

portions, namely, an "incisor" apparatus and a special battery. The former resembles Mercier's instrument, except that the cutting part is of platinum instead of steel; it is a catheter-shaped metal tube (see Fig. 1), the lumen of which is divided into four separate compartments. Two of these are for the conducting electric wires, the other two being channels for the passage of a stream of cold water which runs to the distal extremity of the instrument by one and returns by the other, thus preventing the apparatus from becoming overheated. The conducting wires end in two small platinum plates (Fig. 1, E) one-third of a centimetre in breadth by two in length, placed parallel to each other at a distance of one millimetre, and joined towards the beak of the instrument, from which they are separated by the length of one centimetre. These plates when heated to a dull red, are applied to the hypertrophied tissue which is thus destroyed without the loss of a single drop of blood.

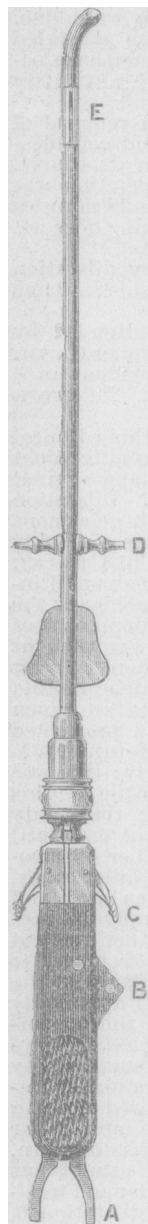


Fig. 2 represents the knife of the galvanic incisor; it consists of a narrow strip of platinum curved into the form shown. A wheel in the handle, resembling that applied to many lithotrites, permits the knife to be screwed backwards and forwards; when the instrument is to be introduced the blade is screwed down until it is completely sheathed in the curved point of the instrument.



Fig. 2.

The battery employed consists of four accumulators, generating fully three times as much electro-motor force as Bunsen's couples, and remaining active for quite twenty-four hours without loss of intensity or of tension. It can be charged easily and in a few minutes with a dynamo, or with one or more Bunsen's couples, or any other pile. The distribution is made by column commutators; in case of need, however, chain commutators would serve the purpose, as they have actually done more than once. The battery remains charged for many months, and may thus in case of necessity be used immediately without any trouble. The several accumulators are hermetically closed, and may thus be turned over without a drop of liquid being spilt. A feature which makes the battery particularly convenient in practice is its portability.<sup>1</sup>

Professor Bottini performs his operation in the following manner: The patient's urethra should be habituated to the instrument before cauterisation of the prostate is attempted. Chloroform is only occasionally required. Unless the bladder is quite empty no water need be injected. The patient being in position as for lithotomy, the instrument is introduced in the usual way. When the point is in the bladder it is turned downwards, as in searching for a stone, and gently drawn forwards so as to cause the beak to hitch against the prostate and bring the cautery into contact with the part on which it is desired to act. If there is any doubt, the exact position of the instrument should be ascertained with the finger in the rectum. The current is next turned on and the point pressed against the hypertrophied tissue. A stream of water, at a temperature of 40° to 50° F., is then made to circulate through the instrument, from a common pail or an Esmarch's irrigator of a capacity of six to eight litres, suspended at a suitable height. By gently elevating

the handle of the instrument the point is made to burn its way slowly through the prostate. When the sound of burning is distinctly heard, the point should be gently moved backwards and forwards until the projecting lobe is completely divided. By experiments on dead human bodies, and on living animals, Professor Bottini was able, with the plates at red heat, to produce in one minute an eschar about one centimetre thick, and one of double that thickness if the action was prolonged for another minute.

When it is judged that sufficient tissue has been destroyed, the current should be shut off, but the instrument should be left *in situ* for two or three minutes, so as to allow it to become cool before it is withdrawn. The knife should next be restored to its sheath, and the instrument pushed into the bladder so as to make sure that it is not caught anywhere, and then withdrawn. For the after-treatment, if the patient cannot pass water in the natural way, Nélaton's soft catheter should be used. The eschar usually separates from the tenth to the fifteenth day. Professor Bottini has operated in this manner in fifty-seven cases with two deaths; these, however, occurred in the early days of the operation. In thirty-two cases a perfect cure was effected, in eleven there was improvement, and in twelve the result was *nil*. The method is not altogether free from danger unless the greatest care is used, and it should be reserved for cases in which strangury is persistent.

If the hypertrophy is only moderate in degree, Professor Bottini recommends that the obstructing lobe should be entirely destroyed with the cautery; in advanced cases, however, the surgeon should be contented with tunnelling a passage through it. Both these procedures are contra-indicated when kidney disease is present, or is even suspected to exist.

## MEMORANDA:

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

#### ANKYLOSIS OF LEFT KNEE-JOINT: TRAUMATIC ANEURYSM.

CHUNIA, a Brahmin female, aged 26 years, was admitted into the Muttra Dispensary on August 29th, 1890. She had ankylosis of the left knee-joint of over a year's standing, the result of an attack of rheumatism. The joint was quite stiff, the leg being fixed at an acute angle to the thigh. She was very miserable, and unable to stand or walk.

Having anaesthetised her, I proceeded forcibly but gradually to straighten the limb, and, after using considerable violence, I got the limb perfectly straight; however, just as I was making my final effort, I suddenly heard a sound, different to that caused by the breaking down of adhesions, loud though muffled in character, and felt the sensation as though some deep-seated structure had given way. I instantly desisted from further violence. Immediately after the sound was heard the limb began to swell, the swelling extending from the popliteal space almost to the ankle.

I had no doubt in my mind that some considerable vessel had given way, and, to verify my surmise, I inserted a small trochar and cannula into the tumour; on removing the former, through the latter came a copious flow of bright arterial blood. For a short space I anxiously deliberated what should be done; whether operative measures should be resorted to, or expectant treatment only adopted.

On consulting with my assistant surgeon, Babu Massmohan Dass, we determined to avoid surgical interference, and to give the patient the alternative chance; consequently the limb was uniformly bandaged from the toes to the centre of the thigh, and then fixed in an elevated position. The patient, very carefully watched, was left thus for twenty-four hours, after which space of time the bandage was removed, and the tumour found considerably reduced in size. Cold applications were now resorted to, the limb being still kept in an elevated position. In one week's time the tumour had entirely disappeared, and the limb was placed in a McIntyre's splint, and gradually straightened.

The patient, after four months' residence in hospital, was

<sup>1</sup> The whole apparatus, battery and incisor, can be obtained from Carlo Mira, Via Ospedale, Milan.

discharged with a fairly useful limb. There was considerable deformity at the knee-joint, but she could get about with comparative ease, which before was out of the question, locomotion being impossible.

The case is interesting in that it shows the risks attendant on manipulating ankylosed joints, and also that simple methods of treatment, as in this case adopted, may be sufficient to produce a perfect cure; indeed, I think it proves that in all cases of so-called traumatic aneurysm, expectant treatment should always primarily be adopted.

The vessel ruptured was almost certainly the popliteal, for the following reasons: 1. Nature of original operation. 2. The sound came from the position of the vessel. 3. Swelling extended from popliteal space downwards, and was of enormous size. 4. Complete failure of tibial pulse. 5. Marked loss of temperature. 6. The practical test with trochar and cannula.

Had the ruptured vessel been the peroneal or other smaller vessel, the swelling would not have been so large or defined, there would probably not have been complete failure of the tibial pulse; and, again, there was no reason why any other vessel should have given way when the knee-joint was being manipulated, except, of course, in the case of disease; but the woman was young and strong, and could give no history of syphilis or other disease except her attacks of rheumatism.

J. FAYRE, M.D., F.R.C.S.E., Medical Staff.

#### DOUBLE SULPHATE OF IRON AND MAGNESIUM.

THE combination of sulphate of iron and sulphate of magnesium in mixtures is a time-honoured one. The relative proportions in which they are prescribed vary largely. These two sulphates, if used in calculated proportions are, however, capable of forming definite salts. The one to which I wish to call attention has the formula,  $\text{FeSO}_4 + \text{MgSO}_4 + 6\text{H}_2\text{O}$ . It may be conveniently prepared by dissolving equal molecules of sulphate of iron and Epsom salts (278 parts by weight of sulphate of iron, and 246 of sulphate of magnesium) in a minimum quantity of boiling water, with the addition of a little dilute sulphuric acid to prevent the formation of oxides. The solution should then be evaporated until it becomes quite thick from the salt gradually crystallising out; and, after allowing it to cool, the deposited salt should be dried, without strong heat, by placing it on filter paper. The double sulphate thus prepared is a crystalline powder of a greenish white colour, about as fine as common salt. It is readily soluble in water, and keeps admirably. If the water of crystallisation is driven off by heat, as in the preparation of "ferri sulphas exsiccata," the resulting powder soon absorbs moisture, and deliquesces.

The double sulphate, prepared as above, is in a form convenient for use; but, if desired, it can be recrystallised, and larger crystals so obtained. Given in 10-grain doses three times a day, the double sulphate appears to have no definitely astringent or aperient influence, and hence is a convenient salt for administration over a considerable period of time in anæmia or chlorosis. A dose of 40 grains produced a slightly aperient effect, with a little flatulence and intestinal pain.

The corresponding double sulphate of iron and ammonium is already largely used in chemical analysis, on account of its being much more stable and less easily oxidised than sulphate of iron itself; and I think that similar qualities, combined with freedom from constipating influence, render the above "magnesium ferrous sulphate" worthy of taking a place among the medicinal preparations of iron.

I have used the following prescription with good results in several cases: R Ferri et magnes. sulphat.  $\mathfrak{z}$ ij; aquæ chloroformi ad  $\mathfrak{z}$ vj;  $\mathfrak{z}$ ss ter die.

Highgate, N.

HUGH WOODS, M.D.

