play from 4 till 6.

Members and friends intending to be present are requested to communicate with the Honorary Secretary before June 20th.—GEORGE HENTY, M.D.

SOUTH EASTERN BRANCH: WEST KENT DISTRICT.—The next meeting of this District will take place on Friday, July 5th, at St. Bartholomew's Hospital, Chatham, Dr. J. V. Bell, President of the Branch, in the chair. Gentlemen desirous of reading papers, or exhibiting specimens, are requested to inform the Honorary Secretary of the District, A. W. NANKIVELL, F.R.C.S., St. Bartholomew's Hospital, Chatham, not later than June 15th. Further particulars will be duly announced.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.—The annual meeting of this Branch will be held at the Hospital, Swansea, on Thursday, June 27th. Further particulars in circular.—A. SHEEN, M.D., Cardiff; D. ARTHUR DAVIES, M.B., Swansea, Honorary Secretaries.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH.—The annual meeting of this Branch will be held in the Medical Institute, Edmund Street, Birmingham, on Thursday, June 20th, 1889. The chair will be taken by the ex-president, Dr. T. W. Thursfield, who will introduce his successor, Mr. D. C. Lloyd Owen. The annual dinner will take place at the Grand Hotel at 6 p.m. Tickets 5s., exclusive of wine. ROBERT SAUNDY, M.D., F.R.C.P., 33A, Edmund Street, and JORDAN LLOYD, F.R.C.S., 22, Broad Street, Honorary Secretaries.

LANCASHIRE AND CHESHIRE BRANCH.—The fifty-third annual meeting of this Branch will be held in the Winter Gardens, Blackpool, on Wednesday, July 3rd, at 2 p.m. Mr. Bishop will read a paper on Congenital Club-Foot and its Treatment. Dr. Leech will make a communication on the Uses of Nitrous Ether. Mr. Hare will read a paper on Seats of Election in Amputation. Dr. Hill Griffith will mention a case of Sympathetic Disease after Removal of the Injured Eye. Dr. Shuttleworth will call attention to some of the Provisions of the Lunacy Acts Amendment Bill, specially those affecting the General Practitioner, and will move a resolution thereupon. The annual dinner will be held in the Winter Gardens after the meeting, tickets 7s. 6d. each (wine not included), for which early application should be made to Dr. Welch, Blackpool. A luncheon will be provided by the members of the profession in Blackpool and district from 1 to 2 p.m. before the meeting. Arrangements are in progress for excursions to Lytham and neighbourhood, and to Fleetwood by steamer.—CHARLES ED. GLASCOTT, M.D., Honorary Secretary.

YORKSHIRE BRANCH.—The annual meeting of the Branch will be held at Sheffield, in the School of Medicine, on Wednesday, June 26th, at 3 p.m. Members intending to read papers, etc., are requested to communicate with the Secretary on or before June 12th.—ARTHUR JACKSON, Secretary.

STIRLING, KINROSS, AND CLACKMANNAN BRANCH.—A meeting of this Branch will be held in the Macfarlane Museum, Bridge of Allan, on Tuesday, June 18th, at 3 p.m. Dr. Strachan, of Dollar, will preside. The office bearers for the ensuing year will be elected, and Dr. Haldane will read a paper on Bridge of Allan as a Health Resort. Members desirous of showing cases, specimens, etc., are requested to communicate with the Honorary Secretary. The annual dinner will be held after the meeting. Tickets, 5s. each.—C. J. LEWIS, Honorary Secretary.

SOUTHERN BRANCH: SOUTH-EAST HANTS DISTRICT.—The sixteenth annual meeting will take place at the White Hart Hotel, Salisbury, on Thursday, June 27th. The general meeting will be held at 1 p.m.; refreshment will be provided between 1 and 3 p.m. In accordance with the by-laws, two gentlemen will be elected at this meeting as representatives of the Branch on the Council of the Association for the ensuing year. The following communications are promised:—Brig.-Surge. C. H. Godwin: Treatment of Varicose Veins by the Injection of Carbolic Acid. Dr. W. Harman: A Case of Gall-Stones. Dr. Ward Cousins: New Antiseptic Artificial Ear-Drum. Dr. Axford will open a discussion on the resolution of the Worcestershire, Herefordshire, and Gloucestershire Branches: "That the disproportionate growth of the out-patient department in all hospitals demands a general inquiry." The address will be delivered by the President-elect at 2.30 p.m. During the afternoon the members are invited to visit several places of interest in the locality. The dinner will take place at 6.30 p.m.—J. WARD COUSINS, Honorary Secretary.

SHROPSHIRE AND MID-WALES BRANCH.—The annual meeting for the election of officers and other business will take place at the Salop Infirmary, on Tuesday, June 25th, at 2 p.m. The annual dinner will take place after the meeting, at 5 p.m. Members wishing to read papers or bring forward subjects for discussion are requested to communicate with the undersigned.—ED. CURETON, Honorary Secretary.

SOUTH-WESTERN BRANCH.—The fiftieth annual meeting of this Branch will be held at the Guildhall, Bodmin, on Tuesday, June 18th, under the presidency of Mr. W. Pearce, President-elect. Programme of Proceedings: Meeting of Branch Council, at Sandoe's Royal Hotel, at 11.30 a.m. Luncheon, by invitation of the President-elect, at Sandoe's Royal Hotel, at 12.30 to 2 p.m. General meeting in room adjoining the Guildhall—Dr. Woodman will resign the chair to the President-elect; President's address; report of Council and general business, at 2 p.m. Notes of Cases, etc.:—Mr. M. H. Bulteel, Stonehouse: Two Cases of Abdominal Section for Ectopic Gestation. Dr. A. Kempe, Exeter: Notes of a Case of Lithotomy. Mr. C. H. Wade, Chudleigh: A Case of Acute Ascending (Landry's) Paralysis. At the conclusion of the meeting, carriages will be provided to visit Lanhedock House and Church, the seat of Lord Robertes; and Pencarrow, the seat of Mrs. Ford. Annual dinner, at Sandoe's Royal Hotel, at 6 p.m. On the following day an excursion will be made to Tintagel and neighbourhood; carriages will start from Bodmin at 8.30 a.m.; luncheon will be provided en route, returning to Bodmin in time to catch the 6.45 p.m. up and down trains; fare to Tintagel and back, 3s. 6d. each; luncheon, 2s. 6d. Members proposing to be present at the annual dinner, or to join the excursion to Tintagel, and who have not yet communicated with the Honorary

Secretary, are requested to do so as soon as possible. Dinner tickets will be forwarded on receipt of remittance for 7s. 6d.—P. MAURY DEAS, Honorary Secretary, Wonford House, Exeter.

METROPOLITAN COUNTIES BRANCH: NORTH LONDON DISTRICT.

THE third meeting of this District was held at the North-West London Hospital, Kentish Town Road, on Thursday evening, May 23rd; Dr. E. HOOPER MAY, Representative Member of Council, in the chair.

Cases.—Dr. CLAYTON, in the absence of Dr. COLLINS, showed the following cases: Successful Extraction of Cataract in both Eyes in a Woman suffering from Aneurysm of Innominate Artery and Aorta; Congenital Coloboma of both Irides and Choroids; Traumatic Cataract, with Dislocation (Partial) of Lens; Penetrating Wound of Cornea and Sclerotic, with Prolapse of Iris, Eyelash lying in Anterior Chamber; Case of Extraction of Cataract in a Man in whom a previous attempt at extraction had caused an escape of vitreous. For Mr. DURHAM: Case of Sarcoma of Neck displacing Trachea and causing Pressure on Recurrent Laryngeal and Sympathetic Nerves; Case of Extreme Genu Valgum on both Sides. For Dr. HOOD: Case of Myxoedema in a Woman aged 48; Case of Sclerosis of Cord simulating Chronic Rheumatism.

Tests for Colour-Blindness.—Dr. F. W. EDRIDGE-GREEN read a paper on this subject. He confined himself to the practical aspect of colour blindness, as he had dealt with the theoretical portion in a paper he lately read before the Ophthalmological Society. From a practical point of view, it was desirable to devise a test which would show whether a person would be able to distinguish between the standard red, green, and white lights under the conditions in which he was likely to be placed. The following three classes of individuals should be excluded from positions in which it was necessary to distinguish between the red, green, and white lights: 1. Those who possessed a psycho-physical colour perception with three or less units; in other words, persons who, instead of seeing the normal six colours, saw only three, two, or one; 2. Those who, whilst being able to perceive a greater number of units than three, had the red end of the spectrum shortened to a degree incompatible with their recognition of a red light at a moderate distance; 3. Those who were affected with central scotoma for red or green. These persons could distinguish colours close to, but not at a distance, because the colour then occupied the central portion of the visual field. Dr. Edridge-Green used coloured lights as the basis of his test, special kinds of neutral glass being used to change their intensity and character at will. These glasses had exactly the same effect upon the light as a mist or fog. The thickest neutral glass completely changed the relative intensity and character of the red and green lights. This glass, when used in combination with the standard red, gave a red light visible to the normal-sighted at a considerable distance. With the colour-blind, if the red end of the spectrum were much shortened, the red light would not be perceived at all. The glass in combination with the standard green gave a dull green light, which was easily recognised by the normal-sighted. It would be noticed that, taking the unmodified lights, the green was lighter and bluer than the red. When modified with this neutral glass the green appeared the darker and yellower of the two, exactly as it did in a mist or fog. The two-unit colour-blind, therefore, at once called this combination red, because the colour was made to look so much like their red. He said that he had not met with a two-unit (ordinary red-green) colour-blind who had named this combination correctly; the answer had invariably been "red" or "black." Dr. Edridge-Green pointed out the importance of this fact, as he had tested educated colour-blind persons who had found no difficulty in naming the colours when unmodified with neutral glasses, and so would have obtained a certificate of competency. These would be most dangerous persons at sea, because they would deliberately mistake the red light for the green, and *vice versa*. At the same time, they would feel positive about the nature of the lights. He said that this was in all probability how many accidents had occurred. He discussed the details of this test at length, and concluded by pointing out the fallacies of the tests in use at the present time.

