

times daily. Not only have I not had any deaths, but I have met with no accident of any kind. I have not once had to do artificial respiration or to pull forward the tongue. Neither have I had to interrupt an operation in order to ward off any accident due to chloroformisation. There is no element whatever either of luck or of chance about these results. Any surgeon can administer chloroform without risk who will take the trouble to assure himself that the patient's breathing is normal and regular throughout the administration, and to stop the inhalation in good time, that is, directly full anaesthesia is produced. Statistics such as those of Dr. Julliard and Mr. Roger Williams, which are intended to show the danger of chloroform, are, as my table proves, susceptible of a very different interpretation. If they help to prove anything, it is that no anaesthetic is absolutely safe except chloroform administered on Syme's principles, and the more proof we have of this kind the better.

### NOTE ON MALTA FEVER.

BY SURGEON DAVID BRUCE, M.S.,  
Netley.

THE BRITISH MEDICAL JOURNAL for May 16th, 1891, contains a paper by Staff-Surgeon Charles C. Godding entitled "Malta (Remittent) Fever," in which the conclusions arrived at are so opposed to those held by myself that I feel compelled to offer a few remarks in the way of criticism. In extenuation of my thus coming forward as a critic, I may state that I have had ample opportunity of studying this most interesting and important fever, as I was stationed for five years in the Military Hospital, Valletta, during which time more than 400 cases came under my notice. I am, therefore, interested in a very high degree in all that pertains to this fever, and am most desirous of procuring a proper recognition of what I consider to be its true nature at the hands of English medical men generally, and especially those of the army and navy. Although there are extremely few of the deductions given by Staff-Surgeon Godding as the result of his experience with which I perfectly agree, I shall limit myself to a consideration of his classification of the disease, as upon this the important questions regarding treatment, and the propriety of early removal from the infective area, evidently depend.

The disease, in his opinion, is "a paroxysmal fever with daily remissions." Turning up the word "paroxysmal" in Quain's *Dictionary of Medicine*, I find it is "used to indicate the periodic attacks or fits which characterise certain diseases, such as ague, gout, and asthma;" but there are no periodic attacks or fits in Malta fever, which, on the contrary, is one of the most monotonous of diseases, and therefore I take it that the word is not used here in the sense quoted. The word is also used commonly as synonymous with malarious, and this is, I presume, the meaning Staff-Surgeon Godding gives it; hence the definition may be read "a malarious fever with daily remissions." Now this is the point I wish to combat. In my opinion Malta fever is not a malarious fever; there is no tiniest thread of malaria running through it; it is a species of fever perfectly distinct from enteric or malarious fever, having its own definite parasitic cause, and is as worthy of specific recognition as diphtheria or tuberculosis. This is my position, assumed and held mainly by a belief in the following line of argument.

It is slowly creeping into the minds of English medical men—slowly chiefly on account of the impassable difficulties placed by legislation in the way of original research in England—that infectious diseases are caused by specific parasites. It is slowly but surely becoming established that enteric fever is not enteric fever without the presence of Eberth's bacillus, and that Asiatic cholera is not Asiatic cholera without Koch's cholera vibrio. In the same way malarious fever, in whatever part of the world it occurs, is coming to be associated with an ameba-like parasite found in the blood of those suffering from the disease. The demonstration of this parasite, supplemented clinically by the very specific action of quinine, constitutes the most rational and surest method of diagnosis. Now, if an ameba-like parasite could be demonstrated in the blood of those suffering from Malta fever, and if quinine could be shown to have its specific effect on the course of the dis-

ease, then I would be the first to admit that Malta fever is malarious. In this case the term remittent fever, in the officially recognised nomenclature of diseases would exactly describe the disease, and could be used instead of the very misleading term simple continued fever, under which heading it is at present principally returned. But in Malta fever no one has been able to find any such parasite in the blood, and it has been proved over and over again, and partly admitted by Staff-Surgeon Godding himself, to be absolutely and totally refractory to quinine. On the other hand, to prove the specificity of this disease, I undertake to demonstrate in every fatal case of true Malta fever a definite micro-organism which has not the slightest resemblance to that found in malaria. This parasite I have shown to be capable of giving the fever to certain animals, with all the symptoms met with in man. It can be cultivated with the greatest ease from the spleen and other organs of fatal cases of Malta fever, and has never been found in the organs of cases of malarious fever or any other disease. From these, and many other, considerations, I hold that Malta fever is not a malarious or a paroxysmal fever, and that Staff-Surgeon Godding's definition of the disease is utterly misleading and not altogether harmless, leading, as it is sure to do, to the indiscriminate use of large doses of quinine in the treatment of the fever.