#### CHLORALAMIDE.

I HAVE prescribed this drug lately with benefit in cases of insomnia. I have at present a patient, aged 80, with granular kidneys and a dilated heart. I prescribed 30 grains of chloralamide, which produces refreshing sleep and entirely takes away the desire to micturate in the night, which is an important action in an old man. The drug produces a most

refreshing sleep and a sense of well-being in the morning, without any headache. I regret, however, on each morning after the drug has been taken there has been profuse epistaxis, and a great deal of congestion of face and neck on the following day.

I send this in the belief that it is dangerous to prescribe the drug when the kidneys are damaged in any way so as not to allow the drug to be freely excreted.

East Ilsley, Berks.

ROBERT MAIN, M.D.

#### AN EFFECTUAL AND EASY METHOD OF PLUGGING FOR EPISTAXIS.

OBSERVING the excellent method given by H. A. Rawlins, M.R.C.S., in the BRITISH MEDICAL JOURNAL of March 14th, 1891, I am prompted to give a method I have used for many years for the relief of epistaxis, and also for safety from its occurrence after operations within the nares. It has no advantage over the method of Mr. Rawlins, excepting that I use cotton wool, which is present in nearly every household, while lint is not always to be had at once.

The method is thus: Take an elongated quantity of cotton wool, lengthwise of the fibres, which when doubled upon itself will be somewhat conoidal, and completely fill the naris. It is intended for, especially the posterior end; but before doubling it upon itself fortifying the cotton by spiral turns of soft thread, such as is used by grocers, then, doubling the mass upon itself you have a cone of cotton, three or four inches long or more, from the smaller end of which extend the strings, which ought to be tied together, the knot to include some of the fibres of the cotton at the ends. Now, if thought necessary, this mass can be saturated with a solution of alum, but preferably it may be anointed with a little lard or vaseline. Now with a thin probe or knitting needle in the right hand the mass of cotton is to be caught in its fold at its larger and what ought to be the distal end of the cone while the strings are caught in the fingers of the same hand, and you have now the cone of cotton wool extended upon your probe or knitting-needle and secured in your right hand, while with the left hand the point of the nose can be elevated and with a rather quick thrust the conoidal mass of cotton is carried back until the yielding sensation is imparted to the hand which indicates that the distal end of the cone has emerged through the opening of the posterior naris into the pharynx. The slender probe or knitting-needle or grooved director, as you please, is now easily withdrawn by giving it a sudden retractive start, and the knotted ends of the strings are then cut off and tucked into the naris out of sight, to be easily hooked out and grasped for the removal of the cotton plug that it secures in its spiral folds.

It ought to be remembered that the direction of the floor of the naris, when the patient is sitting erect, is directly backward and a little downward, and also that the combined calibre of all the choanæ at the posterior naris is much greater than at the anterior naris. Hence, to plug successfully the cotton conoid ought to be three or four times larger at the distal than at the proximal end when *in situ*. And again, in making the insertion, do so with a quick motion and keep your probe close to the floor of the naris. A trial of this simple method will prove so efficient that I believe the surgeon will ever after resort to it in preference to any other.

Pittsburg, Pa., U.S.A.

W. H. DALY, M.D.

PRESENTATION.—Dr. F. J. Butt has been presented by the Hoole (Chester) St. John Ambulance Class with a silver-mounted malacca cane, suitably engraved, in recognition of his services as their instructor. All the members of the class who presented themselves were successful in gaining certificates.

At the last sessional meeting of the Institute of Chemistry at Burlington House, a paper was read by Dr. Odling on "The Relation of the Chemical Society to Professional Chemistry;" it was followed by a lengthy discussion. In the evening the Fellows and Members dined at the Albion, Aldersgate Street, Dr. W. A. Tilden, the President of the Institute, occupying the chair. The toast of "The Learned Societies" was replied to by Sir William Thomson, President of the Royal Society, and by Mr. Thomas Bryant, President of the Royal College of Surgeons.

THE following interesting note from Dr. P. M. Davidson, of Congleton, affords some evidence on this head: "In a little more than a fortnight," he writes, "I have attended 173 cases of influenza. For some days previous to Thursday, May 14th, the weather was very fine, and the temperature high, and on the three previous days—Wednesday, Tuesday, and Monday—I had 37, 24, and 19 new cases. Early on Thursday morning there was a severe hail storm, and on that day, Friday, Saturday, Sunday, and Monday there were frequent showers of snow, quite wintry weather, with a very low temperature. My fresh cases fell to 2, 1, 1, 1, and 3, but immediately on a moderate rise of temperature on Tuesday and Wednesday, May 19th and 20th, increased to 8 and 11. An isolated instance of this kind would not, of course, prove that influenza spreads more rapidly in warm than in cold weather, but I thought the facts worth calling attention to, as the point could be so easily settled now that the disease is so prevalent, and that the same kind of weather we have had here was experienced in most parts of England at the same time."

## 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 1891. ELECTION OF MEMBERS.

MEETINGS of the Council will be held on July 8th and October 21st, 1891. 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 18th and September 30th, 1891.

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

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

FRANCIS FOWKE, *General Secretary*.

### BRANCH MEETINGS TO BE HELD.

METROPOLITAN COUNTIES BRANCH.—The thirty-ninth annual general meeting of the Metropolitan Counties Branch will be held at the Holborn Restaurant on Tuesday, June 9th, at 5.30 P.M.—H. RADCLIFFE CROCKER, M.D., 121, Harley Street, W.; ANDREW CLARK, F.R.C.S., 71, Harley Street, W., Honorary Secretaries.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The annual meeting for the election of officers will take place at the Royal Forest Hotel, Chingford, on Thursday, June 4th, at 6 P.M. At 6.15 the members and their friends will dine together. Sir W. Mac Cormac, President of the Branch, will preside, and will be supported by Sir Guyer Hunter, K.C.M.G., M.D., M.P., and a large number of past presidents. The dinner will be followed by a smoking concert. Tickets 7s. 6d. each; morning dress. Members intending to be present are requested to communicate with the honorary secretary as early as possible, but not later than Saturday, May 20th.—J. W. HUNT, Honorary Secretary, 101, Queen's Road, Dalston, N.E.

MIDLAND BRANCH.—The annual meeting will be held at Derby on Thursday, June 18th. Members desirous of reading papers, etc., are requested to communicate before Monday, June 1st, to W. A. CARLINE, M.D., Honorary Secretary, Lincoln.

SOUTH MIDLAND BRANCH.—The annual meeting of this Branch will be held at Cambridge, in conjunction with the Cambs and Hunts and East Anglian Branches, on Thursday and Friday, June 18th and 19th.—C. J. EVANS, Honorary Secretary.

STAFFORDSHIRE BRANCH.—The third general meeting of the present session will be held at the Bell Medical Library, Cleveland Road, Wolverhampton, on Thursday, May 28th, at 3 P.M.—GEORGE RICH, Honorary Secretary, St. Mary's Road, Stafford.

EAST ANGLIAN, SOUTH MIDLAND, AND CAMBS AND HUNTS BRANCHES.—A combined meeting of the above Branches will be held at Cambridge on Thursday and Friday, June 18th and 19th.

SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT.—The next meeting of this District will be held at the Palace Hotel, Hastings, on Thursday, May 28th, at 3.30 P.M. Dr. Spencer will preside. Dinner at 5.30 P.M., charge 6s., exclusive of wine. Gentlemen who desire to read papers or show cases should communicate, without delay, with the Honorary Secretary, T. JENNER VERRALL, 97, Montpelier Road, Brighton.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.—The next meeting of this District will be held at the Hospital, Gravesend, on Thursday, May 28th, at 4 P.M., Mr. O. R. Richmond, in the chair. The dinner will take place at the Old Falcon Hotel, at 6.15 P.M.; charge, 6s. 6d. (exclusive of wine). To facilitate the arrangements, gentlemen who intend to dine are particularly requested to signify their intention to the Chairman, Mr. O. R. Richmond, The Grange, Gravesend, not later than Tuesday, May 25th. All members of the South-Eastern Branch are entitled to attend this meeting and to introduce professional friends. Communications.—Mr. G. Hartridge: Injuries of the Eye and their Treatment. Mr. R. Bryden: A Case of Acute Glossitis. Mr. A. Boyce Barrow: Some Diseases of the Rectum. Dr. Firth: A Case of Hemoptysis.—A. W. NANKIVELL, Honorary Secretary of the District, St. Bartholomew's Hospital, Rochester.

DORSET AND WEST HANTS BRANCH.—The next meeting will be held at Bournemouth, on Wednesday, May 27th, 1891. The business meeting will be held at the Royal Bath and East Cliff Hotel at 3.15 P.M. Agenda: Secretaries' accounts for 1890. Report of election of Branch Council. Election of a representative of the Branch on the Council of the Association. Election of a representative on the Parliamentary Bills Committee. Election of new members of the Branch. Dr. Lush to move, "That, in consequence of the annual meeting of the Association being held this year at Bournemouth, the next meeting of the Branch be held in October. Place of the autumn meeting. To receive a report from the Committee on the Midwives Registration Bill. Discussion: "Embolism and Thrombosis"—to be opened by the President. Communications: Mr. Gardner: A New Dilator. Mr. Lawton: Notes on a Case of Hydrophobia. Dr. Greves: A Case of Acromegaly. Mr. D. Curme: A Case of Ossification of the Falx Cerebri. Dr. MacDonald: Pathological and Microscopical Specimens with Notes. Dr. Davison: Case of Disease of Stomach. The President and members of the Bournemouth Medical Society request the pleasure of the company of the members of the Branch to luncheon, at the Royal Bath and East Cliff Hotel, at 2 o'clock. Dinner at 6 o'clock; charge 6s. each, without wine. Members intending to be present are requested to communicate with Dr. James Davison, Bournemouth, by Monday, May 23rd.—WILLIAM VAWDREY LUSH, M.D.; C. H. WATTS PARKINSON, Honorary Secretaries.

