

THE
BRITISH MEDICAL JOURNAL,

BEING THE

JOURNAL OF THE BRITISH MEDICAL ASSOCIATION

EDITED FOR THE ASSOCIATION BY

WILLIAM O. MARKHAM, M.D.,

FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS; PHYSICIAN TO ST. MARY'S HOSPITAL.

VOLUME I FOR 1864.

JANUARY TO JUNE.

London:

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MDCCCLXIV.

Association Intelligence.

BRANCH MEETINGS TO BE HELD.

NAME OF BRANCH.	PLACE OF MEETING.	DATE.
WEST SOMERSET. [Conversazione.]	Clarke's Castle Hotel, Taunton.	Wednesday, Jan. 20th.
MIDLAND. [Quarterly.]	Board Room of the Infirmary, Derby.	Thursday, Jan. 21st, 2 P.M.

Reports of Societies.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

TUESDAY, DECEMBER 8TH, 1863.

R. PARTRIDGE, Esq., F.R.S., President, in the Chair.

ON SOME UNUSUAL OCCURRENCES DURING THE CURE OF A POPLITEAL ANEURISM. BY CHARLES H. MOORE, F.R.C.S.

The aneurism was in the calf, under cover of the gastrocnemius. It was as large as the fist, and had been observed four weeks. From the shape of the tumour, and the greater force of its beat externally, it appeared probable that the opening was on the outer side of the artery. The extent of its alternate dilatation and recoil showed that the opening was a large one. The patient, an athletic man, aged forty, had a wide arcus senilis, and an audible roughness produced by the current of blood in the aorta.

Genuflexion was first employed, and the beat of the aneurism was kept somewhat reduced for eight days. A tourniquet was also applied to the groin by day, and the hip flexed by night. A little diminution took place in the size of the aneurism, but the bending of the knee caused such intense pain in the sole of the foot that it could never be long continued at any angle which materially lessened the arterial impulse. That plan of treatment was accordingly abandoned.

Compression of the femoral artery by two tourniquets, tightened alternately, was next made, and was continued twenty-five days. During the greater part of the same period the patient took an ounce and a half of iodide of potassium. At the end of the time mentioned the aneurism beat less, was half full of solid substance, and was larger than before; the veins of the leg were distended, the skin was dusky, the tissues cedematous, and the beat of the artery on the foot imperceptible. On the next day the skin was of a bright pink colour and of high temperature, and some collateral vessels were enlarged. The aneurism seemed to be near its cure.

On the twenty-seventh day of the treatment by compression sudden severe pain struck the aneurism, which was over in two minutes. The feeling at once returned in the foot, which had been painful and benumbed; and the tumour was found to have fallen in at its highest part between the heads of the gastrocnemius. The veins returned to their natural size, the artery beat again on the instep, and the enlarged collateral arteries disappeared. The hope of an imminent cure was gone.

Compression was continued for three weeks longer, and the aneurism improved; but it advanced so slowly that digital compression was resorted to. It was employed occasionally for three days with manifest advantage, and a day without any pressure was accordingly allowed for the skin to recover itself. Digital compression was then made for thirty-five hours, except at intervals of two hours, when a tourniquet was tightened for half an hour. After fourteen hours' rest the femoral artery was again pressed with the fingers for twelve hours, and at the end of that time the aneurism was

found to be pulseless and firm. In thirteen hours it beat again, but an hour and a half's effective pressure stopped it finally.

The author remarked that genuflexion was inapplicable in this case on account of the pressure which happened to be made upon the posterior tibial nerve by the aneurism in that posture of the limb. He thought it not unlikely that the iodide of potassium might have facilitated the deposition of fibrine in the sac during the seventeen days in which it was taken; but he attributed to that medicine a mischievous acceleration of the pulse, which, by keeping the aneurismal sac constantly tense, occasioned its enlargement. He added some observations upon the varying condition of the aneurism, according as the pulse was quick or slow; as well as upon the different kinds and sources of pain in the case; which observations might be of service in the study of internal aneurisms. The remarkable interruption of the cure he assigned to the detachment of a portion of the fibrine in the aneurism from a situation in which it had previously compressed the nerve, artery, and vein. Upon the removal of this pressure, and the restoration of the current of blood to its natural channels, the enlarged collateral arteries had subsided.

