

a preliminary), or, in the case of young children, chloroform alone, or mixed with a small proportion of absolute alcohol. The degree of narcosis depends upon the method the surgeon intends to employ. If the finger is used only, the narcosis need not be so deep as if the forceps is employed. The patient, lying on his back, should have the head drawn over the table as in the method now so frequently employed for staphyloplasty. The advantages of this position are the following: The blood cannot trickle downwards into the larynx, but collects into the roof of the pharynx, which in this position forms, as it were, a cup to receive it, and from which the blood and fragments of adenoid tissue can be easily removed by sponging.

A very important fact for consideration is that in this position we are sure, thanks to the admirable investigations of Dr. Howard, that the air passages are free, and that the epiglottis is raised from the larynx.

The importance of giving the patient every facility for respiring freely cannot be too strongly insisted upon, for the whole of the naso-pharynx is not infrequently plugged with the overgrown pharyngeal tonsil; respiration through the nostril being obstructed, every care is required while he is under the effects of the chloroform.

I would urge the administration of an anæsthetic in these cases on the following grounds: The surgeon can perform the operation more deliberately and with greater thoroughness; the patient is spared much pain and discomfort, and, if unconsciousness is produced by one who is accustomed to this particular class of case, it is as devoid of danger as in any other operation in surgery. I think it necessary to insist on this point, because I feel sure that many laryngologists are more willing to let the patient endure a certain amount of pain than incur undue risk on the score of the imaginary additional dangers which are supposed to complicate anæsthesia in such patients. I can speak with great confidence on this matter, for I have administered chloroform now in a very large number of these cases, and have never had the slightest untoward symptom; and this success I would attribute mainly to the position of the patient during the performance of the operation. Lastly, I cannot avoid the conclusion that in removing adenoid vegetations from the naso-pharynx of a child, it is incumbent on the operator, in the majority of cases, to give the patient the advantage of an anæsthetic.

MEMORANDA:

MEDICAL, SURGICAL, OBSTETRICAL, THERAPEUTICAL, PATHOLOGICAL, ETC.

CHOLE-PULMONARY FISTULA.

MRS. C., aged 70, had always been healthy, except as follows: In 1882 an attack of jaundice, evidently obstructive, lasted six weeks, was accompanied by hepatic pain, and ended in complete recovery. In 1887 she had a similar illness, but said to be without jaundice; recovery. In January, 1889, all the symptoms of obstructive jaundice developed and remained more or less persistent; pain never great; occasional sickness.

Suddenly, on July 13th, rigor and severe persistent pain in the hepatic region set in and continued next day, preventing sleep and quite upsetting the patient. The pain suddenly ceased on the morning of July 15th, with sudden onset of cough and profuse expectoration. It was on this day I first saw the patient. She was much exhausted, thin, and had the typical symptoms of obstructive jaundice. She was sitting upright, and refused to lie down, because the moment she did so she had distressing intermittent cough and expectoration, which troubled her less when she was upright. The physical signs were those of acute bronchitis of the right lung, much less marked in the left, and at first I took the expectoration to be bronchitic mucus deeply bile-stained, but more careful examination showed it to be bile; it was thickish green-and-yellow fluid, with very slight admixture of air. Temperature normal. Little could be made out by abdominal palpation, as whenever the patient tried to lie down the cough and expectoration increased. There was no marked tenderness in the hepatic region. During the next four days the urine and the conjunctivæ became lighter in colour, the stools continued to be quite clayey; hepatic pain

had quite gone. Patient continued to expectorate the same fluid till the evening of July 18th. By the morning of the 19th this had stopped, and the right lung had become solid. Temperature remained normal. She now gradually became weaker, more distressed, more deeply jaundiced, and there gradually developed in the region of the gall-bladder a swelling, which by the 26th could be palpated as a cyst containing fluid, and which was very tender. The patient gradually sank, and died on July 30th.

A necropsy was not granted, but the history and the symptoms point to chronic inflammation of the gall-bladder, and occlusion of the hepatic and cystic ducts or of the common ducts, followed by a fistulous opening of the gall-bladder into the right lung. While this opening remained patent the symptoms of retention and absorption of bile diminished, although the fæces remained clayey. These symptoms again increased when the opening closed, from the consolidation of the right lung caused by the passage of the bile through it. The history of jaundice seven years previously, and again of hepatic pain and disturbance two years previously, and the absence of hard abdominal tumours seem to negative the idea of cancer.

JAMES ADAM, M.A., M.B., C.M.

Hamilton, N.B.

SUPERFICIAL KERATITIS INDUCED BY ANILINE VIOLET.¹

SOME time ago, a healthy boy aged about 7 years was brought to me, and the mother gave the following history: On the preceding afternoon the little fellow had been amusing himself by drawing with an aniline blue pencil, and had got his fingers well stained with the violet dye, and from these had got it into the left eye. When she first noticed the child, "the white of the eye (as she put it) was quite purple." But the child made no complaint. Towards evening the eye got very irritable with photophobia and lachrymation. In the morning the purple colour had faded considerably, but the child had great dread of light and pain. On examining the patient, after instillation of cocaine, I found the conjunctiva extremely congested and of a reddish purple colour. After reducing the superficial hyperæmia by pressure, the colour was of a bluish purple. At the inner side below was an area of deeper circumcorneal injection. The pupil was slightly dilated and active. On examining the cornea by oblique illumination, I found six small vesicles on the inner and lower segment, filled apparently with transparent fluid; one of these had burst and left a small superficial ulcer with clean edges. There seemed to be no infiltration of the corneal tissue around, the media was clear, and the fundus normal. I ordered atropine, cocaine drops every three hours, and boracic acid lotion, the eye to be protected from light. Next day all the vesicles had burst and coalesced to form one superficial ulcer, the floor of which was quite transparent and the margin showing no infiltration. There was much less photophobia, and the violet staining of the conjunctiva was much less marked. The atropine was continued and a light compress applied, and in forty-eight hours the ulcer had completely healed. There was a slight haze over that part of the cornea for a day or two, but eventually it became perfectly transparent and full vision returned. The purple stain had entirely disappeared on the fifth day.

J. TATHAM THOMPSON, M.B.

Cardiff.

ERGOTIN IN ERYSIPELAS.

I HAVE read with interest Dr. Kingsbury's note on the above subject, and though I have never applied ergot externally, I have for some years given it internally in association with perchloride of iron with great success. I was first induced to try it in a case complicated with epistaxis, and the result was so satisfactory, that I have ever since used it. I have employed the liquid extract of the *Pharmacopœia* in combination with tincture of perchloride of iron and glycerine.

A. H. T. CAMERON.

Liverpool.

PRECOCIOUS MENSTRUATION.

THOUGH the early appearance of the menstrual flow is by no means infrequent in the tropics, it is of interest to note its occasional occurrence in the British Isles, where the usual age varies between 13 and 17 years.

E. D., aged 7 years and 3 months, a native of Portsmouth, was brought to me with a muco-serous vaginal discharge and general *malaise*, backache, and loss of appetite, being, as the mother described it, "out of sorts." A week subsequently the true san-

¹ Read in the Section of Ophthalmology at Leeds.

guineous flow came on, continuing for five or six days, and gradually subsiding. Here it is curious to note that the signs of premature puberty were not so marked as is usual in such cases. Krieger gives the extremes for commencement of the catamenial flow as 18 years in Swedish Lapland, and 10 years in Egypt. Parvin has recorded a case at $3\frac{1}{2}$ years, and Ploss a series of cases under 8 years, mostly in healthy subjects.

C. E. GREY STALKARTT, M.B., C.M. Edin.,
Southsea. M.R.C.S., L.R.C.P. Lond.

INFLUENZA AND CATALEPSY.

I HAD under my treatment some cases in which catalepsy appeared immediately after an attack of influenza had subsided. I shall give a brief description of only one case.

O. B., aged 32, mother of three healthy children, of poor condition, had a severe attack of influenza on January 5th last. I saw the woman on the same day. Her symptoms were shivering, abdominal pains, want of appetite, obstinate constipation, vague pains all over the body, and great restlessness; temperature 103° . After four days' illness she was well enough to get out of bed. She was seized, however, with a sudden loss of consciousness. I was called to see her, and found her lying in bed apparently senseless, with her eyes open. The pulse was 120 and weak; the colour of the face very pale. I raised first one arm and then the other, and they remained in the position in which they were placed. I then attempted to rouse her from the senseless state, and for nearly five minutes she remained sitting on the bed in the same position in which I placed her. I raised her legs from the bed, and they remained so for nearly ten minutes.

There is no doubt the case was an attack of catalepsy following the attack of influenza suffered a few days before, which had weakened the patient and rendered her more nervous. I prescribed an enema with assafoetida and camphor mixture. The fit lasted for nearly two hours, and the disease subsided with the first attack, the woman having been all right ever since.

Malta. G. F. INGLOTT, M.D., D.M.O.

LARYNGEAL STENOSIS FROM FIXED ADDUCTION OF THE VOCAL CORDS, FOLLOWING CANCER OF THE OESOPHAGUS.

THE very able report, by Dr. Percy Kidd, of six cases of glottis-closure from tubercular disease, in the JOURNAL of March 29th, recalls to my mind the following case, which may be of interest as bearing on some of the points he adduces:—M. T., aged 51, labourer, came under my notice in September last, by the courtesy of a colleague who had charge of the case. He stated that he had been ill four months (?) but his appearance betokened much suffering. His breathing was noisy, and during the consultation he had several paroxysms of dyspnoea after coughing. His voice was very rough. Externally, the larynx was observed to make scarcely any respiratory excursion, and appeared enlarged on the left side. A swollen gland was felt near the posterior border of the left sternomastoid, and the thyroid was palpably enlarged. No dulness was found on percussing the chest, but on auscultation tubular breathing was slightly marked on the right side. There was much expectoration of frothy mucus, and great pain was experienced, especially on swallowing, which latter act was extremely difficult.

Laryngoscopic examination: Swelling of both ventricular bands, especially the left, which somewhat overlapped the vocal cord of that side. The vocal cords were fixed in the median position and only about an eighth of an inch apart. The mucous membrane over the summits of the arytenoid cartilages was much swollen. The dyspnoea, though marked, was never sufficiently urgent to call for tracheotomy, the patient really dying from exhaustion. The necropsy revealed cancer of the upper portion of the oesophagus involving both recurrent nerves. The crico-arytenoid joints were fixed by the surrounding inflammatory thickening.

I assume that in this case the vocal cords primarily occupied the cadaveric position in consequence of bilateral paralysis of both the adductors and the abductors, but these latter undergoing tonic contraction, of a similar character to that noticed after severe facial palsy, caused the cords to take up the position in which I found them. The contraction, though affecting both sets of muscles, resulted, as in the case of spasm, in the adductors overpowering the abductors, possibly from mechanical advantage. The fixation of the vocal cords in their baneful position is accounted for by the condition of the crico-arytenoid joints found *post mortem*.

J. G. BLACKMAN, M.D., M.R.C.S.

Portsmouth.

REPORTS

ON

MEDICAL & SURGICAL PRACTICE IN THE HOSPITALS AND ASYLUMS OF GREAT BRITAIN, IRELAND, AND THE COLONIES.

GENERAL HOSPITAL, MADRAS.

AORTIC ANEURYSM PRESENTING IN THE DORSAL REGION.

(Under the care of Surgeon-Major BROWNE, M.D.)

CHENGAL ROYAN MOODELLY, aged 30, by occupation a dyer, and formerly a cultivator, Hindu Moodelly by caste, was admitted on



Fig. 1.

April 27th, for a large painful pulsating tumour of the back.

also to be noted that the rise to the maximum was exceedingly rapid after the disease had been recognised as epidemic.

From their inquiry they felt themselves justified in concluding that, though epidemics of influenza occurred during the winter, they were not connected with exceptionally cold weather, especially at their commencement, but rather with exceptionally warm weather, which was noted both before and during the epidemic. Having especial regard to the late epidemic, they observed that the total mortality from all causes had been much above the average, and this was not explained by the increased number of deaths registered as due to influenza. Thus, during the first four weeks of the year, when the mortality from influenza was at its maximum, the total number of deaths was 343, while the total mortality from all causes was 10,065, that is, 2,258 over the mean death-rate of the same four weeks for the previous ten years. The diseases which had yielded an exceptionally high general death-rate during the period were those of the respiratory, circulatory, nervous, and locomotory (rheumatism) systems—more particularly the respiratory. This was the more striking when it was remembered that the temperature had been exceptionally high and fogs had been absent. The diseases which had showed a diminished mortality in London during the prevalence of the epidemic were diarrhoea, dysentery, liver disease, measles, scarlet fever, typhoid fever, and erysipelas. As to the weather, the first three weeks of November had a temperature above the mean; the last week of November and the first two weeks of December showed a temperature below the mean; the last two weeks of December had a temperature above the mean; the first week of January had a temperature above the mean; the last three weeks of January and the first week of February, when the epidemic was at its height, had a temperature much above the mean, while, since that time to the middle of March, the temperature was below the mean. As to age, there had been a remarkable rise of the death-rate of all persons above the age of 20 during the four or five weeks immediately preceding the epidemic, so far as this could be fixed by registration statistics.

