

as not infrequently happens, the endometrium becomes affected with villous degeneration, metrorrhagia often becomes a marked symptom.

Where hysterectomy is not deemed advisable, or the patient refuses all idea of operation, curetting the uterine cavity or applying some strong styptic may effectually prevent the recurrence of profuse hæmorrhage, and thus prove of much service in removing the symptom for which we were consulted. Again, a patient may have had a fibroid tumour for years without any very urgent symptoms, but errors in diet, and undue stimulation by alcohol, may induce severe hæmorrhage. Careful attention to the former and abstention from the latter, may make all the difference as to the loss incurred.

Treatment.—A correct diagnosis being the first and most important element of treatment, it follows as a matter of course that having ascertained the presumed cause we know then what our plan of action should be. Still there are some practical hints which may be found to be of value to some. Where the hæmorrhage results from constitutional or general conditions it is not always wise to attempt to check the flow at once, unless it is producing such an effect upon the system generally as to suggest the expediency of arresting it at all hazards. In certain cases of heart disease uterine hæmorrhage, in place of aggravating, seems to relieve the cardiac symptoms, and should not therefore be hastily repressed. Strophanthus, digitalis, and aconite here prove most useful. Where the action of the liver seems to be at fault, attention to diet, abstention from alcohol, and the administration of a few grains of calomel or pil. hydrarg. or euonymin, followed by a brisk saline aperient, will probably be indicated. If albuminuria be present, or the kidneys seem to be at fault, encourage vicarious action of skin and bowels by means of diaphoretics and purgatives, and follow out any other indications suggested. In cases of menorrhagic chlorosis, bromide of potassium in half-drachm doses has proved of service, iron being given between the periods with strychnine; attention being also given to ordinary hygienic details, avoidance of tight lacing and physical overwork. It is well to remember that hæmophilia, scurvy, malaria from residence in damp or marshy districts, lead poisoning, and other unusual conditions will occasionally explain the presence of metrorrhagia. The mere recognition of the cause will be at once a suggestion as to the proper course of treatment.

Where uterine hæmorrhage persists, notwithstanding the employment of constitutional measures, and there is no apparent local cause to account for it, we should without further delay dilate the cervix uteri and explore the interior of the uterus. Numerous instances have been recorded of patients dying from uncontrollable hæmorrhage, where a *post-mortem* examination revealed the existence of some intrauterine growth, such as a polypus or submucous fibroid, retained product of conception, or fungoid condition of the endometrium, which could readily have been removed or dealt with had appropriate measures been adopted in time, and the patient's life thus saved.

The mere fact of inserting a sponge tent into the cervix uteri arrests the hæmorrhage for the time being, and facilitates subsequent exploration of the uterine cavity. As to any risk of reflux through the Fallopian tube, as sometimes spoken of, it is a mere visionary objection, and need not deter us from employing dilatation in suitable cases. Plugging the vagina is a very unscientific procedure, as well as being unsatisfactory and inefficient. It should seldom, if ever, be resorted to.

It would clearly be impossible in these brief remarks to indicate in detail the methods of local treatment, such as curetting for villous endometritis, removing polypi, operating for cancer, the use of electricity in cases of myoma, the best method of dealing with cases of incomplete abortion, or replacing an inverted uterus. If we have once clearly made out the indications for treatment the rest is merely a matter of detail. But now and again instances occur where no assignable cause, either constitutional or local, can be made out, and where remedies fail to restrain the hæmorrhage. In such cases the hot vaginal douche may prove of service, or even washing out the uterine cavity with hot water through a double current catheter, provided the cervix be patulous enough to admit it. Should this fail it may be considered requisite to wash out the interior of the uterus with a strong solution of iodine or iron. As a *dernier ressort*, the insertion of a sponge tent into the cervix uteri may be effected.

The reliable remedies at our disposal for checking or arresting uterine hæmorrhage are really very few. Ergot is unquestionably

one of our most potent; *hydrastis Canadensis* is a valuable agent, and far too little generally known. In cases of myoma it often proves of service when ergot has failed. Hamamelis, which forms the basis of the American nostrum hazeline, is sometimes useful. Quinine and strychnine, alone or in combination, often succeed in checking or arresting hæmorrhage in those cases where the system is much depressed from repeated or prolonged losses. Bromide of potassium in cases of ovarian irritation, and even in hæmatocele, possesses the power of checking hæmorrhage equal, if not superior, to that of any remedy we possess. Chlorate of potash in combination with ergot has lately been strongly recommended. Opium is beneficial in cases where the loss has already been severe. Sulphuric acid and opium used to be, and still is, with some practitioners, a favourite remedy; so, also, acetate of lead and opium in form of pill.

The ordinary astringents, such as gallic and sulphuric acid, have really very little influence in restraining hæmorrhage, and are far too often relied upon. Iron is often of much benefit in those cases where the loss has been very profuse, as in myomas, and the blood has become so attenuated as to pass readily through the capillaries. Digitalis, in combination with iron, proves most valuable in cardiac complications.

In place, however, of attempting empirically to deal with the effect, we should always endeavour to arrive at a definite opinion as to the cause of the hæmorrhage, and, if we can deal with this satisfactorily, the treatment is very simple.

MEMORANDA:

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

ALBUMINURIA WITHOUT DROPSY.

DR. GOODHART'S lectures, recently published in the JOURNAL, recall to my mind two cases which appear to me worth reporting.

The first was a girl, aged nearly 14, who was brought to me as an out-patient at the Hospital for Sick Children in May, 1887. She was suffering from diarrhoea and vomiting; there was no oedema; and the appearance was by no means anæmic. The temperature (taken in the morning) was subnormal. Careful examination showed no evidence of lung disease. There was certainly no more wasting than might have been accounted for by the persistent diarrhoea. The illness appeared to have commenced five years before with headache and sickness; the patient had never been really well since. No oedema had ever been observed. So far as I could gather, the urine had never been tested until the patient came under my care. I found it contained more than half its volume of albumen, that is, on complete subsidence after boiling.

The treatment which gave most relief was the administration of jaborandi, the patient being kept in bed. When free diaphoresis was established by this means, the diarrhoea became much less and the appetite improved. Oedema, which had appeared since the first observation, while the patient was under other treatment, wholly disappeared again; and the quantity of albumen was sometimes as low as one-seventh, although it rose again at times to one-half. The dose of jaborandi was seven minims of the tincture three times daily, increased gradually to twenty minims as tolerance of the drug was produced by continued administration. The improvement, however, though sufficiently marked, was only temporary. In August the diarrhoea returned, in spite of free diaphoresis maintained by the jaborandi. And this continued more or less until the patient ceased to be under my care in November. Not long afterwards she died. No *post-mortem* examination was obtained.

My second case was that of a young man, aged 20, who came before me as a candidate for life insurance. The most careful inquiry failed to elicit the slightest evidence of ill-health in any way. His complexion was healthily florid; his muscles were well developed and powerful; he was an enthusiastic football player. Nevertheless, the urine contained one-third of albumen; and from September, 1889, to January, 1890 (after which I lost sight of the patient), the urine never contained less than one-fourth of albu-

men, and sometimes more than half. Specimens procured at all times of the day were taken. That passed before breakfast contained rather less than was found later in the day. Vegetarian diet did not affect the quantity of albumen; neither did any of the drugs that I prescribed. In the meantime the patient's health continued to all appearance absolutely perfect. On November 23rd he astonished me with the information that he had got married a few days before. His albuminuria was in no way affected by this event.

The second case was a very remarkable one. The albuminuria was certainly not to be described as "cyclic;" it was persistent. The quantity of albumen was very great; and yet the patient continued to go about his ordinary business entirely unconscious of the slightest deviation from perfect health.

The first case was not so extraordinary; but its history suggests practical lessons too obvious to need pointing out.

FREDERIC C. COLEY, M.D.,

Physician to the Hospital for Sick Children, Newcastle, and
Northern Counties Hospital for Diseases of the Chest.

SEQUEL TO A CASE OF GASTRO-ENTEROSTOMY.

IN the JOURNAL of February 8th, 1890, is recorded my case of gastro-enterostomy for unremovable malignant disease. The improved state of the patient, as there detailed, was maintained until about two months after the operation, when a change occurred; he complained of almost constant pain, took very little nourishment, had fluctuations of temperature, got weaker and weaker, and died on April 24th, four months after the operation.

At the *post-mortem* examination (twenty-four hours after death) the jejunum was found firmly adherent to the stomach, but the opening from the stomach into it (the jejunum) was firmly closed—so firmly that the only indication to the naked eye as to the spot where the incision had been was the presence of unchanged silk sutures, the ends hanging free into the stomach. There were no traces of the bone plates. Water injected through the pylorus ran freely through the bowels. The malignant mass had broken down considerably, its centre being occupied by about an ounce of pus; the duodenum and head of the pancreas were involved. The liver had, scattered through its substance, numerous round white tumours, varying in size, softening in their centres. Right kidney healthy; left kidney, capsule adherent to pelvis, containing a small quantity of pus.

The specimen is now in the Museum of University College, Liverpool.

The remarkable points are the closing of the opening at the time the patient seemed to be, and expressed himself as, improved, and also the presence of unchanged silk sutures after four months, pointing to the desirability of adopting Mr. Jessett's suggestion by using some less permanent material in future cases.

GEO. S. STANSFIELD, M.R.C.S., etc.,

Honorary Surgeon Birkenhead Borough Hospital.

VENESECTON IN PUERPERAL ECLAMPSIA.

I THINK the following case worth recording as an argument in favour of venesection in suitable cases of puerperal convulsions. M. B., aged 29, was confined of a living male child in the evening of June 23th; she was attended by a midwife, and everything passed off normally. I was summoned to her at 3 A.M. the following morning, as she felt in very great pain all over. On my arrival, I found she was suffering from flatulence, accompanied by nausea and pain in the stomach. I administered a carminative and calomel 5 grains. I saw her at 9.30 the same morning, and found that convulsions had commenced at 6 A.M., that these had occurred every twenty minutes, and lasted some three minutes. She was a stout, muscular, florid, full-blooded woman, and when I saw her was unconscious, foaming at the mouth, very restless, and continually throwing herself about, vomiting freely green-stained mucus, with a pulse of 100°. I at once injected a quarter of a grain of pilocarpin, and waited a quarter of an hour. Another violent convulsion then occurred. As it was impossible to administer anything by the mouth on account of the vomiting, and having no chloroform with me, I bled her from the arm to twelve ounces. The effect was immediate: the patient became quiet, the vomiting to a great extent ceased, and she lay quietly in bed. I then left her, and returned in four hours' time to find that she was much quieter, more conscious, and that she had only been convulsed three times since the bleeding, and at greater intervals.

She shortly after regained perfect consciousness, desired to be changed, and passed a good night, but was perfectly oblivious of all that she had passed through. I examined the first specimen of her urine that I could obtain, but found no albumen.

Should I have another such case, I shall feel very disposed to try the same treatment again, as it proved so satisfactory. I may say that when able to swallow, I gave her every four hours a mixture containing 20-grain doses of chloral and 30 grains of bromide.

Harwell, Berks.

RICHARD RICE, M.R.C.S., L.S.A.

DEAFNESS TREATED BY PILOCARPIN.

AFTER Mr. Field's communication in the JOURNAL of May 17th, the following notes of a case of deafness treated by pilocarpin will not be without interest to the profession. I have made very careful observations daily, but as those of every third day clearly show the steady improvement that was made I only for the sake of brevity mention these.

J. C., aged 13, has always had very imperfect hearing; when 5 years old was tested by Dr. McBride, and found able to hear a watch at only three inches from both ears. In January of the present year he had a very severe attack of measles, and after recovering from this was found to hear worse than before, namely, he could only hear a watch at 1½ inch. By means of Politzerizing this distance was increased to 3½ inches.

On March 13th he was taken to see Dr. McBride, and at his suggestion pilocarpin was injected daily, commencing on March 15th. The distances on the respective days being:

		Right.		Left.
March 15th	...	2½ inches	...	3½ inches
" 18th	...	5½ "	...	5½ "
" 21st	...	9½ "	...	7½ "
" 24th	...	10 "	...	8½ "
" 27th	...	16 "	...	16½ "
" 30th	...	28 "	...	20 "
April 2nd	...	44 "	...	46 "
" 5th	...	48 "	...	48 "

The last injection was made on April 5th, there being in all 21 injections. The dose at first was one-twelfth grain, but this was soon increased to one-sixth, and later to one-fifth grain.

After stopping the treatment I examined daily for five days, the distance remaining the same. A month after this I again examined and found them not only to have maintained the improvement, but to be slightly better—50 inches from both ears. The power of hearing conversation is also very markedly improved, but not to the same striking extent to which his power of hearing a watch is.

The case is probably one of mixed middle and internal ear deafness, the bone conduction being much diminished. There were no unpleasant symptoms arising from the treatment.

Edinburgh.

JAMES C. DUNLOP, M.B., M.R.C.S.

INTUSSUSCEPTION SUCCESSFULLY TREATED BY INJECTION OF AIR.

ON May 9th I was asked to see a child aged 10 months. The mother stated that about seven hours before I saw it the child woke up suddenly from sleep and commenced screaming. Sickness occurred very shortly afterwards, and within three or four hours blood and mucus were passed from the anus. When I saw the child it appeared very restless, tossing about in its mother's arms and then apparently dozing off for a few minutes. It was unable to retain any food; pulse small and very rapid; blood and mucus, without any faecal matter, were passed from the anus during my examination.

On examining the abdomen, I noticed a mass in the left hypochondriac region, which appeared to be connected with the intestine, and which the mother said she was sure had not been there early in the day. Feeling confident that it was a case of intussusception, I procured a long rubber tube. I may mention that, being without tubing, I had to do the best I could with tubing used for keeping draughts from penetrating windows and doors.