SOUTH-WESTERN BRANCH. The fifty-second annual meeting of this Branch will be held at the Royal Albert Hospital, Devonport, on Friday, May 29th, 1891, under the presidency of Dr. John Rolston. Programme of proceedings: 11.30 A.M., meeting of Branch Council at Mr. G. T. Rolston's residence, 8, Osborne Villas, Stoke; 12.30 to 1.30 P.M., luncheon, by invitation of the President-elect, at his residence, Clarendon Villa, Stoke; 2 P.M., general meeting; President's address; report of Council and general business. Mr. G. Jackson, F.R.C.S. (Plymouth), gives notice of the following resolution: "That in the opinion of the meeting it is desirable that all vaccinations should be made in four places, statistics clearly showing the superiority of the protection obtained against small-pox by those persons who have four well defined marks, as compared with those who have only one or two such marks." Mr. J. M. Ackland, Exeter, will show a specimen of Buccal Concretion. Mr. M. H. Bulteel, Stonehouse, will show a Tarnier's Couveuse. Mr. J. D. Harris, Exeter, will show, with notes, Papilloma removed from the Right Vocal Cord. Mr. G. Jackson, Plymouth, will show, with notes, Exostosis removed from the Ear. Mr. F. Everard Row, Devonport, will show (1) Water Colour Drawing of Case of Lymphosarcoma; (2) Vesical Calculus. Mr. E. Rundle, Truro, Notes of a Case of Osteomalakia. At the conclusion of the meeting, a visit will be made to the warships in Her Majesty's Dockyard, by the kind permission of Vice-Admiral Sir Walter Hunt Grubbe, K.C.B. 6.30 P.M., annual dinner at the Royal Hotel; tickets 6s. each, exclusive of wine. The naval Commander-in-Chief, His Royal Highness the Duke of Edinburgh, has graciously intimated that he will have much pleasure in dining with the members of the South-Western Branch, unless absent from the port on duty. It is also hoped that many members will remain till the following day, which is fixed for the official celebration of Her Gracious Majesty's birthday. A grand review will be held in the Brickfield of all the troops in the garrison, including detachments of sailors from the war ships and of boys from the training ships, as well as of volunteers. There will also be excursions by land and water in all directions (see daily papers). The Committee of the United Service Club have passed a resolution: "That all members of the South-Western Branch of the British Medical Association be considered as honorary members of the Club for three days." Members proposing to attend the annual dinner are requested to communicate with the Honorary Secretary not later, if possible, than May 22nd, and to enclose remittance for 6s. to P. MAURY DEAS, Honorary Secretary, Wonford House, Exeter.

### ABERDEEN, BANFF, AND KINCARDINE BRANCH.

An ordinary general meeting of this Branch was held at Milne's Library, Aberdeen, on April 15th, 1891. Dr. ALEXANDER REITH in the chair.

*Minutes.*—The minutes of the last meeting were read and approved.

*Cases.*—Dr. EDMOND showed a Case of Hæmophilia Neonatorum. The child at birth presented large areas of purplish red discoloration of the skin on the chest, shoulders, legs, arms and back. It passed a large quantity of blood, *per rectum*, on the first day. At the end of a month the areas of discoloration were little changed, being perhaps a little paler. There remained a curious plexus of enlarged veins in the middle line of the abdomen and lower part of the chest.—Dr. HUTCHEON showed a Case of Syphilis with a very Extensive and Characteristic Eruption. Within ten days of infection a hard chancre appeared, with a discharge from the urethra. A few days later a rash, varying in colour from bright red to a coppery tint, appeared on the neck and gradually extended over the back and limbs. On the flexor aspects of the legs and arms there were symmetrical patches of psoriasis about 6 inches in length. Both legs were oedematous and had the colour of raw ham.—Dr. MACKENZIE BOOTH showed a child suffering from Condylomata Lata; no history of infection could be discovered. Dr. Mackenzie Booth also read notes of a Case of Avulsion of the Tuberosity of the Patella, and described the method of treatment.—In the absence of Dr. OGILVIE WILL, Dr. BOOTH read extracts from a paper published by Dr. Will in the BRITISH MEDICAL JOURNAL of January 22nd, 1887, on Fracture of the Tubercle of the Tibia. The result of treatment was very successful.

*Communications.*—Dr. FERDINANDS made some remarks on a Case of Embolism of the Central Artery of the Retina.—Dr. THISELTON URQUHART read notes of a Case of Unusual Cerebral Injury.

#### METROPOLITAN COUNTIES BRANCH: SOUTH LONDON DISTRICT.

THE annual meeting of this Branch was held at Limmer's Hotel on May 14th, Sir WILLIAM MAC CORMAC, President of the Branch, in the chair.

*Officers and Committee.*—The following were elected for the ensuing year: *Vice-President*: J. W. J. Oswald, M.D. *Representative of the District on the Council of the Branch*: J. Brindley James. *Honorary Secretary*: Hector W. G. Mackenzie, M.D. *Committee*: L. A. Dunn, Lewis Lewis, F. Oldfield, R. J. W. Oswald, R. Percy Smith, M.D., J. W. Washbourn, M.D.

*Dinner.*—The Chairman was supported by Dr. Bristowe and Dr. Oswald. Among others present were Dr. Percy Smith, Mr. Brindley James, Mr. L. A. Dunn, Dr. Rutherford, Dr. Glover Lyon, and Dr. Hector Mackenzie. Sir WILLIAM MAC CORMAC, in proposing the toast of the South London District, referred to the successful meetings of the past session, and the excellent papers read. Such meetings not only tended to the advancement of knowledge, and kept the general practitioner in touch with recent advances, but also promoted that spirit of good fellowship which, important in all professions, was especially so in the medical world.—Dr. OSWALD, in responding to the toast of the Vice-President, proposed by Mr. BRINDLEY JAMES, gave a short account of the work of the past session. He thought it was a great boon to the busy practitioners of the vast South London District to have such meetings held in their midst, and to have opportunities afforded them of meeting in the three great hospitals of South London—Guy's, St. Thomas's, and Bethlehem. He hoped that the measure of success of the past would be much greater in the future, and that many more would take advantage of the meetings.—The health of the Chairman was proposed by Dr. BRISTOWE, and Sir WILLIAM MAC CORMAC replied.

**SOUTH-EASTERN BRANCH: EAST KENT DISTRICT.** THE annual meeting of this District was held at the Kent and Canterbury Hospital on May 14th, Mr. BRIAN RIGDEN in the chair. The usual business of the annual meeting was transacted.

*Vote of Thanks to Dr. Tyson.*—Dr. Tyson, on his resignation of the office of Honorary District Secretary, was accorded a very hearty vote of thanks for his services during the past six years.

*Election of Honorary Secretary.*—Mr. Thomas F. Raven, of

Broadstairs, was elected District Secretary in Dr. TYSON'S place.

*Koch's Treatment of Tuberculosis.*—Dr. FITZGERALD read a paper on Koch's Treatment of Tuberculosis.—Dr. BOWLES contributed a paper on Treatment by Tuberculin: Experiences at Berlin and Folkestone.—Dr. Fitzgerald was critical and sceptical; Dr. Bowles hopeful of good results in the future.

*Cases.*—Mr. PRESTON showed cases of: 1. Congenital Dislocation of the Crystalline Lens in three members of a family. 2. Coloboma of Choroid and Iris.

## SPECIAL CORRESPONDENCE.

### PARIS.

#### *Clinical Teaching in Paris.—A Model Sanitary Dwelling.*

THE Surgical Society held a meeting recently, M. Lannelongue being in the chair, to discuss the present clinical teaching in the Paris hospitals. The discussion was very animated, and a commission was appointed to investigate the question, and suggest a remedy for the defects which were acknowledged to exist. The members of this commission are MM. Tillaux, Horteloup, Lucas-Championnière, Reclus, and Brun. The Société des Hôpitaux has also discussed the question at several of its meetings, and now suggests the following changes: That chemical, bacteriological, and pathological laboratories be attached to different hospitals according to the needs of each one. Probably this change will be objected to by those who consider that laboratories are not well placed in hospitals, and that bacteriological research is all but impossible in such places; the constant sweeping, cleaning, shaking beds, etc., increasing the legions of germs to be avoided in a pure cultivation. Again, pathological laboratories in hospitals evidently render an antiseptic atmosphere more difficult to obtain. The Society further suggests that the number of medical men admitted to the competitive examinations of the Bureau Central should be increased by twelve, and that the doctors of the Bureau Central should replace the hospital doctors at the out-patients' consultation; that the State create sixteen clinical chairs, the Minister of Public Instruction to decide on the title to be given to those who fill these chairs; that special diseases be taught in the hospitals, the pupils who attend these lessons paying an extra fee for them. In *Médecine Moderne*, M. Juhel Renoy describes how the "chefs" go their rounds in the hospital wards, and conduct the gratis consultation for out-patients. The interesting cases and the dying attract the most attention. In the outdoor department the "chef" selects the patients to be treated in his wards, then leaves the remaining portion to the "interne," or house surgeon. He, in his turn, after examining a certain number, leaves the rest to the "externe," or dresser. In a pamphlet on the reform of medical education, recently issued by M. Louis Malassez, of the Collège de France, the following reforms are said to be necessary: More money for the laboratories; reorganisation of the Faculty lectures; more work done by the younger professors, and less done, or pretended to be done, by the seniors.

In the Champ de Mars a sanitary dwelling, designed by Dr. Goupil, is on view. Adhesive cement, which never changes condition, is substituted for bricks and mortar. The cost of such a habitation is £96.