## MEMORANDA:

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

#### HYPERPYREXIA IN INFLUENZA.

CASE I.—On May 26th I saw a man suffering from influenza. The temperature was 103.8° F. On May 28th the temperature was 99°. On May 29th it rose to 101°, and on the following morning it was 104.8°. Antifebrin gr.x were given, but in about an hour the temperature had reached 108.4°. He was then unconscious and dying. He was lifted into a slipper bath partly filled with lukewarm water; cold water was then added until quite cold. The temperature went rapidly down until it became subnormal. During the twenty-five minutes he was in the bath he gradually returned to consciousness. He was lifted out, clothes stripped off him and well rubbed down, put into blankets, and placed back in bed. He went on very well for three or four hours, taking plenty of nourishment. The temperature then rose again to 106.4°, when he was again placed in the bath; he was sensible and was able to take brandy during the bath, which lasted twenty minutes, when the temperature had fallen to 98°. He went on favourably until about 8 p.m., when the temperature rose again to 106.2°, and still continuing to rise; the bath was again suggested, but was not used. He soon became unconscious, and died about an hour after.

CASE II.—On May 27th a young married woman, aged 21, was confined. On May 29th she was seized with influenza. The temperature was 103.6°. She went on pretty well until May 30th, when the temperature ceased to fall, and soon began to rise, reaching 104.8° F. Antipyrin, antifebrin, and quinine reduced this very little, the tendency being upwards. About 2 a.m. on May 31st the temperature rose quickly to 108°. She then became unconscious, and was evidently dying. She was given a bath of lukewarm water, and cold water was poured over her chest until the water became quite cold in the bath. She was kept in the bath until she came to and began to speak (probably 25 minutes) the temperature had fallen to 97.4°. She was then lifted out and rubbed down, and put to bed. During the early morning she became maniacal, but suddenly became sensible again. She continued well until about 2.30 p.m. on May 31st, when the temperature again went up to 106.7°. The cold bath was again resorted to; this time she was able to ask for the bath, and told us to "be sharp" with it. My assistant again put her in, and this time kept her in fifty minutes; the temperature had then reached 97.4°. She conversed freely during the bath, and took support and stimulants. She was again taken out, rubbed down, and put to bed. The temperature one hour and a half after was normal, but about three hours after it again began to rise. Anti-

pyretics had no effect. About 10 P.M. on May 31st the temperature was 103°. One of the members of my ladies' ambulance class was left with her to take the temperature pretty often, and with instructions to send word when it reached 105°. About 11.30 P.M. the message came. She was seen in about a quarter of an hour; the temperature was still rising. She asked if the bath was ready, as she wanted to get in. When the temperature became normal (in 35 minutes) she was taken out, rubbed down, and put to bed. This was at 12.25 A.M., June 1st. The following temperatures will show how the case proceeded: 2 A.M., 100°; 3.30 A.M., 102.2°; 4.20 A.M., 102.8°; 6.15 A.M., 103.4°; 8.45 A.M., 103.9° (quinine, grs. x); 9.15 A.M., 103.1°; 10.15 A.M., 103.1 (quinine, grs. xx); 1 P.M., 104°. Slight shaking now beginning. 2 P.M., 105°. Shaking now given way to convulsions, which became very violent. Chloroform was administered, and she was kept gently under its influence until death took place at 4.30 P.M. Notwithstanding the influenza, high temperatures, cold baths, etc., the discharge continued and remained perfectly sweet until death. Temperature then registered 107.4°.

CASE III. A baby, aged 3½ months, took influenza probably from the mother, who was in bed with it. The temperature rose to 105° F., and the baby became insensible. The cold bath for fifteen minutes brought the temperature down in one hour to normal; the baby awakened up and became quite lively, and is now well.

[My other case of influenza with high temperature, treated with cold bath on May 24th (reported in the *BRITISH MEDICAL JOURNAL* of May 30th) has progressed favourably, and is now getting up daily.]

Greetland.

JAMES GIBSON, M.D.