Under chloroform, with the help of the mother I passed two to three feet of the tubing, and by means of a Higginson's syringe I pumped into the intestines as much warm water as they would retain. I then manipulated the mass through the abdominal

wall; this, of course, expelled the water. This process was repeated several times, but without much success. I then proceeded to pump in air with the same apparatus, blowing the abdomen as full as possible, and then manipulating as before. Under this treatment I was rewarded with feeling the mass gradually decrease, and finally, after an hour and a half, I distinctly felt the gut slip into its right position. Within five minutes about an ounce of loose fecal matter was passed. The child was practically well within a few hours without further treatment.

I was interested to learn that the parents had lost a child a few years ago with exactly the same symptoms. The child died on the fourth day. No examination of the abdomen was made, and the cause of death was certified to be "inflammation of the bowels."

Oxted, Surrey.

EDWARD P. FURBER.

REPORTS

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

GUY'S HOSPITAL.

TWO CASES OF SUBDURAL ABSCESS RESULTING FROM DISEASE OF THE ANTRUM AND MIDDLE EAR.

(Under the care of W. ARBUTHNOT LANE, M.S.)

CASE I.—O. V., a girl aged 8 years, was admitted on March 20th, 1890. She had had measles three years ago. In January last she complained of pain in and behind the right ear. This soon disappeared. Five days before her admission she was again attacked with this pain, and a swelling appeared over the mastoid area. The discomfort experienced was not great, so little indeed that on the morning before her admission she passed a school examination. On admission she was found to have a fluctuating swelling over the mastoid process. There was no optic neuritis, nor any discharge from the meatus. She could apparently hear fairly well with the right ear. The membrana tympani was thickened and opaque, but no perforation was observed. She was put under chloroform, and the mastoid area was freely exposed. The abscess between the soft parts and the bone was seen to communicate with a cavity in the apex of the mastoid process by a ragged aperture. On removing the bone forming the wall of the cavity it was found to be about seven-eighths of an inch long and five-eighths of an inch broad, and to occupy the whole of the mastoid process. It was lined by a pyogenic membrane, which was removed. It was then observed that the lateral sinus and the adjacent dura mater formed the posterior and inner walls of this cavity, which appeared to have contained pus for many weeks. The sinus was not thrombosed. The bony walls were removed so that a cavity no longer remained. Opening into its upper and inner part there was an aperture so small as not to admit an ordinary probe. This led into the mastoid antrum, which was about half an inch in diameter, and deeply placed and filled with caseous material. This cavity was also obliterated by bevelling the bone freely away to its margins. A tube was inserted, and daily irrigation pursued. The child left the hospital on May 13th, wearing the tube, and felt no discomfort from it.

CASE II.—W. R., a man aged 23, was admitted on March 22nd, 1890. He had had small-pox about twelve years ago, and since then had suffered from a discharge from the right ear. Five years ago he began to suffer from noises and giddiness. This continued for four years, and was relieved by the removal of a polypus from the meatus. In July, 1889, he had an abscess behind the ear; this was opened. A fortnight ago another polypus was removed, and he was sent on to Guy's Hospital.

On admission he was found to have no headache or loss of power. The optic discs were normal. He complained of noises in the right ear, which was quite deaf. Pulse was regular, 80. There was a purulent discharge from the meatus, into the lumen of which a mass of granulation tissue projected from its posterior wall. The membrane was completely absent. About two inches behind the meatus there was a small sinus which entered the skull for a quarter of an inch.

He was anaesthetised, and the mastoid area freely exposed.

Pus was found to escape from the mastoid foramen, and a probe suitably bent could be passed through this foramen, and made to enter the petrous bone through a hole in its posterior surface, the dura mater apparently forming the inner wall of a sinus of considerable area. The whole of the bone between the mastoid foramen and the antrum was removed with a gouge, or rather with several, since the osseous tissue, being very dense, blunted them rapidly. By this means the whole bony outer wall of the sinus was exposed, together with the entire circumference of the antral cavity. The dura mater forming the inner wall was covered by a thick soft pyogenic membrane, which was scraped away. It was then seen that about three-quarters of an inch of the lateral sinus was exposed, and that it had apparently for a very considerable period (probably since July, 1889) formed a portion of the wall of an abscess cavity. It was not thrombosed. The antrum was about as large as a kidney bean, and was very deeply placed; it extended a considerable distance into the petrous bone, and a probe could readily be passed through the aperture in the posterior wall of the petrous bone both from and into the antrum. By gouging extensively, the edges of the antral cavity were bevelled down as much as its deep position would allow; it was filled with foul-smelling caseous material, and its floor was carious. A silver drainage tube was fastened in, and thorough irrigation established. He left the hospital on May 7th, wearing the tube, with instructions to continue the frequent irrigations.

I would particularly call attention to the fact that, though the lateral sinus had for a considerable period of time formed a portion of the wall of an abscess cavity in both these cases, no thrombosis ensued; and that, though the dura mater alone entered into the formation of the same wall, there was no evidence of optic neuritis in either patient at the time of observation.

I will not enter into the causation of the subdural abscesses, or the rationale of the treatment adopted, as I have discussed them fully in a recent paper* in the JOURNAL.

COLONIAL HOSPITAL, PORT OF SPAIN, TRINIDAD.

HÆMOPHILIA OCCURRING IN MALARIA.

(By W. V. M. KOCH, M.B., Government Medical Officer, Assistant Surgeon, Colonial Hospital, Port of Spain.)

L. J., female, aged 6 years, was admitted on April 8th, 1890, with the following history.

On April 6th she had an attack of fever, probably intermittent. This abated on the 7th, but she was peevish and irritable, and not her usual self, but she made no complaint. About midnight she was suddenly seized with a profuse and uncontrollable flowing of blood from the mouth, which continued unabated until her admission at 7.30 A.M. Up to this time she had been fairly healthy, having slight attacks of fever, and a few months ago she had an attack of profuse hæmorrhage from the gums, which yielded to treatment.

On admission she was very weak and inclined to be drowsy, and there was a continuous oozing and welling out of blood from the mouth. A careful examination of the gums and fauces revealed nothing. Her temperature was high, about 101° F.; the gums were firm, not spongy, but the incisor teeth were loose. The blood, of which a large quantity was oozing out, was darkish in colour, unmixed with froth, and apparently quite pure; the face was puffy—she was anæmic, in fact; lungs and heart were normal; no cough, no pain; no nausea or vomiting; bowels had not been moved, nor had she micturated. She had a subcutaneous injection of ergotin at once administered, was given ice to suck, had an ice-bag over chest, and took a mixture consisting of ext. ergot. liq. and ac. sulph. arom. in water every hour. The oozing of blood seemed to abate to a slight extent, and she dozed until about 3.30 P.M., when there was a recurrence of it. The heart's action was forcible and rapid, her skin was hot and moist; she had passed water.

The same treatment was continued except that she had stimulants administered. Her condition then rapidly underwent a change; the oozing of blood continued uncontrollable, clotting sometimes in the mouth. Pulse became feebler, about 140 to 160. She had a motion of the consistence of tar. Her jaws were rigidly clenched, and she became collapsed, and died at 1.45 A.M. on the 8th.

Post-mortem Examination made Seven Hours and Three Quarters

* The Treatment of Suppurative Inflammation of the Mastoid Process, associated with Disease of the Middle Ear, JOURNAL, March 29th, 1890.

deceased members, and it was explained that these depended in great measure upon the actual wants of the several widows, which were ascertained by careful inquiry. Every widow coming within the limits of the by-laws, which rendered ineligible those who possess £80 or more a year, had a claim on the Society, but the amounts granted were much greater than those which could be derived from any friendly society which was not possessed of such funds derived from charitable gifts as the Society had. Votes of thanks were passed to the editors of the medical journals for their kind assistance in making known to the profession the workings of the Society. A vote of thanks to the President closed the meeting.

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.

NOTICE OF QUARTERLY MEETINGS FOR 1890.

ELECTION OF MEMBERS.

MEETINGS of the Council will be held on 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*.

GRANTS FOR SCIENTIFIC RESEARCH.

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

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

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

NOTICES of BRANCH MEETINGS intended for insertion in the JOURNAL of the current week should be forwarded, addressed to the Editor, so as to reach the office not later than mid-day Wednesday of that week.

BRANCH MEETINGS TO BE HELD.

METROPOLITAN COUNTIES BRANCH.—The annual meeting and dinner will take place at the Holborn Restaurant on June 10th.—NOBLE SMITH, 24, Queen Anne Street, W.; H. RADCLIFFE CROCKER, M.D., 121, Harley Street, W., Honorary Secretaries.

EAST ANGLIAN BRANCH.—The annual meeting will be held at the Norfolk and Norwich Hospital, Norwich, on Thursday and Friday, June 19th and 20th. Notices of communications should be sent to Dr. BARNES, Eye; Dr. ABBOTT, Baintree; and Dr. BEVERLEY, Norwich, Honorary Secretaries.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH.—The annual meeting of this Branch will be held at the Medical Institute on Thursday, June 26th, at 4 o'clock in the afternoon, when the ordinary business will be transacted and an inaugural address delivered by the President-elect of the Branch, Mr. Alfred Freer, F.R.C.S., of Stourbridge; and after the meeting the members will dine together at the Great Western Hotel at 8.30; tickets, exclusive of wine, 6s.—ROBERT SAUNDY, M.D. and JORDAN LLOYD, F.R.C.S., Honorary Secretaries.

LANCASHIRE AND CHESHIRE BRANCH.—The annual meeting of this Branch will be held in Manchester on Wednesday, July 4th, at the usual hour. Gentlemen wishing to read papers, make communications, or show cases, are requested to communicate with the Honorary Secretary at once, so that the circulars convening the meeting may be sent out in a complete form.—CHARLES E. GLASCOTT, M.D., Honorary Secretary, 23, St. John Street, Manchester.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.—The annual meeting will be held at Cardiff on Friday, June 27th. Further particulars in circulars.—A. SHEEN, M.D., D. ARTHUR DAVIES, M.B., Honorary Secretaries.

NORTHERN COUNTIES (SCOTLAND) BRANCH.—The annual meeting will be held in the Royal Hotel, Inverness, on Thursday, June 12th, at 6.40 P.M. Dr. White, Elgin, president.—Notices of communications should be sent at once to J. W. NORRIS MACKAY, M.D., Honorary Secretary, Elgin.

YORKSHIRE BRANCH.—The annual meeting of this Branch will be held on Wednesday, June 25th, at 3 P.M., at Leeds, when the officers of the Branch and the representatives of the Branch on the General Council will be elected. Members intending to read papers are requested to communicate with the Secretary on or before June 15th.—ARTHUR JACKSON, Secretary, Sheffield.

SOUTH MIDLAND BRANCH.—The annual meeting of this Branch will be held at Springfield House Asylum, Bedford, on Thursday, June 12th, under the presidency of David Bower, M.D. Gentlemen wishing to read papers, cases, etc., are requested to communicate as early as possible with the Honorary Secretary. The following have been promised:—Mr. W. H. Bull: A Tariff of Medical Charges for the South Midland Branch. Dr. Newman: Treatment of Retention of Urine due to Prostatic Enlargement by External Urethrotomy. Mr. G. H. Percival: On Salufer and Salol as Antiseptic Dressings. Dr. Price: The Arsenic Industry of Cornwall. Mr. Skelding: A short paper on The Treatment of Typhoid Fever. Mr. Kinsey will exhibit: Specimens of Perforating Ulcer of Foot, and of Charcot's Joint. Mr. Milligan will show: Two Ovarian Tumours successfully removed from the same patient; and a Specimen of Ruptured Intestine. The President invites the members to luncheon at 1 o'clock, and will be glad of a reply from those gentlemen intending to be present. He will also provide conveyances from and to the stations.—CHARLES J. EVANS, Northampton, Honorary Secretary.

MIDLAND BRANCH.—The annual meeting will be held at the General Dispensary, Lincoln, on Thursday, June 12th, at 2 P.M. After the transaction of the usual business, the following papers will be read and discussed:—Dr. H. Handford: Granular Kidneys in Childhood. Dr. Handford will also exhibit photographs and drawings of Hydroa Vacciniiforme (Bazin) and Elephantiasis Arabum treated by Martin's bandage. Mr. C. J. Bond, F.R.C.S.: Note on Perchloride of Mercury Tablets for making Antiseptic Solutions. Mr. W. J. Cant will show the following cases with short notes: (1) Cataract Extraction without Iridectomy; (2) Conical Cornea treated with Actual Caustery; (3) Thoracic Aneurysm; (4) Lupus Erythematosus treated by Blistering. L. W. Marshall, M.D.: On Stone in Children. Luncheon will be provided by the President-Elect at the Great Northern Hotel at 1 P.M. The dinner will take place at the Great Northern Hotel at 5 P.M.—W. A. CARLINE, M.D., Lincoln, Honorary Secretary.

SOUTHERN BRANCH.—The seventeenth annual meeting will take place at the Bugle Hotel, Newport, Isle of Wight, on Thursday, June 26th, 1890. The general meeting will be held at 1.15 P.M. (Refreshments will be provided between 1 and 3.) In accordance with the by-laws, two gentlemen will be elected at this meeting as representatives of the Branch on the Council of the Association for the ensuing year. Members desirous of reading papers are requested to forward at once the titles to the Honorary Secretary. No communication must exceed seven minutes in length, and no subsequent speech must exceed five minutes. The address will be delivered by Dr. Joseph Groves (the President-Elect), at 2.30. During the afternoon the members are invited to visit Carisbrooke Castle and several places of interest in the locality. The dinner will take place at 5.30 P.M. Tickets 6s. each, exclusive of wine. The Committee request that those gentlemen who intend to be present at the dinner will send in their names to Dr. J. M. Plettis, Ryde, on or before Wednesday, June 25th.—J. WARD COUSINS, Honorary Secretary and Treasurer.