### MELBOURNE.

#### *Proposed Formation of a Neurological Society.—Abdominal Section for Hydatid Cysts.—Spermin.*

THE first steps towards the formation of a Neurological Society were taken a short time ago, when a number of gentlemen met at the house of Dr. Neild for that purpose. Dr. McCreery, the Superintendent of the Kew Asylum, who has taken a very active interest in the movement, was voted to the chair. Dr. McCreery informed the meeting that all the medical officers of the asylums in Victoria had notified their intention of joining. About thirty names were handed in, and it was arranged that a meeting for the inauguration of the Society should very shortly be held.

this case was signed, he is reported to have said, "in the ordinary way we used to sign the certificates of death." There can be, we take it, no question that the signing of certificates in this way is most reprehensible; it is clearly illegal, being contrary to a law framed in the public interest. It is also inimical to the interests of the medical profession.

#### THE CASE OF REGINA v. KERR.

SIR,—With reference to the article on the case of Regina v. Kerr on page 1,098 of the BRITISH MEDICAL JOURNAL, we shall feel obliged if you will allow us to state that the two first paragraphs in italics quoted from the memorial give an entirely erroneous account of what we saw at the *post-mortem* examination. The tears were seen near the bruises before a knife was used; there had been bleeding from the tears, and we were cross-examined as to the source of the blood on the genitals at the trial. We need hardly say we do not subscribe to the opinion quoted, that in taking out the vagina tears should be found on the membrane unless the operation is done very carelessly.—We are, etc.,

Carlisle.

HENRY BARNES, M.D.

RODERICK MACLAREN, M.D.

#### "SIXPENNY DOCTORS."

A MEMBER (Bristol) writes: Your correspondents appear to consider sixpenny fees *infra dig.* and derogatory to a respectable profession; so they are in my humble opinion, but I can assure you that to some of our Bristol "cheap Jacks" sixpence would be considered quite a big fee. They are quite satisfied with the following charges: One penny a week for the whole family, halfpenny for a child, threepence a visit, with as much medicine (?) in each case as their patients like to swallow; midwifery fees, sixpence a week from the time of engagement until about ten shillings has been paid; vaccination, sixpence. In order to obtain their patients at a penny a week, a questionable-looking individual is employed to canvass from house to house, he receiving for his trouble a percentage on all fish he manages to net. The individual in question is not particular to the class of people as long as he can obtain the promise of a penny; if any refuse, he finds out the name of the usual medical man, and of course runs him down, at the same time praising the "penny a week" man. A day or two later a boy may be seen, following in the footsteps of the canvasser, collecting the promised pence.

Some may perhaps doubt such men being really legally qualified practitioners, but I can assure them that some glory in the degrees of B.A., M.B., C.M., M.R.C.S., and L.R.C.P. They are not only recognised and met in consultation by our leading *confrères*, but are invited to medical and social meetings under the plea that they are unacquainted with the antecedents of these qualified practitioners.

Now, is there a remedy against such practice as I have described? Yes; let all respectable medical men refuse to meet them in consultation, and the whole thing would at once be crushed, without having to trouble the respective colleges.

#### FEES FOR ATTENDANCE ON THE FAMILIES OF MEDICAL MEN.

B. writes: A. B., aged 18, the son of a country surgeon, while suffering from an act of indiscretion, consulted a local practitioner; a medical bill of over £5 was eventually sent. Not being in a position to pay, for the first time it was referred to his father. The father demurred, not only on medico-ethical grounds, but also as to its being illegally contracted without his knowledge or consent, whereupon a county court summons was issued, half of bill was offered, and the whole of costs paid into court, but refused. Not being able to leave an important case, the whole of bill and costs had to be paid by the father to his brother practitioner.

#### ADVERTISING IN THE COLONIES.

H. T. B.—It is to be feared that qualified medical practitioners who resort to pictorial advertisements in newspapers in order to obtain practice would not be amenable to any condemnation expressed by medical opinion. We should recommend our correspondent to forward copies of the newspapers containing the advertisements to the Colleges from which the person in question obtained his diploma, and to send at the same time a covering letter signed by English graduates and diplomates practising in the district.

## NAVAL AND MILITARY MEDICAL SERVICES.

#### MYOPIA.

B. F. J.—Probably moderate myopia of the left eye would not disqualify for the medical services.

#### RANK AND TITLES.

A NAVAL MEDICAL OFFICER writes: When the present agitation began I was much opposed to my brethren in the army assuming titles that seemed to conceal their identity as medical men; but my opinions have now completely changed. Military titles by the institution of honorary rank received a new and wider significance; they denote military grade, but the distinctive function is indicated by the name of the corps or department attached; *per se*, they do not necessarily

denote functions of command either limited or unlimited. Is there any reason, therefore, why they should not be borne by medical officers in common with other branches of the army? Relative rank is entirely discredited, and its absurdity is well illustrated in a Commissary General "ranking as" Major General, and yet being styled Honorary Colonel. Mr. Stanhope and his military advisers may adopt compound or polysyllabic titles for medical officers as a way out of a difficulty, but such never will or can come into general social use. In the executive branch of the navy there are no fewer than ten grades of officers each with a distinctive title, from Naval Cadet to Admiral, yet only two are in use colloquially, namely, Captain and Admiral. The Lieutenant, although he may rank with an army Captain or Major, has to put up with plain Mr. That the concession of honorary military rank and title would create a similar demand among naval medical officers is entirely unfounded; the latter consider that the veriest bogey raised up before the Camperdown Commission. The cases of army and naval medical officers are in no way parallel.

If Mr. Stanhope and his advisers adopt a *non possumus* attitude, history will repeat itself; although in the end Junkerism must yield, yet meanwhile the medical staff will be recruited from a class both socially and professionally undesirable, and who will be the first to point the finger of scorn, and complain of these Queen's hard bargains? Will it be the *fons et origo mali*, my "military advisers?"

#### INDIAN MEDICAL SERVICE.

SURGEON W. R. EDWARDS, M.D., Bengal Establishment, is appointed Surgeon to Sir Frederick Roberts, Commander-in-Chief in India, *vice* Surgeon-Major C. W. Owen, C.M.G., C.I.E., resigned, dated April 1st.

#### THE ZHOBB VALLEY OPERATIONS.

THE *London Gazette* of May 12th contains the general order and despatches from the Government of India, and from the general officers commanding, relative to the late operations of the Zhoob field force against the Kidarais and others. Major-General Sir George White, the commanding officer, gives a detailed account of the operations, which were explorative as well as militant, and bestows unstinted praise on all engaged in it. The character of the country, he says, in some instances prevented the use of transport animals, and entailed upon officers and men exertions and exposure of an exceptional kind. He singles out for special mention, among others, Deputy Surgeon-General S. A. Lithgow, C.B., D.S.O., "an officer of great experience in the field, who did much to promote the success of the expedition," and Surgeon-Major G. J. H. Evatt, who had charge of two sections of the 23rd British Field Hospital "and worked with characteristic zeal, ability, and powers of organisation."

## UNIVERSITIES AND COLLEGES.

#### UNIVERSITY OF CAMBRIDGE.

ZOOLOGICAL STATIONS.—Applications for permission to work at the zoological stations at Naples and Plymouth are to be sent to Professor Newton on or before May 28th.

NEW BUILDINGS FOR THE MEDICAL SCHOOL.—The Museums Syndicate propose to make certain structural alterations in the Old Anatomy School so as to fit it for the professors and lecturers in medicine, surgery, midwifery, and medical jurisprudence.

DEGREES.—On Thursday, May 14th, the following degrees were conferred: *M.D.*: Edmund Carver, M.A., St. John's. *M.B. and B.C.*: R. A. Bickersteth, M.A., Trinity; C. H. Leaf, B.A., Trinity; H. Greaves, B.A., Caius; F. Belben, B.A., Christ's; J. E. Creswell, B.A., Cavendish.

TEACHER OF CHEMISTRY.—Mr. A. Hutchinson, Demonstrator of Chemistry in Gonville and Caius College, has been recognised by the Medical Board as a Teacher of Chemistry.

THIRD EXAMINATION FOR MEDICAL AND SURGICAL DEGREES. Easter Term, 1891. Examined and approved:—

Part I (*Surgery and Midwifery*).—J. Attlee, John; G. H. A. C. Berkeley, Cai.; Bradford, Cai.; Cropper, Trin.; Daniel, Trin.; Devereux, H. Selw.; Dixon, Trin.; Drake, Clare; Edmondson, John; L. G. Glover, John; Grimsdale, Cai.; Kent, Trin.; Law, Christ's; Lee, H. Cav.; Miller, Queen's; Phear, Trin.; J. J. Perkins, Emman.; L. Roberts, Cai.; Senior, Queens.; H. Simpson, John; Stack, Pemb.; Troutbeck, Cai.; Wallace, Ware, John; Watkins, Cai.; G. Wilkinson, sen., Emman.

All the above are Bachelors of Arts.

#### UNIVERSITY OF ABERDEEN.

ATHLETICS.—With the advent of good weather the cricket, tennis, golf, and swimming clubs have begun active practice, and the matches already held have resulted creditably for the 'Varsity. The 'Varsity sports and the Swimming Club sports are announced to take place early in June.

MEDICAL STAFF CORPS.—The Medical Staff Corps, which now numbers 102 officers and non-commissioned officers, had their first march out for the season, under the command of Surgeon Macgregor, M.D., on Saturday, May 9th. There was a good turn out, and the corps appeared to be in good training. In the evening a successful smoking concert was held in



Hay's Restaurant. Surgeon Riddell was in the chair, and Surgeon Macgregor, Quartermaster De Lessert, Chaplain Smith, and a few civilian guests were present. A capital programme, which bore a most suggestive design, was presented and was well received. A marching column of upwards of 50 officers and men has been arranged to proceed to Aboyne for June 4th to 8th, and another division is to go into training at Aldershot. Altogether the corps is one of the most energetic bodies in local volunteering.