As to the spread of the epidemic from one locality to another, the mistake had frequently been made of assuming that it was only winds blowing over or near the surface of the earth which were concerned in the distribution of the germs. If the surface winds did not account for the successive distribution of the epidemic it was concluded that the germs had not been transported by the winds. But this was incorrect. It had now been virtually proved that the winds in a cyclone were drawn inwards towards its centre and then ascended in a vast aerial column to the upper regions of the atmosphere, whence again they flowed as an upper current towards any cyclone or cyclones that might surround them. Thereafter they slowly descended down the centre of the anti-cyclone to the earth's surface, over which they were carried in every direction. Owing to the known rapidity of these aerial movements, two or at the least three days were amply sufficient for this distribution. And it was during winter that this rapid and complete distribution of atmospheric impurities from country to country in Europe was effected. In summer time cyclones were rare and the wind system of Europe was more immediately connected with the Atlantic Ocean than during winter.

AUSTRIAN UNIVERSITIES.—During the winter semester 1889-90 the total number of students in the Austrian universities was 13,278. Of these 5,703, or 42.9 per cent. of the whole number, belonged to the medical faculties, Vienna having 2,589, Innsbruck 282, Gratz 575, Prague 1,703 (646 in the German, and 1,057 in the Czech faculty), and Cracow 554. In the winter semester of 1888-89, the total number of medical students in Austria was 5,666. As compared with last year, Vienna and the Czech faculty of Prague show a slight falling off, while the numbers in the other universities have increased.

LITERARY INTELLIGENCE.—A course of lectures on the growth and means of training the mental faculty, delivered by Dr. Francis Warner in the University of Cambridge in 1888-89, will shortly be published. An important work on vaccination in Germany, Holland, Belgium, and Austria (*Der Kuhpockenimpfung in Deutschland, etc.*), from the pen of Dr. M. Hay, has recently appeared at Vienna (Moritz Perles). Dr. A. Baer, the well known Austrian advocate of temperance, has recently published a work (*Die Trunksucht und ihre Abwehr*, Vienna: Urban und Schwarzenberg) dealing with the drink question in the encyclopædic fashion characteristic of German writers.

ASSOCIATION INTELLIGENCE.

LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

MEMBERS are reminded that the Library and Writing Rooms of the Association are now fitted up for the accommodation of the Members, in commodious apartments, at the offices of the Association, 429, Strand. The rooms are open from 10 A.M. to 5 P.M. Members can have their letters addressed to them at the office.

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 16th day of April next, at 2 o'clock in the afternoon.

The following Committees will also meet:—

Tuesday, April 15th, 1890.—Proxy Voting Committee, 3.0 P.M.

—Trust Funds Committee, 4.0 P.M. Wednesday, April 16th, 1890.

—Journal and Finance Committee, 11.30 A.M.

April, 1890.

FRANCIS FOWKE, *General Secretary*.

NOTICE OF QUARTERLY MEETINGS FOR 1890.

ELECTION OF MEMBERS.

MEETINGS of the Council will be held on April 16th, July 16th, and October 15th, 1890. 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 25th, and September 4th, 1890.

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*.

BRANCH MEETINGS TO BE HELD.

MIDLAND BRANCH: LEICESTERSHIRE DISTRICT.—A meeting of this district will be held at the Dispensary, Loughborough, on Wednesday, April 16th, at 3.30 P.M. The following communications have been promised: Mr. C. J. Bond: The Treatment of Enlarged Bursæ and Ganglia by Excision. Dr. H. Handford: Some Forms of Cardiac Dilation. Dr. F. W. Bennett: Recent Experiments on Nasal Respiration. Dr. F. M. Pope: Resorcin in the Treatment of Gastric Ulcer. Dr. J. Headley Neale: A case of Malignant Disease: Enormous and Rapid Enlargement of the Liver. Mr. R. Paul: A case of Compound Comminuted Fracture of the Leg. Dinner at the King's Head Hotel at 6 P.M.; tickets 5s. each, exclusive of wine. All members of the profession resident in the district will be welcomed. Notice of specimens or cases to be exhibited to be sent, before April 12th, to the Honorary Secretary, FRANK M. POPE, M.B., Leicester.

WEST SOMERSET BRANCH.—The spring meeting of this Branch will be held at the Railway Hotel, Taunton, on Thursday, April 17th, at 5 P.M. Dinner at 5.30. The subject, as settled by the Council, for discussion after dinner is the Influenza Epidemic. Members having any case or communication to bring before the meeting are requested to send the title thereof as soon as possible to W. M. KELLY, Honorary Secretary, Taunton.

SHROPSHIRE AND MID-WALES BRANCH.—The half-yearly meeting will be held at the Salop Infirmary, on Tuesday, April 15th, at 3 P.M. Papers have been promised by Messrs. Stephen Paget (on Cancer of the Breast), Webb, and Dr. Charnley. Members having any communications to make or papers to read will kindly inform the Honorary Secretary as soon as possible.—J. A. BRATTON, Honorary Secretary, Shrewsbury.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will be held at the Town Hall, Walthamstow, on Thursday, April 17th, at 8.45 P.M. A paper will be read by Dr. Angel Money on Nocturnal Restlessness in Children. Visitors will be welcomed.—J. W. HUNT, Honorary Secretary, 101, Queen's Road, Dalston, N.E.

SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT.—The next meeting of this Branch will be held at Croydon on Thursday, May 8th.—P. T. DUNCAN, M.D., Honorary Secretary, Croydon.

OXFORD AND DISTRICT BRANCH.—The next meeting of the Branch will be held on Friday, April 25th, at 3.15 P.M., in the Radcliffe Infirmary, Oxford. Gentlemen are requested to send to the Honorary Secretary, W. LEWIS MORGAN, 42, Broad Street, Oxford, notice of any papers to be read, or cases shown, on or before April 14th.

NORTH OF IRELAND BRANCH.—A general meeting of this Branch will be held in the Board Room of the Belfast Royal Hospital on Thursday, April 17th, at 4 P.M. Gentlemen who wish to read papers, show patients, exhibit specimens, etc., will kindly communicate as early as convenient with the Honorary Secretary, JOHN A. BYERS, M.D., Lower Crescent, Belfast.

BORDER COUNTIES BRANCH.—The next meeting of the Branch will be held at Lockerbie on the afternoon of Friday, April 26th. The hour of meeting will be notified on the circulars. There will be a dinner after the meeting. Notice of papers and cases to be read to be sent as soon as possible to the Honorary Secretary, JAMES ALTHAM, M.D., Birkbeck House, Penrith.

NORTH WALES BRANCH.—The intermediate meeting will be held at the Westminster Hotel, Rhyl, on Tuesday, April 15th, at 1 P.M., Evan Williams, Esq., President. After some formal business, the election of five representatives on the Court of Governors of the University College of North Wales will be proceeded with. Messrs. J. Richards and O. T. Williams will open a discussion on Influenza. The following papers will be read: On the Treatment of Puerperal Fever, by F. Imlach, M.D.; On the Surgical Treatment of Infantile Paralysis, by Robert Jones, F.R.C.S.d.; and on a surgical subject by Damar Harrison, F.R.C.S.Ed.—W. JONES MORRIS, Honorary Secretary, Portmadoc.

METROPOLITAN COUNTIES BRANCH: WESTERN DISTRICT.—A meeting of the above District will be held on Friday, April 25th, at the Prince's Hall, Baling. The chair will be taken by Dr. Ord, President of the Branch, at 8.30 P.M. Dr. Clement Godson will read a paper on Cancer of the Cervix Uteri.—C. A. PATTEN, Honorary Secretary, Marpool House, Baling, W.

SOUTH-EASTERN BRANCH: WEST SURREY DISTRICT.

A MEETING of this District was held at the Royal Surrey County Hospital, Guildford, on Thursday, March 27th, Mr. T. M. BUTLER in the chair.

Next Meeting.—It was decided to hold the next meeting at Dorking on the last Thursday in October.

Honorary Secretary.—Dr. J. P. A. Gabb, Guildford, was re-elected for the ensuing year.

Papers.—Mr. T. M. BUTLER read a case of Suppression of Urine, owing to blocking of the ureter by a calculus. The other kidney had previously suffered in a similar way. The specimen was shown.—Dr. BOXALL read some unusual Cases of Death in Childhood, and showed illustrative drawings, etc.—Mr. A. A. NAPPER read a paper on Influenza, the recent Epidemic.

Dinner.—The members and friends afterwards dined at the White Lion Hotel.

SOUTH EASTERN BRANCH: EAST AND WEST SUSSEX DISTRICTS.

A CONJOINT meeting of these districts was held at the Grand Hotel, Brighton, on March 26th, Mr. BABER in the chair.

Nurses' Co-operation Association.—A letter from Dr. HOLMAN was read concerning the proposed formation of a Private Nurses Co-operation Association, and a paper was circulated for the signatures of those who approved of this proposal.

Communications.—Dr. HOLLIS showed a patient suffering from Peripheral Neuritis.—Dr. SAMUEL WEST introduced the subject of Influenza, and the CHAIRMAN, Mr. VERRALL, Dr. HAYMAN, Mr. DODD, Dr. HOLLIS, Dr. RICHARDSON, Dr. MENZIES, Mr. ALBAN and Mr. KINNEIR joined in the discussion.

Next Meeting.—The next meeting of the East Sussex District will be held at Tunbridge Wells in May.

MELBOURNE AND VICTORIA BRANCH.

THE annual meeting of this Branch was held on February 12th.

President's Address.—The retiring President, JR. FISHBOURNE, read an address, in which he dealt first with the amended Lunacy Act for the colony, which had come into force on the first day of last year. The part relating to the administration of the estates of lunatics was in many particulars satisfactory; but the new provisions concerning the management and treatment of the insane were, with few exceptions, "mischievous, unnecessary, or unworkable." Five certificates instead of two were now required before a lunatic could be placed under treatment. The medical man had no protection, as under the Imperial Lunacy Act, but was absolutely at the mercy of any released madman, and equally mad jury, who might think he had not acted in good faith. The results of thus increasing the difficulties of placing lunatics in confinement in the early stages of their complaint were deplorable. Licensed houses for private patients had been abolished,

and no accommodation had yet been provided for the well-to-do classes. If it were permitted to found a properly equipped asylum for such patients, a much-felt want would be met. Provision had been made for boarding out suitable cases, and an extension of the system was desirable; but while wages were so high and the labouring classes so prosperous, it was not likely that offers to take charge of patients would be received from suitable persons. A great want in the colony was a separate asylum for criminal lunatics, meaning by that term prisoners who became insane after having become criminal. Provision for the voluntary admission of patients in imitation of the English Act was also badly needed, and there was as yet no adequate provision for dealing with idiots and imbeciles. Dr. McCreery, at Kew, had initiated a system of training idiot children with pleasing results. Dr. Fishbourne hoped the system might be extended, for there were many children in Melbourne who were so feeble-minded as to require instruction for which the State schools made no provision. In Victoria, in 1888, there was one registered insane person for every 300 of the population, while in New South Wales there was only one in 346. No explanation had been offered of this difference; but there was little doubt that, if the Victorian statute were strictly administered, the difference would be greater still. After severely criticising the proposed abolition of the asylums at Kew and Yarra Bend, which together had cost the country nearly half a million, and the placing of the patients in asylums built upon the cottage plan, like the one to be erected at Sunbury at an estimated cost of £180,000, Dr. Fishbourne proceeded to plead for the more thorough instruction of the graduates of Melbourne University in psychological medicine. He mentioned that an asylum for inebriates had been opened at Beaconsfield; but as, under the Inebriates Act, the patient could only be detained for three months, he feared the measure would be of little use. Dr. Fishbourne next criticised recent changes in the election of the new Board of Health, which, instead of being independent of the municipal councils whose proceedings it was its duty to control, practically consisted of these very bodies. The local health officers were not independent of local influence, and their remuneration was a mockery. Under these circumstances, there could be no check on "municipal selfishness," and it might be expected that sanitary abuses would be multiplied instead of being reformed.

Election of Officers.—The following office-bearers were elected for the ensuing year: *President:* The Hon. Dr. Le Fevre, M.L.C. *Vice-President:* Dr. Shields. *Secretary:* Dr. Kenny. *Treasurer:* Dr. Meyer.

Report of Council.—The retiring Secretary, Dr. MAUDSLEY, read the report of the Council, which showed a roll of members of 138, and a balance to the good of £35.

After the meeting, the health of the new President was proposed by Dr. NEILD and cordially responded to, and the health of the retiring President was proposed by Dr. HENRY, who took the opportunity of expressing his gratification at the contributions the different Branches of the Association had made to science during the past year. He thought that political federationists might well take a lesson with advantage from the organisation of the British Medical Association.

BRITISH MEDICAL ASSOCIATION.

FIFTY-EIGHTH ANNUAL MEETING.

THE fifty-eighth Annual Meeting of the British Medical Association will be held at Birmingham on Tuesday, Wednesday, Thursday, and Friday, July 29th, 30th, 31st, and August 1st, 1890.

President: C. G. WHEELHOUSE, F.R.C.S., J.P., Consulting Surgeon, Leeds General Infirmary, Cliff Point, Filey.