SHROPSHIRE AND MID-WALES BRANCH.—The annual meeting of this Branch will be held at the Salop Infirmary on Tuesday, June 24th, at 3 P.M. Papers will be read by Mr. Bennett May, Dr. Charnley, etc. After the meeting the annual dinner will be held; tickets, exclusive of wine, 6s. Members having any papers to read or communications to make will kindly give notice, on or before Saturday, June 14th, to the Honorary Secretary, J. ALLEN BRATTON, College Hill House, Shrewsbury.

SOUTH-EASTERN BRANCH.—The forty-sixth annual meeting of this Branch will be held in the Board Room of the Royal Surrey County Hospital, Guildford, on Wednesday, June 11th, at 2.45 P.M. The President-Elect invites members and their friends to luncheon at his residence, White Hall, from 12.30 to 2 P.M. After the meeting the members are invited to join: 1. A visit to the Surrey County Asylum at Brookwood, by invitation of Dr. Barton, Resident Medical Officer. 2. Visits to various points of interest in the town of Guildford, namely, (a) the wards of the hospital; (b) the castle caverns and keep; (c) Archbishop Abbot's Hospital and St. Mary's Church. Dinner will be served at 7 P.M. at the Angel Hotel. Tickets, exclusive of wine, 6s. 6d. each. Carriages will meet members at Guildford Station at 12.30 and 1.10 P.M., and

will also convey them from White Hall to the meeting at the hospital after luncheon.—CHARLES PARSONS, M.D., Honorary Secretary, 2, St. James's Street, Dover.

STIRLING, KINROSS, AND CLACKMANNAN BRANCH.—The annual meeting of this Branch will be held at the Castle Campbell Hotel, Dollar, on the afternoon of Tuesday, June 17th, at 3.45 P.M., under the presidency of Dr. Strachan. The office-bearers for the ensuing year will be elected, and Dr. Strachan will read a paper on The Health Conditions of School Life. A discussion on The Present Position of Medical Officers under the Public Health Acts will be introduced by Dr. Wickham. The annual dinner will be held after the meeting. Tickets 5s. each.—C. J. LEWIS and J. PEAKE, Honorary Secretaries.

CAMBRIDGE AND HUNTINGDON BRANCH.—The annual meeting of this Branch will be held, in conjunction with the East Anglian Branch, at Norwich, on Thursday and Friday, June 19th and 20th respectively. A full circular with the agenda and full particulars will be forwarded in a few days.—BUSHELL ANNINGSOON, Honorary Secretary, Walthamsal, Barton Road, Cambridge.

ABERDEEN, BANFF, AND KINCARDINE BRANCH.—The summer meeting of this Branch will be held in the Kintore Arms Hotel, Inverurie, on Saturday, June 21st, at 1 o'clock P.M., Dr. Fowler in the chair. Business: 1. Minutes, etc. 2. Exhibition of various old Scotch and local objects of interest, with description of the same, by Dr. F. Maitland Moir, Aberdeen. A four-in-hand coach will, if the weather be favourable, start from the corner of Market Street at 10.45 A.M. for the conveyance of members to Inverurie *via* Tyr Baggar, Blackburn, and Kintore, arriving at 12.45. The coach will leave Inverurie on the return journey at 6 P.M. Fare for coach and aerated waters, etc., *en route*, 5s. per head. Dinner in the Kintore Arms Hotel, Inverurie, at 1.30 P.M.; price (inclusive of attendance, but exclusive of wine), 3s. 6d. per head. N.B.—In order that suitable arrangements for coach, refreshments, and dinner be made, members intending to be present are urgently requested to signify their intention of so doing as soon as possible.—ROBERT JOHN GARDEN, J. MACKENZIE BOOTH, Honorary Secretaries.

DORSET AND WEST HANTS BRANCH.

The spring meeting of this Branch was held at Ringwood on Tuesday, May 20th; Dr. E. M. SPOONER, President, in the Chair. Twenty-nine members and one visitor were present.

Officers and Council.—Dr. E. W. Batterbury, of Wimborne; Dr. C. Childs, of Weymouth; Dr. J. Davison, of Bournemouth; Mr. H. G. Dyer, of Ringwood; Mr. W. E. Good, of Dorchester; Dr. J. C. Leach, of Sturminster Newton; and Dr. W. V. Snow, of Bournemouth, were elected members of the Branch Council for the ensuing year.

Representative on the Council of the Association.—Mr. C. H. Watts Parkinson, of Wimborne, was re-elected.

Representative on the Parliamentary Bills Committee.—Mr. C. H. Watts Parkinson was re-elected.

New Members.—The following gentlemen were elected: Mr. Alfred Emson, of Dorchester; Mr. Arthur Frederick Stevens, of Buckland Newton; and Mr. Arthur Heygate Vernon, of Bournemouth.

Next Meeting.—It was decided to hold the summer meeting at Bournemouth on July 23rd.

Medical Officers of Health to County Councils.—It was resolved unanimously, "That this meeting is of opinion that the appointment of a medical officer of health by the County Councils in accordance with Section 17 of the Local Government Act, 1888, is most desirable, and should be carried out in the counties of Hants and Dorset."

Case.—Mr. H. G. DYER showed a patient upon whom Lumbar Colotomy had been performed after eleven days' intestinal obstruction due to a bony growth pressing on the rectum.

Papers.—The following papers were read: Dr. McLEAN: On the Epidemic of Fever in Portland during 1889.—Dr. LAWRIE: On the Application of Electricity by Apostoli's Method in Uterine Disease.—Dr. GREVES: Case of Aneurysm of the Third Part of the Arch of the Aorta. Specimen shown.—Dr. MACDONALD: Remarks explanatory of the Lunacy Act, 1890.

Votes of Thanks.—Votes of thanks were passed to Mr. Nunn for his services as President, and to the Earl of Normanton for his kindness in again affording the members the pleasure of visiting his house, picture gallery, and grounds.

Excursion and Dinner.—After a pleasant drive to Lord Normanton's residence at Somerley, the members returned to Ringwood and dined together at the White Hart Hotel.

METROPOLITAN COUNTIES BRANCH: SOUTH LONDON DISTRICT.

The annual meeting was held at the Holborn Restaurant on May 28th.

Officers and Committee.—The ballot was taken for Officers and Committee of the District for the ensuing year, and the following were unanimously elected. *Vice-President of the District:* Dr. J. W. J. Oswald, *vice* Dr. F. Taylor. *Representative of Branch on*

Council: Mr. J. Brindley James. *Honorary Secretary:* Dr. H. W. G. Mackenzie, *vice* Dr. Percy Smith, resigned. *Committee:* Messrs. H. H. W. Button, L. A. Dunn, A. P. Hills, J. Marshall, Herbert Taylor, G. H. Wilkins, and Dr. Percy Smith.

Votes of Thanks.—Dr. OSWALD and Mr. J. BRINDLEY JAMES moved votes of thanks, which were carried by acclamation, to Dr. Frederick Taylor and Dr. Percy Smith for the way in which they had respectively filled the offices of Vice-President and Honorary Secretary during the past three years.

Dinner.—The members subsequently dined together, Dr. ORD, President of the Metropolitan Counties Branch, taking the chair, supported by Dr. F. Taylor and Dr. J. W. J. Oswald, Mr. J. Brindley James, and other prominent members of the District. In proposing the toast of the South London District, Dr. ORD drew attention to the successful character of the meetings that had been held in the past year, and Dr. FREDERICK TAYLOR replied.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.

A MEETING of this District was held at St. Bartholomew's Hospital, Chatham, on May 29th, Deputy-Surgeon General J. H. JEFFCOAT in the chair.

Next Meeting.—It was resolved that the next meeting be a conjoint one with the East Kent District, and that it be held at Maidstone in November. Mr. A. H. B. HALLOWES was unanimously nominated for the chair, and consented to occupy it on the occasion.

Communications.—The following papers were read and discussed: Mr. F. B. JESSETT: Some Observations on the Surgical Treatment of Intestinal Obstruction.—Mr. F. W. PENFOLD: Notes on a Case of Aortic Aneurysm, with Specimen.—Mr. A. G. FOULERTON: Notes of a Case of Scleroderma. This patient was exhibited, and excited considerable interest.

Dinner.—Twelve members dined at the Bull Hotel, Rochester.

GLOUCESTERSHIRE BRANCH.

The annual meeting of the Branch was held at the Bell Hotel, Gloucester, on Tuesday, May 20th. The President, Mr. H. E. WADDY, was in the chair, and upwards of twenty members were present.

The minutes of the last meeting were read and confirmed.

The SECRETARY presented the balance sheet for 1889.

Officers and Council.—Proposed by Mr. WADDY, seconded by Dr. HENLEY, that Dr. Soutar and Mr. Bower be elected scrutineers for 1891. Carried.—Proposed by Mr. WADDY, seconded by Dr. WILSON, that Dr. Needham be elected as the representative of the Branch on the Council of the Association and on the Parliamentary Bills Committee. Carried.—The following officers were declared duly elected for 1890-91: President, Dr. Watters (Stonehouse, Glos.); Honorary Secretary, Mr. G. Arthur Cardew. Dr. Rooke, Cheltenham; Dr. Inglis, Cheltenham; Dr. Clark, Gloucester; and Mr. Bower, Gloucester, were elected to the four vacant seats on the Council.

Paper.—Dr. GREIG SOUTAR (Barnwood House, Gloucester) read a paper on Incipient Insanity, which was followed by a discussion, in which Dr. EAGER (Northwoods, Bristol), Drs. HENLEY, CLARK, BATTEN, ELLIS (Gloucester), Drs. WILSON and SMITH (Cheltenham), and others took part.

Dinner.—The dinner took place at the Hotel, and was well attended.

SPECIAL CORRESPONDENCE.

PARIS.

How to Render Instruments Aseptic.—*Vegetable Diet as a Therapeutic Agent.*—*Different forms of Purulent Pleurisy and their Microbes.*—*Etiology of Glanders.*—*Goat Vaccine.*—*General News.*

ACCORDING to M. Albarran metallic instruments may be made aseptic by exposure to a temperature of 150° C. (334° F.) for half an hour in a sterilising stove, followed by immersion in an antiseptic solution. If there is no sterilising stove at hand the instruments should be kept immersed during several hours in a 5 per cent. carbolic acid solution. Catheters made of gum and catgut are sterilised with more difficulty. The following means can be used: (1) by sulphurous acid, Guyon's apparatus; (2) by

but this seems absurd when our pay on joining is below that of a lieutenant. New arrivals often express regret at not knowing what they had to expect; and I hope that you will kindly make the above facts known for the guidance of those who intend going up for the examination in August.

A ROYAL MEDICAL CORPS.

M.S. writes: All now agree that the Medical Department must be counted a corps, on lines similar to the Royal Engineers, with substantive rank, but limited powers of command. This can only be attained by: 1. Pressure from the schools. 2. Parliamentary influence. The following is suggested:

1. Maintain the Medical Staff Defence Union under auspices of British Medical Association.
2. A Central Committee of retired medical officers to be appointed.
3. Officers on full pay at home and abroad to collect subscriptions limited to £1 per annum, and forward to Central Committee.
4. Brief statements of the questions at issue to be printed and forwarded to Members of Parliament.
5. Fuller statements to be circulated amongst members of the Association, with a request that they would use all their political interest to attain the desired ends.
6. The schools of the United Kingdom to be informed by printed notices of the importance of the question at issue, and the absolute necessity of candidates not coming forward, reasons being given why they should not join the service under existing conditions.

This is all-important. Close the supply for even two years and the authorities must give way; but if the supply cannot be entirely cut off, the idea must be abandoned. A supply of an inferior class, socially and professionally, is just what the authorities would welcome, as giving them just grounds for refusing the claims of medical officers. Systematic organisation is now required; who will come forward and undertake it?

JUNKERISM.

OBSERVER writes: There are many things connected with the German system of government with which we cannot be enamoured, but there is one which most persons can admire—the will and ability of the German Emperor to “sit on” the Junkers of his army. What an advantage it would be if some one in high authority in England could “sit on” our military Junkers.

PUPILS AT THE ROYAL SCHOOL FOR DAUGHTERS OF OFFICERS.

M.D. points out that in the returns from this school is a table, “Rank of Parents of the Pupils,” in which medical officers are placed last of all, under paymasters, quartermasters, commissaries, riding masters, veterinary surgeons, and chaplains. This clearly shows that, in the opinion of the functionaries who compile the table, medical officers have no rank at all, or at all events, are inferior to every other grade in the army. This will please “my military advisers!”

THE NAVY.

THE following appointments have been made at the Admiralty: JOHN LAMBERT, Fleet Surgeon, to the *Tamar*, May 27th; JAMES L. SMITH, Surgeon, to the *Humbert*, May 27th; ROBERT W. BIDDLE, Staff Surgeon, to the *Assistance*, temporarily, May 29th; PHILIP N. RANDALL, Surgeon, to the Chatham Hospital, May 30th; GEORGE G. BORRETT, Surgeon, to the *Duke of Wellington*, additional, May 30th; HENRY T. KELSALL, Surgeon, to the *Invincible*, additional, May 30th; WALTER H. S. STALKART, Surgeon, to the *Vivid*, additional, May 30th; GEORGE A. S. BELL, Surgeon, to the *Wildfire*, additional, May 30th; JOHN A. KEOGH, Surgeon, to the *Excellent*, additional, June 4th; RICHARD BARNARD and EDWARD CUFFEY, Surgeons, to Plymouth Hospital, May 30th; WILLIAM W. JACOBS, Surgeon, to the *Wildfire*, June 4th.

MEDICAL STAFF.

BRIGADE-SURGEON JAMES FORBES BEATTIE, M.D., has gone on retired pay. His commissions are dated: Assistant Surgeon, September 30th, 1863; Surgeon, March 1st, 1873; Surgeon-Major, April 28th, 1876; and Brigade-Surgeon, June 27th, 1888. He served in the Ashanti war in 1873-74 (medal); in the Afghan war in 1878-80, including the defence of Candahar (medal); and in the Egyptian war of 1882, during which he was present at the battle of Tel-el-Kebir (medal with clasp and Egyptian bronze star).