CASE OF POPLITEAL ANEURISM, SUCCESSFULLY TREATED BY FLEXION OF THE KNEE.

BY ARTHUR E. DURHAM, F.R.C.S.

E. P., a pale, unhealthy looking man, aged 31, was admitted into Guy's Hospital, under the care of Mr. DURHAM, on August 5th, 1863. The patient was suffering severely from an aneurism in the right popliteal space, the first symptoms of which had manifested themselves ten or twelve weeks previously. The aneurism was about as large as an orange, firm to the touch, and not easily emptied to any extent by manipulation. Pulsation was very distinct, and the characteristic aneurismal *bruit* could be clearly heard by means of the stethoscope. When the knee was bent as far as expedient, pulsation in the tibial arteries could be scarcely felt.

The case appearing in many respects a favourable one, it was resolved to try Mr. Ernest Hart's method of treatment by flexion. Accordingly, on the 7th, the limb was bandaged, flexed, and supported by pillows in the manner recommended by Mr. Hart. Each succeeding day a fresh roller was applied over those already on the limb, and the degree of flexion somewhat increased. On the 11th the bandages were removed, and the aneurism examined. No pulsation could be felt; but, on making deep pressure, a slight thrill was just perceptible. The limb was again flexed and rebandaged. The next day (that is, the fifth from the commencement of the treatment) neither pulsation nor thrill could be felt or *bruit* heard. The aneurism was, in fact, cured. It gradually diminished in size, and the patient got about comfortably in the course of two or three weeks. He left the hospital on August 28th. During the treatment the patient took every three or four hours a draught containing tincture of opium, tincture of digitalis, and hydrocyanic acid, with manifest good effect.

NOTE OF A CASE OF POPLITEAL ANEURISM CURED BY FLEXION OF THE KNEE (BY THE LATE MR. H. C. JOHNSON.)

BY ERNEST HART, ESQ.

Mr. H. C. Johnson, the late much esteemed and lamented friend of the author, had communicated to him more than a year since some details of a case of popliteal aneurism in which he had effected a cure by forcible flexion of the knee, carried out in the manner which proved successful in the first case which Mr. HART communicated to the Society. The circumstances under which the cure was effected were somewhat peculiar, and Mr. Johnson had intended to bring forward a statement of the case. That intention having been unhappily frustrated, and as he had already authorised Mr. Hart to

month. The globe was hard. She had fair perception of light. There was a peculiar opacity of the cornea, which suggested the probability of calcareous degeneration of some of the internal tissues of the eye. (In a similar case of opacity of the cornea in a disorganised eye, at the Moorfields Ophthalmic Hospital, I heard Von Gräfe express his opinion that there would be found calcareous deposit near the neighbouring ciliary processes.) The surface of the cornea was vesicated. August 20th. Iridectomy was performed. For three days after the operation there was perfect relief from pain. On the fourth day, she had an attack of inflammation; and on the eighth day, a second attack. October 30th. The attacks having occurred almost as frequently as before the operation, I began to despair of permanent relief from iridectomy, and had obtained her consent to extirpation of the globe. On considering, however, the perfect relief conferred for a few days by the first operation, I persuaded her to submit to a second iridectomy. She would herself have preferred extirpation, so great were her sufferings. Iridectomy was accordingly performed for the second time. A large portion was removed from the lower part of the iris. January 17th, 1862. She had had only two or three slight attacks since the operation. November 30th, 1863. Her husband wrote to me, "After the second operation, the attacks became less and less severe, and at longer intervals of time. It is now some months since she had one at all. The eye is slightly harder than the sound one, but is not painful when touched."

In concluding this paper, I cannot refrain from relating the following two cases; which, although not instances of glaucoma, illustrate the wonderful power of iridectomy in relieving disturbed conditions of nutrition of the eyeball.