President-elect: WILLLOUGHBY FRANCIS WADE, B.A., M.B., F.R.C.P., J.P., Senior Physician, Birmingham General Hospital, 27, Temple Row, Birmingham.

President of the Council: THOMAS BRIDGWATER, M.B., LL.D., J.P., Harrow-on-the-Hill.

Treasurer: CONSTANTINE HOLMAN, M.D., J.P., Reigate.

An Address in Medicine will be delivered by Sir B. WALTER FOSTER, M.D., M.P., Senior Professor of Medicine, Queen's College, Birmingham.

An Address in Surgery will be delivered by LAWSON TAIT, F.R.C.S., Surgeon, Birmingham and Midland Hospital for Women, Birmingham.

An Address in Therapeutics will be delivered by WILLIAM HENRY BROADBENT, M.D., Physician to St. Mary's Hospital, London.

The scientific business of the meeting will be conducted in twelve Sections, as follows, namely:

A.—MEDICINE AND THERAPEUTICS.

President: Sir DYCE DUCKWORTH, M.D.

Vice-Presidents: E. RICKARDS, M.B.; D. DRUMMOND, M.D.

Hon. Secretaries: ISAMBARD OWEN, M.D., 40, Curzon Street, Mayfair, W.; C. W. SUCKLING, M.D., 103, Newhall Street, Birmingham.

B.—SURGERY.

President: T. H. BARTLETT, F.R.C.S.

Vice-Presidents: BENNETT MAY, F.R.C.S.; J. G. SMITH, M.B.

Hon. Secretaries: F. A. SOUTHAM, F.R.C.S., 13, John Street, Manchester; F. MARSH, F.R.C.S., 34, Paradise Street, Birmingham; H. G. BARLING, M.B., F.R.C.S., 85, Edmund Street, Birmingham.

C.—OBSTETRIC MEDICINE AND GYNÆCOLOGY.

President: T. SAVAGE, F.R.C.S.

Vice-Presidents: C. J. WRIGHT, M.R.C.S.; J. MURPHY, M.D.

Hon. Secretaries: J. K. KELLY, M.D., Park Villa, Crosshill, Glasgow; C. E. PURSLOW, M.D., 192, Broad Street, Birmingham.

D.—PUBLIC MEDICINE.

President: A. HILL, M.D.

Vice-Presidents: J. B. WELCH, M.B.; A. S. UNDERHILL, M.D.

Hon. Secretaries: L. C. PARKES, M.D., 61, Cadogan Square, S.W. S. BARWISE, M.B., Clough View, Blackburn.

E.—PSYCHOLOGY.

President: F. NEEDHAM, M.D.

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Honorary Local Secretaries:

R. SAUNDBY, M.D., 83A, Edmund Street, Birmingham.

JORDAN LLOYD, F.R.C.S., 22, Broad Street, Birmingham.

A. HARVEY, M.B., 358, Wheeler Street, Lozells, Birmingham.

PROGRAMME OF PROCEEDINGS.

TUESDAY, JULY 29TH, 1890.

9.30 A.M.—Meeting of 1889-90 Council.

11.30 A.M.—First General Meeting. Report of Council. Reports of

Committees; and other business.

8.30 P.M.—Adjourned General Meeting from 11.30 A.M. President's

Address.

WEDNESDAY, JULY 30TH, 1890.

9.30 A.M.—Meeting of 1889-90 Council.

10 A.M. to 2 P.M.—Sectional Meetings.

3 P.M.—Second General Meeting. Address in Medicine by Sir

B. WALTER FOSTER, M.D., M.P.

9 P.M.—Reception by the Worshipful the Mayor of Birmingham

in the Council House.

THURSDAY, JULY 31ST, 1890.

9.30 A.M.—Meeting of the Council.

10 A.M. to 2 P.M.—Sectional Meetings.

3 P.M.—Third General Meeting. Address in Surgery by Law-

son Tait, F.R.C.S.

7 P.M.—Public Dinner of the Association.

FRIDAY, AUGUST 1ST, 1890.

10.30 A.M. to 1.30 P.M.—Sectional Meetings.

3 P.M.—Concluding General Meeting. Address in Thera-

peutics by W. H. BROADBENT, M.D.

9 P.M.—Reception by the President of Mason College and

Mrs. Lawson Tait.

SATURDAY, AUGUST 2ND, 1890.

Excursions.

SPECIAL CORRESPONDENCE.

PARIS.

*Influenza.—Transplantation of Skin in Burns.—Treatment of Por-
rigo Decalvans.—Treatment of Chronic Metritis.—Phosphores-
cence of Crustacea.—Foundlings in Paris.—General News.*

At a recent meeting of the Société Médicale des Hôpitaux M. Féréol stated that he met with one case of ascending myelitis complicating influenza. M. Hayem said that in marked anæmia the blood corpuscles are endowed with very complex movements. The entire corpuscle is contractile; sometimes it has prolongations endowed with movement; sometimes the corpuscle oscillates without changing its place, at others it moves to another spot in the preparation. M. Chantemesse said he had observed bodies exactly like those described by M. Hayem in the blood of patients suffering from influenza. M. Gaucher had found angina pectoris, suppurating otitis, mastoiditis, thyroiditis, and meningitis as complications of the disease.

M. Berger recently showed at the Surgical Society two patients in whom he had cured torticollis following burns by transplantation of skin. He makes a circular incision in the cicatrix as far as the deeper layers of the integument; the edges of the wound are then pulled wide apart, and one or two pieces of skin, measuring from 20 to 25 centimètres, which include the whole thickness of the cellular tissue and a small portion of aponeurosis at the base, are fixed in position by sutures. The skin is taken from over the scapula or from the front wall of the chest.

M. Brocq prescribes the following local treatment for porrigo decalvans. After shaving the head the scalp is washed with hot soap and water. After epilation of the affected regions, they are washed with a 5 to 10 or 25 to 50 solution of corrosive sublimate. A few hours later the following ointment is rubbed in:—℞ Hog's lard, 30 grammes; oil of sweet almonds, 4 grammes; glycerine, 4 grammes; hydrargyrum vitriolatum, 1 gramme. The sublimate lotions and the ointment are applied morning and evening. Epilation is repeated three or four times. M. Brocq sometimes also uses the following lotion:—℞ Water, 400 grammes; glycerine, 100 grammes; corrosive sublimate, 1 gramme. M. Vidal applies a lotion of essence of turpentine to the scalp, then tincture of iodide, and finally rubs a thick layer of vaseline over the parts, which are then covered with gum plaster or laminated gutta-percha. M. Lailler, after epilation, applies frictions of the following preparation with a piece of linen:—℞ Water, 950 grammes; glycerine, 50 grammes; bichloride of mercury, 1 gramme; hydrochlorate of ammonia, 1 gramme. The linen which has been used for

Society of England to form a similar committee to act in conjunction with it."

But with this efforts must be made (a) by practitioners sending letters to Lord Sandhurst, (b) by asking medical practitioners in Parliament to use their influence, (c) by asking other members of Parliament to help us, (d) or by forwarding petitions from medical societies or signed by practitioners in different towns to Lord Sandhurst.

If we do not wake up and help ourselves, we shall be left out in the cold, and for this we shall have ourselves to blame. Just now there is a strong desire to tackle this medical charity question; and if we are not, in the provinces, included, it is most likely we shall not have another opportunity for the next fifteen years.—I am, etc.,

Liverpool.

ROBERT R. RENTOUL, M.D.

THE DROGHEDA INFIRMARY.—The decision of the Local Government Board, on the evidence given at the recent inquiry into the circumstances attending the death of the man Segrave, is that the doctor, nurses, and master were all to blame. They have been reprimanded.

GLASGOW HOSPITAL FOR SKIN DISEASES.—The annual report of this institution states that a total of 35,258 patients have been treated since its foundation twenty-nine years ago. Last year the number of patients was 1,310, and 77 students attended the *clinique*, to which also practitioners are resorting in annually increasing numbers. The expenditure is under £800 a year, and is more than met by contributions and invested funds.

SAMARITAN FREE HOSPITAL.—A bazaar, under the patronage of the Empress Frederick of Germany, the Princess of Wales, Princess Christian, Princess Louise, Princess Beatrice, and other distinguished ladies, will be held at the Portman Rooms on May 6th, 7th, and 8th, with the object of raising a sum of £1,500 with which to provide additional furniture for the Samaritan Free Hospital for Women and Children. Any surplus obtained over the above sum will be devoted to the reduction of the building debt.

UNIVERSITY INTELLIGENCE.

OXFORD.

EXAMINATIONS IN MEDICINE AND SURGERY.—The Regius Professor of Medicine gives notice that the Final Examination for the degree of Bachelor of Medicine will commence on Monday, June 9th, at 9.30 A.M., in the Examination Schools. The examination for the degree of Master in Surgery will take place on Thursday, June 19th. The First Examination for the degree of Bachelor of Medicine will commence on Monday, June 30th, at 9.30 A.M.

The Secretary of the Boards of Faculties gives notice that he will be in attendance at his office in the Clarendon Building on Monday, May 26th, from 9.30 to 10.30 A.M., and from 2 to 3 P.M., for the purpose of receiving names of candidates for the Second Examination for the degree of M.B.; on Monday, June 2nd, from 2 to 3 P.M., for the purpose of receiving names of candidates for the examination for the degree of M.Ch.; and on Monday, June 16th, from 9.30 to 10.30 A.M., and from 2 to 3 P.M., for the purpose of receiving names of candidates for the First Examination for the degree of M.B. Names, with the statutable certificates and fees, may be sent to him by letter at any time not later than the above-mentioned days.

No name can be entered for any of these examinations unless the statutable certificates are exhibited and the fees paid within the prescribed limit of time, namely, "at least fourteen days before the first day of the week in which the examination is to be held." The statutable certificates and fees are as follow:

I. *For the Second Examination.*—1. For candidates who offer *Materia Medica* and *Pharmacy* only. Fee: 15s. 2. For candidates who offer the remaining subjects, whether in conjunction with or without *Materia Medica*. Fee: If *Materia Medica* be offered, £2 5s.; if *Materia Medica* be not offered, £1 10s. Certificates: Certificates of having passed the several subjects of the First Examination, namely, (a) Human Anatomy, (b) Human Physiology, (c) Organic Chemistry. Exemptions: (1) The above-mentioned certificate (b) is not required from candidates who have obtained a first or second class in the Honour School of Natural Science in the subject of Animal Physiology; (2) the above-mentioned certificate (c) is not required (i) from those who have obtained a first or second class in the Honour School of Natural Science in the subject of Chemistry, (ii) from those who passed the examinations for the degree of B.A. before the end of Trinity Term, 1886, and who were on March 16th, 1886, registered as medical students.

II. *For the First Examination.*—Fee: For Organic Chemistry, whether offered with or without the remaining subjects, 15s.; for the remaining subjects, £1 10s. Certificates: (a) A certificate of having passed either the Preliminary Examination in Mechanics and Physics, or the Final Pass School, Group C (4), or the examination in Mechanics and Physics of the medical statute in force up to Michaelmas Term, 1886; (b) a certificate of having passed either the Preliminary Examination in Chemistry, or the Final Pass School, Group C (2), or the examination in Chemistry of the medical statute in force up to Michaelmas Term, 1886; (c) a certificate of having passed either the Preliminary Examina-

tion or the Final Honour Examination in Animal Morphology and in Botany. Exemption: The above mentioned certificate (c) is not required from those who passed the examinations for the degree of B.A. before the end of Trinity Term, 1886, or who obtained a class in the Honour School of Natural Science in or before Trinity Term, 1888, in Animal Morphology or in Animal Physiology or in Botany.

For the Degree of Master of Surgery.—Fee: £5. Certificate: If the candidate be not already a member of the surgical staff of a recognised hospital, he must produce a certificate, countersigned by the Regius Professor of Medicine, of having acted in such a hospital as dresser or house-surgeon for six months.

ABERDEEN.

At the graduation ceremony on April 3rd, 1890, the following candidates receive Degrees in Medicine and Surgery:

Degree of M.D.—G. L. H. Milne, M.A., M.B., C.M., Forbes; R. Shiels, Edinburgh; J. Souter, M.A., M.B., C.M., Burghhead.

Degrees of M.B. and C.M.—J. A. Bruce, Glenrines; W. Bulloch, Aberdeen; H. F. Cameron, Aberdeen; H. G. Cowie, M.A., Turriff; W. Davidson, Oldmeldrum; H. G. Deans, M.A., Dun Echt; R. C. Duthie, M.A., Woodside; P. Fowle, Stornoway; T. Holt, Burnley, Lancashire; J. M. Key, Montrose; J. B. Lendrum, Huddersfield; A. B. Lyon, Banff; W. Macbain, Aberdeen; W. S. Park, M.A., St. Fergus; J. Rennie, Glenbucket; A. H. Rideal, Preston; J. H. Sken, Aberdeen; J. Smith, Inch; J. A. Sutherland, Argyllshire; C. W. T. Stephenson, Aberdeen; H. P. Taylor, Alnwick; J. Wilson, M.A., Banchoy; J. R. Levack, Aberdeen; J. McDonald, Kildrumny; A. C. Ross, Craigellachie, have passed the examinations for the degrees of M.B. and C.M., but will not graduate until they attain the necessary age.