**'VARSITY BATTERY.**—The 'Varsity Battery, which is a company of the City Artillery, though mostly consisting of Arts students, has a considerable number from Marischal, and is commanded by Captain Traill, M.D. The battery has done good work in the local competitions at Barry Links and at headquarters and is still in a vigorous condition. Drill was resumed for the summer on May 12th.

**UNIVERSITY COUNCIL.**—The question of providing distinctive costumes for the graduates was discussed at a meeting of the Council on Saturday, when it was decided by 13 votes to 3 to ask a committee of the Council to inquire into and report on the academic costume of graduates in Aberdeen and other universities with a view to the adoption of a system of distinctive costumes, showing differences of degree, faculty, and university. The minority protested against the continuance of what they considered a childish absurdity, opposed to common sense and the democratic tendency of the age. Dr. Bain made a statement as to the proposed extension of Marischal College buildings, mentioning that a sum of £47,000 would probably be required to cover the cost of buildings. Dr. Angus Fraser, in a trenchant criticism of the proposed University extension, advocated the removal of the arts classes from Old Aberdeen to Marischal College as a means of improving the attendance of arts students and of increasing the amount of public donations towards the extension fund. Dr. Fraser's interesting proposal is being much discussed in university circles.

#### ROYAL COLLEGE OF SURGEONS IN IRELAND.

**ELECTION OF EXAMINERS.**—At a meeting of the President, Vice-Presidents, and Council, held on May 15th, the following examiners were elected for the ensuing year:—*Anatomy and Surgery*: J. Barton, F.R.C.S.; Sir W. Stokes, F.R.C.S.; R. L. Swan, F.R.C.S.; W. Thompson, F.R.C.S.; *Physiology, Histology, and Pathology*: R. G. Patteson, F.R.C.S.; J. A. Scott, F.R.C.S.; *Chemistry and Physics*: E. J. Montgomery, F.R.C.S.; *Midwifery and Gynaecology*: S. B. Mason, F.R.C.S.; *Ophthalmology*: A. H. Benson, F.R.C.S.; *Dentistry*: D. Corbett, jun., F.R.C.S.; R. Hazleton, F.R.C.S.; G. M. P. Murray, F.R.C.S.; H. G. Sherlock, F.R.C.S.; W. Stoker, F.R.C.S.; M. A. Ward, F.R.C.S.; *Public Health*: H. Auchinleck, F.R.C.S.; D. E. Flinn, F.R.C.S.; R. G. Patteson, F.R.C.S.; W. C. Stubbs, B.L.; J. C. Wilmot, C.E.; *Midwifery Diploma*: S. R. Mason, F.R.C.S.; J. O'Donovan, F.R.C.S.; W. Roe, F.R.C.S.; *General Education*: F. J. Davys, F.R.C.S.; R. Morton, F.R.C.S.

**ROYAL COLLEGE OF SURGEONS, EDINBURGH.**—The following gentlemen, having passed the requisite examinations, have been admitted Fellows of the College since last publication:—

W. Keiller, L.R.C.P. and S.E., 40, Lauriston Place, Edinburgh; M. Sinenetamby, L.R.C.P. and S.E., 7, Torrington Square, London, W.C.; A. B. Santiago, L.R.C.P. and S.E., 21, Devonshire Hill, Hampstead, London, N.W.; T. Lusson, M.B., C.M., Cromer, Norfolk; W. M. Leslie, M.B., C.M., 41, Glengall Road, London, E.; L. E. Jowers, M.R.C.S. Eng., 27, Old Steyne, Brighton; A. Miles, M.B., C.M., 27, St. Bernard's Crescent, Edinburgh; J. W. T. Anderson, L.R.C.P. and S.E., Aden; A. G. P. Gipps, M.R.C.S. Eng., Royal Hospital, Haslar, Gosport; A. L. Kerr, M.B., C.M., 52, Burton Crescent, London, W.C.; W. G. Black, M.R.C.S. Eng., 20, Ellison Place, Newcastle-on-Tyne; and H. G. Terry, M.R.C.S. Eng., 16, Green Park, Bath. A. C. F. Rabagliati, M.B., C.M., 9, Walmer Villas, Bradford, was admitted a Fellow of the College without examination.

The following gentlemen, having passed the necessary examinations, received the Diploma in Public Health of the College:—

S. P. Hallows, M.B., C.M., Harle Syke, near Burnley; J. B. Ronaldson, F.R.C.S. Ed., Ennerdale, Haddington; M. J. Oliver, M.B., C.M., Lochside, Kelso; J. N. Burns, M.B., C.M., 4, Park Place, St. James's, London, W.; D. C. Longden, M.B., C.M., 137, Warrender Park Road, Edinburgh; S. B. Burns, M.B., C.M., Mauldslee Cottage, Carlisle; J. C. Wood, L.R.C.P. and S.E., 32, Frederick Street, Sunderland; C. Mackenzie, M.B., C.M., High Street, Tain; J. G. Macaskie, L.R.C.P. and S.E., etc., Bamberough, Northumberland; A. Thom, M.D., Crieff, Perthshire; T. J. Monaghan, L.R.C.P. and S.E., Accrington, Lancashire; M. Calder, L.R.C.P. and S.E., 12, Union Street, Greenock; A. Seddon, L.R.C.P. and S.E., 87, Warrender Park Road, Edinburgh; R. S. Jaques, L.R.C.P. and S.E., 49, Aberdeen Walk, Scarborough; J. Wheatley, M.D., the Infirmary, Blackburn; E. R. Morton, L.R.C.P. and S.E., 17, Victoria Street, London; and J. Rankine, L.R.C.P. and S.E., Stirling.

**ROYAL UNIVERSITY OF IRELAND.**—Medical Degrees Examination, April-May, 1891.—The Examiners have recommended that the following be adjudged to have passed the undermentioned examinations respectively:—

*Doctor of Medicine*.—E. J. McWeeney, M.B.

*M.B., B.Ch., B.A.O.: Upper Pass Division*.—\*Anna L. Church, Royal College of Surgeons, Ireland; \*T. Jones, Queen's College, Cork; J. B. McLaren, M.A., Queen's College, Belfast; C. G. McVicker, B.A., Queen's College, Belfast, and Edinburgh University; \*Hester D. Russell, London School of Medicine for Women; \*E. J. Walker, B.A., School of Physic, Trinity College, Dublin, Royal College of Surgeons, and Catholic University School of Medicine, Dublin.

\*Those marked with an asterisk may present themselves for the honour examination.

*Pass Division*.—H. L. Atkinson, B.A., Queen's College, Belfast; R. Boyd, Queen's College, Belfast; C. L. W. Bunton, Queen's College, Galway, and Royal College of Surgeons; R. F. Carse, Queen's College, Belfast; Frances L. Dick, London School of Medicine for Women; J. Dodd, Queen's College, Cork and Catholic University School of Medicine; P. Gould, Queen's College, Cork; S. Hamilton, B.A., Queen's College, Galway, and School of Physic, Trinity College, Dublin; W. Hartland, Queen's College, Cork; J. F. Kelly, Catholic University School of Medicine; N. O. McConnell, Queen's College, Belfast; J. McLeish, Queen's College, Belfast; T. S. MacSwiney, Catholic University School of Medicine; S. E. M. Moxley, L'Hôtel Dieu, Paris, and Queen's College, Cork; H. W. H. O'Reilly, Queen's College, Galway; J. A. O'Sullivan, Queen's College, Cork; A. G. Robb, Queen's College, Belfast; R. G. C. Thornton, Queen's College, Cork; R. B. Wagner, Queen's College, Cork; J. T. Wallace, B.A., School of Physic, Trinity College, Dublin.

## OBITUARY.

JOHN HAYLAND LILLY, L.R.C.P. Ed., L.F.P.S. GLAS.

THOSE who remember the foundation of the Western Infirmary in association with the Glasgow University School of Medicine will hear with regret of the death of Dr. Lilly.

The transference of the University from its old site in the East End to the Gothic pile of buildings on Gilmore Hill, with all its useful accessories, had, as its one drawback, the loss of the splendid clinical opportunities afforded by the Royal Infirmary. It became necessary to establish a new hospital in close proximity to the University which should provide a sufficient amount of clinical material for the students' education; of this hospital Dr. Lilly was the first superintendent. He had had an excellent preparatory training in the City of Glasgow Fever Hospital, of which he had been physician superintendent, and previously in the wards of the Royal Infirmary, of which he had been one of the house-surgeons. That training he had now full opportunity of applying in aiding in the organisation of a hospital on lines adequate to the great duties it would be required to fulfil.

The labour which occupied his fresher energies ceased with its success, and he sought refuge from routine in private work. As partner to Mr. Seaton at Bitterne, Hants, he spent twelve years in the active and useful practice of his profession; but disease laid her finger upon him and, despite two difficult operations by Mr. Henry E. Clark, of Glasgow, undermined his health. Probably his unsparing work during the influenza epidemic of last year had some say in the recurrence of the disease. Whether that be so or not, all who knew him will recognise that in public and in private life he was a man whose rôle was to be useful, and as such he will be remembered and missed.

WILLIAM BURNIE, M.D., L.R.C.S. Edin.

WE regret to announce the death of a well-known and much respected general practitioner, Dr. William Burnie, of Bradford, a Vice-President and past President of the Yorkshire Branch of the British Medical Association. The deceased had suffered from internal cancer for over a year, and since September last had been confined to his house, receiving such relief as medical aid could afford at the hands of his son, Dr. W. Gilchrist Burnie, and Mr. W. L. Roberts.