Surgeon S. O. STUART has been posted to the Cambridge Hospital, Aldershot, for duty, and has been succeeded in the medical charge of the 2nd Infantry Brigade at Aldershot by Surgeon-Major G. R. RAE, Surgeon-Major A. H. ANTONISZ, M.B., taking Surgeon-Major RAE's position as Medical Officer to the third station hospital at Aldershot.

Surgeon-Major W. E. RIORDAN, ranking as Lieutenant-Colonel, is promoted to be Brigade-Surgeon, *vice* R. W. Berkeley, retired; dated May 6th, 1890. Brigade-Surgeon Riordan's previous commissions are dated: Assistant-Surgeon, September 30th, 1864; Surgeon, March 1st, 1873; and Surgeon-Major, September 30th, 1876. He served in the Egyptian war of 1882 (medal and Khedive's Star), and in the Sudan campaign in 1885 (clasp).

INDIAN MEDICAL SERVICE.

DEPUTY SURGEON-GENERAL W. F. DE FABECK, M.D., Madras Establishment, is appointed Surgeon-General with the Government of Madras. He entered the service as Assistant-Surgeon January 29th, 1857, and rose to Deputy-Surgeon-General March 28th, 1886. He was in the Eastern campaign in 1854-55, including the siege of Sebastopol and the assault on the Redan (medal with clasp), and in the Indian Mutiny campaign in 1857-58 (medal). It will be remembered that Deputy Surgeon-General Donnelly was recently appointed to the post now given to Surgeon-General De Fabeck, but that the Government of India refused its sanction on account of age, Dr. Donnelly being in his 60th year. Dr. De Fabeck was 56 last month.

Surgeon A. S. FAULKNER, F.R.C.S., Bombay Establishment, medical officer 19th Native Infantry, is reappointed officiating Agency Surgeon at Ulwar, during such time as Surgeon A. W. D. Leaky, F.R.C.S., may officiate as Residency Surgeon at Hyderabad.

Brigade-Surgeon H. GRIFFITH, Madras Establishment, has retired from the service on a pension of £700 per annum, from April 30th. He entered as Assistant-Surgeon July 27th, 1859, and rose to Brigade-Surgeon March 28th, 1886. He has no war record.

The services of T. W. STEWART, Madras Establishment, are placed at the disposal of the Government of India in the Home Department,

The services of Surgeon J. L. T. JONES, M.B., Bombay Establishment, are placed at the disposal of the Government for employment in the Civil Department.

Surgeon B. B. GRAYFOOT, Bombay Establishment, medical officer 24th Native Infantry, and Acting Secretary to the Surgeon-General with the Government of Bombay, is appointed to the medical charge of the 10th Light Infantry, *vice* Surgeon A. C. Thompson, dead.

Surgeon M. B. BRAGANZA, Bombay Establishment, officiating in medical charge of 24th Native Infantry, is confirmed in that appointment, *vice* Surgeon Grayfoot, transferred to the 10th Light Infantry.

The undermentioned officers have leave of absence as specified: Brigade-Surgeon A. BARRY, M.D., Bombay Establishment, for one year on medical certificate; Surgeon-Major G. H. PEEVOR, Bengal Establishment, in medical charge of the 1st Battalion 4th Goorkha Regiment, for one year; Surgeon-Major G. GRIFFITH, Bengal Establishment, Deputy Sanitary Commissioner, North-West Provinces and Oude, for one year and 180 days on private affairs; Surgeon-Major W. H. THORNHILL, M.D., Madras Establishment, medical officer 27th Native Infantry, for one year; Surgeon-Major J. LANCASTER, M.B., Madras Establishment, District Surgeon at Vallore, for eighteen months on private affairs.

It is reported from India that orders regarding the redistribution of the military medical administrative staff there, and including all subsidiary modifications of existing arrangements necessitated thereby, are about to be issued, applicable to the three Presidencies.

THE VOLUNTEERS.

THE undermentioned gentlemen are appointed Acting-Surgeons to the corps specified: DAVID RICE, 1st Worcester Artillery; JOSEPH GEORGE MCCANN, 5th Volunteer Battalion King's Liverpool Regiment (late the 18th Lancashire); GEORGE ARTHUR BROWN, 2nd Volunteer Battalion South Wales Borderers (late the 1st Monmouth); EDWARD ELLIS, 1st Volunteer Battalion Duke of Wellington's West Riding Regiment (late the 4th West Riding of Yorkshire).

Surgeons R. MUNRO, M.D., and W. WILSON, 1st Volunteer Battalion Royal Scots Fusiliers (late the 1st Ayrshire), are promoted to be Surgeons-Major, ranking as Majors; and Surgeon A. BLAIR, of the same battalion, is promoted to be Surgeon-Major, ranking as Lieutenant-Colonel.

Surgeon H. J. JOHNSON, London Division of the Volunteer Medical Staff, has resigned his commission, which was dated May 5th, 1888.

Mr. DAVID WALLACE, M.B., is appointed Acting-Surgeon (supernumerary) to the Edinburgh Division of the Volunteer Medical Staff Corps.

Brigade-Surgeon J. L. W. WARD, of the Severn Brigade Infantry Volunteers, has resigned his appointment, on which he entered on February 8th last.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF OXFORD.

THE honorary degree of D.C.L. will be conferred, at the coming Encænna, upon Sir W. Turner, Professor of Anatomy at Edinburgh.

WADHAM COLLEGE.—There will be an election to four scholarships on December 6th, 1890. Candidates must not have exceeded 19 years of age on December 6th. The value of the scholarships is £80 a year, inclusive of rooms and of all allowances. They are tenable in the first instance for two years, but in the case of all scholars whose conduct and industry are satisfactory this term will be prolonged to four years, to which for special reasons a fifth may be added. In the election to one of the exhibitions, preference will be given to any candidate who shall undertake to read for honours in natural science from the time of his admission into college, and to proceed to a degree in medicine in the University of Oxford. Candidates are requested to call on the Warden on Wednesday, November 28th, at 5 P.M., bringing testimonials of good conduct and certificates of date of birth. The examination will begin on Thursday, November 27th, at 9.30 A.M., and will probably occupy four days and a half.

UNIVERSITY OF LONDON.

M.B. EXAMINATION.—At the May examination the following candidates were examined and approved:

First Division.—E. R. C. Earle, University College; H. M. Evans, University College; J. McD. Gill, Guy's Hospital; H. H. Horden, University College; S. H. Jones, St. Thomas's Hospital; R. E. Lord, B.Sc., Owens College and Manchester Royal Infirmary; E. S. Pasmore, University College; E. N. Reichardt, St. Bartholomew's Hospital.

Second Division.—M. Bannister, Owens College and Manchester Royal Infirmary; H. J. Blackler, Guy's Hospital; L. T. F. Bryett, King's College; S. Bueno de Mesquita, Guy's Hospital; A. H. Davis, St. Bartholomew's Hospital; A. C. Frames, St. Bartholomew's Hospital; L. E. Hill, University College; T. W. Hinds, University College; K. McLaren, St. Bartholomew's Hospital; E. A. Sadler, Queen's College, Birmingham; G. Shaw, Westminster Hospital.

SOCIETY OF APOTHECARIES OF LONDON.—May, 1890. Pass-list.

The following passed the Examination in Surgery: Eden, W. A., King's College; Harrison, A. T., Guy's Hospital; Elam, W. H., F.R.C.S. Eng., Charing Cross Hospital; Horsman, W. H., University College; Farquharson, W. G. R., St. Mary's Hospital; Naden, P. T., Queen's College, Birmingham; Hardy, F. W., St. Bartholomew's Hospital; O'Sullivan, C., London Hospital; Spence, D. B., London Hospital.

The following passed the Examination in Medicine, Forensic Medicine, and Midwifery:

Brohier, L. C., M.R.C.S. Eng., Ceylon Medical College and Middlesex Hospital; Hardy, F. W., St. Bartholomew's Hospital; Cohen, I., Charing Cross Hospital; John, H. W., Guy's Hospital; Elam, W. H., F.R.C.S. Eng., Leeds and Charing Cross Hospital; Spence, D. B., London Hospital.

The following passed in Medicine and Forensic Medicine:
Cadel, N. P., Guy's Hospital Parker, G. R. W., Cambridge University and St. Thomas's Hospital

The following passed in Forensic Medicine:
Bate, G. H., London Hospital

The following passed in Forensic Medicine and Midwifery:
De Kretser, E. C., L.M.S., Ceylon Medical College

The following passed in Midwifery:
Bentley, W. L., Owens College, Manchester Guinand, P., University College

The following gentlemen having passed the Qualifying Examination in Medicine, Surgery, and Midwifery, have received certificates entitling them to practise in the same, and have been admitted as Licentiates of the Society:

Messrs. Bate, Bentley, Cohen, De Kretser, Elam, Guinand, Hardy, Harrison, Horsman, Lathbury, Parker, Spence.

FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.—At the meeting of the Faculty held on June 2nd, Mr. Joseph Peake, L.F.P.S.G., having passed the necessary examination, was admitted a Fellow.

MEDICO-PARLIAMENTARY.

HOUSE OF COMMONS.—Monday, June 2nd.

Lepers in Jamaica.—MR. GOURLEY asked the Under-Secretary of State for the Colonies whether he was aware that in the island of Jamaica there was a considerable population of lepers, the number of which was daily increasing in consequence of there being no law compelling them to remain in the hospital until cured; and whether he could see his way to recommend the Governor to introduce a law compelling the isolation of people who might be suffering from leprosy.—BARON H. DE WORMS said there was a considerable number of lepers in certain districts of Jamaica, but the Secretary of State was not aware whether the number was increasing. The question of the compulsory isolation of lepers was under the consideration of the Governors of Jamaica and other West Indian colonies.

OBITUARY.

MARIANO MARTIN DE BARTOLOMÉ, M.D. EDIN.

THE sudden death on June 2nd, at the age of 76, of Dr. de Bartolomé, will come as a shock to the large number of attached friends whom he counted among the Council and Vice-Presidents of the British Medical Association, who had long been intimately associated with him in the course of the affairs of the Association, in which he held so high a position and took so lively an interest. His death will be deeply mourned by the great body of practitioners in his own district and throughout the Association, to whom he was known as a kindly and warm-hearted friend; a man of great independence, straightforwardness, and a warm supporter of the best traditions of professional life.

Although advanced in years and suffering occasionally, and sometimes acutely, from an affection of the heart, which he was fully aware had a serious meaning, Dr. de Bartolomé remained until the last an active and energetic physician, deeply interested in all the institutions of Sheffield. He had lectured in the Medical School since 1845, and during that period had given more than 3,000 lectures, and had been attached as physician to the Sheffield Infirmary from 1843 until about eighteen months ago, when he felt the necessity of retiring from his public engagements. He was at that time senior physician to the infirmary and president of the medical school, having been largely instrumental in obtaining the funds necessary to erect the new buildings in Leopold Street, which were finished in the summer of 1888, and opened on September 29th of that year by a *conversazione*, at which Sir Andrew Clark was present and delivered an address. In November, 1888, a portrait of himself as president was presented to Dr. de Bartolomé, and by him to the school, when he recalled the fact that that was his jubilee year in Sheffield, in which he had resided for fifty years; and in handing to the Council the portrait which had been presented him, he said: "I wish that my portrait might remain in the midst of its givers—those friends whom I have so sincerely and fervently loved."

Dr. de Bartolomé was born a Spaniard, his father being Civil Governor of the province Segovia, and he had been gazetted to a commission in a hussar regiment when the Spanish revolution

brought about by the despotism of Ferdinand VII, and the confiscation of the estates of Bartolomé, drove his father into exile, from which his brothers returned to fill high offices in the Government.

Dr. de Bartolomé adopted the medical profession, matriculating at the University of Edinburgh, and became naturalised as an Englishman. He took his M.D. degree in 1830 with honours, and earned the confidence and friendship of Sir Robert Christison, whose assistant he became in the laboratory and lecture room. He settled at Sheffield in 1838, and occupied the same house for forty-five years. He took the deepest interest in the medical school and hospital, taking an active part in all the arrangements for developing the usefulness of those institutions. At the same time he gained the goodwill and respect of his profession by his high standard of professional integrity, and by his invariable readiness to counsel and assist younger men. As a member of the Council of the British Medical Association he showed himself loyal, energetic, firm, and independent in judgment. He was one of the most steadfast upholders of the work of the Medical Reform Committee, and never failed to respond to the summons of Dr. Waters, however inconvenient and costly the journey to London and consequent absence from his local professional duties might be.

When the Association went to Sheffield, in 1876, for its annual meeting, Dr. de Bartolomé was selected by the profession of the district for nomination as President, and the nomination was unanimously and cordially accepted by the Council. He had the honour to succeed in the presidential chair his old master, Sir Robert Christison, and he showed himself in every way worthy of the honour conferred upon him. His hospitality, his energy, his courtesy, and his policy as chairman, were universally recognised, and he did much to make that meeting one of the most brilliant in the records of the Association. His life was full of honours; in addition to those which we have mentioned, the pupils of the medical school presented him, in 1864, with a handsome piece of plate in recognition of his services. He held some of the highest offices in the craft of Freemasonry, and a presentation portrait of him, subscribed for by a number of his brethren, hangs in the Masonic Hall. Dr. de Bartolomé was President of the Sheffield Athenaeum, being rarely absent from the chair at its annual meetings, and when he retired from that position a few years ago a testimonial, of which he was the recipient, indicated the high appreciation in which his services were held.

Dr. de Bartolomé was twice married and leaves a widow, the daughter of the late Mr. Samuel Jackson, with a family of eight, four sons and four daughters. He died accompanied by all that makes old age most honourable and tolerable—troops of friends, honoured, esteemed and beloved by all his fellows, and surrounded by all the pleasures of recollection which a long life spent in a career of honourable usefulness can give. His name will long be remembered with affection and esteem in this Association.