CASE VII. *Failure of Sight after Extraction of Soft Cataract; Recovery after Iridectomy.* H. C., Esq., of Y—, having had a soft cataract extracted by me from the right eye in October 1859, was able three months afterwards to read the *Saturday Review*; and nine months afterwards "to read small print for several hours very comfortably." During last winter he worked very hard at his occupation as a clerk; and, as he said, "overworked his eyes." His sight rapidly failed; and he made up his mind to go out to Australia as a farmer, fearing that his eyes would not bear work. Finding, however, that the iris was drawn up to the scar of the wound through which the cataract had been removed, I urged him to suspend his decision to emigrate; to submit to iridectomy of the right eye; and to have a partial cataract of the left eye extracted. July 18th, 1863. The area of the pupil of the right eye was clear; free from opaque capsule. He read No. 16 Jäger. Iridectomy was performed on the right eye; and the imperfect cataract in the left was freely punctured. July 22nd. The softened cataract was extracted by a curette through a small opening in the cornea. Aug. 13th. He read No. 2. Sept. 1st. He read No. 2 with the right eye, and No. 1 with the left. The pupil of the left eye was perfect, central, and active. The iris was not adherent to the scar.

In the above case I attribute the deterioration of sight in the right eye to the disturbed condition of the eyeball consequent upon the entanglement of the upper portion of the iris in the corneal scar; and the restoration of sight to the relaxation of the iris obtained by iridectomy. I feel, moreover, great confidence that the eye will now bear reasonable work without fear of deterioration; and also that the left eye will be less liable to fail than the right one, because the iris remains perfectly free from adhesions to cornea or lens.

The following case is, perhaps, more striking.

CASE VIII. *Failure of Sight after Extraction of Soft Cataract; Recovery under Iridectomy.* Master A., aged 9, having had soft cataract of the right eye extracted by

me in February 1861, was able in July to read No. 4 Jäger. The pupil, however, was drawn upwards to the site of the corneal wound, to which the iris was adherent. 1862. June 10th. The sight had become defective, so that he could now only read No. 14. 1863. Aug. 25th. He was now unable to read No. 20, or even to count fingers. Iridectomy was performed downwards, opposite to the corneal scar. Aug. 31st. He read No. 14. Sept. 12th. He read No. 2.

I am, etc., T. PRIDGIN TEALE, JUN.

Leeds, December 5th, 1863.

Medical News.

APOTHECARIES' HALL. On December 17th, 1863, the following Licentiates were admitted:—

Bartlett, Joseph James Henry, Ladbroke Square, Notting Hill
Caldwell, John Thomas, Knutsford, Cheshire
Cook, John, Warwick Street, Regent Street
Dickson, James, Colsterworth, Lincolnshire
Gray, William John, Princes Street, Cavendish Square
Haire, John Hillary, Gosport
Hughes, Robert, Woodbridge, Suffolk
Lewis, William Thomas, St. Bartholomew's Hospital
M'Caull, Charles Nathaniel, Wilton, near Salisbury
Rayner, William, Leeds
Ryder, Dudley Howe, Greenwich
Symonds, William Nathaniel, Sprowston, Norfolk
Tibbitts, Robert William, Ashton, near Bristol

At the same Court, the following passed the first examination:—

Barrett, Joseph William, Guy's Hospital
Lattey, Walter, St. George's Hospital
Vise, William Foster, Middlesex Hospital
Wilford, John George Frederick, Guy's Hospital

Admitted December 24th, 1863:—

Cooke, Alfred Square, Gloucester
Hanks, William, Snaith, Yorkshire
Levet, Nathaniel, Grosvenor Place School of Medicine
Martin, Paulin, Abingdon, Berks
Mence, William Henry Dison, Cambridge
Ruddock, John Robert, Leeds
Simpson, Philip John, Gower Street, Bedford Square
Steward, Thomas Theodore, Wolverhampton
Walker, Samuel Edward, Warwick

At the same Court, the following passed the first examination:—

Paull, Josiah, St. Bartholomew's Hospital
Shaw, Charles Edwin Martin, St. Bartholomew's Hospital
Tomlinson, David Webster, St. Mary's Hospital

APPOINTMENTS.