Dr. Burnie, who had reached the ripe age of 76, was born in Dumfriesshire, and settled in Bradford in 1836, having previously taken the degree of M.D. Edin. He subsequently removed to London, where he practised with success, and held the post of honorary senior physician to the Islington Dispensary. After a fifteen years' residence in London Dr. Burnie returned to Bradford, and became one of the firm of Messrs. Douglas, Kay, and Burnie. On the death of Mr. Kay (Mr. Douglas having previously retired), the large practice of

The mortality from "fever" showed no marked excess in any of the large towns. Of the 32 deaths from diphtheria in the twenty-eight towns, 19 occurred in London, 2 in Leicester, and 2 in Salford. No fatal case of small-pox was registered during the week under notice, either in London or in any of the large provincial towns; 35 small-pox patients were under treatment in the Metropolitan Asylums Hospitals, and not one in the Highgate Small-pox Hospital, on Saturday, May 16th. The number of scarlet fever patients in the Metropolitan Asylums Hospitals and in the London Fever Hospital on the same date was 924, and showed a slight increase upon the number at the end of the previous week; 118 new cases were admitted during the week, against 100 and 79 in the preceding two weeks. The death-rate from diseases of the respiratory organs in London was equal to 7.2 per 1,000, and considerably exceeded the average.

#### HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday, May 16th, 913 births and 630 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had increased from 22.1 to 23.9 per 1,000 in the preceding three weeks, further rose to 24.1 during the week under notice, but was 6.0 per 1,000 below the mean rate during the same period in the twenty-eight large English towns. Among these Scotch towns the lowest rates were recorded in Perth and Greenock, and the highest in Glasgow and Paisley. The 630 deaths registered in these towns included 83 which were referred to the principal zymotic diseases, equal to an annual rate of 3.2 per 1,000, which exceeded by 1.1 the mean zymotic death-rate during the same period in the large English towns. The highest zymotic death-rates were recorded in Glasgow and Paisley. The 291 deaths registered in Glasgow included 14 which were referred to whooping-cough, 9 to measles, 5 to "fever," and 4 to scarlet fever. Five fatal cases of measles were recorded in Edinburgh, and 10 in Paisley. The death-rate from diseases of the respiratory organs in these Scotch towns was equal to 5.4 per 1,000, against 7.2 in London.

#### HEALTH OF IRISH TOWNS.

In sixteen of the principal town districts of Ireland the deaths registered during the week ending Saturday, May 9th, were equal to an annual rate of 27.2 per 1,000. The lowest rates were recorded in Armagh and Waterford, and the highest in Newry and Lisburn. The death-rate from the principal zymotic diseases averaged 1.4 per 1,000. The 179 deaths registered in Dublin were equal to an annual rate of 26.4 per 1,000 (against 23.0 and 24.4 in the preceding two weeks), the rate for the same period being 24.0 in London and 22.9 in Edinburgh. The 179 deaths in Dublin included 6 which were referred to the principal zymotic diseases (equal to an annual rate of 0.9 per 1,000), of which 4 resulted from whooping-cough, 1 from typhoid fever, and 1 from diarrhoea.

#### VACCINATION AWARDS.

**M.B.**—The private vaccinations of a public vaccinator cannot be reckoned for the purposes of award under Section 5 of the Vaccination Act, 1867, nor should they be entered in his register of public vaccinations. That register is closely examined by the Government inspector on the occasion of his periodical visits, and it is upon his recommendation or otherwise that awards are made. One of the points which he invariably looks into is the regularity with which the public vaccinator adheres to the station arrangements laid down by his contract with the guardians. Article I (1) of the Official Regulations of February 18th, 1868, prescribes that where a public vaccination station has been provided for a district, "no person resident within two miles thereof, and not being an inmate of the workhouse, shall be vaccinated under contract elsewhere than at such station, unless the vaccinator in the particular case be of opinion (which, if so, he is hereby required to note in his register) that, for some special reason, the person whom he purposes to vaccinate cannot properly be vaccinated at the station;" and, if the inspector finds that domiciliary vaccination has been unjustifiably excessive, he reports the facts to the Local Government Board, with the probable result that the public vaccinator loses his award altogether.

## MEDICAL NEWS.

**DR. B. LONDON**, of Carlsbad, has received the Cross of an Officer of the Star of Roumania.

DURING the last academic year the number of registered students in the Paris Faculty of Medicine was about 4,000.

**MEDICAL MAGISTRATES.**—Drs. Evan Jones (Ty-Mawr, Aberdare) and Thomas J. Webster (Brynglâs, Merthyr Tydvil) have been placed on the Commission of the Peace for the county of Glamorgan.

**WORKHOUSE INFIRMARY NURSING ASSOCIATION.**—At the eleventh annual meeting of the Workhouse Infirmary Nursing Association, Her Royal Highness the Duchess of Teck, the President of the Society, distributed the medals and gratuities. Miss Twining, in a brief address, described the objects of the Association and the special work for which the nurses were trained, encouraging them to elevate their calling by their energy and devotion. Twenty nurses had earned medals, and twenty-seven were the recipients of gratuities; of the latter, four had served the Association for ten years.

THE Duke of Westminster has shown his appreciation of the work of the National Health Society by making a donation of £100 and raising his annual subscription to £20.

**THE ROYAL INFIRMARY, LIVERPOOL.**—Since the election of Mr. Rushton Parker to the post of full surgeon to the Royal Infirmary the office of assistant surgeon has remained vacant. While the new infirmary was being erected, and the work was carried on on a greatly reduced scale, it was not thought that the services of an assistant were needed, but now that the full complement of beds is again in use it becomes necessary to appoint a successor to the office. The election, which is by the trustees, has been fixed for June 2nd. There are at present four candidates in the field: Messrs. Damer Harrison and George Hamilton, surgeons to the Northern Hospital; Mr. W. Thelwall Thomas, F.R.C.S., Demonstrator of Anatomy in the School of Medicine; and Mr. Robert Bickersteth, whose father and grandfather have been successively connected with the infirmary, either as surgeons or consulting surgeons, during the last eighty years.

**GENERAL PRACTITIONERS' UNION.**—A general meeting of the Executive Committee of the above Union was held on May 13th, Mr. George Brown in the chair. The other members of the Committee present were Drs. Hugh Woods, J. B. Cook, F. H. Alderson, T. R. Atkinson, J. Dawson, W. E. Dawson, and A. C. Dove (Honorary Secretary). The following gentlemen were elected District Secretaries:—A. Phillips Hills, M.R.C.S.Eng., for Battersea; Cecil A. Digby, M.D., for Staffordshire; and John Grout, L.R.C.P., for Worcestershire. The following registered medical practitioners, having been duly proposed and seconded, were elected members of the Union:—J. Adams (Barnes), D. M. Barry (Grampound), R. F. Benham, G. G. Bird, T. E. Bowkett, H. W. Brighthouse, A. H. W. Clemow, C. A. Digby (Hednesford), E. O. Fountain, J. Godding, E. C. Greenwood, J. H. Griffin, J. Grout (Lye), J. H. Gwynne, P. Z. Hebert, A. P. Hills, W. H. Horsman, A. Hunt, H. J. Jones, R. W. Jones, A. Kisch, C. F. Knight, F. Lawrance, R. H. Lloyd, W. C. Luffman, W. Y. Martin (Walkden), W. Moore (Stourport), E. Norton (Folkestone), R. F. Owen, W. L. Penny, H. C. Pope, C. H. Sers, J. P. Simpson, P. J. Slevin (West Drayton), G. Stevenson, H. C. Strover (Sandy), G. A. F. Tait, M. Townsend, C. A. P. Truman (Reading), and H. Walker.

**THE BETTER PROTECTION OF CHILDREN.**—The annual report, which was presented the other day at the second anniversary meeting of the National Society for the Prevention of Cruelty to Children, must be regarded as very satisfactory, for though it is true that the balance sheet still shows a deficit, this is much less than it was a twelvemonth ago, and the scope and amount of the Society's work has immensely increased in that period. A considerable portion of their work consists in protecting children against unnatural parents. The mere list of horrible barbarities against their children, of which parents have, at the instance of the Society, been convicted, is appalling, and would, under almost any other conditions, have been deemed incredible. If they had done no other work than this they would deserve the support of all who take any interest in the welfare of those who are unable to help themselves. The work they are doing in the matter of infant life assurance must be well known to all our readers, and they have been not less active and perhaps even more successful in their crusade against baby farmers, their chief prize in this direction having been the conviction of Mrs. Reeves and the well-merited sentence of ten years' penal servitude passed upon her. The Society has only been at work two years, but it has succeeded in spreading itself all over England in that time and now has no fewer than 60 centres, besides 2 in Wales and 3 in Ireland. There is still plenty of work for the Society, and we trust it will be generously supported by the public during the current year.

#### MEDICAL VACANCIES.

The following Vacancies are announced:

**BLACKBURN AND EAST LANCASHIRE INFIRMARY.**—Junior House-Surgeon. Salary, £50 per annum, with board, washing, and lodging. Applications to Joseph Eastwood, Secretary, 15, Richmond Terrace, Blackburn, by May 26th.

**CANCER HOSPITAL (Free), Fulham Road, S.W.**—Surgeon; must be F.R.C.S.Eng., and reside within four mile radius. Applications to the Chairman of the House Committee by May 26th.

**CANCER HOSPITAL (Free), Fulham Road, S.W.—Honorary Pathologist.** Applications to the Chairman of the House Committee by May 26th.

**CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—House-Physician.** Board, residence, and washing provided. Applications to T. Storrar-Smith, Secretary, 24, Finsbury Circus, E.C., by May 26th.

**COUNTY ASYLUM, Whittingham, Preston, Lancs.—Assistant Medical Officer and Pathologist.** Salary, £200 per annum, with board, lodging, washing, and attendance. Applications to the Medical Superintendent.

**COUNTY BOROUGH OF SHEFFIELD.—Medical Officer of Health.** Salary, £500 per annum; must devote his whole time. Applications to the Chairman of the Health Committee, Town Clerk's Office, Sheffield, by May 27th.