Votes of Thanks.—Votes of thanks were proposed to the Chairman, the gentlemen showing the various cases, and to Dr. Edridge-Green, and to the house committee for their kind reception.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.

THE sixth meeting of the session was held at the Royal Forest Hotel, Chingford, on Thursday, June 9th, at 6 P.M., the PRESIDENT in the chair, 12 members being present. The minutes of the preceding meeting were read and confirmed.

District Committee.—The members of the District Committee were re-elected as follows:—*Vice-President:* Dr. Adams; *Representative on the Council:* G. Weller; *Ordinary Members of the Committee:* F. E. Cockell, jun., T. Hoskin, V. Nicoll, St. Clair Shadwell, and C. R. Walker; *Honorary Secretary:* J. W. Hunt, 101, Queen's Road, Dalston, N.E.

An Unfounded Charge.—Dr. HUNT proposed and Dr. REILLY seconded that "this meeting cordially sympathises with Dr. Jones, of Edmonton, in the late trial which he has passed through, and congratulates him on his acquittal from an unfounded charge." This was carried unanimously, and Dr. JONES returned thanks.

Dinner.—After the meeting the members and their friends dined together, to the number of forty-nine. The President was supported by the President of the Council, the President-Elect, seven past Presidents, and Sir Guyer Hunter, K.C.M.G., M.P. The toasts of "The President" and "The President-Elect" were drunk with enthusiasm.

NEW SOUTH WALES BRANCH.

THE seventy-ninth general meeting of this Branch was held in the Royal Society's Room, Sydney, on Friday, April 5th, 1889. Dr. Fiaschi, President, was in the chair, and the following members were present: Drs. Hankins, Quaife, Jenkins, Todd, Clubbe, Reddall, Cohen, R. Bowker, jun., Marshall, Lyden, Scot Skirving, Rockley, Worrall, Hodgson, Crago, Knaggs, Fisher, Marano, West, Huxtable, Parker, and Rennie. Drs. Turner, De Lambert, and Wright were also present as visitors.

The minutes of the previous meeting were read and confirmed.

President's Address.—Dr. FIASCHI, in thanking the members for having elected him President for the current year, made some remarks on the success of the Branch.

Communications.—Dr. JENKINS exhibited a specimen of hydatid of the heart, and Dr. FIASCHI made some comments on the case.

Dr. WORRALL read notes on "Examples of Ovarian Disease," with two exhibits.

Dr. CRAGO read some notes on a case of Empyema (bilateral).

—Dr. SCOT SKIRVING said that, with regard to the question of rib excision, his experience was that, if there was a fair amount of room, there was no need to cut the rib, but in young children he had been in the habit of cutting the rib for drainage purposes.

—Dr. CLUBBE made some remarks, and Dr. CRAGO replied.

Dr. WORRALL exhibited a sample of cellular clothing, and explained its advantages.

SOUTH INDIAN BRANCH.

THE annual meeting of this Branch was held at the Central Museum, Madras, on March 28th, Surgeon-General BIDIE, President, in the chair.

Presidential Address.—The PRESIDENT delivered an address, in which he said that the past year had been a fairly prosperous one for the Branch. At the close of 1887 it had 71 members, 19 joined during 1888, and 5, including 2 deaths, ceased to belong to the Branch. The number on the rolls on December 31st was therefore 85. Twelve meetings of the members took place, and the *Transactions* were published in four parts, occupying 343 pages, and completing vol. ii. The remainder of the address will be published in a future number.

Vote of Thanks.—Surgeon-Major MACKINNON, D.S.O., proposed, and Surgeon-Major COOK seconded a vote of thanks to the President for his address.

BATH AND BRISTOL BRANCH.

THE sixth ordinary meeting of the session was held at the Grand Pump Room Hotel, Bath, on Thursday evening, May 30th; J. HINTON, M.R.C.S. Eng., President, in the chair. There were present thirty-seven members.

Communications.—Dr. J. G. SWAYNE read a paper "On Accidental Hæmorrhage," which Dr. AUST LAWRENCE and Mr. J. S. BARTRUM made some comments upon.

Dr. FIELD brought forward "Notes on a Case of Villous Growth in the Bladder," and showed a photograph of the growth *in situ*. Remarks were made on the subject by Dr. GREIG SMITH, Dr. BRABAZON, and Mr. BARTRUM.

Dr. WALDO read a paper "On the Treatment of Syphilis," which gave rise to a discussion in which Drs. MICHELL CLARKE, SHINGLETON SMITH, H. F. A. GOODBRIDGE, J. K. SPENDER, E. MARKHAM SKERRITT, and B. BONVILLE FOX joined.

SPECIAL CORRESPONDENCE.

BERLIN.

[FROM OUR OWN CORRESPONDENT.]

An Undescribed Form of Dilatation of the Œsophagus.—Rare Case of Foreign Body in the Stomach.—An Accessory Thyroid Gland on the Tongue.—The Suspension Treatment of Locomotor Ataxy in Germany.

At a meeting of the Berlin Medical Society on May 8th, Professor Ewald exhibited a specimen of dilatation of the Œsophagus, which he described as unique. In stricture of the gullet the tube is frequently found dilated *above* the point of narrowing, and it is easy to see how this is caused by the pressure of the food which is arrested by the stricture and gradually accumulates so as to make the walls of the Œsophagus bulge outwards. The remarkable feature in Professor Ewald's case was that the dilatation was *below* the point of stricture. The patient was a man aged about 60, who died of cachexia and inanition a few days after admission to the hospital. For some time he had been unable to swallow any solid food, and even fluids were quickly brought up again quite unaltered. The results of examination with the bougie were somewhat puzzling. At one time the instrument passed into the stomach without the slightest difficulty; at another it was found impossible to pass it beyond a point about midway down between the upper and lower orifices of the Œsophagus. A diagnosis of cancerous stricture complicated by a diverticulum was made, and this was confirmed by the *post-mortem* examination. There was a cancerous ulcer extending round the circumference of the tube 14 centimètres below its upper orifice. This ulcer had caused a small sac-like bulging of the Œsophageal wall, forming the diverticulum which had been recognised during life. Below the stricture, however, there was a wide spindle-shaped dilatation of the gullet, which measured 12 centimètres across, whilst the diameter of the tube nowhere else exceeded from 5 to 6 centimètres. Below this dilated part, the Œsophagus recovered its normal capacity, but there was no trace of stricture or mechanical obstruction of any kind between the lower end of the dilatation and the entrance to the stomach. The walls of the Œsophagus below the situation of the cancerous formation were, however, in a very unhealthy state as the result of chronic inflammatory processes. The mucous membrane had almost entirely disappeared, only tiny shreds and patches being left on the surface of the muscular layer, while the latter itself was greatly atrophied, being in some places no thicker than a piece of thin paper. To the weakness of the Œsophageal wall resulting from this condition, Professor Ewald attributes the origin of the dilatation. He points out that food swallowed in the natural way always remains for a short time just above the cardiac orifice till it is forced through that aperture into the stomach by the contraction of the lower end of the gullet. In the present case, owing to the degeneration of the Œsophageal wall, such contraction could not take place; hence whatever food found its way through the stricture accumulated above the cardiac orifice and led to the dilatation of the tube in that situation.

At the same meeting Professor Ewald showed another curious specimen. He had been called to see a lady between 40 and 50 years of age, who was said to have expectorated a piece of mucous membrane in the course of an attack of profuse hæmatemesis. About twelve years before she had had a similar attack, accompanied by excruciating pain in the stomach. On the present occasion she had again suddenly begun to suffer from agonizing gastralgia, with vomiting of blood as before. Part of the blood was clotted, part liquid, and in it was found the substance which Professor Ewald considers the *corpus delicti*, namely, a piece of vegetable or fruit which had remained all that time in the stomach, and had been firmly soldered to the wall of that organ by adhesive inflammation. It was cylindrical in shape, and about six centimètres in length, with sharp processes and small pendulum-like appendages. The vegetable nature of the foreign body was clearly demonstrated by microscopic examination.

At the recent Congress of German Surgeons, Dr. Rudolf Wolf, of Hamburg, related a case of accessory thyroid gland, of which he said there was no similar example on record. The patient was a girl aged 18, who from her twelfth year had complained of a sensation as of a foreign body in the throat. On examination, Dr. Wolf found a tumour at the base of the tongue, extending from the left side to the middle of that organ; it was hard and solid to the touch, and was clearly marked off from the tongue-substance by its colour. Treatment by iodide of potassium internally, and local applications of iodine, at first produced some effect, but the tumour soon began to grow, and attained such a size that swallowing became difficult. Dr. Wolf then removed it, first performing tracheotomy, and next detaching the tongue from the mucous membrane of the mouth and dividing the arch of the fauces on the left side. The patient made a rapid recovery.

At a meeting of the Berliner Gesellschaft für Psychiatrie und Nervenkrankheiten, on May 13th, Dr. Bernhardt communicated the results of the suspension treatment which he had carried out in nineteen cases of locomotor ataxy. These patients had been subjected to 209 suspensions in all; in none of them had Dr. Bernhardt seen any ill effects produced by the treatment. He began by suspending the patients for half a minute every other day, and rose by degrees to three minutes. The effects which he had observed were: 1, diminution and occasional total cessation of the "lightning" pains; 2, the patients stated that they could walk better and longer, but Dr. Bernhardt himself never saw any change in the ataxic symptoms; 3, power over the bladder was recovered, so that the patients could hold their water and sleep the whole night through; 4, sexual power was restored. In a few patients there was no objective improvement, but all declared that they felt better. The good effect, however, was in almost every case merely temporary. Dr. Bernhardt had not seen any effect on the optic nerve from suspension. He pointed out that the treatment was not curative, but only palliative as regards certain symptoms. Dr. Eulenburg, with an experience twice as large as that of Dr. Bernhardt, confirmed his statements in every particular. The improvement showed itself in restoration of sleep and general well-being, in Romberg's symptom, the walk, the functions of the bladder, the neuralgic and "lightning" pains, the headache and the gastric crises. In some cases the amelioration which manifested itself at first ceased on further continuation of the treatment; in others, when the suspensions were discontinued, the symptoms became worse, but improved again when the treatment was resumed. Several other speakers expressed themselves to the same effect. Dr. Remak called attention to the danger of the suspension treatment in cases of heart-disease.