ARNISON, William C., M.D., elected Resident Medical Officer to the Newcastle-on-Tyne Dispensary.
BOBART, William M., Esq., appointed Resident Surgeon to the Birmingham Lying-in Hospital.
CHAMBERS, Thomas, Esq., elected Assistant-Surgeon to the London Surgical Home for the Diseases of Women.
FISHER, Stephen W., Esq., elected District Surgeon to the Bristol Dispensary.
JORDAN, Robert C. R., M.D., appointed Additional Honorary Medical Officer to the Birmingham and Midland Free Hospital for Sick Children.
OLDMAN, John, Esq., appointed Surgeon to the Huntingdon County Hospital.
POTTER, John B., M.D., appointed Resident Surgeon to the Birmingham Lying-in Hospital.
ROBERTS, Edwin, Esq., elected House-Surgeon to the West Kent General Hospital.
ROBERTS, F. T., M.D., appointed House-Surgeon to the Liverpool Northern Hospital.
SMITH, William J. F., M.D., elected Physician to the Royal Infirmary, Aberdeen.

POOR-LAW MEDICAL SERVICE.

ATKINSON, George P., Esq., to the Knottingley District of the Pontefract Union.
FRESHFIELD, Allen, Esq., to Districts Nos. 1 and 2 of the Tendring Union, Essex.
FRESHFIELD, Philip W., jun., Esq., to Districts Nos. 1 and 2 of the Tendring Union, Essex.
JAMIESON, John, L.R.C.P.Ed., to the Ashill Dispensary District of the Newport Union, co. Mayo.
MITCHELL, Thomas C., Esq., to the Pickhill District of the Thirsk Union, Yorkshire.

ARMY.

WALSH, Staff-Assistant-Surgeon T., to be Assistant-Surgeon 12th Foot, vice A. H. F. Lynch.

To be Staff-Assistant-Surgeons :—

LEWIS, A., M.D.

LYNCH, Assistant-Surgeon A. H. F., 12th Foot.

ROYAL NAVY.

BOWER, John, M.D., Surgeon, to the *Hogue*.

EDWARDS, Robert, Esq., Surgeon, to the *Lyra*.

HOLLINSWORTH, J. M., Esq., Acting Assistant-Surgeon, to the *Cumberland*.

KEELAN, Patrick, Esq., Assistant-Surgeon, to the *Aurora*.

MOORE, George B., M.D., Surgeon, to the *Rattlesnake*.

WOODS, H. C., Esq., Acting Assistant-Surgeon, to the *Royal Oak*.

VOLUNTEERS, (A.V.=Artillery Volunteers; R.V.=

Rifle Volunteers :—

HARRISON, R., Esq., to be Assistant-Surgeon 1st Lancashire Engineer Volunteers.

PROSSER, T., Esq., to be Assistant-Surgeon 2nd Administrative Battalion Monmouthshire R.V.

SHEPHERD, W. G., M.D., to be Assistant-Surgeon Middlesex Victoria R.V.

STEWART, H. C., M.D., to be Surgeon Middlesex Victoria R.V.

To be Honorary Assistant-Surgeons :—

ALLAN, R. L., Esq., 2nd Renfrewshire A.V.

BIRD, P. H., Esq., 36th Middlesex A.V.

FERGUSON, J., Esq., 4th Eiginshire R.V.

WATSON, W. M'C., Esq., 3rd Kincardineshire A.V.

BIRTHS.

CROOK. At Northfleet, Kent, on December 26th, 1863, the wife of *J. Evelyn Crook, M.D., of a son.

FLETCHER. On December 22nd, 1863, at 13, Mornington Terrace, Liverpool, the wife of *F. D. Fletcher, Esq., of a son.

DEATHS.

BOOTT, Francis, M.D., at 24, Gower Street, aged 71, on December 25, 1863.

DANIELL. On December 24th, 1863, at Newport Pagnell, aged 66, Henrietta, wife of *Edward Daniell, Esq.

GIRLING. On December 24th, 1863, at St. Ives, aged 67, Sarah, wife of *G. L. Girling, Esq.

JONES, Thomas, Esq., Surgeon, at Chesterfield, on December 18.

SINCLAIR, Alexander, M.D., Staff-Surgeon, at Southsea, on December 26, 1863.