**COUNTY OF CAITHNESS.—Medical Officer of Health.** Salary, £300 per annum, with £50 travelling and other expenses; must not engage in private practice, and reside in Wick. Applications to James Burns, County Clerk, Thurso, by May 25th.

**COUNTY OF ROXBURGH.—Medical Officer for the County; to also act as Medical Officer under the Public Health Acts for the five districts of the county.** Salary, £350 per annum and travelling expenses. Applications, with eighteen copies of testimonials, to the Chairman of the Medical Committee, Broomlands, Kelso, by May 28th.

**DERBY AMALGAMATED FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Assistant Surgeon; not under 30 years of age.** Salary, £160 per annum, rising £10 after six months, and £10 per annum afterwards up to £250, with midwifery fees. Applications to the Secretary, Mr. H. Bullivant, 73, Abbey Street, Derby, by May 23rd.

**DUNSTABLE FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Resident Medical Officer.** Salary, £180, rising £10 annually to £220, with residence, large garden and conservatory, rent and taxes free. Applications to F. W. White, Honorary Secretary, Princes Street, Dunstable, Beds, by May 26th.

**DUNSTABLE FRIENDLY SOCIETY'S MEDICAL ASSOCIATION.—Dispenser.** Salary, £50 per annum. Applications to F. W. White, Honorary Secretary, Princes Street, Dunstable, Beds, by May 26th.

**GENERAL HOSPITAL, Birmingham.—Honorary Surgeon.** Must be Fellow of one of the Colleges of Surgeons of the United Kingdom. Applications to Dr. J. D. M. Coghill, House Governor, by June 1st.

**GENERAL HOSPITAL, Birmingham.—Assistant Physician for three years.** Honorarium, £100 per annum. Applications to Dr. J. D. M. Coghill, House Governor, by June 1st.

**GENERAL HOSPITAL FOR SICK CHILDREN, Pendlebury, Manchester.—Junior Resident Medical Officer; double qualifications; must devote his whole time.** Salary, £80 per annum, with board and lodging. Applications to the Chairman of the Medical Board by June 1st.

**HALIFAX INFIRMARY AND DISPENSARY.—Assistant House-Surgeon, unmarried, and doubly qualified.** Salary, £50 per annum, with residence, board, and washing. Applications to Oaks Webster, Secretary, by June 3rd.

**HARTLEPOOL UNION.—Medical Officer and Public Vaccinator for the Greatham District.** Proposed salary, exclusive of fees, £50 (if also appointed Medical Officer to the Greatham Hospital, joint salary £100) per annum; must reside within the district. Applications, endorsed "Medical Officer," to Geo. Kilvington, Union Clerk's Office, by May 27th.

**KIDDERMINSTER INFIRMARY.—House-Surgeon, unmarried.** Salary, £110, rising £10 annually to £170, with rooms in the infirmary and attendance. Applications to the Secretary by June 5th.

**LEAMINGTON AMALGAMATED FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Resident Medical Officer, over 28 and under 40 years of age, married man preferred.** Salary, £200 per annum, with residence, etc., and £50 for cab hire. Applications to Mr. J. B. Richardson, Secretary, 91, Queen Street, Leamington, by May 26th.

**LIVERPOOL ROYAL INFIRMARY.—Honorary Assistant-Surgeon.** Applications to the Chairman of the Committee ten days before election on June 2nd.

**NORTH STAFFORDSHIRE INFIRMARY AND EYE HOSPITAL, Harts-hill, Stoke-upon-Trent.** Assistant House-Surgeon for six months. Board, apartments, and washing provided. Applications to R. Hordley, Secretary, by June 2nd.

**NOTTINGHAM BOROUGH ASYLUM, Mapperley Hill.—Assistant Medical Officer, unmarried.** Salary, £125 per annum, with apartments, board and washing. Applications to the Medical Superintendent by May 25th.

**ROYAL BERKS HOSPITAL, Reading.—Physician.** Applications to the Secretary, John T. Hugo, at least ten days before the election on June 2nd.

**ROYAL COLLEGE OF SURGEONS OF ENGLAND.—Five Examiners in Anatomy; Four Examiners in Physiology; Examiners for Parts 1 and 2 of the Examination in Public Health; Five Examiners in Elementary Anatomy; Two Examiners in Elementary Physiology (First Professional Examination); and four Examiners in Midwifery (for the Third or Final Examination).** Applications to Edward Trimmer, Secretary, by May 26th.

**ROYAL WESTMINSTER OPHTHALMIC HOSPITAL, King William Street, West Strand.—House-Surgeon.** Applications to T. Beattie-Campbell, Secretary, by May 27th.

**SALFORD UNION.—Assistant Medical Officer for Union Infirmary; double qualifications.** Salary, £130 per annum, with furnished apartments. Applications, endorsed "Assistant Medical Officer," to T. H. Bagshaw, Clerk to the Guardians, Union Offices, Eccles New Road, Salford, by May 26th.

**SOUTHPORT INFIRMARY.—Assistant to the House-Surgeon for six months. Board and residence provided.** Applications to Lieutenant-Colonel S. W. Wilkinson, Honorary Secretary, by June 1st.

**UNIVERSITY OF GLASGOW.—Assistant Examiner in Physiology.** Annual fee, £30. Twenty copies of printed applications and testimonials to the Secretary of the Court, Mr. A. E. Clapperton, 91, West Regent Street, Glasgow, by June 30th.

**VESTRY OF FULHAM.—Medical Officer of Health, double qualifications, under 45 years of age.** Salary, £400 per annum. Applications, marked "Applications for Medical Officer of Health," to the Clerk to the Vestry, Town Hall, Waltham Green, by May 30th.

**WARNEFORD HOSPITAL, Leamington Spa.—House-Surgeon; must devote his whole time.** Salary, £100 per annum, with board, lodging, and washing. Applications to J. Warren, Secretary, by May 25th.

**WORCESTER AMALGAMATED FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Assistant Medical Officer.** Salary, £140 per annum, with residence, and part of midwifery fees, also £20 per annum for cab hire. Applications to Mr. G. B. Gibson, Gasy Row, Worcester, by June 4th.

### MEDICAL APPOINTMENTS.

**BAILEY, J. Harold, M.B., Ch.B.Vict.,** appointed House-Surgeon to the Manchester Southern Hospital for Women and Children, and to the Manchester Maternity Hospital, *vice* A. W. Senior, M.R.C.S., L.R.C.P., resigned.

**BENSON, Annette M., M.B., B.Sc.Lond.,** appointed Resident Clinical Assistant to the Paddington Infirmary, Harrow Road, *vice* W. S. Carpenter, M.R.C.S.E.

**CARGILL, L. Vernon,** appointed Clinical Assistant to the Royal South London Ophthalmic Hospital, St. George's Circus, *vice* Mr. J. L. Jaquet.

**CROUCH, E. T., M.R.C.S., L.S.A.,** appointed Honorary Surgeon to the Royal Portsmouth, Portsea, and Gosport Hospital.

**DICK, James, M.D.Glas., L.R.C.S., Edin.,** appointed Medical Officer for the Harrington District of the Whitehaven Union.

**EVANS, William George, F.R.C.S.Eng., L.R.C.P.Lond.,** appointed Clinical Assistant to the City of London Lunatic Asylum, Stone, near Dartford.

**EYTON-JONES, J. A., L.S.A.,** appointed Medical Officer for the Gringley District, Yorks.

**GILPIN, Frank, M.R.C.S.,** appointed Medical Officer, Stratford-on-Avon.

**GRAHAM, P. F., M.D., M.Ch., M.A.O.,** appointed Medical Officer to the No. 1 District of the Limerick Union, *vice* F. W. O'Connor, F.R.C.S.I.

**GRIFFITHS, (Gilbert) H., M.R.C.S., L.R.C.P.Lond.,** appointed House-Surgeon to the Wallasey Dispensary, *vice* Dr. Whiteley.

**HALLIBURTON, W. D., M.D., B.Sc., M.R.C.S.,** appointed Examiner in Physiology at Oxford University.

**HENDERSON, Jane B., L.R.C.P., L.R.C.S. Edin.,** appointed Third Assistant Medical Officer to the Holloway Sanatorium, Virginia Water.

**KER, Alice, M.D.,** appointed Honorary Surgeon to the Birkenhead Lying-in Hospital, *vice* Dr. Lamb, deceased.

**KINGDON, Edward Owen, M.R.C.S., L.R.C.P.,** appointed Medical Officer to the Workhouse, and Medical Officer and Public Vaccinator to the No. 3 District of the Holsworthy Union, *vice* Dr. John G. R. Symons.

**LAING, Charles F., M.B., C.M.Glas.,** appointed Assistant Medical Officer to the Greenock Parochial Asylum and Poorhouse at Smithiston, *vice* G. A. Bannetyn, resigned.

**LOGAN, Thomas, M.D.Aberd., L.F.P.S.G.,** appointed Medical Officer North Brierley Union.

**LUMLEY, B., M.R.C.S.,** reappointed Medical Officer for the Northallerton District of the Northallerton Union.

**MACKENZIE, William Leslie, M.A., M.B., C.M., D.P.H.,** appointed Medical Officer of Health to the counties of Kirkcudbright and Wigtown.

**MACVINE, John W., M.B., C.M.,** appointed House-Physician to the East London Hospital for Children.

**MONTAGLE, H. W. B., M.D.Glas.,** appointed Medical Officer to the Manchester and Salford Provident Dispensaries Association.

**MORTON, A. Stanford, M.B., F.R.C.S.Eng.,** appointed Assistant-Surgeon to the Moorfields Ophthalmic Hospital.

**O'GORMAN, R. P., L.K.Q.C.P., L.R.C.S.Irel.,** appointed Medical Officer to the Manchester and Salford Provident Dispensaries Association.

**POWELL, George William, B.A., M.B., B.Ch.,** appointed Extra Acting Physician to the Birmingham and Midland Free Hospital for Sick Children, *vice* C. W. Suckling, M.D.