Graduation Honours:

Highest Academical Honours.—W. Bulloch.

Honourable Distinction.—H. G. Cowie, M.A., W. Davidson, J. R. Levack, J. Rennie.

The diploma in Public Health will be conferred on the following candidates:

W. C. Dale, M.A., M.B., C.M., St. Helens; G. Reid, M.D., Stafford.

The University gold medals for the winter session, 1889-90, have been awarded as follows:

Five Jamieson Memorial Gold Medal in Anatomy.—H. Fraser, M.A.

Keith Gold Medal for Systematic and Clinical Surgery.—G. W. H. Tawse.

Shepherd Memorial Gold Medal for Systematic and Practical Surgery.—W. Findlay, M.A.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

BLOODLESS MEAT AND FISH.

IN connection with the article on "Shall we Eat Tuberculous Meat?" published in the JOURNAL on April 5th, Mr. J. Lawrence-Hamilton, M.R.C.S., Brighton, has forwarded an extract from his recently published report to the London County Council, in which he discusses the question of our food supply of bloodless fish, flesh, and fowl. He points out that the Mosaic law did not allow of the use of animals from which the blood had not been carefully drained by educated responsible "clerical veterinary practitioners," whose duty it was to reject any animal with any sort of blemish. "These priestly veterinary experts were appointed absolutely to protect and preside over the immediate interests and health of their entire people, and not to make loopholes for the sale and distribution of unsound, unhealthy, diseased, or otherwise improper food. They have always considered every killed animal unhealthy till its technical inspection and dissection after death shall have proved its goodness, as otherwise the carcass is forbidden to orthodox Jews. Blood and other fluids found in cattle putrefying more rapidly than flesh, muscle, or fat convinced Moses of the necessity to remove all blood. Modern science confirms this view by the microscope so frequently revealing putrefactive germs or bacteria or microbes in the blood and internal fluids of fish, flesh, and fowl, whilst their muscles and fat may still be quite healthy. But if the blood has once become contaminated by these putrefactive germs it is likely to at once infect the sound flesh, muscle, and fat."

After discussing the causes of putrefaction in flesh and fish Mr. Lawrence-Hamilton says that the statistics of the Jewish veterinary practitioners, or shechita board, show "that about one-quarter of the animals slaughtered under its conscientious inspection are declared to be unfit for human food according to the strict doctrines of the orthodox Jews. This veterinary-priestly Jewish board affixes a seal on all sound healthy meat killed according to the Jewish ritual, which may be called its ecclesiastical and sanitary duty, whilst its financial part, which is used to support the synagogues, consists in levying a light tax on a bullock of 4s. 3d.; a calf, of 1s. 6d.; a sheep, of 6d.; fowls to the traders,

each, of 1d.; turkeys and geese, each, 2d., their public paying for poultry an additional tax of one half-penny on each animal killed according to the Jewish ritual."

"Carefully concealing its previous history, the diseased meat condemned by the Jewish authorities is said to be sold in the metropolitan meat markets, and by Christian retail butchers as the best prime English meat."

Describing and criticising the Mosaic laws as regards fish, we are told that "it is curious that both Moses and his disciples, the Talmudists, appear all alike to have overlooked and omitted the forbidding of unbled and uncut fish, which is much more unhealthy, dangerous, and poisonous than unbled meat."

It is interesting to note how thoroughly the Jewish laws tinge most of the Continental regulations for the inspection of meat. Anyone who has gone through the abattoirs in Berlin and other large towns on the Continent, must have been struck by the fact that any animal in which the slightest trace of tuberculosis is found is never stamped as "first class." If it is allowed to pass into the market at all it is sold under special regulations, in a special market, and any customer purchasing it can see at a glance that it is not first class meat, and that before it is used it must be thoroughly cooked. It is, of course, sold at a cheaper rate. Similarly, any animal which, during life, has suffered from bruised muscles due to blows or fracture, is condemned to be sold as second class meat, either altogether or in part.

It is curious to observe in connection with Mr. Lawrence Hamilton's report on the Jewish code and its relation to ungutted fish, that few precautions are taken against the distribution and consumption of such food, even in those cities in which the most perfect system, as regards flesh meat, has been adopted, this being an additional argument in favour of the Jewish origin of most of the Continental regulations.

It remains for our legislators to adopt, directly or in a modified form, such portions of the Mosaic law as have been proved to be of value, and to fill up, with the aid of the knowledge and experience resulting from modern investigations, those gaps which are now known to exist, in order that we may have a more complete code of meat inspection and control.

HEALTH OF ENGLISH TOWNS.

DURING the week ending Saturday, April 5th, 5,345 births and 3,601 deaths were registered in twenty-eight of the largest English towns, including London, which have an estimated population of 9,715,559 persons. The annual rate of mortality in these towns, which had declined from 26.6 to 21.4 per 1,000 in the four preceding weeks, further fell to 19.3 during the week under notice. The rates in the several towns ranged from 10.5 in Huddersfield, 12.9 in Birkenhead, 14.1 in Nottingham, and 15.5 in Leicester to 25.0 in Wolverhampton, 27.1 in Plymouth, 27.8 in Newcastle-upon-Tyne, and 28.6 in Manchester. In the twenty-seven provincial towns the mean death-rate was 21.5 per 1,000, and exceeded by 4.8 the rate recorded in London, which was only 16.7 per 1,000. The 3,601 deaths registered during the week under notice in the twenty-eight towns included 351 which were referred to the principal zymotic diseases, against 364 and 426 in the two preceding weeks; of these, 145 resulted from whooping-cough, 80 from measles, 37 from diphtheria, 36 from diarrhoea, 34 from scarlet fever, 19 from "fever" (principally enteric), and not one from small-pox. These 351 deaths were equal to an annual rate of 1.9 per 1,000; in London the zymotic rate was 1.9, and corresponded with the mean rate in the twenty-seven provincial towns, among which the zymotic death-rates ranged from 0.0 in Preston and 0.5 in Norwich and in Birkenhead to 2.8 in Salford, 3.6 in Liverpool, 4.6 in Portsmouth, and 6.7 in Derby. Measles caused the highest proportional fatality in Liverpool, Plymouth, and Derby; whooping-cough in Derby, Liverpool, Newcastle-upon-Tyne, Bristol, and Salford; and "fever" in Sunderland. Scarlet fever showed no fatal prevalence in any of the twenty-eight towns. Of the 37 deaths from diphtheria recorded during the week under notice in these towns, 20 occurred in London, 5 in Salford, 2 in Manchester, and 2 in Sheffield. No fatal case of small-pox was registered during the week under notice, either in London or in any of the large provincial towns; and 4 cases of this disease were under treatment in the Metropolitan Asylums Hospitals on Saturday, April 5th. These hospitals contained 1,043 scarlet fever patients on the same date, against numbers steadily declining from 1,541 to 1,035 at the end of the thirteen preceding weeks; 84 cases were admitted during the week, against 73, 78, and 84 in the three previous weeks. The death-rate from diseases of the respiratory organs in London was equal to 3.5 per 1,000, and was considerably below the average.

HEALTH OF SCOTCH TOWNS.

In the eight principal Scotch towns 852 births and 624 deaths were registered during the week ending Saturday, April 5th. The annual rate of mortality in these towns, which had declined from 28.7 to 24.2 per 1,000 in the seven preceding weeks, further fell to 21.1 during the week under notice, but exceeded by 4.8 per 1,000 the mean rate during the same period in the twenty-eight large English towns. Among these Scotch towns the lowest death-rates were recorded in Greenock and Paisley, and the highest in Aberdeen and Glasgow. The 624 deaths registered in these towns during the week under notice included 105 which were referred to the principal zymotic diseases, equal to an annual rate of 4.1 per 1,000, which exceeded by 2.2 the mean zymotic death-rate during the same period in the large English towns. The highest zymotic death-rates were recorded in Perth, Edinburgh, and Leith. The 275 deaths registered in Glasgow included 22 from measles, 14 from whooping-cough, and 5 from "fever." In Edinburgh, 14 fatal cases of measles,

10 of whooping-cough, and 3 of diphtheria were recorded; and 6 deaths from measles occurred in Dundee. The death-rate from diseases of the respiratory organs in these towns was equal to 5.1 per 1,000, against 3.5 in London.

MEDICAL NEWS.

EXAMINING BOARD IN ENGLAND BY THE ROYAL COLLEGES OF PHYSICIANS AND SURGEONS.—The following gentlemen passed the Second Examination of the Board in Anatomy and Physiology at a meeting of the Examiners on March 31st, namely:

G. W. K. Crossland, E. W. S. Hughes, H. G. Paterson, and E. S. Steward, students of Yorkshire College, Leeds; J. Dulberg, of Wurzberg and Owens College, Manchester; H. G. Dain, A. J. Martin, and E. St. John Whitehouse, of Queen's College, Birmingham; W. H. Ligertwood, C. M. Phillips, J. C. Smyth, and E. White, of Bristol School of Medicine; J. C. Hepton, S. T. Lord, C. C. Preston, and W. M. Steintal, of Owens College, Manchester; C. M. Corkery, of Bombay and Queen's College, Cork; G. Browning, of Rennes, France; J. K. Troup, of Melbourne and Edinburgh; and A. J. Thomas, of University College, Liverpool.

Passed in Anatomy only.

J. E. Abbott, J. E. H. Mitchell, and J. Nicholson, of Yorkshire College, Leeds; W. W. Darlington and G. A. Wilkes, of Queen's College, Birmingham; T. Aspinall and J. N. Platt, of Owens College, Manchester; and S. Wilkinson, of University College, Liverpool.

Passed in Anatomy and Physiology on April 1st.

A. Billson and J. M. Nicol, of Yorkshire College, Leeds; R. P. Lawson, A. Hooton, A. H. McDougall, and J. D. Willis, of Owens College, Manchester; C. R. Batchellor, R. B. James, and J. A. H. White, of Queen's College, Birmingham; E. A. Duffield and R. C. Leonard, of Bristol School of Medicine; M. Ashley, of University College; F. J. Carter and J. M. Flavell, of St. Bartholomew's Hospital; and F. E. Rock, of Middlesex Hospital.

Passed in Anatomy only.

F. G. Doreyi W. Faull, and E. Howgate, of Yorkshire College, Leeds; S. A. Coad, of Leeds and St. Mary's Hospital; P. F. Howden, of Bristol School of Medicine; J. E. Hickman and H. H. Rubra, of Queen's College, Birmingham; H. W. Nott, of University College, Liverpool; H. A. Howes, of Owens College, Manchester; and H. E. Pittway, of Middlesex Hospital.

Passed in Physiology only.

E. G. C. F. Atchley, A. L. Flemming, and W. R. Hadwen, of Bristol Medical School; T. H. Wilkins, of Queen's College, Birmingham; and L. N. Gibbs, of St. George's Hospital.

Passed in Anatomy and Physiology on April 2nd.

H. L. Barnard and J. D. Jenkins, of London Hospital; V. T. Greenyer, H. B. Maingay, and J. S. Sloane, of St. Bartholomew's Hospital; C. Planck, W. Redpath, E. Smith, and K. B. J. Vickers, of St. Thomas's Hospital; H. Davies and F. T. Travers, of University College; B. W. Nankivell, of Middlesex Hospital; A. E. Hine and H. E. Oldfield, of Charing Cross Hospital; R. E. G. Phillips, of Guy's Hospital; D. C. Longden, of Edinburgh University; and T. H. J. C. Goodwin, of St. Mary's Hospital.

Passed in Anatomy only.

A. G. Cooley and E. Morton, of Sheffield Medical School; F. A. Robinson, of Guy's Hospital; C. J. Harrison, of University College; F. C. Fend, of St. Bartholomew's Hospital; G. E. Kinnersly, of St. Thomas's Hospital, and H. W. Hull, of London Hospital.

Passed in Physiology only.

P. S. Ewes, of University College.

Passed in Anatomy and Physiology on April 3rd.

E. D. McDougall and E. K. Perrine, of St. Bartholomew's Hospital; B. H. Kingsford, G. V. Benson, J. C. Durston, and E. P. Wrinch, of St. Thomas's Hospital; J. W. W. Stanton and W. E. Fry, of London Hospital; G. E. Mould and F. J. Poynton, of St. Mary's Hospital; T. H. Symons, of Charing Cross Hospital; W. F. Lucas and H. B. Long, of Middlesex Hospital; A. Gaskell and E. J. Smyth, of University College; A. J. Sharp, C. S. Pantin, J. W. Taylor, and R. C. Kirkby, of Guy's Hospital; W. Mansell-Woodhouse, T. S. Good, and N. Kirlington, of St. George's Hospital.

Passed in Anatomy only.

A. E. Weston, of St. George's Hospital; W. W. Hodgins and H. S. Revell, of University College; and A. A. Macfarlane, of St. Bartholomew's Hospital and Mr. Cooke's School of Anatomy and Physiology.

Passed in Physiology only.

V. Foote, of Charing Cross Hospital, and R. L. Meade-King, of St. Bartholomew's Hospital.

Passed in Anatomy and Physiology on April 5th.

J. T. Sear, of St. Thomas's Hospital; R. H. Castellote, of University College; H. W. Newton, of Middlesex Hospital; W. J. Johnson, of Guy's Hospital; and E. E. Francis, of St. Bartholomew's Hospital.