ROBERT C. R. JORDAN, M.D. LOND., M.R.C.S., L.S.A.

DR. ROBERT C. R. JORDAN, whose death we chronicled last week, was born at Teignmouth in 1825, the son of a solicitor and of a well-known Devonshire family. He was educated at the Grammar School at Exeter, and in his twenty-first year was entered as a medical student. His early career was a promising one; he took the Warneford prize and other distinctions, and was appointed house-physician to King's College Hospital. He took the licence of the Apothecaries' Company in 1849, receiving at the same time the prize in botany. In 1851 he was elected an associate of King's College. In 1852 he took the degree of M.B. and obtained the gold medal in physiology. His first connection with Birmingham was as medical tutor at Queen's College, where his work was rewarded by the remarkable success of his pupils. On the formation of Sydenham College, which was closely associated with the General Hospital, Dr. Jordan was elected to the chair of physiology—at first singly, and afterwards in conjunction with Mr. T. H. Bartleet—and this post he continued to hold until the amalgamation of the Queen's and Sydenham Colleges, and the consequent formation of one medical school in Birmingham. In 1853 Dr. Jordan proceeded to the degree of M.D.; and about the same time he did excellent work as a teacher of the ladies' class in physiology at the Midland Institute. When the Children's Hospital was founded, mainly through the exertions of Dr. Heslop, in 1863, Dr. Jordan was elected honorary physician to the new charity, which for twenty years profited by his skilful and unremitting services.

The number of deaths from all causes was 370, and, deducting 60 deaths of visitors, the death-rate stands at 12.4 per 1,000. The zymotic rate was only .3 per 1,000, the lowest of any seaside health resort in the kingdom. Once more was illustrated the danger of using water from a well in a town which is permeated with drains. In the case in question the water of the well was celebrated for its coolness, brightness, and freshness. But, on four cases of enteric fever occurring amongst those who resorted to it, Mr. Karkeek discovered that, a drain in its vicinity having become choked, an overflow of sewage had taken place into the well. The well was closed, but the case is a good illustration of the tenacity with which some people cling to dangerous, shallow wells, even when a safe supply is available.

CHELTEMHAM (Population, 47,200).—*Slow Convalescence from Scarlet Fever: Scarlet Fever and Diphtheria should be kept apart, and separately isolated: Cancer Mortality.*—The statistics for 1889 show that the health of this town was exceptionally good, in spite of the occasional outbreaks of zymotic disease which Surgeon-General Roch has to record. The death-rate (15.3 per 1,000) was considerably under the average of previous years, and the zymotic rate was the lowest recorded since 1883. Although 30 cases of scarlatina occurred, principally during the months of October and November, none proved fatal. A remarkable feature in the epidemic was the length of time that infection seemed to cling to the convalescent patient. Mr. Roch cites a case in which, fifty-three days after its invasion (the attack being a mild one) and a fortnight after the child had been pronounced perfectly safe, she communicated the disease to her sister, although there was not the slightest vestige of desquamation or sore throat to be seen. The only remnant of delicacy was an unpleasant odour from the breath—which was beyond doubt the immediate cause of transmitting the disease—proceeding from the vocal cords below the range of ordinary observation. There were 11 cases of diphtheria, of which 2 proved fatal. Mr. Roch urges the need of provision for the isolation of cases of this disease, he being of opinion that they should never be brought into contact or associated with scarlatina cases. He suggests, therefore, that in view of the far greater likelihood of an outbreak of diphtheria than of small-pox, some part of the present small-pox hospital should be set apart for the reception of diphtheria patients—a course which would render that institution of far greater service to the public than it is at present. Forty-five deaths from cancer are recorded.

MEDICAL NEWS.

DR. LONDON, of Carlsbad, has had the Knight's Cross of the Order of Isabella the Catholic conferred on him.

THE Worshipful Company of Grocers have granted a donation of £50 to the funds of the National Truss Society.

THE collections of the Southampton Hospital Sunday Committee amount this year to £1,183, the largest sum collected in any year.

DR. FRIEDRICH SALZER, well known as having been Professor Billroth's chief assistant for many years, has been appointed Professor of Surgery at Utrecht.

Drs. Giovanni Gigli, Ettore Gallone, and Giovanni Quirico (of Rome), and **Dr. Francesco Albani** (of Casalmoferrato), have been named Knights of the Order of the Crown of Italy.

PROFESSOR VON DITTEL, the distinguished Vienna surgeon, will celebrate the fiftieth anniversary of his graduation as doctor of medicine on June 9th.

DR. LAVERAN, of the Val-de-Grâce Hospital in Paris, has received a prize from the French Institute for his researches on the hæmatozoa of malaria.

CARDINAL LAVIGERIE is having negroes trained as medical practitioners at Malta, and several have already completed their education and proceeded to Central Africa.

AN Intercolonial Australasian Medical Congress will be held in Sydney, probably in September or October, 1891. The President-elect is the Hon. Dr. MacLaurin.

TESTIMONIAL TO DR. T. J. STAFFORD.—Dr. Stafford has been presented with an address, a service of silver, and a cheque for

£100, by his medical brethren in Boyle, co. Roscommon, on his appointment as Medical Inspector, Local Government Board.

IRISH LUNATIC ASYLUMS.—His Excellency the Lord Lieutenant has authorised the expenditure of a sum of £3,600 in repairs on the Castlebar Asylum, of £250 on Clonmel Asylum, and £600 on Waterford Asylum.

MADAME DÉODOR, who died at Nancy on May 11th, has left 800,000 francs (£32,000) for the foundation of a hospital in that town, to be called by her maiden name (Léonie Bruillard-Balbâtre).

At the recently established Pasteur Institute in Buda-Pesth, Professor Högyes has inoculated 32 persons since April 15th. Poor patients are lodged in a hospital, and kept under supervision during treatment.

MR. LEWIS, of Gower Street, sends us an interesting mezzotint reproduction of the famous portrait of Hunter by Sir Joshua Reynolds, of which the line engraving by Sharp is much valued, and is becoming scarce.

THE Duchess of Albany distributed the certificates granted by the Oxford Corps of the St. John Ambulance Association in the Corn Exchange, Oxford, on the evening of June 2nd. Sir Henry Acland presided.

THE Wladimir Order of the Second Class has been conferred on Dr. Kanzler, director of the Katharine Children's Asylum in St. Petersburg, in recognition of his fifty years of work in the public service.

THE foundation stone of the sanatorium which the Salford Corporation are about to erect in Eccles New Road, on a site adjoining the Trafford estate, was last week laid by Alderman A. L. Dickens, ex-Mayor and Chairman of the Health Committee. The building will cost between £40,000 and £50,000.

By a recent decree everyone who wishes to practise dentistry and "phlebotomy" in Italy must henceforth have taken a legally recognised degree in medicine and surgery. Dentistry will, for the future, be taught in the surgical department of such medical faculties as possess the necessary equipment for the purpose.

COUNTRESS BROWNLOW opened last week a hospital at Woodhall Spa, Lincolnshire, which has been erected by public subscription in order that the poor may participate in the benefit to be derived from the mineral waters. The Princess of Wales has consented to become patroness of the hospital which is to be called the Alexandra.

At the general monthly meeting of the Royal Institution, held on June 2nd—Sir James Crichton-Browne, M.D., LL.D., F.R.S., treasurer and vice-president, in the chair—Mr. C. J. Cullingworth, M.D., F.R.C.P.; Mr. Jonathan Hutchinson, F.R.S., F.R.C.S.; and Mr. Rudolph Messel, Ph.D., F.C.S., were elected members of the Institution.

DURING the early months of the present year, Hove enjoyed an almost total immunity from infectious sickness. Only five cases belonging to the zymotic class (one being an imported case of typhoid fever) were reported during the first quarter, and there was no death. Three deaths were referred to influenza, but in each instance the disease was complicated by lung disease.

A RECENT report of the St. Petersburg Town Council shows that between May 21st, 1882, and April 1st, 1890, trichinae were found on microscopic examination in 458 pigs in the slaughter-houses of that city. Trichinae were also found in 21 specimens of bacon during the same period. During April of the present year alone the carcasses of 8 pigs were condemned on the same ground.

PRESENTATIONS.—At a distribution of certificates and medallions to the successful pupils of the Paris Centre of the St. John Ambulance Association, Dr. Barnard, the Honorary Secretary of the Centre, was presented with a valuable surgical instrument, in recognition of his services as lecturer to the first class, held under the auspices of the Centre.—Dr. Wm. Taylor, on resigning the Chairmanship of the Cardiff Free Library and Museum Committee, has been presented with an address expressive of the appreciation of the invaluable services rendered by him during his term of office.

HORSEFLESH AS FOOD.—The sale of horseflesh as human food was authorised in France in 1856; the consumption in Paris alone amounted to 4,500,653 kilogrammes in 1886. At Berlin 7,000 horses are slaughtered for food every year; at Vienna 6,271 were

disposed of in the same way in 1887. In Italy horseflesh can be lawfully sold as human food; the town where it is most largely eaten is Milan.

THE Royal Humane Society have awarded their bronze medal to Hubert A. Bray, physician and surgeon at Cape Juby, on the West Coast of Africa, for the following act of bravery: The ship *Sahara* was nearing the port of Arrecife, Lanzarote, one of the Canary Isles, when Dr. T. Russell Cruise fell overboard. Mr. Bray jumped overboard after him, and succeeded in supporting him until picked up by a boat.

UNIVERSITY OF TÜBINGEN.—The total number of students in the University of Tübingen this summer session is 1,416, of whom 263 belong to the medical faculty. The building of a new clinic for mental diseases has been commenced, and one for diseases of women is so far advanced towards completion that it will be opened in the coming winter session. A new operating theatre has been added to the surgical clinic.

METROPOLITAN CONVALESCENT INSTITUTION.—One of the earliest of the convalescent institutions which now take so leading a part in hospital relief in this country is the convalescent institution at Walton, with its branches at Kingston Hill (Children), and the seaside branch at Bexhill. This institution celebrated this week its jubilee. During its fifty years' existence it has helped no fewer than 111,000 patients.

THE CYPRUS SOCIETY.—At a meeting of the Cyprus Society this week, it was announced that the immediate objects undertaken were the creation of a Gordon Memorial Cottage Hospital at Cairo, at an estimated cost of £1,500, and the appointment of two lady nurses to go out to Nicosia, at a cost of £180 per annum. One lady, trained at St. Bartholomew's Hospital, has already been sent out, and it is desired to send out three more ladies, with a view to training the native women to the work, and also for carrying out the religious and educational work which the Society contemplates.

RESECTION OF STOMACH FOR SIMPLE ULCER.—At the recent Italian Surgical Congress, Professor Postempski showed a lad, aged 18, on whom, after every kind of medical treatment had been tried to no purpose, he had excised a "round ulcer" by resection of the anterior wall of the stomach near the pylorus. Examination of the ulcer after removal showed that perforation was on the point of taking place. The patient got up on the tenth day after operation; there had been no return of the vomiting which previously troubled him, and he was gaining weight.

The trustees of the late Mr. J. A. Longmore have offered to give £5,000 to the building and furnishing fund of the Longmore Hospital for Incurables, Edinburgh, on whose behalf an appeal was recently made for subscriptions to add a new wing to the present building. The entire amount required for this purpose is estimated at £15,000. The late Mr. Taylor, of Starley Hall, left £3,000 to aid the work, which, with the £5,000 to be given by the trustees, leaves £7,000 still to be got; of this £300 has already been received, and a lady has promised to give £500.

LITERARY INTELLIGENCE.—The first number of a new medical paper, the *Medicinische Revue für Balneologie, Hydro- und Mechano-Therapie Diätetik und Hygiene*, with an "inset" entitled "*Curorte Zeitung*," appeared at Vienna on April 15th. The editor is Dr. A. Kállay, of Carlsbad, and among his collaborators are Drs. Harvay (? Harley) and Mapother, of London; Professors Adamkiewicz, of Cracow; Benedikt, Lewandowski, v. Stofella, and Schrötter, of Vienna; Liebreich and Senator, of Berlin; Rossbach, of Vienna; Mosler, of Greifswald; Cantani, of Naples, etc.

SMALL-POX MORTALITY IN SWEDEN.—The statistics of small-pox in Sweden are instructive, as showing in a most conclusive manner the effect of vaccination in mitigating the scourge. From 1774 to 1800 the death-rate from small-pox was 165 per 100,000 of the population. In 1801 optional vaccination was introduced and the small-pox mortality fell to 90 per 100,000 during the following nine years, and to 21 per 100,000 in the six years after that. From 1816, when vaccination was made compulsory, to 1883, beyond which year the official records from which these figures are drawn, do not extend, the average death-rate from small-pox has been 18.2 per 100,000 inhabitants. In many single years the rate has been as low as 3, 2, or even 1 per 100,000.

THE fourteenth annual meeting of the British Medical Temperance Association was held on May 30th; Dr. B. W. Richardson,

the President, in the chair. The report showed that 29 new members and 25 new associates (the latter being abstaining medical students), had joined during the year, the total enrolled being 411 members and 130 associates. The report referred to the important investigations on the use of alcohol in workhouses and in hospitals, the former showing that in the all but unanimous opinion of the medical officers it is unnecessary for healthy paupers at any age; and the latter that there is, as a rule, much less used now in hospitals than in 1863. The publication of the endorsement of the medical declarations against alcohol by upwards of 600 medical men was also referred to, and the prize written competition on alcohol by medical students in London, Edinburgh, Glasgow, and Belfast. The income for the year was £65 9s. 6d., and the expenditure £69 11s.