NOTES FROM ITALY.

Toxic Effects of Pyrodine.—Excision of Clavicle.—Nephrectomy.—Pilocarpine in Tetanus.—Deaths of Eminent Medical Men.

At a meeting of the Medico-Chirurgical Society of Padua on March 30th, Dr. Luigi Cantù gave an account of the effects produced by pyrodine in a case which he had had under observation. The patient was a lad, aged 19, who was suffering from tetanus; pyrodine was given to the amount of 50 centigrammes a day. On the third day the urine was intensely dark red in colour, and was found to contain methæmoglobin and a large quantity of urobilin, besides masses of amorphous reddish-brown granules. The red corpuscles were discoloured and showed little tendency to form *rouleaux*, and numbered 2,500,000 per cubic millimetre. Under diet, consisting largely of milk, all toxic symptoms disappeared in twelve days, but the patient remained in a state of grave anæmia. The pyrodine did not lower the temperature, and had no effect on the tetanic symptoms. Dr. Cantù concludes that pyrodine is a powerful blood poison, with a destructive action on the red corpuscles analogous to that of chlorate of potassium, pyrogallol, etc. He maintains that it has no advantage over the antipyretic and nervine remedies already known, and absolutely condemns its employment.

Professor Tansini, of Modena, recently performed¹ total extirpation of the clavicle for myxo-sarcoma. The patient was a woman aged 30, who two and a half years previously had become aware of pain in the left clavicle, increased by movement of the arm. She soon afterwards noticed a small lump on the inner third of the clavicle; it was hard and painful on pressure, and gradually attained the size of a hen's egg. Its long diameter corresponded

¹ *Gazzetta degli Ospitali*, May 15th, 1889.

report that the staff now in office will compare favourably with any other workhouse hospital in the kingdom. The use of stimulants in workhouses is well considered. At the end of the year in question, Dr. Sheen found himself responsible for an expenditure of £60 under this heading, being for the 2,123 patients previously mentioned, less than 7d. per head per annum. Surely the most economical guardian would be satisfied with this very moderate allowance; but some who hold extreme views on the alcoholic question may perhaps think even this expenditure excessive. As to that, Dr. Sheen's remarks are so forcible, and so much to the point, as to deserve literal quotation. He says: "Cases of sickness occur where it would not only be a gross dereliction of professional duty on the part of the physician to withhold stimulants, but also as much a piece of culpable negligence as to withhold necessary food or medicine.....A somewhat extended experience leads me to say most emphatically that, where no stimulants are prescribed, very great hardship, if nothing more, is entailed on the sick; and further, I am quite satisfied that in many cases the judicious use of stimulants has helped to tide over difficulties which could not otherwise be met, and has saved not a few lives."

It is highly satisfactory to note that, of eighty-one puerperal cases in the workhouse, all the mothers did well except one, who died of convulsions.

A copy of the sick dietary of the institution is appended to the report. It has been drawn out on a fairly liberal scale. We should be glad to receive similar reports from medical officers of other large workhouses.

WOMEN'S AND CHILDREN'S HOSPITAL, CORK.

DURING the past year, 388 patients were under treatment in this hospital, the cost of maintenance per bed being £27 5s. 5d., the lowest sum yet attained since the institution was founded. The amount contributed by the patients towards their own support is one of the strongest proofs of the value placed on the hospital by the suffering poor, and it amounts to more than one-fourth of the total receipts of the institution. Further, the increase in the receipts for the services of nurses sent out to attend private cases is a gratifying and practical testimony to the careful training received by the lady probationers, and to the high value set on their services by the public.

MEDICAL AID ASSOCIATION.

WE have received a newspaper correspondence on the subject of a so-called "Medical Aid Association" established at Stourport, a small town of 4,500 inhabitants, of whom it is said that 2,600 are members of the Association. The latter is, in fact, a cheap dispensary, offered by medical men paid for that service only, and not allowed to take private practice. These members seem to be admitted without any restriction as to their private means, and are entitled, if we understand rightly, to all medical attendance and medicine for a payment of four shillings a year, so that more than half the population of the town is withdrawn from the practice of its medical men. Against such a system we protest in the strongest possible way. It has, it is true, some resemblance to that of the provident dispensaries, which do so much good work in providing for the medical attendance of the poorer classes, and which would do so much more if allowed a fair field, and not choked by the gratuitous medical charities. But the resemblance is only superficial, and vital differences are apparent when the matter is looked into. In the provident dispensary system either a wage limit is fixed, or the medical men form part (and a most influential part) of a committee which has power to object to the membership of any person not entitled to medical attendance at the low scale of fees which it is necessary to fix. The medical officers are not the paid servants of the institution, but are taken from the practitioners of the place, and are also engaged in private practice, and divide a certain share of the income of the dispensary, a share which gives them a fair remuneration when the numbers are sufficient.

Such institutions as the Medical Aid Association are among the greatest difficulties which the provident principle has to encounter. Cheap doctors' shops and institutions of the kind spoken of in this correspondence are easily labelled "provident," and are then confounded by the public and by many members of the profession with the legitimate institutions. Publicity and free inquiry may assist to distinguish them, and to enlist public sympathy and support in favour of those that are most worthy.

DR. WM. A. S. ROYDS (Senior Surgeon to the Reading Dispensary) writes: I have been desired by resolution of the meeting to forward to you the following resolution, which was unanimously passed at a meeting of the consulting and acting staff of the Reading Dispensary held May 30th.

"That in the opinion of this meeting it is incompatible with the interests of the Reading Dispensary and the dignity of its medical staff that any member of the medical staff should be connected with any so-called 'Medical Aid Society.'"

HOSPITAL REFORM.

DR. HUGH WOODS (Highgate, N.) writes: The out-patient departments at the teaching hospitals would be of vastly greater use to the students if the numbers of patients so attending were very much smaller, so that proper attention would be given to each case. For the purposes of education, it would seem to

be unwise to abolish the out-patient departments altogether. But it would be better for all concerned if they were closely restricted. Why not make each patient sign a declaration that his income is under a certain amount, and then take steps to punish any false declarations? As to the necessity for out-patient departments, apart from educational purposes, I think it is in great part imaginary. If they are abolished, I do not think their place need be supplied by any new organisation. The burden of attendance on the poor, when shared among the innumerable medical men thronging our large towns, would be gladly borne by them in preference to the much heavier burdens brought on them by the present system. I think there is scarcely a medical man who would decline to attend a patient because his poverty made payment out of the question; or who would put unfair pressure to exact fees from people in straitened circumstances. I am not hereby claiming credit to the medical profession for unusual philanthropy (much as it certainly deserves), because gratuitous services and kindness to the poor are well known to bring an abundant material reward to a medical man. It is a cheap and most effective method of advertisement. Conduct of a reverse character meets with such severe condemnation at the hands of the public, that self-interest would serve to exclude it. The patients now overcrowding the hospitals would receive more time and attention from the general practitioners to whom they ought to go. A large number could pay a small fee without even restricting their usual allowance of beer, and those who were genuinely poor would be treated with just as much generosity as they are at the hospitals. On the other hand, the hospitals ought to be able to spare more beds for chronic cases. Poor people, who have nothing before them but to linger in suffering months or years, need careful tending and comfort as much as any. Many of these are left to die in wretched homes, when they might and ought to be received into a comfortable hospital. Is it not as important for students to be acquainted with the course of more chronic ailments as with acute ones? Beds for such cases could be supported by the funds which are now spent in supplying medicines to restore drunkards after last night's debauch, or in humouring whole troops of hysterics and hypochondriacs in the out-patient department. With regard to the indoor patients, I do not believe that better results are obtained by treatment in hospital than by treatment in reasonably comfortable homes; and, therefore, I think that by admission of well-to-do people to hospitals a great injustice is done, no good result is gained, and the interests of the poor are sacrificed. Are the hospital physicians and surgeons sure that they get better results than the general practitioners in the majority of cases? Or is it, after all, their own interests they are looking to when they treat well-to-do people in the hospitals?

DR. ALBERT WESTLAND (Belsize Park, N.W.) writes: One of the complicating elements in the reform of gratuitous medical relief in London is undoubtedly the necessity of providing sufficient material for instruction of medical students. I had this in view when in a previous letter I suggested the extension of poor-law dispensaries as one of the means of regulating out-patient treatment. While the out-patient departments of the general hospitals are overcrowded at present, both with students and patients, the poor-law dispensaries of London attend to the wants of more than one hundred thousand patients annually, not one of whom is utilised at present for teaching purposes, although their maladies are exactly such as the student will meet with in daily life in his future practice. I am hopeful that when the whole question is fully considered, some method of associating students with these dispensaries will be attained. The opportunity of teaching thus afforded to poor-law medical officers would be exceedingly valuable to them, and would do more than anything else to raise the status of the teachers themselves.

No one who has been associated with students can doubt the stimulating effect of their criticisms upon those who are teaching them. Such a connection of students with poor-law medical officers, could easily be extended to attendance in the wards of the infirmaries, and to visits to the sick poor under supervision, such as exists already in some of the Scotch schools of medicine.

I think it is quite impossible to say at present what will be the best substitute for the misused out-patient department. It is perfectly certain that no scheme can be successful unless the hospitals themselves commence the reforms, either voluntarily or under compulsion. As Dr. Rentoul says, "No pay service can compete with any hope of success against the free hospitals." But when that reform is effected, different substitutes will have fair chance for natural growth, and the most eligible will be the most successful, so long as all are untainted with the pauperising misuse of charity.

UNIVERSITY INTELLIGENCE.