Passed in Anatomy only.

E. H. Worth and A. Marshall, of St. Thomas's Hospital; T. Streatfield, of University College; C. M. Greenway and J. J. E. Biggs, of Guy's Hospital; H. L. Powys, of London Hospital and Mr. Cooke's School of Anatomy and Physiology; S. P. Hopewell, of London Hospital; B. A. Lukmani, of Bombay and Mr. Cooke's School of Anatomy and Physiology; F. Wall, of Ceylon and Mr. Cooke's School of Anatomy and Physiology; J. E. Phillips, T. Stevens, and W. A. Powell, of Charing Cross Hospital; and A. C. Durham, of London Hospital and King's College.

Passed in Physiology only.

B. Cooper, of St. George's Hospital; P. Northcote and C. Hodgson, of St. Thomas's Hospital; P. V. Hughes and K. W. Prentice, of King's College; E. H. Smith and R. R. H. Wonnacott, of London Hospital; W. B. Winckworth, of Westminster Hospital; W. W. Lacey, of St. Bartholomew's Hospital.

mew's Hospital and Mr. Cooke's School of Anatomy and Physiology; G. E. Clarkson, of St. Bartholomew's Hospital; E. S. Dukes, of Guy's Hospital; and R. Evans, of University College and Owens College.

Passed in Anatomy and Physiology on April 7th.

A. H. Woodcock and H. G. Toombs, of St. Thomas's Hospital; M. W. W. Curtis and A. M. Mills, of Middlesex Hospital; S. C. Cresswell, F. G. Hopkins, and H. D. Eccles, of Guy's Hospital; S. A. Bull and T. E. Harper, of Westminster Hospital; A. R. Rendle and H. S. Elliott, of St. George's Hospital; F. N. Grinling, D. Keele, I. Costa, and G. Read, of University College; W. Shears, K. Rogers, W. N. Roden, and H. M. Sylvester, of St. Bartholomew's Hospital; D. O. Thomas, of Indiana and St. Bartholomew's Hospital; H. J. Cummings, of Trinity University, Toronto.

Passed in Anatomy only.

G. R. Swinhoe, of St. Thomas's Hospital; A. P. Brice, of Westminster Hospital; and B. W. Swenden, of St. George's Hospital.

Passed in Physiology only.

C. F. P. Baly and C. F. Van Geycel, of University College; H. J. Clark, of St. Thomas's Hospital; F. A. M. Flegg, of St. Thomas's Hospital and Mr. Cooke's School of Anatomy and Physiology; S. Infield, of Guy's Hospital; and H. E. Dalby, of Charing Cross Hospital.

Passed in Anatomy and Physiology on April 8th.

H. Cogill, H. A. D. Dickson, and W. Stokes, of St. Thomas's Hospital; E. H. Helby and N. I. Smith, of Middlesex Hospital; C. N. C. Walch, R. C. Tweedy, and A. C. Underwood, of St. Bartholomew's Hospital; C. P. T. Edwards, A. D. Heath, S. R. Schofield, and A. Y. Fullerton, of University College; W. S. H. Sequeira, of London Hospital; G. C. Hayes, of Melbourne and King's College; C. F. Warren, of St. Mary's Hospital; and R. N. Moon, of Guy's Hospital.

Passed in Anatomy only.

H. Potts, of University College; J. H. Compton and O. C. Worthington, of Guy's Hospital; and B. Brook, of King's College.

Passed in Physiology only.

A. W. Wilson, of Melbourne and Middlesex Hospital; R. B. Williams, of St. Thomas's Hospital and Mr. Cooke's School of Anatomy and Physiology.

THE new Hospital for Women, Euston Road, will be open on April 24th; the old building in Marylebone Road is now closed.

OF 414 students who matriculated this year at the University of Copenhagen, 11 were women, 3 of whom had passed their "maturity" examination with the highest distinction.

THE Lord Chancellor has placed Mr. John St. J. Wilders, senior surgeon to the Queen's Hospital, upon the commission of the peace for the city of Birmingham.

NORWAY, which has a population of 2,000,000 souls, is divided into 152 medical districts, with 581 doctors and 89 druggists' shops.

THE Empress Frederick of Germany has given 4,000 marks (£200) to the Seaside Sanatorium for Children at Norderney in Schleswig.

IT has been decided at a special general meeting of the Governors of the Royal London Ophthalmic Hospital to petition for a Royal Charter of Incorporation.

THE Duchess of Fife has consented to open a grand fancy bazaar on June 4th in aid of the funds of University College Hospital in the College grounds, Gower Street.

DR. ERNEST WILLIAM SKINNER has been unanimously elected Mayor of Winchelsea, one of the ancient towns of the Cinque Ports.

SIR HENRY LOCH, the Governor of Capetown, laid on April 8th the foundation-stone of the new Leper Hospital on Robben Island.

ACCORDING to official statistics, there were 234 medical practitioners, 13 dentists, 107 midwives, and 141 pharmacists in Lisbon on January 1st, 1890.

AT the thirty-eighth annual commencement of the Women's Medical College of Pennsylvania on March 13th, the degree of Doctor of Medicine was conferred on forty candidates. One of these ladies is an Englishwoman.

By a recent enactment of the Argentine Republic, ships carrying patients suffering from beri-beri are to be considered suspect, and all passengers must be landed and kept in quarantine for the usual period. The ships must also be thoroughly disinfected.

INSANITARY BOARD SCHOOLS.—The Islington Vestry General Purposes Committee, after considering letters from the Vestries of Kensington and Wandsworth in favour of a searching inquiry into the affairs of the London School Board, so far as relates to the acquisition of sites and the construction of schools, have recommended that a petition be presented to the House of Commons praying for the appointment of the Commission for the purpose.

To mask the taste of antipyrin, M. Batterny (*Lyon Médical*) recommends adding an infusion of coffee with milk to the watery solution of the drug. Soda water also, with currant or raspberry syrup, will both disguise the unpleasant taste of the medicine and lessen its disturbing action on the stomach.

DEATH FROM CHLORODYNE.—A retired baker, named Maysent, living at Tunbridge Wells, is reported to have died from the effects of an overdose of chlorodyne. The jury, in returning a verdict of "death by misadventure," added a rider expressing the opinion that the sale of chlorodyne should be restricted.

SUCCESSFUL INOCULATION OF PSORIASIS.—Destot (*Providence Médicale*, June 8th, 1889; *Annales de Derm. et de Syph.*, February, 1890), succeeded in inoculating himself with psoriasis from a child by the insertion of scales into the skin of the shoulder on May 9th. On May 25th, it is stated, that there were patches of psoriasis on both elbows.

DEVON AND EXETER MEDICO-CHIRURGICAL SOCIETY.—A meeting of this Society was held at the Devon and Exeter Hospital on March 21st; Arthur J. Cumming, F.R.C.S., President, in the chair. Mr. Domville opened a discussion on antiseptics and their value in surgical practice. An interesting discussion followed, in which many members of those present took part. We are informed that the Society already numbers over 50 members, and is well supported by the medical men of Exeter and the neighbourhood.

PHARMACY IN PORTUGAL.—A committee has been appointed to consider the steps to be taken for the reform of pharmaceutical teaching and the better regulation of pharmaceutical practice in Portugal. The committee includes the names of most of the leading teachers of pharmacy in Portugal, Senhor Joao José de Sousa Telles, President of the Lusitanian Pharmaceutical Society, being the President, and Senhor Emilio Frago, editor of the *Gazeta de Pharmacia*, the Secretary.

PRESENTATIONS.—Mr. H. Culliford Hopkins, M.R.C.S. Eng., L.R.C.P. Edin., Surgeon to the Bath City Police, has been presented by the Bath City Police force with a handsome silver punch-bowl, in recognition of his undeviating kindness and attention.—Mr. P. M. Scatliff, M.R.C.S. Eng., L.R.C.P. Lond., was presented by the ladies of the Lordship Lane Branch of the St. John Ambulance Association with a very handsome case of silver afternoon tea-spoons and tongs, as a mark of their appreciation of his services as honorary lecturer to the class recently concluded.

SMALL-POX AND VACCINATION.—A neat little demonstration of the protective influence of vaccination has recently been given by the "logic of events" in Germany. The town of Gladbach, in the Rhine province of Prussia, was visited by an epidemic of small-pox. Of a population of 47,800, 94 persons were attacked, of whom 48 were vaccinated, 38 revaccinated, and 8 not vaccinated. The number of deaths in these three categories was 9 in the first, 1 in the second, and 4 in the third. These figures show a death-rate of 50 per cent. among unprotected, 18.75 per cent. among partly protected, and 2.63 per cent. among better protected persons.

BEQUESTS.—Mr. Philip Falk bequeaths by his will £200 to the Jews' Hospital, £100 to the Home for the Jewish Deaf and Dumb (Notting Hill), £50 each to the Institution for the Relief of the Indigent Blind of the Jewish Persuasion (Duke Street, Aldgate), the Jews' Convalescent Home (South Norwood), University College Hospital, the London Hospital, St. Mary's Hospital (Paddington), Great Ormond Street Hospital for Sick Children, the Male Lock Hospital (Dean Street), the Female Lock Hospital (Paddington).—Miss Clara Waddington, sister of the late Dean Waddington, of Durham, has bequeathed the sum of £2,000 to the Durham County Hospital free of legacy duty.

NOTIFICATION IN SOUTH AMERICA.—The introduction of the notification of infectious diseases by the municipal authorities of Rosario, a town of the Argentine Republic, has created a state of acute tension between them and the local medical practitioners, who strongly object to having this duty thrust upon them. The municipality no doubt means well, but its zeal for sanitary reform would seem to be not altogether according to knowledge, since venereal diseases are apparently included among those which must be notified. It is not easy to understand what public benefit could follow the notification of such cases, but it is obvious that in a small town it would be pretty sure to give rise to the gravest social and domestic complications.

INTERNATIONAL MEDICAL CONGRESS.—The programme of the Section of Medicine is not yet definitively arranged, but it is probable that the following subjects, among others, will be discussed: the Treatment of Diseases of the Heart and Kidney; of Various Forms of Anæmia; of Phthisis, particularly in special hospitals; of Diabetes; of Gallstones; of Uræmia; and of Locomotor Ataxy. Sir Andrew Clark will deliver an address on the Bearing of the Exclusive Bacillary Theory of Tuberculosis on the Clinical History of Phthisis; and Dr. Ord will introduce a discussion on Myxœdema. Among the non-German physicians who have promised communications are Drs. W. Osler, of Baltimore; Andrew H. Smith, A. S. Loomis, and Jacoby, of New York; Lépine, of Lyons; Dujardin-Beaumetz, of Paris; Pavy, of London; and Grainger Stewart, of Edinburgh. Further particulars may be obtained from Mr. G. H. Makin, 2, Queen Street, Mayfair.

BRADFORD MEDICO-CHIRURGICAL SOCIETY.—At a recent meeting of the Bradford Medico-Chirurgical Society Dr. Major showed a case of alcoholic paralysis associated with pleurisy, pointing to incipient phthisis, which is so frequently associated with that disease. In discussing Dr. G. Carter's paper on Landry's Paralysis, which will be published in the JOURNAL, Dr. Major inclined to attribute the affection to a toxic cause, as indicated by the frequent implication of the spleen, while Dr. Rabagliati believed it to be due to changes in the fluid of the central canal of the spinal cord. Drs. Goyder, Bell, and Kerr also joined in the discussion, the latter stating that he had seen a fatal case of poisoning by bromidia presenting exactly similar symptoms. A paper was also read by Dr. Major on the Position and Duties of Private Practitioners under the New Lunacy Act.

INFECTIOUS DISEASES IN ITALY.—The following are the official statistics of cases of infectious disease notified in Italy (the population of which was 30,565,253 on January 31st, 1888) during the month of January in 1890 and 1889 respectively: Small-pox, 2,317 in 1890, as against 52,341 (?) in 1889; measles, 9,946, as against 5,478; scarlet fever, 1,599, as against 3,692; diphtheria, 2,314, as against 3,431; typhoid, 2,615, as against 3,158; typhus, 114, as against 160; puerperal fever, 597, as against 734. There were besides 79 cases of malignant pustule and 6 of rabies in January, 1890, while Italy showed a clean bill of health in respect of both these diseases in the corresponding period of 1889. In January, 1890, 178,679 cases of influenza were reported, but that number does not adequately indicate the prevalence of the epidemic, as influenza not being in the list of notifiable diseases, many communes did not send in any return relative thereto.