#### PHENACETIN IN INFLUENZA.

I DESIRE to draw the attention of the profession to the beneficial action of phenacetin during the first stage of influenza. Its action is prompt and striking, so that many patients declare they have derived more benefit from the "powders" than from anything else. It rapidly cures the headache which is such a distressing symptom at first, helps to reduce the temperature, and mitigates, but does not entirely remove, the aching of the limbs, a few doses of salicylate of sodium effecting its final removal. I give the phenacetin in 5-grain powders, repeated every four hours, till the headache and other pains cease. I have used phenacetin largely in a variety of conditions, and consider it is unrivalled as an analgesic. It seldom fails, it is comparatively cheap, tasteless, and, as far as I can see from a tolerably extended experience of it, is totally free from the unpleasant after-effects—depression of heart, etc.—sometimes caused by antipyrin and other drugs of its class. Insolubility is its sole drawback.

St. Mary Cray, Kent. JOHN P. HENRY, M.D., B.Ch.Dub.

#### ASSOCIATION OF ERYTHEMA WITH ASTHMA.

W. M., aged 36, a man previously in perfect health, developed suddenly the symptoms of a severe attack of asthma at 9 A.M., half an hour after taking breakfast. I saw him immediately at the onset of the attack; observed that his face was red, swollen, and presented numerous hard, red, raised patches, and on auscultating heard sibilant rhonchi over both lungs, with normal resonance. The dyspnoea began to subside at 9.20 A.M., and ceased at 9.45 A.M., when he vomited, the rhonchi ceasing concomitantly. The urticarial erythema first seen on the face soon appeared on the forearms, and gradually spread over the trunk and limbs, becoming finally universal. A moderate amount of itching was complained of. This rash disappeared in the inverse order of its appearance, the skin being quite clear shortly after noon. The attack was not accompanied or followed by any expectoration, and the axillary temperature was subnormal throughout. The patient slept after the dyspnoea ceased, and at 3 P.M. appeared and felt perfectly well.

The marked feature in the case was the instantaneous appearance of alarmingly severe dyspnoea in a perfectly healthy man while at rest. The onset so soon after a meal, and the vomiting, suggest that the disturbance was caused by diet, though others who ate of the same food were not affected in any deleterious manner; the meal consisted of Irish stew with coffee. The theory that asthma may be consequent to erythe-

matous swelling of the bronchial mucous membrane may be applied to explain the case pathologically, and adapts itself better to the clinical features of the case than the alternative theory that the symptoms were primarily due to pulmonary anaemia.

Herne Bay.

W. H. BOWES.

#### DISLOCATION OF ANKLE WITH DISPLACEMENT OF THE FOOT FORWARDS.

As this accident is stated by Erichsen to be so rare as seldom to have been witnessed, the following case may be of interest:

J. S., a riveter, while engaged in moving some scaffolding, slipped off the plank on which he was standing, owing to its tilting upwards, and fell a distance of 16 feet, striking his left foot against the edge of an iron tank so forcibly as to make a distinct groove on the edge of his boot. I saw the patient a few minutes after the accident before any swelling had taken place. There was no fracture of bone; the lower end of the tibia was displaced behind the astragalus, the smooth surface of which could be felt beneath the skin, on to the upper and posterior part of the os calcis, the foot being considerably lengthened, and the prominence of the heel absent and replaced by a slight depression.

Reduction was accomplished with some difficulty by flexing the leg upon the thigh and traction on the foot forwards and downwards, the leg being fixed.

MEADMORE CROCKER, M.R.C.S., L.R.C.P.Lond.

Bingley.

#### TRAUMATIC NEUROSAL PEMPHIGUS.<sup>1</sup>

R. F., aged 17, a well-nourished bright-looking girl, had suffered from fits of an epileptic nature, brought on by a fright at school, from childhood. In December, 1887, while cutting wood, she chopped off the distal phalanges of the index and ring fingers, and cut through the middle phalanx of the middle finger. She was taken into the Cottage Hospital at Sevenoaks, which she left in a month with the wounds unhealed; they remained open for three months. Shortly afterwards patches of redness followed by blebs appeared on the left wrist, hand, and arm. The eruption was peculiar from the rapid way in which it spread; sometimes in a quarter of an hour the whole hand and arm would be covered with large blebs, which would burst and give out a thin sticky watery discharge, which on drying would leave the surface of the skin of a purple or bluish tint. The circulation also seemed very feeble.