CAMBRIDGE.

At the Congregation on June 6th the following degrees in Medicine and Surgery were conferred:—M.D.: A. J. Richardson, King's (thesis, Chlorosis). M.B.: R. G. Wilde, Clare; R. F. Castle, Pembroke; G. H. Weston, Caius; L. E. Stevenson, Christ's; R. Boxall, Downing. B.C.: R. G. Wilde, R. F. Castle, L. E. Stevenson, R. Boxall.

The following have been appointed Examiners for the Third M.B. Examination for the ensuing year:—Medicine: Dr. J. B. Bradbury (Cambridge), Dr. J. Dreschfeld (Manchester). Midwifery: Dr. A. L. Galabin (London), Dr. H. Gervis (London). Surgery: Mr. G. E. Wherry (Cambridge), Mr. C. N. Macnamara (London), Mr. A. Willett (London).

Sir George E. Paget, Regius Professor of Physic, and Dr. G. M. Humphry, Professor of Surgery, have been nominated by the University to act as members of the General Committee of the International Congress of Hygiene and Statistics to be held in London in 1891.

In consequence of the steady increase in the number of candi-

dates for the Final M.B. Examination, the Special Board for Medicine have recommended the appointment of additional examiners in medicine and surgery, to be nominated by the Regius Professor of Physic and the Professor of Surgery respectively.

The Museums and Lecture Rooms Syndicate have recommended that the buildings for human anatomy should be at once proceeded with, at an estimated cost of £8,300. Owing to want of funds, they propose that the necessary extension of the physiological laboratory be postponed for the present. In view of the urgent need of further accommodation for physiology, this postponement is a calamity, which the addition of some £5,000 to the available funds would be sufficient to avert. Benefactions to the medical school, as such, are sadly lacking.

GLASGOW.

THE final examinations for degrees in Medicine begin at Glasgow University on July 8th, and continue till July 23rd. The number of candidates is 153.

ROYAL UNIVERSITY OF IRELAND.

At a meeting of the Senate held on May 29th, 1889, the following Honours, Exhibitions, etc., were awarded:—

Second Examination in Medicine.

Exhibition, Second Class.—J. J. Bourke, M.A., Catholic University School of Medicine.

Honours, Second Class.—J. J. Bourke, Catholic University School of Medicine; J. J. Fitzgerald, Catholic University School of Medicine; J. A. Adams, Queen's College, Galway.

Third Examination in Medicine.

Exhibitions, Second Class.—P. G. Griffith, Queen's College, Belfast; J. R. Steen, Queen's College, Galway, and Ledwith School of Medicine.

Honours, Second Class.—P. G. Griffith, Queen's College, Belfast; J. R. Steen, Queen's College, Galway, and Ledwith School of Medicine.

Medical Degrees Examination.

Exhibition, First Class.—J. Jackson, Queen's College, Cork.

Exhibition, Second Class.—R. W. Haslett, B.A., Queen's College, Belfast; *C. Porter, Queen's College, Cork.

Honours, First Class.—J. Jackson, Queen's College, Cork.

Honours, Second Class.—R. W. Haslett, B.A., Queen's College, Belfast; C. Porter, Queen's College, Cork.

N.B.—Those marked with an asterisk were disqualified by standing from obtaining the money value of the Exhibition.

Travelling Medical Scholarship.—J. Stewart, M.B., Queen's College, Galway.

A public meeting of the University was subsequently held, at which the following Degrees were conferred by the Vice-Chancellor:—

The Degree of M.D.—A. Burgess, R. T. Condon, W. Jamison, J. C. Martin, C. V. H. Nesbitt, J. F. O'Carroll, D. J. O'Keeffe, G. J. Pierce, C. Porter, C. A. Stone, W. A. Wheeler.

The Degree of M.B.—C. J. Beattie, J. C. Connor, J. N. Donnellan, P. H. Donovan, W. Downes, J. J. Egan, J. W. Fogarty, R. Forsyth, B.A.; D. H. Hamilton, J. C. Harkin, R. W. Haslett, B.A.; R. L. Heard, S. Irwin, J. Jackson, J. F. Jordan, J. Kenny, M.S.; A. McBride, W. McCallin, J. McConnell, W. P. McDowd, J. W. C. Macpherson, J. P. Maynard, N. Morton, S. J. Parker, D. C. Smiley, F. K. Tweedie, J. T. Walker, C. R. Zimmer.

The Degree of M.Ch.—J. P. Maynard; J. B. Smith, B.A., M.B.

The Degree of B.Ch.—C. J. Beattie, A. E. I. Birmingham, A. Burgess, R. T. Condon, J. C. Connor, J. N. Donnellan, P. H. Donovan, W. Downes, J. J. Egan, J. W. Fogarty, R. Forsyth, D. H. Hamilton, J. C. Harkin, R. W. Haslett, R. L. Heard, S. Irwin, J. Jackson, W. Jamison, J. Johnston, J. F. Jordan, J. Kenny, M.S.; A. McBride, W. McCallin, J. McConnell, W. P. McDowd, J. W. C. Macpherson, J. C. Martin, N. Morton, C. V. H. Nesbitt, D. J. O'Keeffe, S. J. Parker, G. J. Pierce, C. Porter, D. C. Smiley, C. A. Stone, F. K. Tweedie, J. T. Walker, W. A. Wheeler, C. R. Zimmer.

The Degree of B.A.O.—C. J. Beattie, A. E. I. Birmingham, A. Burgess, R. T. Condon, J. C. Connor, J. N. Donnellan, P. H. Donovan, W. Downes, J. J. Egan, J. W. Fogarty, R. Forsyth, D. H. Hamilton, J. C. Harkin, R. W. Haslett, R. L. Heard, S. Irwin, J. Jackson, W. Jamison, J. F. Jordan, J. Kenny, M.S.; A. McBride, W. McCallin, J. McConnell, W. P. McDowd, J. W. C. Macpherson, J. C. Martin, N. Morton, C. V. H. Nesbitt, D. J. O'Keeffe, S. J. Parker, G. J. Pierce, C. Porter, D. C. Smiley, C. A. Stone, F. K. Tweedie, J. T. Walker, W. A. Wheeler, C. R. Zimmer.

The Degree of B.A.—W. F. C. Bradley, J. J. C. Healy.

The following Degrees were conferred *in absentia*.

The Degree of M.A.O.—M. R. O'Connor, M.D.

The Degree of B.A.O.—J. Donelan, M.B.; W. H. Murdoch, M.D.; S. A. L. Swan, M.D.; J. J. Walsh, M.B.

The Degree of B.Ch.—A. K. Stevenson, M.D.

OBITUARY.

GEORGE OWEN REES, M.D., F.R.C.P., F.R.S.,
Physician Extraordinary to H.M. the Queen, Consulting Physician to Guy's Hospital.

THIS veteran of the profession entered Guy's Hospital as a student in 1829, and retired from his appointment as physician to that institution on February 26th, 1873. After distinguishing himself by his diligence as a student, he became known to science through his work *On the Analysis of the Blood and Urine in Health and Disease*, published in 1836. During the same year he wrote in the first volume of the *Guy's Hospital Reports* on the same subject, working with his great teacher, no less a man than Dr. Bright. They became intimately associated in practice. In 1843 Dr. Owen Rees was appointed Assistant-Physician to Guy's Hospital; two years later he delivered the Goulstonian Lectures at the College of Physicians. In 1850 he was made Lettsomian Lecturer to the Medical Society. Several years later his name came more prominently before the general public, when he was called as a witness for the prosecution, in company with Dr. A. S. Taylor, in the famous trial of Palmer, of Rugeley.

The dates of some of the appointments held by Dr. Owen Rees, as given above, are sufficient to establish his claim to be held as a veteran in the best sense of the word, for as long as fifty-three years ago he produced a work based upon several years of patient observation under one of the greatest physicians of the century, whilst his retirement from active hospital duties did not take place till 1873. It is sad to think how many of his younger medical colleagues—Hilton Fagge, Moxon, Mahomed, Carrington, and last, but not least, Wooldridge—have been prevented by more or less premature death from sharing his good fortune, for the term may fairly be applied to a long life when lived by a man who knew so well how to spend it. In comparing the career of Dr. Rees with that of his less fortunate colleagues, we can estimate what a gain it is to humanity when a good and industrious physician lives long, and what a loss it must be should he die early.

On the retirement of Dr. Owen Rees in 1873, his colleague, Dr. Wilks, made the following graceful allusion to him as a teacher in the *Guy's Hospital Gazette*:—"In the hospital it were needless to declare what everyone so well knows—how Dr. Rees is beloved by students and officials, and how delightful it has been to watch his good-natured smile or hear his hearty laugh; nor need we add how much his gay manner and genial voice will be missed from amongst us. He has, however, no amiable weakness for wrong-doing—no one can use bitterer invectives in denouncing a mean and dishonest act. We might add that no officer of the hospital ever fulfilled his duties with more assiduity and punctuality—two qualities to be reckoned amongst the virtues of a teacher."

Dr. Owen Rees never married. His death took place on May 27th, at Mayfield, Watford.

PROFESSOR D. BOYES SMITH, M.D., F.R.C.P.