HORSE SHOEING.—Periodically the discussion of this interesting subject recurs, sometimes in the daily press, but more frequently in the pages of weekly journals devoted to "sports and pastimes." Recently several meetings have been held to consider this matter at the Animals' Institute, where at the present time there is an exhibition of horseshoes, interesting and complete, perhaps more complete in demonstrating that the number of useless inventions far exceeds those of practical merit in dealing with horses' feet. As a rule more harm than good is caused by an exhibition of this kind to the general public and the "horsey amateur." The latter often proceeds to experiment upon information afforded by exhibits to the disaster of his faithful four-footed servant, and travels over ground long cleared of every blade of grass by the skilled and trained student of farriery and veterinary surgery. It is gratifying to know that in effect the result of the deliberations at the Animals' Institute was to establish that a piece of iron bent to the shape of the foot, pierced with holes, and with its centre of bend thinner than its branches and extremities, was, in the opinion of the meeting, the best and most economical, especially in the face of the formidable array of inventions exhibited. The Institute has arrived at a wise decision; in fact, it is a decision endorsing the opinion of several generations of horseshoers, and there is nothing at all novel in the matter. For a horseshoe a practical test is always at hand: If it cannot be used, of what service are the brilliancy of the idea and depth of thought exhibited in elaboration of detail? The harm done in horseshoeing is not that caused by the principle of the shoe, but by the ignorance, carelessness, or want of ability on the part of the smith in fitting. We do not want new principles so much as a careful, painstaking, thoughtful manipulation of the iron in fitting, to render it suitable to the organ to which it is to be applied.

MEDICAL VACANCIES.

The following Vacancies are announced:

- BETHLEHEM HOSPITAL.**—Two Resident Clinical Assistants; doubly qualified. Residence in the hospital for term not exceeding six months, with apartments, rations, and attendance. Applications to John Baggally, Esq., Bridewell Hospital, Blackfriars, by April 12th.
- BIRMINGHAM AND MIDLAND HOSPITAL FOR WOMEN.**—A vacancy exists in the Honorary Acting Out-patient Staff. Applications to the Honorary Secretary, Mr. Russell Jolly, 43, Waterloo Street, Birmingham, by April 28th.
- BIRMINGHAM GENERAL DISPENSARY.**—Resident Surgeon. Double qualification. Salary, £100 per annum, and £30 for cab hire. Applications, with testimonials and certificates of registration, to the Secretary by April 17th.
- BOLTON INFIRMARY AND DISPENSARY.**—Junior House-Surgeon. Double qualification. Salary £100 per annum (increasing to £150, by £10 annually) with furnished apartments, board, and attendance. Applications to be addressed to Mr. Kevan, Honorary Secretary, 12, Acresfield, Bolton, by April 28th.
- CHELSEA HOSPITAL FOR WOMEN, Fulham Road.**—Resident Medical Officer, fully qualified. Salary, £80 per annum, with board and residence. Applications by April 16th to the Secretary, A. C. Davis.
- CITY OF LIVERPOOL.**—Medical Officer to the Main Bridewell. Double qualification. Salary £110 per annum, to include cost of medicines, medical appliances, etc. Applications, endorsed: "Application for appointment of Medical Officer to Main Bridewell," to be addressed to the Chairman of the Watch Committee, under cover to the Town Clerk, Municipal Offices, Dale Street, Liverpool, by April 14th.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.**—Pathologist; must be registered and not engaged in practice. Salary, 100 guineas per annum. Applications by April 16th to the Secretary, T. Storrar-Smith.
- ENNISKILLEN UNION (Ely Dispensary).**—Medical Officer. Salary, £115 per annum and fees. Applications to Mr. John Trotter, Honorary Secretary; Mully Kevill, Derrygonnelly. Election on April 14th.
- FEMALE LOCK HOSPITAL, Harrow Road, W.**—House-Surgeon. Candidates must be Members of the Royal College of Surgeons. Salary, £100 per annum, and board and lodging. Applications by April 14th to the Secretary.
- GENERAL INFIRMARY, Leeds.**—Resident Officer at the Ida Hospital. Appointment for six months, with honorarium of £25. Board, lodging, and washing in the Infirmary. Applications to the Secretary to the Faculty, 19, Queen Street, Leeds, by April 19th.
- GENERAL INFIRMARY, Leeds.**—Two House-Physicians (one for six and one for twelve months). Board, lodging, and washing. Applications to the Secretary to the Faculty, 19, Queen Street, Leeds, by April 19th.
- GENERAL INFIRMARY, Leeds.**—Two House-Surgeons. Board, lodging, and washing. Applications to the Secretary to the Faculty, 19, Queen Street, Leeds, by April 19th.
- HENDON RURAL SANITARY AUTHORITY.**—Sanitary Medical Officer. Salary, £100 per annum. Applications, endorsed "Application for Sanitary Medical Officer," to be sent to W. A. Tooteil, Clerk, Edgware, by April 21st.
- HOLBORN UNION.**—Assistant Medical Officer at the Infirmary, Archway Road, Upper Holloway, N.—Salary, £100 per annum, with board, lodging, and washing. Applications to James W. Hill, Clerk to the Guardians, Clerk's Offices, Clerkenwell Road, E.C., by April 15th.
- LANCASTER COUNTY ASYLUM, Whittingham.**—Experienced Pathologist. Salary, £200 per annum, with board, lodging, washing, and attendance. Applications to Dr. Wallis, the Medical Superintendent.
- LONDON COUNTY ASYLUM, Colney Hatch.**—Medical Superintendent. Salary, £1,000 per annum, with a furnished house, coals, gas, etc. Age not to exceed 50. Double qualification. Must have had similar experience. Applications (on forms furnished) to be sent in by April 23rd to the clerk, R. Partridge, London Asylums Committee Office, 40, Craven Street, Strand.
- MACCLESFIELD GENERAL INFIRMARY.**—Senior House-Surgeon; must be doubly qualified. Salary, £100 for first year, an increase of £10 the second year, with board and residence. Applications to "Chairman House Committee" by April 12th. Election April 25th.
- NORFOLK AND NORWICH HOSPITAL, Norwich.**—Assistant to House-Surgeon. Must possess one qualification. Appointment for six months only. No salary, but board, residence and washing. Applications to the House-Surgeon, H. C. Nance, by April 22nd.
- OWENS COLLEGE, Manchester.**—Demonstrator in Materia Medica and Pharmacy. Salary, £100 per annum. Applications addressed to the Senate under cover to the Registrar, H. W. Holder, by April 15th.
- OWENS COLLEGE, Manchester.**—Senior Demonstrator in Physiology. Salary, £150 per annum. Applications by April 28th to the Registrar, Henry Wm. Holder, M.A.
- PADDINGTON GREEN CHILDREN'S HOSPITAL, London, W.**—House-Surgeon. Salary, £50 per annum, with board and residence. Applications to the Secretary by April 22nd.
- QUEEN'S HOSPITAL, Birmingham.**—One House-Physician. Salary, £50 per annum, tenable for one year. Double qualification. Applications to the Secretary by April 24th.
- QUEEN'S HOSPITAL, Birmingham.**—One House-Surgeon. Salary, £50 per annum, tenable for one year. Double qualification. Applications to the Secretary by April 24th.
- QUEEN'S HOSPITAL, Birmingham.**—One Obstetric and Ophthalmic House-Surgeon. Salary, £10, tenable for six months, with board, lodging and washing. Applications to the Secretary by April 24th.
- RANGOON MUNICIPALITY.**—Health Officer. Salary, Rs. 600 per mensem, rising by annual increments of Rs. 50 to Rs. 1,000. Private practice debarred. Applications to J. Short, Secretary, by June 1st.

STOCKTON-ON-TRES HOSPITAL AND DISPENSARY.—House-Surgeon (non-resident), doubly qualified; to reside near the hospital and give whole time. Salary, £200 per annum. Applications to the Secretary, John Settle, by April 12th.

WALSALL AMALGAMATED FRIENDLY SOCIETIES MEDICAL ASSOCIATION.—Resident Medical Officer. Married. Salary, £200 per annum, with unfurnished residence. Applications to the Secretary, James Kimberley, 61, Williams Street, Walsall, by April 22nd.

YORK COUNTY HOSPITAL.—Senior House-Surgeon, duly qualified. Salary, £100, with board and residence. Candidates to state whether, if elected, they would be willing to take the Assistant's post (he being a candidate for the appointment). Applications to C. E. Pinfold, Secretary, by April 22nd.

MEDICAL APPOINTMENTS.

BARRETT, R. H., L.R.C.P., M.R.C.S., appointed Medical Officer for the 2nd and 3rd B. Districts of the Wisbech Union, *vice* E. Welchmann, L.R.C.P., M.R.C.S., resigned.

BENHAM, H. A., M.D., C.M.Aberd., L.S.A., appointed Medical Superintendent at the Fishponds Lunatic Asylum, *vice* Dr. Thompson.

BLACK, R. S., M.A., M.B., D.P.H.Aberd., appointed (Clinical Assistant to the South-Western Fever Hospital (Metropolitan Asylums Board), Stockwell, *vice* A. W. Carter, M.B. Edin.

BRADSHAW, James C., L.R.C.P., L.R.C.S., C.P.H., reappointed Medical Officer of Health to the Brackley Rural Sanitary Authority for two years.

CAMPBELL, H. Gordon, appointed Resident Clinical Assistant to Dundee Royal Asylum.

CHALMERS, Quintin, M.D. Glasg., appointed Medical Officer to the Commercial Travellers' Society of Scotland, *vice* Professor Wm. Leishman, M.D.

CLOTHIER, H., M.D., L.R.C.P. Lond., reappointed Medical Officer of Health to the Hornsey Urban Sanitary Authority.

CREASY, R., L.R.C.P., M.R.C.S., reappointed Medical Officer and Public Vaccinator to the 2nd District of the Winslow Union.

DANIEL, E. P., M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Surgeon to St. Peter's Hospital for Stone, Henrietta Street, Covent Garden, *vice* E. L. Pauli, M.R.C.S.

DEVEREUX, W. C., M.R.C.S., L.R.C.P., appointed Assistant House-Surgeon to the General Hospital, Birmingham, *vice* T. G. Crump.

DRAGE, Lovell, M.A., M.B., M.R.C.S., reappointed Medical Officer of Health to the Hatfield Rural Sanitary District.

FISHER, J. A., L.R.C.P. Edin., L.M., L.F.P.S. Glasg., reappointed Medical Officer of Health to the Garston Local Board.

GANGE, F. A., M.D. St. And., M.R.C.S., L.S.A., reappointed Medical Officer of Health to the Faversham Rural Sanitary Authority.

GOODE, Charles Fox, M.R.C.S. Eng., L.S.A., appointed Medical Officer to the Northern District and Vaccination Officer of the Eastern District of the Parish of Brighton, *vice* John Hams Ross, M.D.

HARRIS, A. Wellesley, M.R.C.S., L.S.A., D.P.H., appointed Medical Officer of Health to the Borough of Southampton—not, as stated, to the Southampton Infectious Diseases Hospital.

HUTCHINSON, Jonathan, F.R.C.S., appointed Honorary Consulting Surgeon to the Jewish Home for Incurables.

ILLINGWORTH, Charles R., M.D., M.R.C.S., appointed Surgeon to the Altham Collieries, near Accrington, *vice* John William Irvine, L.R.C.S.

JARDINE, Robert, M.D. Edin., C.M., M.R.C.S. Eng., appointed Physician in the Department of Diseases of the Chest, Glasgow Public Dispensary.

JONES, Hugh R., M.A., M.B. Cantab., B.Sc. Lond., appointed Honorary Assistant-Surgeon to the Liverpool Hospital for Cancer and Skin Diseases.

LANGWILL, Hamilton G., M.B., C.M., appointed Resident Physician to the Royal Edinburgh Hospital for Sick Children.

LEON, John T., B.Sc. Lond., F.I.C., F.C.S., appointed to the post of Demonstrator of Chemistry and Assistant Lecturer on Physics.

McGOWAN, W. S., M.A., M.B., C.M., appointed House-Surgeon to the Alnwick Infirmary, *vice* Dr. J. Duncan.

MACGREGOR, D. A., M.B. Edin. and C.M., reappointed Medical Officer of Health to the High Hoyaland Division of the Penistone Union Rural Sanitary Authority.

McLEAN, Chas. J. Russell, M.D., M.S. Edin., reappointed Medical Officer of Health for the Yeardon Urban Sanitary District.

MORCOM, A., L.R.C.S. Edin., L.M., L.S.A., reappointed Medical Officer of Health to the Luton Rural Sanitary Authority.

MOYNHAN, B. G., M.B., M.S. Lond., F.R.C.S., appointed Resident Surgical Officer to the General Infirmary, Leeds, *vice* H. Littlewood, F.R.C.S.

MUMF, Dr., appointed a Medical Officer to the Workhouse of the Belfast Union.

OSBALDESTON, L. Fredk., M.R.C.S. Eng., L.S.A., reappointed Medical Officer to the 3rd District of the Hatfield Union.

PARKER, Charles A., M.R.C.S., appointed Resident Medical Officer to the Hospital for Diseases of the Throat, Golden Square, *vice* H. B. Brackenbury.

PATCHETT, B. A., L.R.C.S. Edin., reappointed Medical Officer to the Chipping District of the Clitheroe Union.

POWELL, William, L.R.C.P., M.R.C.S., appointed Surgical Registrar to Westminster Hospital.

PRESTON, H. T., M.B., C.M., M.R.C.S. Eng., reappointed Medical Officer for the Wolverley District of the Kidderminster Union.

SANDERS, W. G. W., M.B., appointed Resident Physician to the Royal Edinburgh Hospital for Sick Children.

SERGEANT, E., L.R.C.P. Lond., M.R.C.S., L.S.A., Medical Officer of Health for Bolton, appointed Medical Officer of Health for the Lancashire County Council.