In February, 1889, she had a crop of these on the left leg. Up to that time she was rarely without a series of blebs or threatening of them for quite twelve months. Various remedies, principally arsenic and iron, with external applications, were tried without effect. I admitted her into the Norwood Cottage Hospital, and having found the puckered cicatrices of the ring and middle fingers, especially the latter, very tender, I amputated the stump just beyond the proximal joint of the middle phalanx.

In March, 1889, she had a much slighter return of vesicles, and in August of the same year a single vesicle after being at the seaside, since which she has had no return. At this time a small fragment of bone worked out of the dorsal surface of the wrist.

The vesicles in this case occurred in irregular patches upon both the front and dorsum of the forearm, in the area of distribution of both the median and the ulnar nerves. That the irritation was reflex is rendered probable by this scattering of its effects and the occurrence of the disease on the leg of the same side, as well as its cessation after removal of a source of irritation upon the median nerve alone.

A microscopic preparation of the scar on the amputated portion, kindly made by Mr. H. G. Plimmer, shows hypertrophied papillae with new small cell inflammatory growth round vessels and nerves extending in all directions.

June 8th. Since the above was sent for publication, a slight return of vesicles has occurred and may probably require an operation upon the other finger. She has been quite free for eighteen months.

Upper Norwood.

JOHN H. GALTON, M.D.Lond.

<sup>1</sup> Read before the East Surrey District of the South-Eastern Branch.

elected by subscribers. As to the comparative cost of large and small hospitals, the Witness specified nine large and nine small institutions, and said that the former spent on management 7 per cent. of the cost of maintenance, and the latter 30 per cent. The subscriptions aimed at by the board were small regular weekly contributions. They preferred a penny, but were not above taking a halfpenny a week. The Witness then explained the connection of the Morley House Convalescent Home with the fund, and stated that the Home was to be extended. Last year the Committee disbursed £750 of the whole sum received in surgical appliances, and more than 2,000 patients were thus relieved. The working classes had unbounded confidence in the hospitals. The definite aim of the fund was primarily to enable the working classes to contribute to the hospitals. The amount aimed at was £100,000, but that he hardly thought possible in London. However, he looked forward in a few years to raising at least £50,000 a year. The Committee also wished to obtain representation of the working classes on the hospital boards. He had satisfied himself that if they selected as they could from the board of delegates the right men as representatives, it would be of enormous advantage to the hospitals. The fund had had the effect of bringing into the workshops a knowledge of, and great interest in, the work of the different hospitals. The Committee hoped to exercise great influence on the management of the hospitals. Whilst not desiring to meddle with the internal management of the institutions, it was found to be of great advantage that there was a body subscribing to hospitals as the fund did to whom a complaint as to treatment could be made by any particular patient. The Hospital Sunday Fund was considered a permanent institution, but he hoped that the Saturday Fund would be as permanent. The general and financial secretaries of the fund received £250 each, and two assistant organising secretaries received £200 each. The duty of the latter was to go among all the workshops and advocate systematic collections, and, as far as possible, introduce the Hospital Saturday scheme.

Mr. ROBERT J. NEWSTEAD, secretary of the Royal London Ophthalmic Hospital, Moorfields, next examined, said it was founded in 1805. It was entirely for diseases of the eye. Exceptional cases were sent from other hospitals. It was governed by a board and managed by a committee. The governors met once a year and the committee met once a month. The expenditure last year was £6,349, and the income, £5,496, came from subscriptions, donations, legacies, and dividends. The dividends came from £20,000 consols and about £6,000 stock. The hospital was on freehold ground, but there was no house property. For the last six or seven years there had been a deficit and stock had to be sold. There was a very large out-patient department, there being 26,000 fresh cases in the year and about 300 attendances daily. The hospital was quite free, but there were letters for subscribers if they wished it. There were three sisters and six regular nurses, including two night nurses. No contracts were made for food, the matron being responsible for it. The medical staff consisted of nine surgeons, two resident house-surgeons, and one curator and librarian. Every member of the staff must be a F.R.C.S. Eng. The residents were paid and their appointments varied as to time. Although it was said that many patients were treated who could afford to pay, he considered that the number was greatly exaggerated.

Miss NICHOL, the lady superintendent of the same hospital, who stated that she was trained at Newcastle-on-Tyne, gave particulars as to the work of the nurses.