THE late Dr. Boyes Smith, whose death we announced last week, was fifty-six years of age, a Doctor of Medicine of Edinburgh, and held the diploma of the Royal College of Surgeons of Edinburgh; was formerly President of the Royal Medical Society of that city; was a Fellow of the Royal College of Physicians of London; ex-President of the Faculty of Medicine in the University of Calcutta; formerly Principal and Professor of Medicine, Calcutta Medical College, and *ex officio* First Physician to the College Hospital; and, at the time of his death, Professor of Military Medicine in the Army Medical School, Netley. His first commission in the Bengal Army was dated November 28th, 1855. He served with the Bengal Foot and Horse Artillery in Upper India for three years and three months, and temporarily with the 3rd Bengal Fusiliers, at Agra, during the severe epidemic of cholera in 1856. For this duty he was thanked in presence of the regiment on parade by the then Commander-in-Chief, General Anson. Dr. Smith received the thanks of the Hon. the Court of Directors for having given two courses of anatomical lectures to the medical subordinate service at Meerut. Dr. Smith's war services were considerable. He was present in fourteen general actions—that is, actions in which all three arms of the service were engaged on both sides—and was present throughout the entire period of the siege of Delhi. Brigadier-General Walpole thus mentions Dr. Smith's services in his despatch after the action of Lipeza Ghat: "The zeal and indefatigable exertions of Assistant-Surgeon D. B. Smith, Bengal Horse

A PECULIAR interest attaches to a water-colour drawing exhibited this year in the Academy by an amateur, Mr. Joseph Rodgers. The artist, who was blind of both eyes from cataract, had been successfully operated on in one eye, and has since studied the art of water-colour painting with so much success as to win his way into the great annual show.

notwithstanding that the annual number of births remained almost stationary. Since the latter date, and until 1887, the annual births showed an almost uninterrupted decline, from which it would appear that the decrease in the population had at least been maintained, the birth-rate and the death-rate during 1888, calculated on the reduced population, as estimated by the ordinary method, being actually lower than that which prevailed in 1881. Since 1886, however, the births have increased, and were unusually high in the first quarter of the present year. The death-rate during 1888, based upon the Editor's estimate of the population, was considerably lower than that recorded in 1881, when the population was accurately known. The very high death-rate in the first quarter of this year in St. Olave, Southwark, appears to be principally due to the epidemic prevalence of measles; since the beginning of April last the death-rate has been only 20.7 per 1,000, based upon the population as published in the JOURNAL; if the population be taken as stationary at the number estimated for 1886, this rate would be 19.4 per 1,000. It is possible that the population of the district is no longer declining; and the we should be glad to receive any information which would enable us to estimate more nearly the present population of this sanitary district.

HEALTH OF ENGLISH TOWNS.

In the twenty-eight large English towns, including London, which have an estimated population of 9,555,406 persons, 5,849 births and 3,214 deaths were registered during the week ending Saturday, June 8th. The annual rate of mortality in these towns, which had been 17.3 and 16.5 per 1,000 in the two preceding weeks, rose again to 17.7 during the week under notice. The rates in the several towns ranged from 10.1 in Leicester, 13.0 in Bristol, 13.4 in Birmingham, and 13.8 in Norwich to 26.0 in Plymouth, 27.0 in Halifax, 33.2 in Manchester, and 36.1 in Preston. In the twenty-seven provincial towns the mean death-rate was 19.4 per 1,000, and exceeded by 3.7 the rate recorded in London, which was only 15.7 per 1,000. The 3,214 deaths registered in the twenty-eight towns during the week under notice included 152 which were referred to measles, 98 to whooping-cough, 67 to diarrhoea, 49 to diphtheria, 41 to scarlet fever, 23 to "fever" (principally enteric), and not one to small-pox; in all, 430 deaths resulted from these principal zymotic diseases, against 429 and 391 in the two preceding weeks. These 430 deaths were equal to an annual rate of 2.3 per 1,000; in London the zymotic death-rate was 1.6, while it averaged 2.9 per 1,000 in the twenty-seven provincial towns, and ranged from 0.8 in Norwich, 0.9 in Cardiff, and 1.1 in Birmingham and in Leicester, to 5.5 in Bolton, 6.5 in Hull, and 14.5 in Preston. Measles caused the highest proportional fatality in Wolverhampton, Oldham, Newcastle-on-Tyne, Leeds, Bolton, Manchester, Halifax, Hull, and Preston; scarlet fever in Derby, Salford, and Plymouth; and whooping-cough in Portsmouth, Birkenhead, and Preston. Of the 49 deaths from diphtheria recorded during the week under notice in the twenty-eight towns, 34 occurred in London, 3 in Manchester, 3 in Salford, and 3 in Sheffield. No fatal case of small-pox was registered either in London or in any of the twenty-seven provincial towns, and no small-pox patients were under treatment in any of the Metropolitan Asylums Hospitals on Saturday, June 8th. These hospitals contained 549 scarlet fever patients on the same date, against 579, 573, and 560 at the end of the three preceding weeks; 35 cases were admitted during the week, against 61, 52, and 44 in the three previous weeks. The death-rate from diseases of the respiratory organs in London was equal to 2.5 per 1,000, and was below the average.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday, June 8th, 910 births and 497 deaths were registered in the eight principal Scotch towns. The annual rate of mortality, which had been 22.3 and 21.3 per 1,000 in the two preceding weeks, further declined to 19.4 during the week under notice, but exceeded by 1.7 per 1,000 the mean rate during the same period in the twenty-eight large English towns. Among the Scotch towns the lowest rates were recorded in Greenock and Edinburgh, and the highest in Aberdeen and Glasgow. The 497 deaths registered in these eight towns during the week under notice included 74 which were referred to the principal zymotic diseases, equal to an annual rate of 3.4 per 1,000, which exceeded by 0.7 the mean zymotic death-rate during the same period in the large English towns. The highest zymotic death-rates were recorded in Glasgow and Aberdeen. The 234 deaths registered in Glasgow during the week under notice included 16 from whooping-cough, 16 from measles, 6 from diarrhoea, and 3 from scarlet fever. Seven fatal cases of measles were recorded in Aberdeen, and 6 of whooping-cough in Dundee. The death-rate from diseases of the respiratory organs in these towns was equal to 3.6 per 1,000, against 2.5 in London.

REPORT OF MEDICAL OFFICER OF HEALTH.

DAVENTRY URBAN AND RURAL.—*Drainage of Town Advocated*—The report of Dr. W. J. F. Churchouse for 1888 is principally an enunciation of reasons for the speedy adoption of a system of drainage for the town of Daventry, now practically undrained, and therefore a fertile spot for the propagation of fevers. Typhoid fever, diphtheria, and scarlet fever were rife during 1888, and had the season been hot and dry, the town could not have escaped so easily as it did. The record of deaths from zymotic diseases in the town was apparently small, but it was large in proportion to the population, and when regard is had to the returns for the rural district, where, in a population nearly four times as great as that of the urban district, there was only half the number of deaths. The general death-rates were 19.1 and 13.6 per 1,000 in the urban and rural districts respectively.

MEDICAL NEWS.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following gentlemen having passed the necessary examinations on May 20th, 21st, 22nd, 23rd, 24th, and 25th, 1889, were at a meeting of the Council on Thursday, June 13th, admitted Fellows of the College:

Name.	Qualification.	Residence.	Date of Membership.
Martin, J. M. H.	L.S.A.	"Arnheim," Blackburn, Lancashire	July 21, 1874.
Blakesley, H. J.	L.R.C.P.Ed.	Bow Bridge House, Leicester	Nov. 16, 1880.
Russell, R. H.	L.R.C.P.Lond.	St. Luke's Hospital, E.C.	July 30, 1882.
Gunn, D. S.	L.R.C.P.Lond.	123, Gower Street, W.C.	July 27, 1883.
Gray, J. P. W.	L.S.A.	26, Lansdowne Crescent, Notting Hill, W.	Aug. 5, 1884.
Spong, C. S.	L.S.A.	Fort Pitt, Chatham	Aug. 7, 1884.
Leech, P.	L.S.A.	King's Cross, Halifax, Yorks	Jan. 22, 1885.
Flemming, P.	M.D.Lond.	35, Regent's Park Road	Jan. 27, 1885.
Edge, F.	L.R.C.P.Lond.	7, Thorncliffe Grove, Manchester	Oct. 22, 1885.
Parsons, F. G.	L.R.C.P.Lond.	79, Lambeth Palace Road	Jan. 27, 1886.
Redmayne, T.	M.B.Cantab.	Low Fell, Gateshead-on-Tyne	April 22, 1886.
Barclay, W. M.	L.R.C.P.Lond.	Glencairn Villa, Queen's Road, Clifton, Bristol	July 23, 1886.
Drew, H. W.	L.R.C.P.Lond.	Croydon General Hospital	July 23, 1886.
Thompson, J. E.	M.B.Lond.	Guest Hospital, Dudley	July 23, 1886.
Jones, S. H.	L.S.A.	16, George Street, Hanover Square, W.	July 29, 1886.
Smith, H.	M.B.Lond.	Medical Department, Gen. Post Office, E.C.	Oct. 20, 1886.
Brown, H. H.	M.B.Lond.	Tower House, Harrow	Jan. 18, 1887.
Crook, H. E.	L.R.C.P.Lond.	Essex Hall, Colchester	Jan. 18, 1887.
Balgarnie, W.	M. & O. 20-1-87	St. Bartholomew's Hospital, E.C.	Jan. 20, 1887.
Brook, W. F.	L.S.A.	Fareham, Hants	May 5, 1887.
Davenport, C. J.	L.R.C.P.Lond.	14, Downshire Hill, Hampstead	May 5, 1887.
Jones, O. M.	L.R.C.P.Lond.	Llandilo, South Wales	June 27, 1887.
Gifford, H.	L.R.C.P.Lond.	Melford, Eastern Avenue, Reading	Nov. 10, 1887.
Ross, A. MacL.	M.B.Edin.	14, Falkner Street, Liverpool	May 9th, 1889.

Fifty-two candidates presented themselves for examination, of whom 32 passed, including 8 candidates who have not yet attained the legal age (25 years), and 20 failed.

The following gentlemen having passed at previous meetings of the Court of Examiners, and having now attained the legal age (25), were also admitted Fellows:

Wacher, S., L.R.C.P.Lond., "Eddington," Canterbury, January 27th, 1886.
Street, A., M. and O., July 30th, 1888, Addenbrooke's Hospital, July 30th, 1888.

The following gentlemen having passed the necessary examination, and having obtained a medical qualification, was admitted a Member of the College:

Smith, R. E., L.S.A., Sutherland Avenue, W.

DR. HUEPPE, of Wiesbaden, has been invited to the Chair of Hygiene in the German University of Prague.