SMYTHAN, George, M.D., at Canaan Park, Edinburgh, on December 25, 1863.

THOMSON. On December 24th, at Edinburgh, Mary, wife of *David Thomson, M.D., Staff-Surgeon R.N.

WHEELER, C. W., M.D., at Shirley Lodge, Hants, aged 71, on December 26, 1863.

WOODY. On December 22nd, 1863, at Tamworth, Alice, widow of the late Robert Woody, M.D.

THE MEDICAL COUNCIL is to meet on the 15th of January.

EDINBURGH MEDICO-CHIRURGICAL SOCIETY. Dr. A. Douglas MacLagan has been elected President of this Society.

DENTAL HOSPITAL. The College of Surgeons now recognise both the National Dental Hospital and the Dental Hospital in Soho Square.

AT LAST. We believe that the *Pharmacopœia* is actually printed off, and now only awaits the operations of the binder.

DR. EUSTACE SMITH accompanies the Duke of Brabant, as medical attendant, in his journey to a warmer winter climate than is Belgium.

GUY'S HOSPITAL. Sir Lawrence Peel has been elected President of Guy's Hospital, in place of the late Mr. B. Dobree.

EDINBURGH MEDICAL SCHOOL. It is not improbable that another year the Christmas holidays may be done away with at Edinburgh, and the session closed at the end of March.

MR. GREEN was buried on the 19th ult., at Highgate Cemetery. His funeral was attended by the President and many of the Council of the College of Surgeons, as well as by a large number of his old pupils and friends.

GLASGOW SOUTHERN MEDICAL SOCIETY. Edward McMillan has been elected President; W. F. Loneragan Vice-President; and Dr. H. Howatt Treasurer.

GLASGOW MEDICAL SOCIETY. Dr. James Stev has been elected President; and Dr. A. M. Smith Dr. G. H. B. McLeod Vice-Presidents of this Society for 1863-4.

MR. WM. LAWRENCE has been elected an honorary member of the American Academy of the Arts Sciences, as well as of the French Academy of Sciences as announced last week.

TESTIMONIAL TO A HOUSE-SURGEON. A case surgical instruments and a purse have been presented to Mr. W. Oxley of Rotherham, as a mark of esteem for the way in which he performed the duties of a house-surgeon to the Huddersfield Hospital during seven years.

ACTION AGAINST THE SUPERINTENDENT OF AN ASYLUM. An action was lately brought against Dr. Le the superintendent of the Richmond Asylum, Dublin, by the widow of a lunatic who was killed there by another lunatic. The jury, however, gave a verdict in favour of the doctor; not considering the death of a lunatic as any pecuniary loss to the widow.

POOR-LAW GUARDIANS' LIBERALITY. We are glad to be able to record the following act of justice done by a Board of Guardians. We only wish that it were one of those exceptions which prove the rule. At the beginning of the summer, on Dr. Gibbon's commendation, the Guardians of the Holborn Union admitted small-pox cases into a detached portion of the workhouse. Their medical officer treated eight or nine, many of them natural, cases of small-pox, and only three deaths. At the termination, they voted Norton £25 for his extra work. May the publication of this induce other Boards to follow the example.

THE CONVICT TOWNLEY AND THE GOVERNMENT COMMISSION. The conviction of George Victor Townley has been the prevailing topic of conversation in the midland counties ever since his trial. With exception of one or two journals, all the power of the press has been used to applaud the verdict and corroborate the sentence. Against these fearful odds the friends of the murderer have worked, and have succeeded in inducing the Government to send a Special Commission to examine the man. The Home Secretary has been supplied with statements on oath from various members of the prisoner's family, deposing to the numerous instances of insanity existing amongst its various branches; that the views of the prisoner, expressed by him to Dr. Forbes Winslow, were opposed to the notions he had previously entertained; and that his previous life was most exemplary and moral. He was also furnished with declarations by persons who were cognisant of delusions entertained by the prisoner, including one referring to the former breach of the engagement by Miss Goodwin about eight months ago, in which the prisoner was said to have displayed extraordinary acts of eccentricity, such as turning pictures upside down, purchasing a number of white hats and umbrellas at one time, and taking a bath with his clothes on. A memorial signed by nine or ten of the jurymen was also sent, asserting that although in their opinion the verdict was lawful and just, they were also of opinion that an inquiry should take place as to the prisoner's mental condition at present. Sir G. Grey yielded to the request of Messrs. Wilkes, Foster, and Campbell—two medical men and one lawyer—consequently had long interviews with Townley. The borough just subsequently communicated to Sir George Grey an impression on their minds that the prisoner is insane. (*Derby Mercury*.)