Mr. DANIEL, honorary secretary of the British Hospital for Skin Diseases, said it was founded by himself and other gentlemen. Its work was carried on at Great Marlborough Street and at Newington Butts. There were 3,472 out-patients and 2 in-patients last year. The total receipts last year were £1,180. A considerable sum was received from patients, but the very poor were received free. There were no nurses in the hospital. There was no resident medical officer.

Mr. FITZROY BENHAM, M.R.C.S., the founder of the Queen's Jubilee Hospital, Richmond Road, South Kensington, stated that the hospital was founded in 1887. There were ten beds. The total income in 1888 was £604 5s. 4d., and the expenditure £1,591. The committee had applied several times for grants to the Hospital Saturday and Sunday Funds, but without success. There were three medical men besides himself on

the staff and a medical registrar. A number of cases had been successfully treated at that hospital which had not been successfully treated at others. The number of patients was annually increasing.

[There was no sitting of the Committee on Thursday. Several witnesses whom it was arranged should be examined were unable to attend, and, in consequence, it was resolved not to hold a sitting until Monday.]

## 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.

WEST SOMERSET BRANCH.—The annual meeting will be held at the residence of the President-elect, Mr. Charles Randolph, at Milverton, on Thursday, June 25th, at 2.45 P.M. Mr. C. Randolph will be happy to see gentlemen and offer them refreshments at his house before the business of the meeting commences. Dinner will be served at the White Hart, Milverton, at 5 o'clock. Members intending to be present, or having communications to bring before the meeting, are requested to send notice to Mr. C. RANDOLPH, or to the Honorary Secretary, W. M. KELLY, M.D.

SOUTHERN BRANCH.—The eighteenth annual meeting will take place at the Royal Hants County Hospital, Winchester, on Thursday, June 18th, 1891. (President, Dr. Joseph Groves; President-elect, Mr. T. C. Langdon, F.R.C.S.) The general meeting will be held at 12.30. In accordance with the by-laws, two gentlemen will be elected at this meeting as representatives of the Branch on the Council of the Association for the ensuing year. Members desirous of reading papers are requested to forward at once the titles to the Honorary Secretary. The subjects will be announced in the BRITISH MEDICAL JOURNAL of June 13th. No communication must exceed seven minutes in length, and no subsequent speech must exceed five minutes. The Address will be delivered by the President-elect at 2.30. During the afternoon, the members are invited to visit the Cathedral and several places of interest in the locality. The dinner will take place at the Royal Hotel at 5.30 P.M. Tickets 6s. each, excluding wine. The Committee request that those gentlemen who intend to be present at the dinner will send in their names to Mr. T. C. Langdon on or before Wednesday, June 17th.—J. WARD COUSINS, Honorary Secretary and Treasurer.

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. The President-Elect, Mr. Geo. H. Percival, will introduce for discussion the subject of Surgical Dressings. Dr. Alexander Hill, Master of Downing, President of the Cambs and Hunts Branch, will be glad of the earliest possible intimation of accommodation required, or he will have great difficulty in obtaining it.—C. J. EVANS, Honorary Secretary.

NORTH OF IRELAND BRANCH.—The annual meeting of this Branch will be held in the Belfast Royal Hospital, on Thursday, July 16th. Gentlemen wishing to read papers or to bring any other business before the meeting will kindly communicate, as early as convenient, with the Honorary Secretary, JOHN W. BYERS, M.D., Lower Crescent, Belfast.

MIDLAND BRANCH.—The annual meeting will be held at the Derby Infirmary on Thursday, June 18th, at 2 P.M. After the transaction of the usual business, the following special business in connection with the proposed annual meeting of the Association at Nottingham in 1892 will

be taken: To appoint a deputation to convey the invitation to the Council at the meeting at Bournemouth. To nominate a President-elect for the Association in case of such invitation being accepted. Papers: H. Handford, M.D.: Antiseptic Treatment of Diseases of the Stomach. E. Mansel Sympson, M.D.: A Case of Diabetes Mellitus, with Remarks on its Treatment by Salicylate of Soda. T. Henderson Pounds, F.R.C.S.: Aural Vertigo—Notes of a Case. Mr. E. Collier Green: The Old and the Proposed New Infirmary at Derby. Luncheon will be provided by the President-elect, at the Infirmary, at 1 P.M. The dinner will take place at the Midland Hotel, at 5 P.M.; tickets, 7s. 6d. each, exclusive of wine.—W. A. CARLINE, M.D., Honorary Secretary and Treasurer.