THE prizes to the students of the Medical School of St. Thomas's Hospital will be distributed by Sir Henry Doulton, Almoner of the Hospital, on July 2nd, at 4 P.M.

DR. T. WHITESIDE HIME, of Bradford, is a candidate for the post of Medical Officer for the County Council of West Riding. There are few men who could possibly have a stronger claim for such an appointment.

THE quarterly death-rate recorded for Hastings at the end of March, 1889 (14.43 per 1,000) was the lowest in the corresponding quarter for the past eight years, and was 2.85 below the annual average; 23.46 per cent. of the deaths occurred among non-residents or visitors.

HYDROPHOBIA IN BAVARIA.—From 1863 to 1876 from fourteen to thirty-one persons died each year in Bavaria from the bites of mad dogs. A striking contrast to this is presented by the experience of the last seven years, during which period only three deaths from hydrophobia have occurred in a population of five and a half millions. This result is attributed to the strict enforcement of the regulation that every dog is at once killed who is found without a collar with a mark signifying that the tax on the animal for the current year has been paid. By this means stray curs without owners are easily eliminated.

The annual meeting of the Public Health Medical Society, a society of medical men qualified in sanitary science, public health, and State medicine, will be held at the Holborn Restaurant on June 19th, at 6.30. The annual dinner will be held at the same place at 7 o'clock on the same evening, when the President, Sir Charles A. Cameron, will preside.

MEDICAL VACANCIES.

The following Vacancies are announced:

- BRISTOL GENERAL HOSPITAL.**—Assistant House-Surgeon. Salary, £50 per annum, with board, lodging, and washing. Applications by June 17th to the Secretary.
- CAMBRIDGE UNION.**—Medical Officer. Salary, £120 per annum, and extras. Applications by June 15th to Mr. John Congreve, Clerk, 55, St. Andrew's Street, Cambridge.
- CHELSEA, BROMPTON, AND BELGRAVE DISPENSARY,** Sloane Square, S.W.—Physician. Applications by June 20th to the Secretary.
- CHILDREN'S HOSPITAL,** Pendlebury.—Junior Resident Medical Officer. Salary, £80 per annum, with board and residence. Applications by June 26th, to the Chairman of the Medical Board.
- CHORLTON-UPON-MEDLOCK DISPENSARY,** Manchester.—Resident House-Surgeon. Salary, £100 per annum, with furnished rooms and attendance. Applications by June 27th to the Secretary.
- CLARE INFIRMARY.**—Surgeon. Salary, £94 per annum with residence. Candidates to attend the Board Room of the Infirmary at 1 P.M., on June 26th.
- DENTAL HOSPITAL OF LONDON MEDICAL SCHOOL.**—Medical Tutor. Salary, £40 per annum. Applications by July 10th, to the Dean.
- DONCASTER INFIRMARY AND DISPENSARY.**—Dispenser and Assistant to House-Surgeon. Board and lodging. Applications before June 24th to the House-Surgeon.
- GENERAL HOSPITAL,** Nottingham.—Senior Resident Medical Officer. Salary, £120 for the first year, with increase, with board, residence, and washing. Applications by June 24th to the Chairman of the Weekly Board.
- LIVERPOOL DISPENSARIES.**—Head Surgeon. Salary, £200 per annum, with board, lodging, etc. Applications by June 25th to R. R. Greene, Esq., Leith Offices, 34, Moorfields, Liverpool.
- LIVERPOOL DISPENSARIES.**—Assistant Surgeon. Salary, £80 per annum, with board, lodging, etc. Applications by June 25th to R. R. Greene, Esq., Leith Offices, 34, Moorfields, Liverpool.
- MACCLESFIELD GENERAL INFIRMARY.**—Junior House-Surgeon. Salary, £70 per annum, with board and residence. Applications by June 15th to the Chairman, House Committee.
- NORTH-EASTERN HOSPITAL FOR CHILDREN,** Hackney Road, E.—Junior House-Surgeon. Salary at the rate of £80 per annum for six months, with increase. Applications by June 17th to the Secretary, 27, Clement's Lane, E.C.
- ROYAL ALBERT HOSPITAL,** Devonport.—Assistant House-Surgeon. Board, lodging, and washing. Applications by June 18th to the Chairman of Medical Committee.
- ROYAL BERKS HOSPITAL.**—Assistant House-Surgeon. Board and lodging. Applications by June 15th to the Secretary.
- ROYAL WESTMINSTER OPHTHALMIC HOSPITAL,** King William Street, Charing Cross.—House Surgeon. Board and lodging. Applications by June 22nd to the Secretary.
- ROYAL WESTMINSTER OPHTHALMIC HOSPITAL,** King William Street, Charing Cross.—Clinical Assistants. Applications to the Secretary.
- RUBERY HILL ASYLUM,** near Bromsgrove, Worcestershire.—Clinical Assistant. Board and residence. Applications to Dr. Lyle.
- ST. LEONARD,** Shoreditch.—Resident Assistant Medical Officer. Salary, £100 per annum, with board, lodging, and washing. Applications by June 17th to the Clerk to the Guardians, 213, Kingsland Road, E.
- ST. MARY'S HOSPITAL.**—Clinical Assistants in the Electro-therapeutic Department (Dr. de Watteville). Applications to the Secretary, stating time for attendance at the disposal of the candidates.
- SUNDERLAND INFIRMARY.**—House-Surgeon. Salary, £80 per annum, with board and residence. Applications by June 20th to the Chairman of the Medical Board.
- UNIVERSITY COLLEGE,** Liverpool.—Demonstrator in Physiology. Salary, £120 per annum. Applications by July 1st to the Dean of the Medical Faculty.
- UNIVERSITY COLLEGE,** London.—Resident Medical Officer. Applications by June 24th to the Secretary.
- WEST LONDON HOSPITAL.**—House-Physician. Board and lodging. Applications by June 20th to the Secretary Superintendent.
- WEST LONDON HOSPITAL.**—House-Surgeon. Board and lodging. Applications by June 20th to the Secretary Superintendent.
- WILLITON UNION (EASTERN DISTRICT),** Somerset.—Medical Officer of Health. Salary, £50 per annum. Applications by June 24th to W. H. White, Esq., Clerk.
- WILLITON UNION (STOGURSEY DISTRICT),** Somerset.—Medical Officer. Salary, £80 per annum, with fees. Applications by June 24th to W. H. White, Esq., Clerk.

MEDICAL APPOINTMENTS.

- BARLING, A. S.,** L.R.C.P.Lond., M.R.C.S., appointed House-Surgeon to the North Staffordshire Infirmary, *vice* R. G. Lynam, M.B.Lond., M.R.C.S.Eng., L.S.A., resigned.
- BATTERSBY, J. H.,** M.B.Edin., C.M., appointed Resident House-Surgeon to the Rotherham Hospital, *vice* H. Cropley, F.R.C.S.Eng., L.S.A., resigned.

- DOUTY, Edward H.,** M.A., M.R.C.S., L.R.C.P., appointed House-Surgeon to the Middlesex Hospital.
- DUFF, J.,** M.D., M.R.C.P., appointed Physician to the North London Consumption Hospital, *vice* F. H. Hawkins, M.B., C.M., resigned.
- ELKINS, F. A.,** M.B., C.M.Edin., Assistant Medical Officer to the Greenock Parochial Asylum and Poorhouse, appointed Junior Assistant Physician to the Royal Edinburgh Asylum, Morningside, Edinburgh.
- FARDON, J. H.,** appointed Junior House-Physician to the Royal Infirmary, Bristol.
- GIDDINGS, GEORGE T.,** M.D.Durh., appointed House-Physician to the London Hospital.
- HAMILTON, B.,** M.R.C.S., L.R.C.P., appointed Junior House-Surgeon to the London Temperance Hospital, Hampstead Road, *vice* J. H. R. Glenn, M.B., B.S., resigned.
- MILLER, A. DIXON,** L.R.C.P.Lond., M.R.C.S., appointed Resident Surgeon to the Birmingham General Dispensary, Union Street, *vice* W. T. Ord, resigned.
- PETTIT, W. B.,** M.R.C.S.Eng., L.R.C.P.Lond., appointed Junior House-Surgeon to the Bradford Infirmary, *vice* W. Denby, M.B., resigned.
- PLATT, H. T.,** M.S., M.B.Dunelm., appointed Senior House-Surgeon to Preston Royal Infirmary, *vice* F. W. Collinson, M.B., C.M., resigned.
- ROSS, D. M. M.,** M.B., C.M.Edin., appointed Junior Assistant Medical Officer to the Counties Asylum, Carlisle, *vice* E. M. Tyrrell, M.B., resigned.
- SUGARS, J. H.,** M.D., M.Ch., appointed Medical Officer to the Dungannon Union Dispensary, *vice* T. J. Browne, M.B.Dubl., L.R.C.S.Eng., resigned.
- WARD, T. H.,** M.B., C.M.Edin., appointed Assistant Medical Officer to the Exeter Asylum, *vice* T. A. Bell, L.R.C.P.Lond., M.R.C.S., deceased.

DIARY FOR NEXT WEEK.

MONDAY.

- ROYAL COLLEGE OF SURGEONS OF ENGLAND,** 5 P.M.—Professor M. Berkeley Hill: On some Affections of the Genito-Urinary Organs. Lecture I.

WEDNESDAY.

- ROYAL COLLEGE OF SURGEONS OF ENGLAND,** 5 P.M.—Professor M. Berkeley Hill: On some Affections of the Genito-Urinary Organs. Lecture II.
- THE COLLEGE OF STATE MEDICINE,** 4 P.M.—Surgeon-Major J. L. Notter: On Food and its Relation to Active Work.
- HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST,** Brompton, 4 P.M.—Dr. R. Maguire: On Functional Murmurs.