OPERATION DAYS AT THE HOSPITALS.

MONDAY......Metropolitan Free, 2 P.M.—St. Mark's for Fistula and other Diseases of the Rectum, 1.15 P.M.—Samaritan, 2.30 P.M.

TUESDAY.....Guy's, 1½ P.M.—Westminster, 2 P.M.

WEDNESDAY....St. Mary's, 1 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—London, 2 P.M.

THURSDAY.....St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Great Northern, 2 P.M.—London Surgical Home, 2 P.M.—Royal Orthopaedic, 2 P.M.

FRIDAY......Westminster Ophthalmic, 1.30 P.M.

SATURDAY.....St. Thomas's, 1 P.M.—St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 P.M.—Lock, Clinical Demonstration and Operations, 1 P.M.—Royal Free, 1.30 P.M.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY. Medical Society of London, 8.30 P.M. Dr. F. W. Mackenzie, "Retraction of the Gravid Uterus, with special Reference to its Occurrence in the Latter Months of Pregnancy."—Odontological (Anniversary).

WEDNESDAY. Pharmaceutical Society, 8 P.M. Mr. J. Eliot Howard, F.L.S., "Note on the Root-Bark of Calisaya"; Mr. Daniel Hanbury, F.L.S., "Note on *Cassia moschata*"; Mr. David S. Kemp, "On Goa Powder"; Mr. T. B. Groves, "Note on the Recovery of Essential Oils from their Watery Solution"; Thompson's Patent Bottles, and Thonger's Patent Label for the Prevention of Accidental Poisoning, will be exhibited.—Obstetrical Society of London, 8 P.M. Annual Meeting; Election of Officers for 1864; President's Address.

THURSDAY. Harveian Society of London, 8 P.M. (Anniversary); President's Address, Election of Officers, and Conversazione.

TO CORRESPONDENTS.

. All letters and communications for the JOURNAL, to be addressed to the EDITOR, 37, Great Queen St., Lincoln's Inn Fields, W.C.

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

COMMUNICATIONS have been received from:—THE REGISTRAR OF THE MEDICAL SOCIETY OF LONDON; Mr. LOWNDES; Dr. W. H. O. SANKEY; Dr. A. T. H. WATERS; Mr. A. H. DOLMAN; THE HONORARY SECRETARIES OF THE HARVEIAN SOCIETY OF LONDON; Dr. PARSONS; Mr. W. G. CORBIN; THE HON. SECRETARIES OF THE OBSTETRICAL SOCIETY; Mr. BRODBURST; Mr. W. WHITE COOPER; Mr. BREMIDGE; Mr. G. L. GIRLING; Mr. HAYNES WALTON; Mr. E. DANIELL; Dr. J. WILLIAMS; Dr. QUAIN; Dr. DOBELL; Dr. CANDY; Mr. G. B. IRVING; Dr. BREE; Mr. T. P. TEALE, JUN.; Dr. C. H. MARRIOTT; Mr. F. D. FLETCHER; and Mr. J. SPROULE.

BOOKS RECEIVED.

1. Life and Death. By W. S. Savory, F.R.S. London: 1863.
2. The Stomach Medically and Morally Considered. By L. J. Beale. London: 1863.
3. The Science and Practice of Medicine. By William Aitken, M.D. Second edition, revised and rewritten. In Two Volumes. London: 1863.
4. Obstetric Aphorisms for the Use of Students. By J. G. Swayne, M.D. London: 1863.
5. A System of Qualitative Chemical Analysis. By Dr. C. Remegius Fresenius. Sixth edition. Edited by J. Lloyd Bullock, F.C.S. London: 1864.

ADVERTISEMENTS.

Exhibition Clock.—"The entire

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