**SHROPSHIRE AND MID-WALES BRANCH.**—The annual general meeting of this Branch will be held on Friday, June 26th, 1891. Any member having a paper to read, or notes, or business to bring before the Branch, is requested to communicate the same to the Honorary Secretary, care of Mr. J. Gray, Belmont, Shrewsbury.—J. ALLEN BRATTON, Honorary Secretary.

**LANCASHIRE AND CHESHIRE BRANCH.**—The fifty-fifth annual meeting of this Branch will be held in the Town Hall, Birkenhead, on Wednesday, July 1st, 1891, at 2.30 P.M. Agenda: Inaugural address by the President, Dr. Vacher. Report of Council and Financial Statement. Election of Office Bearers. Election of New Council. Choice of place for holding next annual meeting. Dr. Rentoul has given notice of the following motions: Proxy Voting. That the following additions be made to the Laws of the Lancashire and Cheshire Branch of the British Medical Association: Rule 7. "At any General or Special Meetings of the Branch, votes to be given either personally, or by proxy, who shall be appointed in writing under the hand of the appointer. No person shall be appointed a proxy who is not a member, and the instrument appointing him shall be deposited with the Branch Secretary, at his address, not less than forty-eight hours before the time of holding the meeting at which he proposes to vote." That in Rule 4 after the words "Annual Meeting" the words "by a majority of the members present" be omitted. That in Rule 7 after the words "the voting paper properly filled up shall be handed in" the next word "personally" be omitted. That in Rule 8 and in other rules, after the words "by a majority of three-fourths" the words "those present" be omitted. Branch Parliamentary Bills Committee: That a Branch Parliamentary Bills Committee be formed; that such Committee consist of the President, President-Elect, Branch Secretary and members of the Branch, such number of elected members of Committee to be in the proportion of one to every one hundred members of the Branch; that these be elected at the annual Branch meeting by a majority of votes, and that each candidate for election be nominated by five members of the Branch, the nomination paper, duly signed, being forwarded to the Branch Secretary on or before the 31st of May of each year. Publication of Notices of Motion: That 14 days' notice be given in the JOURNAL of the Association of all motions to be brought up for consideration at any general or special meeting of the Branch. Payment of Fares; Parliamentary Bills Committee: That this Branch recommends that, at the annual meeting of the Association a resolution providing for the payment of first-class railway fare to each member of the Parliamentary Bills Committee, thus following the Rule which provides for the payment of first-class railway fare to members of the Council of the Association, be passed. Addition to the Editorial Reference Committee: That this Branch recommends that, at the annual meeting of the Association a resolution providing for the appointing and payment of an additional member to the "Editorial Reference Committee of the Journal," such member to be, and to be distinctly representative of those, in general medical practice, be passed. Medical and Surgical Communications: Dr. Brooke will read a Paper on the Modern Conception of Eczema. Mr. Lee will read a Paper on Some Aural Sequelae of Influenza. Surgeon-Major Blood will read a Paper on a Series of Cataract Extractions with a description of "Couching" as practised in India. Mr. Johnson Martin, on the Present Epidemic of Pneumonic Fever. Dr. Milligan will give an Analysis of 300 Cases of Suppurative Disease of the Middle Ear, with some remarks upon treatment. Luncheon: A light luncheon, kindly provided by the members of the Branch and profession resident in Birkenhead and district, will be served in the Large Committee Room, Town Hall, from 1 to 2.30 P.M. Dinner: Arrangements have been made for a dinner in Berry's Grand Restaurant, 75 and 77, Argyle Street, Birkenhead, at 5.30 P.M. Tickets, wine not included, 8s. each. Excursions: If fine, excursions will be arranged for to Messrs. Laird's Shipbuilding Yards, to an Atlantic liner, and to the Observatory at Bidston.—CHARLES E. GLASCOTT, Honorary Secretary, 23, St. John Street, Manchester.