- ROYAL METEOROLOGICAL SOCIETY** (25, Great George Street, Westminster), 7 P.M.—Robert H. Scott, M.A., F.R.S.: The Climate of British North Borneo. William Ellis, F.R.A.S., F.R.Met.Soc.: On the Variation of the Temperature of the Air in England during the period 1849 to 1888. Charles Harding, F.R.Met.Soc.: Atlantic Weather and Rapid Steamship Navigation. Henry Corder: Meteorological Phenomena observed during 1875-87 in the neighbourhood of Chelmsford. W. Doberck, Ph.D., F.R.Met.Soc.: Rainfall in China, and Meteorological Observations made at Ichang and South Cape in 1888. Mr. Marriott will make a communication on the recent Thunderstorms, and a number of Photographs of Lightning will be exhibited.

THURSDAY.

- ROYAL COLLEGE OF PHYSICIANS OF LONDON,** 5 P.M.—Dr. Lauder Brunton: The Croonian Lectures on the Connection between Chemical Constitution and Physiological Action. Lecture III.
- ASSOCIATION OF FELLOWS OF THE ROYAL COLLEGE OF SURGEONS** (11, Chandos Street, Cavendish Square), 4.30 P.M.—Annual General Meeting.

FRIDAY.

- ROYAL COLLEGE OF SURGEONS OF ENGLAND,** 5 P.M.—Professor M. Berkeley Hill: On some Affections of the Genito-Urinary Organs. Lecture III.
- CHARING CROSS HOSPITAL,** 3.30 P.M.—Mr. B. Wainwright: On Pyæmia and Septicæmia.

BIRTHS, MARRIAGES, AND DEATHS.

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

BIRTH.

- BLUMER.**—On June 4th, at Burn House, Sunderland, the wife of W. Percy Blumer, F.R.C.S.Eng., of a son.

MARRIAGES.

- HERN—HERSCHELL.**—On the 29th ult., at St. Mark's, Notting Hill, by the Rev. W. Ward, William Hern, M.R.C.S., L.D.S., of 18, Stratford Place, W., and Ealing (late of Ashburton, Devon), to Laura, younger daughter of the Rev. L. Herschell, of North Kensington, London. No cards.
- SMELT—SIMKIN.**—On June 5th, at Redmartry Parish Church, by the Rev. R. L. Simkin, brother of the bride, assisted by the Rev. H. M. Niblett, rector, Frank Hayes, of Newent, Gloucestershire, Surgeon, youngest son of Thomas Smelt, of Old Trafford, Manchester, to Maud Mary Symes, eldest daughter of the late Wm. Simkin, of Halleton, Leicestershire. No cards.
- SMITH—CRAWSHAW.**—On the 5th inst., at Highfield Chapel, Huddersfield, by the Rev. R. Bruce, M.A., D.D., John Anderson Smith, M.D.Lond., M.R.C.S., of London, son of T. R. Smith, of Hull, to Laura, third daughter of the late John Crawshaw, J.P., of Huddersfield.

DEATH.

- CLAYTON.**—On 7th inst., of peritonitis, Rupert Clayton, L.R.C.P.Eng., aged 26, lately a student at St. Mary's Hospital, where he was held in much affection.

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.

HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

CHARING CROSS .—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M. 1.30; Dental, M. W. F., 9.
CHELSEA HOSPITAL FOR WOMEN .—M. Tu. W. and F., 1.30.
GREAT NORTHERN CENTRAL .—Medical and Surgical, M. Tu. Th. F., 2.30; Obstetric, W., 2.30; Eye, Tu. F., 10; Ear, M. F., 2.30; Diseases of the Skin, W., 2.30; Diseases of the Throat, Th., 2.30; Dental Cases, W., 2.
GUY'S .—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu. 1; Skin, Tu., 1; Dental, Tu. Th. F., 1.30.
KING'S COLLEGE .—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. S., 1.30; o.p. W. F., 1.30; Eye, M. Th., 1.30; Ophthalmic Department, W., 2; Ear, Th., 2; Skin, F., 1.30; Throat, F., 1.30; Dental, M. Th., 9.30.
LONDON .—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p. W. S., 1.30; Eye, Tu. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9.
MIDDLESEX .—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 9.30; o.p. W., 1.30; Eye, W. S., 9; Ear and Throat, Tu., 9; Skin, Tu., 4, Th. 9.30; Dental, M. W. F., 9.30.
NATIONAL ORTHOPAEDIC .—M. Tu. Th. F., 2.
NORTH-WEST LONDON .—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, Tu., 2; Dental, F. 9.
ROYAL ORTHOPAEDIC .—Daily, 1.
ROYAL FREE .—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Dental, Th. 9.
ST. BARTHOLOMEW'S .—Medical and Surgical daily, 1.30; Obstetric, Tu. Th. S., 2; o.p. W. S., 9; Eye, W. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopaedic, M., 2.30; Dental, Tu. F., 9.
ST. GEORGE'S .—Medical and Surgical, M. T. F. S., 12; Obstetric, Th. 2; o.p. Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopaedic, W., 2; Dental, Tu. S., 9.
ST. MARK'S HOSPITAL .—Fistula and Diseases of Rectum, males, W., 8.45; females, Th., 8.45.
ST. MARY'S .—Medical and Surgical, daily, 1.45, o.p., 1.30; Obstetric, Tu. F., 1.45; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopaedic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electro-therapeutics, Tu. F., 2; Dental, W. S., 9.30; Consultations, M., 2.30; Operations, Tu., 1.30; Ophthalmic Operations, F., 9.
ST. THOMAS'S .—Medical and Surgical, daily, except Sat., 2; Obstetric, Tu. F., 2; o.p. W., 1.30; Eye, M. Tu. W. Th., F. 1.30; o.p., daily, except Sat., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu. F., 1.30; Children, S., 1.30; Dental, Tu. F., 10.
UNIVERSITY COLLEGE .—Medical and Surgical, daily, 1.30; Obstetrics, M. Th., 1.30; Tu., W. F., 2; Eye, Tu. F., 2; Ear, M. F., 9; Skin, W., 1.45, S., 9.15; Throat, Th., 1.30; Dental, W., 9.30.
WESTMINSTER .—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1; Eye, M. Th., 2.30; Ear, M., 9; Skin, W., 1; Dental, W. S., 9.15.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS FOR THE CURRENT WEEK'S JOURNAL SHOULD REACH THE OFFICE NOT LATER THAN MIDDAY POST ON WEDNESDAY. TELEGRAMS CAN BE RECEIVED ON THURSDAY MORNING.

COMMUNICATIONS respecting editorial matters should be addressed to the Editor 429, Strand, W.C., London; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, Strand, W.C., London.

IN order to avoid delay, it is particularly requested that all letters on the editorial business of the JOURNAL be addressed to the Editor at the office of the JOURNAL, and not to his private house.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate beforehand with the Manager, 429, Strand, W.C.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

CORRESPONDENTS not answered are requested to look to the Notices to Correspondents of the following week.

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

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.

QUERIES.

BLOOD-LETTING.

A.M.S. asks as to the latest books or pamphlets on blood-letting.

PUNCTURE OF THE ABDOMEN FOR FLATULENT DISTENSION.
DR. WM. WOODWARD (Worcester) writes with regard to puncture of the abdomen for the relief of distension by flatus, in chronic incurable cases:—“There are very many in which the greatest relief could be given in this way if successful; but although I have frequently practised it, I have seldom, if ever, succeeded in giving the relief expected. A few weeks since one of your correspondents stated that he punctured the ascending and descending colon, which I have tried, but still without success. I have used trocars and cannulas of all sizes and lengths, but flatus does not escape. Why so? Veterinarians, I believe, use a pitchfork in cases of distension from over-feed—but I do not see why that should succeed any better. There is no danger attending the operation, as far as my experience goes. I have lately punctured in one case more than half a dozen times with a good-sized trocar, and with negative results except the withdrawing of about a pint of serum on some occasions, with, of course, a comparative amount of relief.”

ANSWERS.

DR. EARDLEY-WILMOT.—Dr. Gould's paper, entitled “Dreams, Sleep, Consciousness,” is published by the Open Court Publishing Co., Chicago.

CONSANGUINITY IN MARRIAGE.

ALPHA.—Messrs. Longmans, Green and Co. are the publishers of *The Marriage of Near Kin, considered with Respect to the Laws of Nations, the Results of Experience, and the Teachings of Biology*. By Alfred Henry Huth. Second edition; revised. Price 21s.

DAVY'S LEVER TO OCCLUDE URETER.

A.B. writes; If “M.B., F.R.C.S.,” will refer to Sections 1044-5, *Medical Digest Appendix*, he will see that Mr. Davy described in the JOURNAL, vol. ii, 1884, p. 758, how he occluded the ureter by his lever in a case upon which he operated.

“PATENT MEDICINE.”

MR. JOHN EXLEY, M.R.C.S. Eng. (Leeds) writes: In reply to “Patent Medicine” (under “Queries,” JOURNAL, June 8th), asking for information as to the composition of Warner's Safe Cure, I send the following, copied from the *Pharmaceutical Era*, February, 1889: “Dr. F. Homayer has recently examined this nostrum (Ph. Post.), and reports it to contain approximately in each bottle:

Ext. herb. lycop. virginicus	...	20 grammes.
“ hepatica	...	15 “
Ext. gaultheria	...	0.5 gramme.
Potassium nitrate	...	2.5 grammes.
Alcohol (90 per cent.)	...	80 “
Glycerine	...	40 “

The remainder is water.”

REGISTRATION OF FOREIGN DEGREES.

YANKEE asks whether there is the remotest chance for American graduates to be registered under the present Medical Act as foreign graduates. It seems strange, if not ridiculous, that graduates of New Zealand University have that privilege, whilst Harvard, New York, Philadelphia, and Canadian graduates are not recognised.

* * All Colonial and all foreign degrees are placed by the 11th and subsequent clauses of the Medical Act of 1886 under precisely similar circumstances. If degrees from American universities have not been registered, the fault, as we have frequently explained, does not rest with the English authorities.

NOTES, LETTERS, ETC.

A DISCLAIMER.