DOCTORS IN FRANCE.—Official statistics show that the number of doctors in France and Algeria was 10,600 in 1847; 11,254 in 1866; 10,743 in 1876; 11,643 in 1881; and 11,995 in 1886—figures which seem to indicate that, contrary to the experience of several other countries, the number of medical men in France is even more stationary than its general population. This fact is all the more evident when the steady diminution in the number of practitioners holding the restricted licence of *officier de santé* is considered. The number of these in 1847 was 7,500; in 1866 it was 5,568; in 1876, 3,633; in 1881, 3,200; and in 1886, 2,794. In the new law regulating the practice of medicine, which it is expected will be passed before long, it is proposed to suppress the class of *officiers de santé*; but it is clear from these figures that, in the natural process of professional evolution, they are fast being eliminated as "unfit." It is remarkable that though the number of doctors has increased so little, the number of medical students has almost doubled in the last ten years, there being 6,455 now in the whole of France, as against 3,500 in 1879.

ASSOCIATION OF THE FELLOWS OF THE ROYAL COLLEGE OF SURGEONS OF ENGLAND.—A general meeting of the Association of Fellows of the Royal College of Surgeons of England will be held in the rooms of the Medical and Chirurgical Society, 20, Hanover Square, W. (hired for the occasion), on Saturday, June 14th, at 4 o'clock. The following gentlemen have been recommended for election to the Committee and various offices, etc.:—*President*: Mr. G. D. Pollock (London). *Vice-Presidents*: Mr. Timothy Holmes (London); Mr. Walter Rivington (London). *Treasurer*: Mr. John Tweedy (London). *Honorary Secretary*: Mr. Herbert William Allingham (London). *Committee*: Mr. William Adams (London), Mr. W. Allingham (London), Dr. Robert Barnes (London), Mr. W. K. Barnes (London), Mr. E. R. Bickersteth (Liverpool), Mr. Bruce Clarke (London), Dr. W. J. Collins (London), Dr. Ward Cousins (Portsmouth), Mr. J. Couper (London), Mr. W. T. Crosse (Norwich), Mr. Richard Davy (London), Mr. Alban Doran (London), Mr. Victor Horsley (London), Mr. Jordan Lloyd (Birmingham), Mr. J. H. Morgan (London), Mr. A. T. Norton (London), Mr. Mayo Robson (Leeds), Mr. Manley Sims (London), Mr. C. Steele (Bristol), Mr. W. T. Squares (Plymouth), Mr. Lawson Tait (Birmingham).

PRIZE ESSAYS.—The following prizes are offered by the French Medico-Psychological Society in 1891: 1. Aubanel prize of 2,500 francs (£100) for an essay on insanity in old persons; 2. Belhomme prize of 800 francs (£32) for an essay on vision in idiots and imbeciles; and the Esquirol prize of 800 francs (£32) for the best essay on some point in mental pathology. The essays should be sent to Dr. A. Ritti, general secretary, before December 31st, 1890. The Belgian Royal Academy of Medicine offers a prize of £20 for a demonstration, by original research, of the mode of formation of the red and white blood corpuscles; the papers must be sent in by December 15th, 1890. A prize of £20 will be awarded for an essay elucidating the nature and etiology of cancer, and the prophylaxis of the disease; one of £20 for an essay showing the causes of the development of diphtheria in Belgium and the means of checking its spread; and one of £60 for an essay embodying clinical facts, and, if necessary, experiments in elucidation of the pathogenesis and treatment of epilepsy. Consolation prizes of from £12 to £40 may be awarded to unsuccessful competitors whose essays appear to deserve recognition. A sum of £1,000, in addition to the £60 prize, may be given to an author who should achieve a radical improvement in the treatment of diseases of the nervous centres, as, for example, by the discovery of a curative remedy for epilepsy. A prize of £30 will also be given, under the will of the late Dr. da Costa Alvarenga, of

Pianhy (Brazil), "to the author of the best paper or work on any branch of medicine (the choice of subject being left to the writer)." The essays for the four last mentioned prizes must be sent in by February 1st, 1891. The essays may be written in Latin, French, or Flemish, and should be addressed to the Secretary of the Academy at Brussels.

THE MEDICAL PROFESSION IN FRANCE AND GERMANY.—During the academic year 1888-89 the number of candidates admitted to the degree of doctor of medicine in France was 625. Of these, 399 received their diplomas from the Paris faculty, 77 from that of Montpellier, 66 from that of Bordeaux, 47 from that of Lyons, 18 from that of Nancy, and 18 from that of Lille. In Germany, during the same period, the degree of M.D. was conferred on 1,030 persons—201 receiving it from the University of Würzburg, 123 from Berlin, 114 from Munich, 82 from Bonn, 80 from Greifswald, 58 from Kiel, 47 from Erlangen, 46 from Strassburg, 44 from Freiburg, 39 from Jena, 32 from Halle, 29 from Königsberg, 23 from Tübingen, 26 from Göttingen, 22 from Marburg, 19 from Breslau, 17 from Giessen, 17 from Heidelberg, and 1 from Rostock. No medical degree was granted by the University of Leipzig. A comparative view of the number of students who graduated in medicine during the last four years in the two countries respectively shows that the overcrowding of the profession, in Germany, to which attention was publicly called not long ago, is not exaggerated. During 1885-6, the degree of M.D. was conferred on 546 candidates in France and on 685 in Germany; the corresponding numbers being 624 and 847 in 1886-87, and 642 and 935 in 1887-88. In Germany, as has been shown above, the cry is still "they come." The population of France is thirty-eight and that of Germany forty-five millions.

THE MEDICO-LEGAL SOCIETY OF NEW YORK.—Mr. Clark Bell, in his tenth inaugural address at the last general meeting of the New York Medico-Legal Society, was able to point to a remarkably prosperous year's work, including as it did the first international congress on the subject of medical jurisprudence. The roll of the Society has been increased by about 150 members, and now numbers the very large total of 743 members, of whom 527 are active, 204 corresponding, and 12 honorary. A considerable number of papers have been read and discussed at their meetings and published in the Society's *Journal*, and the Society is continuing the publication of a selection of the papers that were read in the earlier days of the Society's work before the *Journal* was founded. The work the Society now has on hand is twofold—namely, to prepare for a second international congress, to be held in New York in 1892, when we have no doubt that no efforts will be wanting to make the gathering one of real importance. The other work is to promote the study of medical jurisprudence, especially in America, and to endeavour to get the subject made compulsory both at the examinations and in the lecture rooms of the schools of medicine and law. For their success in this they have our best wishes; the subject has always, or at any rate for a long time, been compulsory with us, and its importance cannot be overestimated. It is the one which brings the medical profession into closer contact with the general public, and one which affords the greatest opportunities to the practitioner to bring credit or discredit on his calling, according to the skill or ignorance he displays. For the third year in succession the Society is displaying the great liberality and public spiritedness in offering two prizes, of the value of 150 dollars respectively, for the best essay on any subject connected with medical jurisprudence. The papers must be sent in before April 1st, 1891, to the President of the Society, 57, Broadway, New York, the only condition being that competitors shall enrol themselves as members of the Society. The awards in the case of the last competition have not yet been made known.

MEDICAL VACANCIES.

The following Vacancies are announced:

- BRISTOL GENERAL HOSPITAL.**—House-Surgeon. Salary, £120 per annum, board, lodging, and washing. Double qualification. Applications with certificate of registration to be addressed to the Secretary, William Thwaites, by June 16th.
- CANCER HOSPITAL (FREE)** Brompton, S.W.—Assistant House-Surgeon and Registrar. Salary, £50 per annum, with board and residence. Applications to the Secretary by June 9th.
- CENTRAL LONDON OPHTHALMIC HOSPITAL**, 238A, Gray's Inn Road. House-Surgeon, qualified. Rooms and board. Applications to the Secretary by June 7th.
- CENTRAL LONDON THROAT AND EAR HOSPITAL**, Gray's Inn Road.—Registrar and Anæsthetist. Small honorarium. Applications to the Secretary.

- CENTRAL LONDON THROAT AND EAR HOSPITAL**, Gray's Inn Road.—Three Clinical Assistants, qualified. Applications to the Secretary.
- CHARING CROSS HOSPITAL**, Strand, W.C.—Assistant-Physician with University degree, Fellows or Members of the Royal College of Physicians, London. Applications to the Treasurer by June 7th.
- CHARING CROSS HOSPITAL**, Strand, W.C.—Assistant Surgeon-Dentist, a M.B.C.S. Eng. and L.D.S.—Applications to the Treasurer by June 7th.
- CHARING CROSS HOSPITAL**, Strand, W.C.—Anæsthetist, qualified to practise. Applications to be addressed to the Chairman of the Medical Committee by June 7th.
- CHARING CROSS HOSPITAL MEDICAL 'SCHOOL.**—Demonstrator of Anatomy. Honorarium, £150 per annum. Applications to the Dean, Dr. J. Mitchell Bruce, by June 19th.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST**, Victoria Park, E.—House-Physician. Board and residence, and allowance for washing provided. No salary. Applications to Storror-Smith, Secretary, 24, Finsbury Circus, E.C., by June 13th.
- CITY OF LONDON LUNATIC ASYLUM**, Stone, near Dartford, Kent.—Assistant Medical Officer; single; not less than 25 nor more than 35 years of age. Single. Salary £150 per annum, with board, lodging, washing, and attendance. Applications by June 10th to Henry F. Youle, Clerk to the Visiting Committee, City of London Lunatic Asylum, Guildhall, London, E.C., from whom the necessary forms of application can be obtained.
- COUNTY AND COUNTY OF THE BOROUGH OF CARMARTHEN INFIRMARY.**—House-Surgeon; unmarried. Salary, £100 per annum, with board, lodging, and laundry. Knowledge of Welsh desirable. Applications to Mr. H. Howell, Secretary, 11, Morley Street, Carmarthen, by June 17th.
- CO. DOWN INFIRMARY.**—Registrar. Compounder of Medicine, and Assistant to Surgeon. Salary, £63, with board, fuel, and washing. Candidates, who must possess a surgical diploma, should apply to Mr. G. W. O'Flaherty. Election on June 14th.
- CO. MONAGHAN INFIRMARY.**—Surgeon. Salary, £92 6s. 2d. per annum. Applications to J. H. Swan, Resident Surgeon. Election on June 11th.
- DERBY AMALGAMATED FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.**—Second Assistant Surgeon; age 25 to 40. Salary, £160 per annum, rising to £250 (outdoor), and midwifery fees. Applications to the Secretary, Mr. J. Bullivant, 58, Abbey Street, Derby, by June 7th.
- DERBY AMALGAMATED FRIENDLY SOCIETIES MEDICAL ASSOCIATION.**—Senior Resident Medical Officer. Age not under 30 or over 42. Salary, £280 per annum, with house rent and taxes free, midwifery fees, and cab hire. Applications to the Secretary, Mr. J. Bullivant, 58, Abbey Street, Derby, not later than June 21st.
- DERBYSHIRE GENERAL INFIRMARY.**—Resident Assistant House-Surgeon (175 beds). Board and washing and bonus of £10. Applications to the House-Surgeon by June 21st.
- HORTON INFIRMARY**, Banbury.—House-Surgeon and Dispenser; qualified. Salary, £60 per annum, with board and lodging. Applications by June 14th to C. H. Davids, Honorary Secretary, 27, Marlborough Road, Banbury.
- JARROW-ON-TYNE MEMORIAL HOSPITAL.**—House-Surgeon; double qualifications. Age not under 25 years. Appointment for three years at a progressive salary of £130, £150, and £170 respectively, with board and lodging in the hospital. Applications by June 18th to James Campbell, Secretary.
- LEEDS GENERAL INFIRMARY.**—Honorary Surgeon. Applications, addressed to the Treasury at the Infirmary, and marked "Private," should be sent in not later than June 13th.
- LEEDS HOSPITAL FOR WOMEN AND CHILDREN.**—Honorary Surgeon qualified for not less than seven years. Applications to the Secretary, Frederick Kirby, by June 9th.
- LONDON HOSPITAL**, Whitechapel Road, E.—Assistant Physician. Applications to the House Committee by June 17th. Election June 24th.
- LONDON HOSPITAL**, Whitechapel Road, E.—Assistant Surgeon. Applications to the House Committee by June 17th. Election June 24th.
- LUTON FRIENDLY SOCIETIES MEDICAL INSTITUTE.**—Resident Medical Officer. Salary, £180 per annum, rising to £220, with residence. Forms of application to be obtained from the Secretary, Thomas Keens, 12, Grove Road, Luton, Beds.
- MILLER HOSPITAL AND ROYAL KENT DISPENSARY**, Greenwich, S.E.—Junior Resident Medical Officer. Salary, £30 per annum, with board, attendance, and washing. Applications to the Honorary Secretary by June 13th.
- NORTH RIDING OF YORKSHIRE.**—Medical Officer of Health for the Riding; qualified to practise medicine, surgery, and midwifery. Remuneration, a fixed fee of £100 per annum, and 5 guineas per day (to include expenses) for every day's services, with leave to hold other appointments. Applications to William C. Trevor, Deputy Clerk of the County Council, Clerk of the Peace Office, Northallerton, before June 30th.
- OXFORD UNIVERSITY.**—Deputy Linacre Professor of Human and Comparative Anatomy. Salary, £700 a year. Applications to the Registrar of the University by June 21st.
- PARISH OF FARR**, Sutherland.—Medical Officer. Salary, 100 guineas per annum. Single. Applications to Chairman of Board, John Box, House of Tongue, Sutherland.
- PRESTWICH LOCAL BOARD.**—Medical Officer of Health for the District. Salary, £30 per annum. Applications to the Chairman of the Board by June 10th.
- ROYAL FREE HOSPITAL**, Gray's Inn Road.—Senior Resident Medical Officer. Applications to the Secretary, Conrad W. Thies, by June 18th.
- ROYAL FREE HOSPITAL**, Gray's Inn Road.—An additional Assistant-Surgeon; a Fellow of the Royal College of Surgeons of England. Applications to the Secretary, Conrad W. Thies, by June 24th.
- ST. MARY'S HOSPITAL**, Paddington, W.—Physician in charge of Out-Patients. Fellow or Member of one of the Royal Colleges of Physicians in the United Kingdom. Appointment for five years. Applications to Thomas Ryan, Secretary, by June 12th.