**ABERDEEN, BANFF, AND KINCARDINE BRANCH.**—A joint meeting of the Northern Counties and Aberdeen, Banff, and Kincardine Branches will be held at the Gordon Arms Hotel, Elgin, on Saturday, June 27th, 1891, at 2.50 P.M. Business: (1) Minutes, etc. (2) General. A visit to Elgin Cathedral and Gray's Hospital will be made by those arriving by early train. An excursion has been arranged to visit Pluscadden Priory, starting from Gray's Hospital, Elgin, at 12.15 P.M., and returning to Gordon Arms Hotel, at 2.50 P.M. Fare for excursion and luncheon, 4s. 6d. per head. Dinner will be served in the Gordon Arms Hotel, Elgin, at 3 P.M. Price (exclusive of wine, but inclusive of attendance) 4s. per head. Train Arrangements: For the convenience of members a saloon carriage will be attached to the 6.50 A.M. train from Aberdeen, reaching Elgin at 9.44 A.M.; also, to the train leaving Elgin at 5.45, reaching Aberdeen at 9.40 P.M. Fares for the return journey, going *via* Highland and returning *via* Coast route, 14s. Members leaving Aberdeen by 9.30 A.M. train can take part in excursion and dinner. Members are invited to bring medical friends with them.—J. MCKENZIE BOOTH and C. THISELTON URQUHART, Honorary Secretaries.

#### BOMBAY BRANCH.

A GENERAL meeting of this Branch was held on April 10th, 1891.

*Communications.*—Dr. DALGADA read a paper on the Treat-

ment of Snake Bites in the Konkan, giving a botanical description of plants used by natives.—Dr. PECHEY PHIPSON showed the Photograph of a Case in which a Uterine Tumour had, by Continuous Growth, caused Inversion of the Uterus; the tumour was protruding from the vagina and presented a remarkable appearance. A slight groove indicated at one spot the separation between tumour and uterus. The posterior wall of the vagina had become adherent to the posterior surface of the tumour. An elastic ligature was applied and the greater part of the tumour came away. The tumour was of several years' standing, and the patient had continued at hard manual labour until recently.—Surgeon COLLIE showed (1) a Case of Extensive Destruction of the Palate and Nasal Bones from Hereditary Syphilitic Disease. (2) The Parts Removed by Excision of the Hip in a lad aged 17. The case was an extremely unpromising one from the beginning, but was now doing fairly well.

#### EAST YORK AND NORTH LINCOLN BRANCH.

The thirty-fifth annual meeting was held at the Station Hotel, Hull, on June 3rd; Mr. E. P. HARDEY, President, in the chair.

*Election of Branch Representative and Secretary.*—Mr. R. H. B. Nicholson was elected Representative of the Branch, and Dr. H. W. Pigeon was re-elected Secretary.

*Communications.*—The PRESIDENT delivered an address on Recent Advances in Obstetrics.—Dr. J. F. NICHOLSON read a paper on the Complications of Influenza, which is published at page 1273.—Mr. R. H. B. NICHOLSON showed Three Cases of Lupus that had improved after injection of tuberculin; also a Man whose Tendo Achillis had been sutured fourteen days after a wound of the foot.

#### DORSET AND WEST HANTS BRANCH.

The spring meeting of this Branch was held at Bournemouth on May 27th, Dr. WILLIAM VAWDREY LUSH, President, in the chair. Fifty-two members and visitors were present.

*Luncheon.*—The members and visitors were hospitably entertained at luncheon by the Bournemouth Medical Society.

*Council and Representatives.*—Branch Council: The following gentlemen were elected members of the Branch Council for the ensuing year: Dr. G. H. Batterbury, of Wimborne; Dr. C. Childs, of Weymouth; Mr. G. W. Daniell, of Blandford; Dr. J. C. Leach, of Sturminster Newton; Dr. P. W. MacDonald, of the Dorset County Asylum; Dr. A. McLean, of Portland; and Dr. W. V. Snow, of Bournemouth. Representative of the Branch on the Council of the Association: Mr. C. H. Watts Parkinson, of Wimborne, was re-elected for the ensuing year. Representative on the Parliamentary Bills Committee: Mr. C. H. Watts Parkinson was re-elected for the ensuing year.

*Vote of Thanks.*—A vote of thanks was unanimously accorded to the retiring President, Dr. E. M. Spooner, for his services during the past year.

*New Members.*—The following gentlemen were elected: Mr. J. E. Appleton, Dr. J. C. Bucknill, Mr. A. E. B. Love, Mr. N. MacGillycuddy, Mr. G. Schofield, and Mr. Francis Scott, of Bournemouth; Dr. J. A. Ewan, of the Dorset County Asylum; Mr. G. A. George, of Dorchester; Mr. A. C. Kemble, of Poole; Mr. F. D. Lys, and Mr. George Lys, of Bere Regis; Dr. John Moorhead, of Weymouth; Mr. Lawson Tait, of Lyndhurst Road; Mr. Maitland Thompson, of Puddletown; Mr. A. F. Van, of Cranborne; Mr. B. P. Viret, of the Dorset County Hospital; and Dr. William Watson, of Blandford.