DR. THOS. ALPH. BUCK (Ryde, Isle of Wight) writes: I forward a copy of the *Isle of Wight Observer* of June 1st. In a leading article headed “Generous

Actions of Medical Men," I am alluded to by name. I beg to disclaim all knowledge of how or by whom the article was inserted, and to state most emphatically that I have not, directly or indirectly, furnished any information upon which it could be framed.

CONSUMPTIVES AND LONG SEA VOYAGES.

MR. GEORGE SERJEANT (Medical Missionary to the Australian Aborigines Cumerogunga, Percy Street, Echuca, Victoria) writes: The above subject having been brought so prominently before your readers, may I be allowed to touch upon what, perhaps, is much more important to the patient, namely, the most suitable locality for consumptives in Australia? Australia is liable to very sudden changes of temperature, and many places here are most unsuitable for chest complaints. Again, some patients may find their way into a suitable locality and greatly improve in health, but after a time, their funds falling them, and being unable to obtain employment there, they go off into some unsuitable place for the purpose of earning a livelihood, and so, instead of being cured, remain invalids to the end of their days. Perhaps of all places in Australia there is none better than the town of Echuca, in Victoria. Hundreds of consumptives owe their restoration to health to this place. It is on the borders of New South Wales, on the Murray and Campespe rivers, 156 miles by rail from Melbourne, 314 feet above the sea level, with a population of over 4,000 people. The following is quoted from Brück's *Guide to the Health Resorts of Australia*: "Echuca is surrounded by forests of gum trees, which protect it from winds and impregnate the pure atmosphere with the balsamic odour of the essential oil of eucalyptus. The climate is warm, equable, and very dry. The mean annual temperature is 58.9° F. The average annual rainfall is only 16 inches, with 67 rainy days in the year; there is very little variation of temperature, and hardly any sudden atmospheric changes. The river scenery is very fine. Fishing (Murray cod, etc.), boating, steamer excursions, shooting (hares, turkeys, etc.); mechanics' institute, free library, three public parks."

Many sad cases come here during the year, some having wandered in search of health into most unsuitable towns, and spending all the means they were possessed of. These cases having come under the notice of some ladies—Mrs. Henry Varley, my wife, and others; they are on the eve of opening a Consumptive Hospital, for the purpose of receiving patients without means, and possibly a few paying ones. Any coming from England could be met by Mrs. Varley in Melbourne, who would send them safely here to the hospital, so that friends in England would have no cause for anxiety as to their welfare on landing in Australia. Those having means, and not caring for the hospital, can be directed to suitable lodgings and have the companionship of Christian friends, on writing to Mrs. Henry Varley, Kew, Melbourne.

Many influential business men in Melbourne, such as Mr. T. Kitchen, Messrs. Beath, Scheis, and Co., are subscribers, and it has the help and sympathy of Dr. Singleton, the well known philanthropist of Melbourne, and Mr. Henry Varley, the evangelist, lately from London.

A PENNY-A-WEEK FUND.

M.B. writes: In this district it is found that after contributing for a short time, the working-classes begin to agitate for representatives on the governing board, which cannot fairly be objected to. But if one workshop has a representative, why should not another? And so it comes to pass that in one hospital with which I am acquainted there are about two dozen working men representatives on a committee of about thirty members.

I must say that in this case the system has worked well enough in many respects, but here the hospital and town are small, and the staff attend the meetings and are well known and respected by the other members of committee. But in a neighbourhood and much larger hospital affairs have not gone on so smoothly. For instance, some of the governors exercise to the full their prerogative of going in and out at all hours of the day, and even late at night, and systematically visit those patients who are from their own workshops, and ask "if they have any complaints to make." Of course many of the representatives are men of common sense, but there are ignorant, biased men among them, and so at next meeting of committee the house-surgeon is called on to explain "how it is that Smith has chicken for dinner, while Jones, with the same complaint, is only allowed milk diet;" or "why Robinson was refused admission after his club doctor had told him that his was a suitable case."

This is not an imaginary evil; the house-surgeons and nurses of this hospital are regularly worried before each committee meeting, by receiving a notice asking them to attend and reply to some charge against them. As to "the moral claim to relief," many of those who contribute learn to look upon the charity as in some sense a club to which they have paid their subscription, and that, therefore, they have a right to treatment.

Men who can well afford to pay a doctor send their families, or come themselves, to the out-patient department, and when told that they cannot be treated express the greatest indignation, threaten to stop their subscription, and to complain to their representative; so that for his own peace of mind a house-surgeon is often tempted to give in and treat indiscriminately all who come to him. One woman, who was told that hers was not a suitable case, informed the house-surgeon that "he had too much cheek and impudence; that the working-men had put him in his place, and they would put him out again." This is of course an extreme case, but it shows the feeling in the minds of the contributors.

I believe that in hospitals in small towns the system is good for everybody except the resident staff, whose lives are made a burden to them by constant petty annoyances; but it appears to me that it will only tend to make worse the present state of affairs in the large hospitals, and especially in those of the metropolis, where, in their eagerness for a good report, no steps are taken to prevent abuse, or to ascertain the social standing of their patients.

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

Dr. J. K. Spender, Bath; Mr. C. Steele, Clifton; Dr. W. S. Playfair, London; Mr. P. Mulvany, London; H. T. Pratt, M.B., Preston; Mr. R. H. Fenn, Simla; Dr. G. T. Giddings, London; Dr. R. J. H. Scott, Bath; Dr. J. M. Wilson, Doncaster; Dr. J. W. Moore, Dublin; The Secretary of the New South Wales Branch, Sydney; Dr. R. R. Rentoul, Liverpool; J. T. Richards, M.B., Birkenhead; G. S. Thomson, M.B., Deesa, India; Dr. A. Duke, Dublin; Dr. J. Cagney, London; Dr. G. H. Mackenzie, Edin-

burgh; Mr. Page, London; Dr. Maguire, London; The Honorary Secretary of the Newcastle-on-Tyne Clinical Society, Newcastle; Dr. H. Woods, London; Surgeon-Major Sanderson, Blackwater; Dr. H. Bramwell, Cullercoats; Dr. C. J. Cullingworth, London; Dr. Drysdale, London; Mr. W. A. Morris, London; Dr. G. W. Potter, London; Dr. R. Barnes, London; Mr. W. H. Peet, London; Dr. S. Martin, London; R. Littlejohn, Edinburgh; Mr. J. West, London; The Honorary Secretary of the Workhouse Infirmary Nurses' Association, London; Dr. R. J. Burnett, Galashiels; Mr. G. S. Johnson, London; Mr. H. W. Lownds, Kirk Burton; Mr. E. M. Keely, Nottingham; Mr. H. T. Jenkins, Salford; Mr. H. C. Major, Bradford; Mr. R. Bremridge, London; Mr. E. Thompson, Omagh; Mr. S. Murphy, London; E. W. Reid, M.B., London; Mr. R. Bangay, Lyme Regis; G. Parsons, M.B., Ambleside; Mr. A. D. Miller, Birmingham; Inquirer; Dr. D. Buxton, London; Dr. W. Hale White, London; Mr. T. F. Raven, Broadstairs; Mr. T. G. Read, London; Mr. W. Clark, Doncaster; Our Birmingham Correspondent; Dr. G. Henty, London; Mr. W. R. Buckell, Cheltenham; Dr. W. D. Halliburton, London; Dr. G. S. Woodhead, Edinburgh; Mr. G. Cowell, London; Mrs. Phillips, London; Dr. Brouardel, Paris; Dr. William Collier, Oxford; Mr. E. Burchell, London; Mr. S. M. Copeman, London; Mr. G. Holland, London; Dr. A. J. Fleming, Salop; Dr. J. W. Hunt, London; Mr. W. Southam, Coalisland; Surgeon W. J. C. Crofton, Charlton; Dr. C. McBride, Wigtown; Dr. G. W. Reid, Stafford; X. I. N.; Our Liverpool Correspondent; Dr. J. J. Dinns, H.M.S. *Anson*, Portsmouth; J. K. Robinson, M.B., Doncaster; Mr. J. H. Wilson, Hull; A. M. S.; Mr. T. Donnithorne, Mill Hill; Dr. R. Stockman, Edinburgh; Mr. J. H. Dow, London; Rev. F. Lawrence, York; Dr. F. J. Allan, London; The Director-General of the Medical Department of the Navy, London; Mr. H. Fox, Newcastle-on-Tyne; Mr. B. W. Thomas, Welwyn; Mr. A. W. Cooke, London; Dr. Macpherson, London; Dr. S. Coupland, London; Dr. J. Pirie, Priors Marston; Dr. J. S. Bristowe, London; H. J. Wheeler, M.B., High Wycombe; Dr. D. Thomas, London; Dr. A. Sheen, Cardiff; Messrs. Burgoyne, Burdighes, and Co., London; Mr. S. E. Pedley, London; Dr. S. Phillips, London; Dr. F. Hall, Leeds; The Chairman of the Hornsey Local Board, London; Mr. W. Ferriday, Manchester; The Chairman and Directors of the Native Guano Co., London; Mr. C. Rothwell, Bolton; Dr. R. W. O. Withers, Shrewsbury; Mr. W. H. Jalland, York; Mr. A. W. Mayo Robson, Leeds; Mr. Adams Frost, London; Mr. G. S. Johnson, London; Mr. S. Plowman, London; Mrs. Falls, Bournemouth; Mr. J. R. Gaylard, New Shildon; Messrs. Orridge and Co., London; Mr. R. Leith, Hemel Hempstead; Mr. E. H. Douty, London; etc.

BOOKS, ETC., RECEIVED.

The Cup of Youth, and other Poems. By S. Weir Mitchell, M.D., LL.D. Boston and New York: Houghton, Mifflin and Co. 1889.
Observations on Some Rare Diseases of the Skin. By Joseph Frank Payne, M.D., Oxon., F.R.C.P. Lond. With Four Plates. London: Smith, Elder and Co. 1889.
The Guide for Irish Medical Practitioners. By Professor R. J. Kinkead, M.D., J.P. Dublin: John Balconer. 1889.
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