SALFORD ROYAL HOSPITAL.—An Honorary Medical Officer for the Pendleton Branch Dispensary; double qualification. Applications, with certificates of age and registration, etc., to the Secretary, Alexander Hay, by June 16th.

SEAMEN'S HOSPITAL SOCIETY.—House-Surgeon for the new Branch of the Society at the Royal Victoria and Albert Docks. Must be M.R.C.S. Applications by June 9th to P. Michell, Secretary, Greenwich, S.E.

UNIVERSITY COLLEGE, LONDON.—Resident Medical Officer. Applications to J. M. Horsburgh, M.A., Secretary, by June 9th.

WALLASEY DISPENSARY.—Assistant or Junior House-Surgeon, to visit and dispense. Unmarried; must devote his whole time to the duties. Salary, £20 per annum, with furnished apartments, coal, gas, and attendance. Applications by June 22nd to the Honorary Secretary, Mr. William Heap, Elm Mount, Penkett Road, Liscard, Cheshire.

WEST SUSSEX, EAST HANTS, AND CHICHESTER GENERAL INFIRMARY AND DISPENSARY.—House-Surgeon. Salary, £20 per annum, with board, lodging and washing. Applications to the Secretary, The Infirmary, Chichester, by June 11th.

WEST LONDON HOSPITAL, Hammersmith Road, W.—House-Physician. Appointment tenable for six months. Board and lodging. Applications to R. J. Gilbert, Secretary-Superintendent, by June 19th.

WEST LONDON HOSPITAL, Hammersmith Road, W.—House-Surgeon for six months. Board and lodging. Applications to R. J. Gilbert, Secretary-Superintendent, by June 19th.

MEDICAL APPOINTMENTS.

ABBOTT, Henry Kingsmill, B.A., B.Ch., M.D. Dub., appointed Third Assistant Medical Officer to the Hants County Asylum.

ALFORD, Charles Edward, M.R.C.S., L.S.A., reappointed District Medical Officer to the Yeovil Union for three years.

BROCKWAY, Archibald Birt, M.R.C.S., L.R.C.P., appointed Medical Officer to the Town of Muttaherra, Queensland, *vice* Dr. Wilkie, resigned.

BURDWOOD, James Watson, L.F.P.S.G., L.M., L.S.A. Lond., M.San. Inst., reappointed Medical Officer of Health for the Bourne Rural Sanitary District.

BURGESS, H. C., L.S.A., appointed Resident Dispenser to the Norwich Friendly Societies' Medical Institute.

BURNETT, Robert William, M.D. Aberd., C.M., M.R.C.P. Lond., appointed Physician to the London Life Association, *vice* Dr. Arthur Julius Pollock, deceased.

CROKER, W. B., M.D., elected House-Physician to the Belfast Royal Hospital, *vice* Dr. McQuitty, whose term of office has expired.

EWART, C. T., M.D., C.M. Edin., appointed Assistant Medical Officer to the London County Asylum, Colney Hatch.

GAYLOR, Edward, L.R.C.P. Edin., L.M., L.F.P.S. Glas., reappointed Medical Officer of Health to the Ripley Urban Sanitary Authority.

HARRIS, Arthur G. R., L.R.C.P. Lond., M.R.C.S. Eng., appointed Medical Officer for the No. 2 (Market Weighton) District of the Pocklington Union, *vice* Alfred Jackson, L.R.C.P., L.R.C.S. Edin., deceased.

HEMBROUGH, John William, M.D. Durh., M.R.C.S., L.S.A., appointed Medical Officer to the Earsdon District of the Tynemouth Union, *vice* P. Alexander, L.R.C.P., L.R.C.S. Edin., resigned.

HENDERSON, A. E., M.B., C.M. Aberd., Ballymeanoch, Lochgilphead, appointed Medical Officer to Pottaloch and to the Parishes of Kilmartin and Craignish, Argyllshire, *vice* Dr. F. L. Roberts, deceased.

HOWARD, Thomas, M.B. Glas., C.M., appointed Medical Officer to the Clun Union.

IRELAND, Thomas, L.R.C.P., L.R.C.S. Edin., L.F.P. & S. Glas., appointed Government Medical Officer, British Guiana.

JACKSON, Fox Turner, M.R.C.S., L.R.C.P. Lond., appointed Resident Medical Officer to Walton Workhouse, Liverpool.

KITE, E. Whitfield Dawson, M.B. Durh., M.R.C.S. Eng., L.S.A., appointed Medical Officer for the 2nd District of Wortley.

M'CARTRY, Dr., appointed Medical Officer for the Tuosist Dispensary District, *vice* Dr. Geoffrey M'Carthy, deceased.

MCMMASTER, A., L.R.C.P. Edin., appointed Medical Officer for the Omagh No. 2 Dispensary District, *vice* John McClung, L.K.Q.C.P.I., L.R.C.S.I.

MOORE, William Daly, L.S.A., reappointed Medical Officer and Public Vaccinator to the Dispensary District of Greatham, Hartlepool Union.

MOSSOP, John, M.D., appointed Medical Officer for the 4th District and Workhouse of the Cheltenham Union, *vice* H. E. Jessop, L.R.C.P. Edin., deceased.

NICHOLLS, William John, L.R.C.P. Edin., L.M., M.R.C.S. Eng., appointed Honorary Medical Officer for the St. Ives Union District.

RUGG, William John, L.R.C.P. Lond., M.R.C.S. Eng., appointed Medical Officer to the Pontefract Dispensary, *vice* George Wills Blomfield, L.R.C.P. Lond., M.R.C.S. Eng., resigned.

SIMPSON, Charles S., M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Surgeon to the Brighton, Hove, and Preston Dispensary, *vice* Mr. W. W. Scott.

SKEEN, James Humphry, M.B., C.M. Aberd., appointed Assistant Medical Officer to the Stirling District Asylum, Larbert, *vice* A. Grimth, M.B.

WALKER, Cyril H., B.A., M.B. Cantab., M.R.C.S., appointed Ophthalmic Surgeon to the Bristol General Hospital, *vice* W. P. Keall, deceased.

WARE, E. E., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.

WAWN, E. Russell, L.K.Q.C.P. Irel., M.R.C.S. Eng., appointed Medical Officer and Public Vaccinator for the Bramley District of the Bramley Union, *vice* Charles Slesser, M.D. Aberd., resigned.

WELCHMAN, Edward, L.R.C.P. Lond., M.R.C.S. Eng., L.S.A., appointed Medical Officer and Public Vaccinator for the Heckington District of the Sleaford Union, *vice* W. W. Stables, L.R.C.P. Edin., M.R.C.S. Eng., resigned.

WILL, John C. Ogilvie, M.D. Aberd., and C.M., appointed Consulting Surgeon to the Royal Infirmary, Aberdeen.

WOODFORD, E. R., M.D. Aberd., M.R.C.S., L.S.A., reappointed Medical Officer of Health to the Ventnor Local Board.

WOOLCOMBE, Walter L., L.R.C.P. Lond., M.R.C.S. Eng., appointed Assistant Surgeon to the South Devon and East Cornwall Hospital, Plymouth.

DIARY FOR NEXT WEEK.

MONDAY.

LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. R. Marcus Gunn: On External Diseases of the Eye. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Dr. Lubbock on Wasting in Children.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Mr. W. Pye: On the Growth Rates of the Body and especially of the Limbs in their Relation to the Natural and Surgical Processes for Rectification of Deformity. Lecture I.

TUESDAY.

LONDON POST-GRADUATE COURSE, Bethlem Hospital, 2 P.M.—Dr. R. Percy Smith: On General Paralysis of the Insane. Hospital for Diseases of the Skin, Blackfriars, 4 P.M.—Mr. Jonathan Hutchinson: On Parasitic Affections of the Skin.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY, 8.30 P.M.—Sir William Roberts: A Contribution to the Chemistry of Gout. Mr. Clinton T. Dent and Mr. W. C. Bull: Analysis of Four Hundred Cases of Amputation, with special reference to the Causes of the Diminution of Mortality.

ANTHROPOLOGICAL INSTITUTE OF GREAT BRITAIN AND IRELAND, Hanover Square, W., 8.30 P.M.—Mr. Theodore Bent: The Nomad Tribes of Asia Minor. Mr. Bernard Hollander: A Contribution to a Scientific Phenology.

WEDNESDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption, Brompton, 4 P.M.—Dr. Acland: On the Elements of Prognosis in Tubercular Disease of the Lungs. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. A. Quarry Silcock: On Ophthalmoscopic Cases.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Mr. W. Pye: On the Growth Rates of the Body and especially of the Limbs in their Relation to the Natural and Surgical Processes for Rectification of Deformity. Lecture II.

BRITISH GYNÆCOLOGICAL SOCIETY, 8 P.M.—Council. 8.30 P.M.—Mr. Eowrieman Jessett: Some Points in the Surgery of the Intestines.

THURSDAY.

LONDON POST-GRADUATE COURSE, National Hospital for the Paralysed and the Epileptic, Queen Square, W.C., 2 P.M.—Mr. W. Adams: On the Surgery of Deformities due to Paralysis. The New Infirmary, Paddington, 4 P.M.—Dr. Broadbent: Clinical Lecture on Medical Cases. 5 P.M.—Dr. Savill: *Post-Mortem* Examinations.

ROYAL COLLEGE OF PHYSICIANS OF LONDON, 5 P.M.—Dr. D. Ferrier: The Croonian Lectures on Cerebral Localisation. Lecture II.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM, 8.30 P.M.—Patients and Card Specimens at 8 P.M. Exhibition of Portrait of the late Professor Donders, by Sir William Bowman, Bart. Mr. Kenneth Scott: Cases of (1) Double Cataract; (2) Iritis (card). Dr. J. Collins: Cases of Persistent Capsulo-pupillary Membrane (card). Mr. Gunn (for Dr. Werner): Vascular Abnormality (card). Mr. Sta-ford Morton: Tumour of Plica Semilunaris (card). Mr. Lawford: Embolism of a Branch of the Central Retinal Artery (card). Papers:—Mr. McHardy: On Artificial Maturation Cataract (concluded). Mr. Snell: On Artificial Ripening of Cataract. Discussion on Artificial Ripening of Cataract by Messrs. Critchett, Browne, Tweedy, Berry, Mackinlay, Cowell, Hill Griffiths, Brailey, and Priestley Smith. Dr. Bronner: Conclusion of the Eye-ball. Dr. Sharkey: On Graef's Sign.

FRIDAY.

LONDON POST-GRADUATE COURSE, Bethlem Hospital, 11 A.M.—Dr. R. Percy Smith: Clinical Demonstration. Hospital for Consumption, Brompton, 4 P.M.—Dr. Acland: On the Pathology, Diagnosis, and Treatment of Hæmoptysis.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Mr. W. Pye: On the Growth Rates of the Body and especially of the Limbs in their Relation to the Natural and Surgical Processes for Rectification of Deformity. Lecture III.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 6s. 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.

BIRTH.

MACPHAIL.—At Rowditch, Derby, on May 28th, the wife of S. Rutherford Macphail, M.D. Edin., of a daughter.

MARRIAGE.

DINGLEY—WADDY.—On May 29th, at Finsbury Park Wesleyan Chapel, by the Rev. James Crabtree, assisted by the Revs. W. G. Beardmore and J. T. Waddy, Allen Dingley, F.R.C.S. Lond., eldest son of Mr. William Dingley, of 277, Camden Road, N., to Emma Louisa (Louie), eldest surviving daughter of Mr. S. D. Waddy, Q.C., M.P., of 1, Gloucester Gate, Regent's Park.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

- CANCEL**, 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, 9; 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., Tu. W. F. S., 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; (Obstetrical), 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, 4, 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, F., 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.

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

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

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

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

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

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

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

PUBLIC HEALTH DEPARTMENT.—We shall be much obliged to Medical Officers of Health if they will, on forwarding their Annual and other Reports, favour us with Duplicate Copies.

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

QUERIES.

DR. LAWSON, who has lately returned from Candelo, N.S.W., is requested to communicate with Dr. Lane, Murray Crescent, Milford Haven.

PHYSICIAN writes: Will anyone kindly inform me as to the best treatment for scurvy of the gums in a child of 9 years, apparently in good health?

DISPENSING CABINETS.

F.R.C.S. would be glad to know where he could obtain a small and not expensive portable dispensing cabinet suitable for dispensing occasionally and on emergencies.

CAN SLEEP-WALKING BE PREVENTED?

MEDICUS would be much obliged for information or suggestions with regard to sleep-walking. He has been liable to it all his life, but during the last two or three years it has become an almost nightly occurrence. He will, after sleeping for a variable time—never more than three hours—suddenly start up and walk about the room with some delusion in his mind that the house is on fire, etc. If questioned, he tells some lie to account for his somnambulism, and, after turning the gas up, he will wake up, go to sleep again, and perhaps in a few minutes he will repeat the performance. He has married within the year, but is rather worse. He notices that when his digestion, which is weak, is wrong, he is not so well; but, though he has tried various plans of diet, he does not improve, and bromide, which he has taken, has no effect. There is no history of insanity on either side.

ANSWERS.

M.B. LOND.—Ladd's *Elements of Physiological Psychology* is published by Longmans, Green, and Co., price 21s.

M.B. C.M.—A memorandum as to colonial surgeons can be obtained on application at the Colonial Office; and for information as to the D.P.H. of London University, our correspondent should apply to the Registrar of the University, Burlington Gardens.

FEHLING'S SOLUTION.