**ROBINSON, James, M.D.Brussels, L.R.C.P. Edin., M.R.C.S.,** reappointed Medical Officer of Health for the Turton Urban Sanitary District.

**RUTHERFORD, Thomas, M.B., C.M.Glasg.,** appointed Medical Officer for the County of Bute.

**SALTER, F. J., L.R.C.P., L.R.C.S. Edin.,** appointed Assistant House-Surgeon to the Devonshire Hospital, Buxton.

**SHAW-MACKENZIE, J. A., M.B., M.R.C.S.,** appointed Pathologist to the Chelsea Hospital for Women, Fulham Road, *vice* Dr. Morris.

**SHIELS, George Franklin, M.D., C.M., F.R.C.S. Edin.,** appointed member of the Board of Examiners of the State of California Medical Society.

**SMITH, Henry, M.B., C.M.Durh.,** appointed Medical Officer for the St. Nicholas District of the Durham Union.

**SMITH, Robert G., M.A., B.Sc., M.R.C.S.,** appointed Assistant Medical Officer to the City of Newcastle Asylum, Gosforth, *vice* Alex. Simpson, M.B., C.M., resigned.

**TIPLADY, William, L.R.C.P., L.R.C.S. Edin., L.F.P.S.Glas., L.M.,** appointed Acting Surgeon to the 25th Volunteer Brigade Royal Highlanders.

**VICKERY, W. H., M.R.C.S., L.R.C.P.,** appointed Assistant Resident Medical Officer to the North-West London Hospital, *vice* C. H. Fowler.

**WARD, W. F., L.R.C.P.Lond., M.R.C.S.,** reappointed Medical Officer for Scrooby, Retford.



WEAR, Algernon, M.B., B.S.Durh., appointed Resident Medical Officer to the Ida Hospital General Infirmary, Leeds, *vice* C. Leonard Lake.  
WHEATLEY, James, M.D., B.S.Lond., D.P.H., appointed Medical Officer of Health for Blackburn, *vice* Dr. Barwise.

### DIARY FOR NEXT WEEK.

#### MONDAY.

LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. W. Lang: Conjunctival Diseases. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Dr. O. Sturges: Tuberculosis in Children.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Dr. J. R. Bradford (Arris and Gale Lecturer): On the Physiology of the Vasomotor System. Lecture I.

ANATOMICAL SOCIETY OF GREAT BRITAIN AND IRELAND, University College, 4.30 P.M.—Specimens:—Professor Thane, Mr. Lawrence. Papers:—Sir W. Turner: On the Relations of the Dentary Arcades in the Crania of Australian Aborigines. Professor Cleland: On Burial in Sand for Preparation of Bones. Dr. Herbert Spencer: On Ossification in the Head of the Humerus at Birth. Dr. Wardrop Griffith: On a Case of Congenital Malformation of the Heart. Mr. Lockwood and Dr. Rolleston: On the Situation of the Vermiform Appendix.

#### TUESDAY.

LONDON POST-GRADUATE COURSE, Bethlehem Royal Hospital, 2 P.M.—Dr. Theo. Hyslop: Delusional Insanity and Moral Insanity. Examination Hall, Victoria Embankment, 5 P.M.—Mr. Jonathan Hutchinson: The Tinea Group (Cryptogamic Affections).

ROYAL MEDICAL AND CHIRURGICAL SOCIETY, 8.30 P.M.—Dr. Sheridan Delépine: On the Changes observed in Healthy Arteries and in Tendon Ligatures during the first four weeks after Ligation. Dr. George Thin and Dr. Frank J. Wethered: Symptoms and Pathology of a case of Acute Inflammation of the Mucous Membrane of the Ileum from Climatic Causes.

#### WEDNESDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption, Brompton, 4 P.M.—Dr. J. Kingston Fowler: Clinical Demonstration on Cases of Mitral Disease. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. J. B. Lawford: Atrophy of the Optic Nerve.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Dr. J. R. Bradford (Arris and Gale Lecturer): On the Physiology of the Vasomotor System. Lecture II.

#### THURSDAY.

LONDON POST-GRADUATE COURSE, National Hospital for the Paralysed and the Epileptic, Queen Square, 2 P.M.—Dr. Buzzard: Selected Cases of Disease of the Nervous System. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Dr. Octavius Sturges: Broncho-pneumonia and its Relationship to Lobar Pneumonia and Empyema. London Throat Hospital, Great Portland Street, 8 P.M.—Mr. G. C. Wilkin: The Common Forms of Disease of the Pharynx, Nasopharynx, and Fauces.

BRITISH GYNÆCOLOGICAL SOCIETY, 8.30 P.M.—Mr. Lawson Tait: Further Observations on the Method of Restoring the Perineum.

#### FRIDAY.

LONDON POST-GRADUATE COURSE, Bacteriological Laboratory, King's College, 11 A.M. to 1 P.M.—Lecture: Tuberculosis, Human and Bovine. Practical Work: Examination of Sputum. Hospital for Consumption, Brompton, 4 P.M.—Dr. J. Kingston Fowler: Clinical Demonstration on Cases of Aortic Disease. Great Northern Central Hospital, 8 P.M.—Dr. Galloway: Demonstrations of Morbid Anatomy: Gastro-intestinal Tract.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Dr. J. R. Bradford (Arris and Gale Lecturer): On the Physiology of the Vasomotor System. Lecture III.

#### SATURDAY.

LONDON POST-GRADUATE COURSE.—Bethlem Royal Hospital, 11 A.M.—Dr. Theo. Hyslop: Clinical Demonstration.

### BIRTHS, MARRIAGES, AND DEATHS.

*The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in Post Office Order or Stamps with the notice not later than Wednesday morning, in order to insure insertion in the current issue.*

#### BIRTHS.

PARKER.—On May 17th, at 7, Bloomsbury Place, W.C., the wife of Herbert Parker, M.R.C.S., of a daughter.

TATE.—On May 18th, at Woolwich, the wife of Alan Edmondson Tate, M.R.C.S., L.S.A., Surgeon, Army Medical Staff, of a daughter.

#### DEATHS.

BOOKEY.—At Mereside, Hanmer, Flintshire, on May 17th, from pleuro-pneumonia, Dr. Thomas Leeson Bookey, aged 42, deeply regretted. Friends please accept this intimation.

HIRON.—On Whit Monday, at Studley, John Hickman Hiron, M.R.C.S., second son of the late John Hiron, Esq., of Chipping Camden.

### 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 BRITISH MEDICAL JOURNAL are devoted, will be found under their respective headings.*

#### QUERIES.

##### TREATMENT OF STOMATITIS.

RHAMNUS would be obliged if some reader could recommend a good mouth wash to use in a case where the patient has very soft spongy gums and tongue liable to small recurring ulcers. The patient had syphilis some years ago and was well treated with mercury, etc. The gums are the chief trouble, on account of bleeding whenever touched with toothbrush, etc.

#### ANSWERS.

MAX.—We would recommend our correspondent to communicate with Mr. J. R. Upton, clerk to the Apothecaries Society, Blackfriars, E.C.

MEDICAL STUDENT.—The patient should consult a physician.

##### AN EXPLOSIVE MIXTURE.

Dr. J. GRANT.—Potassium permanganate gives up oxygen to all organic matter, and with those substances which are readily oxidised, such as glycerine, sugar, syrup, etc., the oxidation is so rapid that the heat produced is sometimes sufficient to cause combustion.

#### NOTES, LETTERS, Etc.

Dr. JOHN GORDON (Aberdeen) writes that he omitted to mention that the chloralamide employed by him in his observations, detailed in the BRITISH MEDICAL JOURNAL of May 15th, was kindly supplied to the Aberdeen Materia Medica Laboratory by Messrs. A. and M. Zimmermann, 6 and 7, Cross Lane, St. Mary-at-Hill, London.

##### DEGREES IN SPAIN.

OFFICIAL statistics recently published show that the following professional titles were conferred by the General Direction of Public Instruction in Spain, from 1880 to 1889, both years inclusive: Doctors of Medicine and Surgery, 388; Doctors of Pharmacy, 80; Licentiates of Medicine and Surgery, 5,591; Licentiates of Pharmacy, 1,822; Medical Practitioners of the Second Class, 51; Surgeon Dentists, 87; Medical Assistants, 1,812; Midwives, 443. It would seem, from these figures, that there is at least one country in Europe where an "accessible M.D. degree" is even less common than in England.

##### CHLORIDES IN DIPHTHERIA.

Dr. ALBERT WILSON (Leytonstone) writes: In the BRITISH MEDICAL JOURNAL of May 9th, quoting a paper I read at the Pathological Society, there is a small error I wish to correct. I said that hydrarg. perchlor. in the strength of 1 to 5,000 (not 1 to 500) and iodine 1 in 500 would prevent the growth of the diphtheria coccus. It is an important fact for those who rely on hydrarg. perchlor. in the treatment of diphtheria. I do not think the efficacy of a 5 per cent. hydrochloric acid solution in diphtheria is sufficiently known. It is rapid and certain in ordinary cases, but not sufficient in very severe cases. It is the hydrochloric acid in tinct. ferri perchlor. which checks the diphtherococci. The iron is inert.

##### DIVERTICULUM OF OESOPHAGUS.

Mr. J. F. CRAIG, M.A., M.B., C.M. (Gosta Green, Birmingham) writes: I was called to a man, J. O., aged 55, who was recovering from an attack of acute bronchitis, and who was then suffering from a stabbing pain in the region of the heart. I diagnosed angina pectoris, and prescribed accordingly. Next day his son called, and said that shortly after I left, he suddenly brought up a piece of rind of bacon with strip of fat attached, and that since then the pain had all but gone. The piece of bacon—which he brought with him—measured seven inches long and