SEARMAN, John Schutze, M.R.C.S., appointed Surgeon to the Finsbury Dispensary, Brewer Street, Goswell Road, *vice* John Sharman.

SKINNER, Ernest W., M.B., C.M. Edin., appointed Medical Officer of Health to the Bye Rural Sanitary Authority.

SMITH, Fredk. J., B.A., M.B., M.R.C.P. Lond., appointed Consulting Physician to the Jewish Home for Incurables.

SMITH, K. R., M.D. Lond., B.S., M.R.C.S., appointed Medical Officer for the 7th and 8th Districts of the Totnes Union, *vice* J. A. B. Thompson, M.D. Glasg., resigned.

SWALLOW, F. McDonald, L.R.C.P., L.R.C.S. Edin., L.S.A., reappointed Medical Officer of Health to the Silkestone District of the Penistone Union Rural Sanitary Authority.

VAISEY, T. F., M.R.C.S., L.S.A., reappointed Medical Officer and Public Vaccinator to the 1st District of the Winslow Union.

WATSON, Thomas, M.D. Glasg. and C.M., reappointed Medical Officer of Health to the South Stockton Urban Sanitary District.

WHEATSON, S. W., M.D., M.R.C.P., M.R.C.S., etc., appointed Registrar and Chloroformist to the Royal Hospital for Children and Women, Waterloo Bridge Road, *vice* Dr. Orr.

WILSON, A. C. J., L.R.C.P. Edin., L.M., M.R.C.S. Eng., reappointed Medical Officer of Health to the Penistone Union Rural Sanitary District.

WORBOYS, Thomas Saunders, M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Surgeon to the Wrexham Infirmary and Dispensary, *vice* Edward A. Clarke, L.S.A.

DIARY FOR NEXT WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Mr. Meredith: On the Present Position of Abdominal Surgery.

ODONTOLOGICAL SOCIETY OF GREAT BRITAIN, 8 P.M.—Mr. Henry Sewill: On some points in the Etiology and Pathology of Dental Caries, illustrated by Microphotographs of the Tissues exhibited on the Screen by Mr. Andrew Pringle, and the original slides shown under the microscope. Mr. W. Scott-Thomson: Casual Communications.

TUESDAY.

PATHOLOGICAL SOCIETY OF LONDON, 20, Hanover Square, 8.30 P.M.—Brigade-Surgeon Myers: Perforating Ulcer of Duodenum. Mr. Harry Fenwick: Spontaneous Fracture of Urinary Calculus. Mr. Buckton Browne: Spontaneous Fracture and Reunion of Vesical Calculi. Mr. Anthony Bowlby: Melanotic Epithelioma (two specimens). Mr. E. Solly: Melanotic Carcinoma of Labium. Mr. James Berry: Fibrochondroma of Tongue. Mr. D'Arcy Power: Fracture of Patella from Direct Violence. Dr. Montague Murray: Four Sacculated Aneurysms arising from Dilated Aortic Arch. Mr. Jonathan Hutchinson, jun.: Calcareous Nodule of Skin. Card Specimens: Mr. H. D. Rolleston: Separation of Symphysis Pubis. Mr. Shattock: Necrosis Sica of Digital Phalanx.

WEDNESDAY.

ROYAL MICROSCOPICAL SOCIETY, 20, Hanover Square, 8 P.M.—Mr. W. West: Fresh-water Algae of North Wales. Mr. M. Hartog: The state in which Water exists in Live Protoplasm.

ROYAL METEOROLOGICAL SOCIETY, 25, Great George Street, Westminster, 7 P.M.—Mr. Charles Harding: On the Cold Period at the beginning of March, 1890. Mr. J. E. Clark: Note on a Whirlwind. Mr. Albert E. Watson: On the possibility of Forecasting the Weather by means of Monthly Averages. Mr. W. B. Tripp: On the Rainfall of the Globe.

THURSDAY.

HARVEIAN SOCIETY OF LONDON, 8.30 P.M.—Mr. J. R. Lane: Urethral Chancres. Dr. Sidney Phillips: On the Symptoms connected with the Circulation in Diphtheria.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 5s. 6d., which sum should be forwarded in Post Office Order or stamps with the notice not later than Wednesday morning, in order to ensure insertion in current issue.

BIRTHS.

BARRETT.—On March 4th, at 21, Learmouth Terrace, Edinburgh, the wife of W. H. Barrett, M.D., of a son.

CHEESEWRIGHT.—On Easter Sunday, at Rawmarsh, Rotherham, the wife of John F. Cheesewright, M.R.C.S. Eng., of a son.

DEATH.

POLLARD.—On March 29th, at Southlands, Torquay, William Pollard, F.R.C.S. Eng., in his 71st year. Deeply regretted.

SCALE OF CHARGES FOR ADVERTISEMENTS IN THE "BRITISH MEDICAL JOURNAL."

Seven lines and under	£0 3 6
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NOTICE.—Advertisers are requested to observe that it is contrary to the Postal Regulations to receive at Post-Offices letters addressed to initials only.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

- CANCER, Brompton (Free).** *Hours of Attendance.*—Daily, 2. *Operation Days.*—Tu. S., 2.
- CENTRAL LONDON OPHTHALMIC.** *Operation Days.*—Daily, 2.
- CHARING CROSS.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M. 1.30; Dental, M. W. F., 9.; Throat and Ear, F., 9.30. *Operation Days.*—M., 3; Th. 2.
- CHELSEA HOSPITAL FOR WOMEN.** *Hours of Attendance.*—Daily, 1.30. *Operation Days.*—M. Th., 2.30.
- EAST LONDON HOSPITAL FOR CHILDREN.** *Operation Day.*—F., 2.
- GREAT NORTHERN CENTRAL.** *Hours of Attendance.*—Medical and Surgical, M. Tu. Wed. Th. F., 2.30; Obstetric, W., 2.30; Eye, Tu. Th., 2.30; Ear, M. F., 2.30; Diseases of the Skin, W., 2.30; Diseases of the Throat, Th., 2.30; Dental Cases, W., 2. *Operation Day.*—W., 2.
- GUY'S.** *Hours of Attendance.*—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, daily, 1.30; Throat, F., 1. *Operation Days.*—(Ophthalmic), M. Th., 1.30; Tu. F., 1.30.
- HOSPITAL FOR WOMEN, Chelsea.** *Hours of Attendance.*—Daily, 10. *Operation Days.*—M. Th., 2.
- KING'S COLLEGE.** *Hours of Attendance.*—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, daily, 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, Tu. Th., 9.30. *Operation Days.*—Tu. F. S., 2.
- LONDON.** *Hours of Attendance.*—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. *Operation Days.*—M. Tu. W. Th. S., 2.
- METROPOLITAN.** *Hours of Attendance.*—Medical and Surgical, daily, 9; Obstetric, W., 2. *Operation Day.*—F., 9.
- MIDDLESEX.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, M. Th., 1.30; o.p., M. F., 9, W. 1.30; Eye, Tu. F., 9; Ear and Throat, Tu., 9; Skin, Tu., 4, Th. 9.30; Dental, M. W. F., 9.30. *Operation Days.*—W., 1, S., 2; (Obstetric), W., 2.
- NATIONAL ORTHOPÆDIC.** *Hours of Attendance.*—M. Tu. Th. F., 2. *Operation Day.*—W., 10.
- NORTH-WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, Tu., 2; Dental, F. 9. *Operation Day.*—Th., 2.30.
- ROYAL FREE.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Dental, Th. 9. *Operation Days.*—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.
- ROYAL LONDON OPHTHALMIC.** *Hours of Attendance.*—Daily, 9. *Operation Days.*—Daily, 10.
- ROYAL ORTHOPÆDIC.** *Hours of Attendance.*—Daily, 1. *Operation Day.*—M. 2.
- ROYAL WESTMINSTER OPHTHALMIC.** *Hours of Attendance.*—Daily, 1. *Operation Days.*—Daily.
- ST. BARTHOLOMEW'S.** *Hours of Attendance.*—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; Orthopædic, M., 2.30; Dental, Tu. F., 9. *Operation Days.*—M. Tu. W. S., 1.30; (Ophthalmic), Tu. Th., 2.
- ST. GEORGE'S.** *Hours of Attendance.*—Medical and Surgical, M. Tu. F. S., 12; Obstetric, Th. 2; o.p., Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopædic, W., 2; Dental, Tu., S., 9. *Operation Days.*—Th., 1; (Ophthalmic), F., 1.15.
- ST. MARK'S.** *Hours of Attendance.*—Fistula and Diseases of Rectum, males, W., 8.45; females, Th., 8.45. *Operation Days.*—M., 2, Tu. 2.30.
- ST. MARY'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.45, o.p., 1.30; Obstetric, Tu. F., 1.45; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopædic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electrotherapeutics, Tu. F., 2; Dental, W. S., 9.30; Consultations, M., 2.30. *Operation Days.*—Tu., 1.30; (Orthopædic), W., 11; (Ophthalmic), F., 9.
- ST. PETER'S.** *Hours of Attendance.*—M., 2 and 5, Tu., 2, W., 2.30 and 5, Th., 2, F. (Women and Children), 2, S., 3.30. *Operation Day.*—W. 2.30.
- ST. THOMAS'S.** *Hours of Attendance.*—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. *Operation Days.*—W. S., 1.30; (Ophthalmic), Tu., 4, F., 2.
- SAMARITAN FREE FOR WOMEN AND CHILDREN.** *Hours of Attendance.*—Daily, 1.30. *Operation Day.*—W., 2.30.
- THROAT, Golden Square.** *Hours of Attendance.*—Daily, 1.30; Tu. and F., 6.30. *Operation Day.*—Th., 2.
- UNIVERSITY COLLEGE.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetrics, M. W. F., 1.30; Eye, M. Th., 2; Ear, M. Th., 9; Skin, W., 1.45, S., 9.15; Throat, M. Th., 9; Dental, W., 9.30. *Operation Days.*—W. Th., 1.30; S., 2.
- WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Dental, Tu., F., 9.30; Eye, Tu. Th. S., 2; Ear, Tu., 10; Orthopædic, W., 2; Diseases of Women, W. S., 2; Electric, Tu., 10, F., 4; Skin, F., 2; Throat and Nose, S., 10. *Operation Days.*—Tu. F., 2.30.
- WESTMINSTER.** *Hours of Attendance.*—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. *Operation Days.*—Tu. W., 2.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

Queries, answers, and communications relating to subjects to which special departments of the JOURNAL are devoted, will be found under their respective headings.

QUERIES.

TREATMENT OF ALOPECIA.

D.S.G. asks for advice in the treatment of the following case: A patient, an officer, is steadily losing all the hair out of his eyebrows and moustache. The loss is slow but steady, and the moustache and eyebrows have now a moth-eaten appearance, and cause much annoyance. Sole previous medical history: acute rheumatism in 1885. Both parents gouty. Has tried arsenic, tonics, blistering, but cannot manage chrysarobin as it stains skin and linen.

ANSWERS.

W. M. W.—The office of the Anglo-American Vienna Medical Association is at 12, Landesgerichtsstrasse, Vienna.

A MEMBER.—Turpentine baths for the treatment of rheumatism, etc., may be prepared by shaking up 90 to 120 grains of oil of turpentine with a very strong solution of green soap, and mixing this emulsion thoroughly with warm water when the latter is poured into the bath.

AN ASSOCIATE.—Appointments to the post of surgeon to a passenger ship are made by the owners, to whom application should be made, backed up if possible by a recommendation from some person having influence with the managers of the line selected.

HYDROCOTYLE ASIATICA.

R. T. HUSTON.—Hydrocotyle Asiatica has been recommended by some French physicians in the treatment of eczema, but has found no favour either in England or America, and in the best textbooks it is not considered as deserving even of mention.

LARVÆ PASSED PER ANUM.

E. E. B.—If our correspondent will consult Leuckart's *Die menschlichen Parasiten*, of which the first volume of the second edition has recently been translated by W. E. Hoyle, he will probably be able to identify the larvæ for himself. Any person having a fair knowledge of the subject could identify such larvæ.

DYSMENORRHEA.

MR. FRANK BOXALL, M.R.C.S. (Rudgwick, Sussex) writes: In answer to "Puzzled," I would suggest the use of antipyrin, in 15-grain doses every four hours till the pain is relieved, as I have found it very useful in similar cases.

DR. STANLEY HAYNES (Malvern) writes: "Puzzled" should order solution of dialysed iron, 10 drops, on sugar or bread, morning, noon, and night, for his patient, beginning as soon as her period is ended until the next, repeating for another month, or two or three if necessary, and warning her she should not miss a dose.

Chloral hydrate, or antipyrin, in doses of 10 grains of either, every hour—to six doses if required—could be hopefully given during the paroxysms of pain, unless specially contra-indicated.

Local examination may be essential in the case described in "Puzzled's" letter.

DEPILATORY.

MR. HEYGATE VERNON, F.R.C.S. (Boscombe, Bournemouth) writes: In reply to Dr. Shelton Daly's question on "Depilatory" in the JOURNAL of April 5th, page 819, the only satisfactory way to treat the hairs is by epilation, and then destroying the hair follicles by means of the electric needle cautery, as used by ophthalmic surgeons for a similar purpose in the eyelids. This is tedious but radical, and not very painful.