MR. C. W. DEAN (Lancaster) writes: I think "M.D." will find the modification of Fehling's solution he requires in the JOURNAL for March 27th, 1888, page 587. It is Cresswell's, and is most satisfactory. I have used it constantly since that date and have never known it fail.

DR. C. J. LEWIS (Stirling) also sends the reference.

*The directions there given for preparing the solution are as follows: About 35 grammes of copper sulphate are to be dissolved in 200 cubic centimetres of glycerine and 100 cubic centimetres of water; 80 grammes of sodium hydrate dissolved in 400 cubic centimetres of water are then added and the mixture boiled. After boiling, the solution is made up to 1 litre with distilled water. Dr. Cresswell directs that, if required for clinical purposes only, the above quantity should be diluted to 1,250 cubic centimetres, and states that 10 cubic centimetres will then be approximately equal to 5 centigrammes of sugar.

THE STUDY OF HYPNOTISM.

A STUDENT.—The most useful works in English for anyone seeking knowledge of the medical applications of hypnotism are: (1) Bernheim, *Suggestive Therapeutics*, translated by C. A. Hasler, New York, 1889, 1 vol. sm. 8vo. (2) Binet and Féré, *Animal Magnetism*, translated from the second French edition, London, 1888, 1 vol. (International Scientific Series). (3) Moll, *Der Hypnotismus*, Berlin, 1890 (which will be published in English in the series of Contemporary Science, price 3s. 6d., in a few weeks). For those who do not wish to confine themselves to English: Forel, *Der Hypnotismus, seine Bedeutung und seine Handhabung*, Stuttgart, 1 vol., 1889; Liébeault, *Le Sommeil Provoque et les États Analogues*, Paris, 1889, 1 vol.; *Revue de l'Hypnotisme*, Paris, 1889 (monthly, 75 centimes).

A CASE OF TIC DOLOUREUX.

Mr. FREDERIC C. WOOD (Nottingham) writes: A boot and shoemaker, aged 53, first came under my care last autumn, complaining of severe pains in the right side of his head; he had for the last four years been under my predecessors for the same complaint, generally coming on during spring and autumn. When first I saw him the pains in his head were of the most agonising description, coming on at intervals of about ten minutes; during the paroxysms he would pace up and down the room, raving like a madman; bromide and chloral gave him the greatest relief he ever experienced, and for two or three months after the attack he was taking large doses of arsenic. During the middle of March of this present year I was again sent for, only to find him in precisely the same condition as he was last autumn; he was then very thin, and presented a careworn appearance, so I advised him to have all his teeth out, seventeen in number, without delay, to which he readily consented. Accordingly, I proceeded to put him under chloroform; he took the anæsthetic remarkably well; Messrs. Wing, surgeon-dentists, then removed the whole of the teeth, seventeen in number, Dr. Watkins also assisting; hæmorrhage being restrained as they went along, by means of perchloride of iron. He very quickly recovered from the effects of the operation, and at the present time he is looking remarkably well and has had no return of the pains whatever. This was clearly an aggravated form of tic douloureux, and I have every reason to believe the effects of our operation will be permanent.

IRISH DIPLOMAS AND ENGLISH HOSPITALS.

DR. D. A. SHEAHAN (Portsmouth) writes: It is a source of great gratification to the medical profession at large, but more especially to the Irish section of it, to see the various and high honours that are being conferred on Surgeon T. H. Parke—honours which are certainly well deserved, not only in consequence of his heroic exploits in the Stanley expedition, but still more so because, on Stanley's own evidence, he, by his unremitting attention and skill, saved the lives of many members of the expedition as well as that of the great explorer himself.

Mr. Parke, thus famous for his great professional skill under most trying circumstances, is a Licentiate of the Royal Colleges of Surgeons and Physicians of Dublin, and as such is, with hundreds of his countrymen, together with our brothers north of the Tweed, ineligible for the position of surgeon, or even assistant-surgeon, in most English hospitals. Is not this a shame? Why should this great man, who in the darkest part of the Dark Continent, away from the leaders and resources of the surgical art, successfully combated disease, not be recognised as able to fill with honour the post of surgeon to an English hospital with all the resources of science and civilisation at his back? I therefore submit that the proper recognition of Surgeon Parke's worth is not in present bustle and turtle soup, but in opening to him and those equally qualified the highest surgical offices in this country. Englishmen may laud a Captain Kane or a Surgeon Parke, but this counts for little if they still persist in placing Irishmen and Irish institutions at a disadvantage.

Let the Association grant Surgeon Parke its medal if it will, but let it first use its great influence to place him on an equality with Englishmen, which will be only when those barriers of prejudice and selfishness which surround English hospitals have been swept away.

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

C. H. Taylor, M.B., Derby; Dr. Thomas Ireland, Prestonpans; Dr. C. R. Illingworth, Accrington; Dr. Murrell, London; Dr. Myers, London; Mr. W. T. Freeman, Reading; Dr. J. W. Lane, Milford Haven; Dr. W. P. Heringham, London; P. H. Kidd, M.B., Basingbourne; Mr. Adams, Cambridge; Mr. R. L. Whigham, London; Mr. G. N. Robins, London; Dr. G. P. Rugg, London; Mr. H. Greenway, Plymouth; A. Mouillot, M.B., Gorey; Mr. W. L. Woolcombe, Plymouth; Mr. C. Legg, Stamford; Mr. F. T. Jackson, Liverpool; The Publishers of the *Chemist and Druggist*, London; Our Paris Correspondent; Mr. J. Gilroy, Ecclefechan; Dr. J. J. Ridge, Enfield; Mr. R. Rice, Harwell; Dr. W. A. Carline, Lincoln; Dr. E. P. Philpot, Bournemouth; Dr. A. H. Hassall, Lucerne; M. O.; Mr. W. J. H. Fletcher, Uttoxeter; Surgeon L. W. Swabey, Punjab; Professor Tillmanns, Leipzig; Dr. G. A. Atkinson, Newcastle-on-Tyne; Dr. A. Ogston, Aberdeen; Mr. L. Carr, Peterborough; Dr. R. Paramore, London; Madras Medical Service; An Unlucky Brigade-Surgeon; The Secretary of the Metropolitan Hospital Sunday Fund, London; Dr. F. P. Atkinson, Surbiton; Mr. L. Strong, Cosham; Dr. Silles, Wimbledon; Mr. A. Wood, London; A Workhouse Medical Officer; Mr. B. W. Thomas, Welwyn; J. A. Mackenzie, M.B., Balham; Dr. T. A. Palm, Wigton; Mr. W. D. Brydone-Jack, Vancouver; Dr. Seaton, London; Mr. A. W. Nankivell, Chatham; Mr. J. M. MacLaren, St. John, N.B.; Dr. G. V. Poore, London; Mr. B. Shadwell, Manor Park; Surgeon-Major M.S.; Dr. Abercrombie, London; Surgeon-Major N. Leacher, Punjab; Surgeon H. Herbert, Aden; Mr. G. S. Stansfield, Birkenhead; Mr. G. Nussbaum, London; Our Swiss Correspondent; Mr. G. A. Staff, St. Ives; Dr. C. Parsons, Dover; Brigade-Surgeon A. A. Gore, Alexandria; Dahl's Agency, London; Dr. A. W. Renny, Watford; Mr. J. W. Burdwood, Bourne; Mr. E. Millais, London; Professor McKendrick, Glasgow; Mr. W. Roger Williams, London; Messrs. G. Gale and Son, Leeds; Dr. J. Rorie, Liff; Dr. Bateman, Norwich; Dr. Brownrigg, Milford; Member B. M. A.; Lord Ripon, Ripon; Mr. T. M. Watt, Hovingham; Dr. W. Sykes, Momborough; Mr. C. R. Crawford, London; Surgeon T. H. Parke, London; Professor Attfield, London; Mr. C. W. Dean, Lancaster; Dr. W. R. Parker, Kendal; Mr. F. Broadbent, Newark; Mr. H. Fletcher, Ambleside; Mr. W. J. Richardson, Ravensthorpe; Mr. J. Griffiths, Cambridge; Dr. A. C. Miller, Fort William; Messrs. J. Haddon and Co., London; Dr. Mickle, London; Mr. T. S. Ellis, Gloucester; Mr. N. E. Davies, Sherborne; Wm. Ball, M.B., Hounslow; Mr. A. G. R. Foulerton, Chatham; Dr. B. Slade-King, Ilfrac-

combe; Dr. F. O. Coley, Newcastle-on-Tyne; Dr. Major Greenwood, London; Dr. D. W. M. Turpin, Alvaaston; Mr. F. Marsh, Birmingham; Mr. J. Bland Sutton, London; Surgeon M.S.; Mr. W. J. Haslett, London; Mr. J. Benson, Sheffield; Dr. Lush, Weymouth; Messrs. Ewart and Son, London; Dr. R. P. Smith, London; Mr. E. Hurry Fenwick, London; The Income Tax Repayment Agency, London; The Secretary of the University of London; Mr. J. E. Garner, Preston; Dr. Arthur Evershed, London; Dr. J. Cagney, London; Sir Joseph Fayrer, London; Dr. D. Bower, Bedford; Mr. E. H. Ryan-Tenison, Bexhill-on-Sea; Dr. R. W. Burnet, London; Mr. J. Sheppard, Bristol; Mr. H. Marsh, London; Dr. S. W. Bryant, Tavistock; No. 29; Dr. T. Buzzard, London; Mr. W. Thwaites, Bristol; The Registrar of the Royal College of Surgeons in Ireland, Dublin; Query; Mr. C. E. S. Flemming, Freshford; Dr. Barnard, Paris; Messrs. Gardner and Son, Edinburgh; I. M. D.; Mr. A. Thomson, Huntley; Mr. J. M. Richards, London; Messrs. G. Van Abbott and Co., London; Mr. P. S. Hutchinson, London; M.D., Brigade-Surgeon; Dr. Fletcher Beach, Dartford; Professor Corfield, London; Mr. G. Rendle, London; Professor Burdon Sanderson, Oxford; Dr. A. W. Dingley, London; Mr. A. D. Barron, London; Mr. Lawson Tait, Birmingham; Messrs. Street and Co., London; Mr. H. N. Custance, London; Miss Wilson, London; The Registrar of the Royal College of Physicians, London; D. C. L.; Mr. T. D. Finucane, Blackrock; Dr. Wm. Thorburn, Manchester; Mr. W. Bullivant, Derby; Mr. W. Renton, Knaresborough; Mr. T. Lumsden, Gateshead; Dr. C. J. Lewis, Stirling; Dr. W. H. Fenton, London; Mr. G. A. Walker, Darlington; Dr. R. Wade Savage, London; Mr. B. Holmes, London; Dr. Cranstoun Charles, London; Dr. P. Z. Hebert, London; Mr. E. J. McWeeny, Dublin; Mr. W. M. Banks, London; Mr. A. P. Fiddian, Cardiff; Dr. R. Bell, Glasgow; Mr. W. Downing, Aston; Mr. A. B. Druitt, Dunstable; Mr. T. Keens, Luton; Mr. S. Tredder, Bournemouth; Dr. P. G. Unna, Hamburg; Mr. G. W. Bloxam, London; Messrs. Drew and Son, London; Dr. R. Quain, London; Dr. Balding, Royston; Mr. F. G. Harvey, London; Dr. Leslie Phillips, Birmingham, etc.

BOOKS, ETC., RECEIVED.

- The Doctor in Canada. By Robert Wynyard Powell, M.D. Montreal: Printed by the Gazette Printing Company. 1890.
- A Manual of Pharmaceutical Testing for the Man of Business and his Assistants. By Bernard S. Proctor, F.I.C. London: Offices of *The Chemist and Druggist*.
- Dental Surgery for Medical Practitioners and Students of Medicine. By A. W. Barrett, M.B., M.R.C.S., L.D.S.E. Second Edition. London: H. K. Lewis. 1890.
- The History of the Medical School, afterwards the Durham College of Medicine at Newcastle-upon-Tyne, for Forty Years, from 1832 to 1872. By Dennis Embleton, M.D., F.R.C.P. Newcastle-upon-Tyne: Printed by A. Reid, Sons, and Co. 1890.
- The Colours of Animals, their Meaning and Use. By Edward P. Poulton, M.A., F.R.S. London: Kegan Paul, French, Trübner and Co. 1890.
- Proceedings of the New York Pathological Society for the Year 1889.
- The Modern Malady. By Cyril Bennett. With a Preface, by H. Tibbitts. M.D. Price 6s. London: Edward Arnold. 1890.
- Character as Seen in Body and Posture. By Furneaux Jordan, F.R.C.S., New Edition. London: Kegan Paul, French, Trübner and Co. 1890.
- Health Springs of Germany and Austria. By F. O. Buckland, B.A., M.B. London: W. H. Allen and Co. 1890.

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

Seven lines and under	...	...	...	£0 3 6
Each additional line	...	...	...	0 0 4
A whole column	...	...	...	1 15 0
A page	...	...	...	5 0 0

An average line contains seven words.

When a series of insertions of the same advertisement is ordered, a discount is made on the above scale in the following proportions, beyond which no reduction can be allowed.

For 6 insertions, a deduction of	...	10 per cent.
" 12 or 13 "	...	" "
" 26 "	...	25 "
" 52 "	...	30 "

Special terms for occasional change of copy during series:

20 per cent. if not less than 26 pages be taken	...	or their equivalent
25 "	52 "	in half or
30 "	104 "	quarter pages.

For these terms the series must, in each case, be completed within twelve months from the date of first insertion.

Advertisements should be delivered, addressed to the Manager at the Office, not later than noon on the Wednesday preceding publication; and, if not paid for at the time, should be accompanied by a reference.

Post-Office Orders should be made payable to the British Medical Association at the West Central Post-Office, High Holborn. Small amounts may be paid in postage-stamps.

NOTICE.—Advertisers are requested to observe that it is contrary to the Postal Regulations to receive at Post-Offices letters addressed to initials only.