NOTES, LETTERS, ETC.

UNINFLAMMABLE FABRICS.

A FRENCH Commission, after a long investigation, recommends (according to *Le Génie Civil*) as a simple and efficacious method of rendering textiles non-inflammable that they be soaked in a 10 per cent. solution of ammonium phosphate.

A DANGEROUS PRACTICE.

DR. CHAS. J. RUSSELL MCLEAN (Yeadon, Leeds) writes: One night a few months ago I was called in haste to Mrs. X., the message being that she "had broken a glass in her inside." Taking a few instruments, I set off, and found the poor woman on her knees afraid to move for fear of pain. She had been using one of those objectionable glass vaginal syringes, and, as often happens when the piston is packed too tightly, it had broken. After very carefully getting two fingers in behind the remains of the syringe in the vagina, I managed to get a Sims's speculum introduced, and then easily picked out four large sharp-edged pieces of glass, and finished off with a gentle syringe from a Higginson's syringe.

The use of such glass syringes as one sees in nearly every druggist's shop cannot be too strongly condemned. In the above case no damage resulted; but one can easily imagine a case where the woman, bashful of being seen using the syringe—and such people are constantly met with—would try to remove the pieces of glass herself, with disastrous results.

ENDOWMENT OF BOTANICAL SCIENCE.

THE *Botanical Gazette*, published at Crawfordsville, Indiana, gives some particulars of one of the most magnificent bequests ever made for scientific purposes: that of the late Mr. H. Shaw for the endowment of the Botanic Garden and School of Botany at St. Louis, Missouri, amounting to no less than between 3,000,000 and 5,000,000 dollars. The trustees have determined

to apply the income to the maintenance and increase in the scientific usefulness of the Botanic Garden; to provide fireproof quarters for the invaluable herbarium of the late Dr. George Engelmann, and to supply means for its enlargement; to secure a botanical museum; and to gradually acquire and utilise facilities for research in vegetable physiology and histology, the diseases and injuries of plants, and other branches of botany and horticulture. To aid in the carrying out of this last purpose travelling botanical scholarships have been established. The present very able director of the Botanic Garden is Dr. William Trelease.

MEDICAL APPEAL.

THE REV. ARTHUR R. CARTER (Rector of Wapping) writes: I am requested to send you a list of subscriptions received as a supplement to the vote of £10 granted by the British Medical Benevolent Society for removing a medical practitioner to a warmer climate, as advised by hospital and other medical authorities. The following sums have been forwarded to me, namely:

	£	s.	d.
Sir Andrew Clark, Bart.	2 2 0
Sir James Paget	1 0 0
Dr. Thomas Stevenson	0 10 0

THE FASTING MAN.

MR. G. N. ROBINS, M.R.C.S. Eng., L.R.C.P. Edin. (Westminster) writes: Signor Succi has during the third week of his fast lost 5 lbs. 4 ozs. in weight, and is becoming very emaciated in appearance. During the week there has been a steady though slight reduction in temperature, but in other respects his health does not appear to have suffered from the effects of his continued abstinence.

Daily Record of Succi's Condition during Third Week of his 40 Days' Fast at the Royal Aquarium, Westminster.

Date, 1890.	Day of Fast.	Pulse.	Temperature (axillary).	Respirations.	Weight.	Dynamometer (kilogrammes).	Spirometer (cubic centimetres).	Urine passed (fluid ounces).	Urea = (grains).	Water Consumed (fluid ounces).	Kaiser Brunnens (fluid ounces).	Hunyadi Janos (purgative) (fl. oz.).	Sleep (hours).
April 1st, noon	15	58	97.9°	21	106 lb. 9 oz.	47	1500	14½	177.3	12	7	—	6½
„ 2nd „	16	71	98.2°	19	106 0	51	1550	16½	176.8	16	9	—	5½
„ 3rd „	17	65	98.2°	21	104 13	48	1500	17	178.5	13	4	—	6
„ 4th „	18	62	97.6°	18	104 3	48	1450	13	136.5	13	10	—	7½
„ 5th „	19	64	97.8°	19	103 12	47	1500	11½	131.5	13	7	—	5½
„ 6th „	20	56	97.8°	18	103 4	47	1450	13	153.5	15	9	5	4
„ 7th „	21	58	97.0°	18	102 9	48	1450	11	132.2	18	4	—	4½

SURGICAL INSTRUMENT MAKERS AS PRACTITIONERS.

SPES writes: I shall be extremely glad to know if there is any way of suppressing a traffic which is largely carried on by certain surgical instrument makers after the following manner: I send a patient simply to buy an ordinary truss; but instead of being supplied with one at a moderate cost he is advised by the maker (after a "consultation," for which the fee is half a guinea or a guinea) that a specially constructed one is desirable, and for this he is charged most exorbitantly.

In the first place, I fail to see why these persons are allowed to charge consultation fees, and, in the next, I think it is due to our patients that we should protect them against being thus misled. Within the last few minutes I have had a working man in my surgery, who, after such a "consultation" with such a maker paid £2 18s. 6d. for an unnecessary make of truss, which I happen to know would have been dear at one-third that amount. To my knowledge this kind of thing has occurred repeatedly, and it seems absurd that we should be powerless to put a stop to such dishonourable trading.

I cannot help thinking that we might at least have a method for obtaining information as to who are trustworthy, for it is a serious reflection on a medical man who innocently recommends patients to such makers as I describe.

A local list of "recognised surgical instrument makers," published by each Branch of the British Medical Association, might be a valuable guide.

AMERICAN MEDICAL DEGREES.

A COLONIAL MEMBER B. M. A. writes: In recent numbers of the JOURNAL you published some correspondence on the value, or rather the want of it, of certain American degrees. Doubtless too many of the American graduates are undereducated; but British graduates are far from being immaculate, as the recital of my experience in a recent consultation with two of them will show.

One of the gentlemen to whom I allude has the M.D. of a well-known British university, and on every possible occasion boasts of his high classical and professional education—and, as the result of all this, affirms that uric acid crystals are not reddish brown but colourless, and that they are never seen except under a high power, while oxalates are like cayenne pepper, and have frequently been seen by him without a microscope.

The same gentleman, together with a new fledged M.R.C.S., diagnosed a case of enormously distended gall bladder—verified by operation—as "gastric catarrh, probably cancer," and they both said the only treatment was to "go in for euthanasia by gradually increasing doses of morphia until she dies!" Surely this displays no less ignorance than the statement of an American graduate that he had treated several cases of prostatitis in the female.

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

Dr. T. Maccall, Morecombe; Mr. J. Hutchinson, London; Dr. O. Wood, London; Mr. G. N. Robins, London; Surgeon H. W. G. Macleod, Meean Meer; The Dean of St. Mary's Hospital Medical School, London; Mr. T. L. Drewe, London; Mr. W. E. Row, Sydenham; Mr. E. Somers, Pendleton; The Secretary of the University of Oxford; Mr. W. S. Frew, Princetown; Dr. G. Thin, London; Dr. Maxwell, Woolwich; Mr. R. Black, Brighton; Mr. J. E. Blomfield, Sevenoaks; Miss M. Longlands, King's Lynn; Mr. H. Vernon, Boscombe; Surgeon-Major J. MacGregor, London; Dr. W. A. Aikin, London; Mr. H. C. Nance, Norwich; Cuticura; Mr. F. Boxall, Rudgwick; A. B.; Mr. A. de Winter Baker, Dawlish; Dr. A. G. Blomfield, Exeter; Mr. F. Joy, Northwold; Mr. F. M. Puddicombe, Devonport; Mr. J. S. Gelston, Ixworth; Mr. C. E. Pinfold, York; Cockade; Mr. H. Herbert, Oldbury; Dr. R. Stockman, Edinburgh; Mr. G. Fisher, Guildford; Mr. A. Holme, Birmingham; Dr. G. N. Pitt, London; W. H. Lewis, M.B., London; Dr. W. Sykes, Mexborough; Mr. D'Arcy Power, London; Mr. J. T. Jones, Corris; Dr. Dreschfeld, Manchester; Rev. Dr. Carter, London; Mr. C. R. Niven, Eaglesham; Mr. A. E. Joscelyne, High Wycombe; Mr. A. W. Mayo Robson, Leeds; Mr. J. Binks, Wakefield; Mr. Ballance, London; Mr. J. Clarke, Cambridge; Mr. W. N. Hepburn, Coxhoe; Dr. J. Cagney, London; Mr. V. L. Watts, Clonskea; Dr. C. Norman, Grangegorm; Dr. D. J. Mackenzie, Glossop; Mrs. O'Neill, Wisbech; Mr. H. W. Roberts, London; Mr. Michel de Lapinsky, Kiev, Russia; Dr. E. D. Mapother, London; Mr. Wm. Phillips, Newcastle-on-Tyne; Mr. R. W. Lloyd, London; Mr. G. H. Makin, London; Messrs. Bush and Co., London; Dr. Edwards, London; Mr. F. Evans, Beeston; Sir J. Paget, London; Mrs. E. G. Fenwick, London; Dr. F. M. Pope, Leicester; Mr. A. Milman, London; Surgeon-General Cornish, London; Dr. Blackman, Portsmouth; Mr. T. Fisher, Garstang; Dr. E. Seaton, London; Dr. T. R. Bailey, Bilston; Mr. G. H. Corbisbley, Macclesfield; Dr. C. J. McLean, Yeading; Mr. W. H. Copley, Wisbech; Mr. A. Colles, Wellington; Mr. F. C. W. Piggott, Teignmouth; Mr. A. E. Legat, Sunderland; Dr. P. Little, London; Mr. C. E. G. Stalkart, Southsea; Mr. H. B. Hewetson, Leeds; Mr. T. J. Vallar, Brighton; Dr. Abercrombie, London; Dr. R. Martin, London; Dr. Balding, Royston; Mr. J. Poland, London; Dr. W. E. Steavenson, London; Miss M. Kavanagh, Coventry; Mr. Lawson Tait, Birmingham; Mr. A. Barker, London; Dr. C. C. Cripps, London; A General Practitioner; Mr. S. Craddock, Bath; Dr. F. W. Lewis, Llandoverly; Dr. R. Barnes, London; Mr. H. S. Leigh, Cheatham; Dr. L. W. Morgan, Bath; Dr. B. Shillitoe, London; Dr. J. Goodhart, London; Dr. S. M. Copeman, London; Dr. A. Ruffer, London; Dr. T. W. Hime, Bradford; Mr. R. Greene, Berry Wood; Dr. G. T. Galbraith, Stirling; Dr. A. Meldon, Dublin; D. S. G.; Mr. A. Thomson, Oxford; M. W. M. Hanquine, Paris; D. D.; Dr. C. Steele, Clifton; Mr. J. C. Thresh, Chelmsford; Mr. W. W. Wagstaffe, Sevenoaks; Parish Doctor; Mr. E. H. Fowler, Plymouth; One Who Has Seen Much Service; Dr. W. W. Ireland, Prestonpans; J. W. Downie, M.B., Glasgow; Dr. J. D. McCaw, London; Mr. E. Blacker, Midsomer Morton; A Member; Mr. J. St. S. Wilders, Birmingham; Surgeon J. R. Mallins, Rawal Pindi; Sir William Jenner, Bishop's Waltham; Miss M. F. Cusack, Toronto; Brigade-Surgeon J. B. Hamilton, Lucknow; Dr. S. Haynes, Malvern; Mr. P. M. Scatliff, London; W. F.; Dr. H. B. Bailey, Grantham; Brigade-Surgeon; Mr. F. H. Moore, Ely; A Member B.M.A.; Dr. J. Cross, London; Mrs. E. Clark, Datchet; Dr. J. Ewart, Brighton; Dr. W. S. Lang, Edinburgh; Mr. C. Hanbury, Richmond Hill; Confido; Messrs. Blondeau and Co., London; Mr. W. M. Jones, Swinton; Mr. E. C. Masser, Wellington; A Colonial Member B.M.A.; Mr. M. Jennings, Bervie; The Dean of the University of Aberdeen; Dr. Rentoul, Liverpool; Mr. H. M. Madden, Braidwood, N.S.W.; Mr. H. R. Jones, Liverpool; An Associate; Mr. James West, London; Surgeon-Major Adye Curran, Bermuda; Mr. W. Thorburn, Manchester; Mr. J. E. Crisp, Corsham; Mr. J. M. Stone, Wimbledon; Dr. G. S. Woodhead, Edinburgh; Dr. F. W. Mott, Harrow-on-the-Hill; Our Paris Correspondent; Mr. W. J. Miller, London; Dr. Ward Cousins, Southsea; Mr. G. M. Whipple, Richmond; Surgeon-Major J. Macartney, Newbridge, etc.

BOOKS, etc., RECEIVED.

Studies in Evolution and Biology. By Alice Bodington. London: Elliot Stock. 1890.
 Agenda du Chimiste. Par MM. G. Salet, Ch. Girard, A. Pabst. Paris: Hachette et Cie. 1890.
 Les Rêves: Physiologie et Pathologie. Par le Dr. Ph. Tissie. Paris: Félix Alcan. 1890.
 The Biology of Daily Life. By John H. M. Nevill, M.A. London: Kegan Paul, Trench, and Co. 1890.