*Next Meeting.*—It was resolved that the next meeting should be held in October at Wimborne.

*Discussion.*—A discussion on Embolism and Thrombosis was opened by the PRESIDENT, and taken part in by Dr. MOORHEAD, Mr. NUNN, Mr. GRAHAM, Mr. G. W. DANIELL, and Dr. MACDONALD.

*Communications.*—The following communications were presented: Mr. GARDNER: A Phimosis Dilator.—Dr. LAWTON: Notes on a Case of Hydrophobia.—Dr. GREVES: A Case of Acromegaly. Patient exhibited.—Dr. MACDONALD: Pathological and Microscopical Specimens of Diseases of the Brain.

*Dinner.*—The members dined together at the Royal Bath and East Cliff Hotel.

Colonial Governments, by the difficulties of supervision caused by the climate, and by the opposition frequently manifested by the natives themselves to sanitary improvements. Much, however, had been done.

Wednesday, June 10th.

Mr. E. ROBERTSON obtained leave to introduce a Bill to amend the Local Government (Scotland) Act, 1889, and it was read a first time.

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF CAMBRIDGE.

**LECTURER IN MIDWIFERY.**—W. S. A. Griffith, M.D., Downing College, Assistant Obstetric Physician at St. Bartholomew's Hospital, has been appointed to the University Lectureship in Midwifery, vacant by the resignation of Dr. Ingle. Dr. Griffith announces a course of lectures for the Long Vacation and Michaelmas Term.

**DIPLOMA IN PUBLIC HEALTH.**—Candidates for this diploma are requested to send their names and certificates to the Registrar on or before September 28th. The examination begins on October 6th.

**LONG VACATION LECTURES.**—Twenty-three courses of lectures and practical classes in the subjects of the examination for medical and surgical degrees are announced for the Long Vacation. They begin on July 6th and extend to August 24th.

**BRITISH MEDICAL ASSOCIATION.**—A joint meeting of the Eastern Counties and South Midland Branches of the Association will take place in Cambridge on June 18th and 19th, under the presidency of Dr. Hill, Master of Downing College. The University has placed the new Anatomical School and adjoining laboratories at the disposal of the meeting.

**DEGREES.**—At the Congregation on June 4th the following degrees were conferred: *M.D.*: Frank Frederick Schacht, M.A., Trinity. *M.B.* and *B.C.*: C. H. Cayley, B.A., Pembroke (thesis, Tuberculous Meningitis).

### UNIVERSITY OF ABERDEEN.

**MEDICAL STAFF CORPS—MARCHING COLUMN.**—On Monday forenoon the Ambulance Corps completed a four days' march to the country. The column was under the command of Surgeon Alex. Macgregor, M.D., and the other officers were Surgeon Scott-Riddell, Quartermaster M. D. Lessert, and Chaplain Rev. Mr. Smith. The column was furnished with everything necessary for their use in field service, such as litters, pack transport, ambulance waggon, etc., and there was a convoy train with provisions, tents, baggage, and kitchen. This being the only fully equipped volunteer corps in the North, more than ordinary attention is attracted by their occasional outings. Their fine military appearance was noted with evident appreciation by the crowd of spectators who watched them leave the city. The ultimate destination was Aboyne, the seat of the Lord Rector, the Marquis of Huntly, and the march was completed in three stages. The men were in high spirits, and their behaviour and marching was throughout most satisfactory. Military authorities assert that this is by far the best means of training, and the officers are to be congratulated on their admirable arrangements and the splendid condition of the corps, which, though by far the youngest, is certainly the most vigorous in local volunteering.

### UNIVERSITY OF GLASGOW.

For the final examinations in Medicine at Glasgow University there are 152 candidates. The written examinations will be conducted on July 6th, 7th, and 8th, while the clinical examinations begin on June 15th and last till July 8th; and the oral portion of the examinations begins on the July 16th, and last till the 24th. The results will be announced on July 25th, and the graduation takes place at the end of the month.

### BRISTOL MEDICAL SCHOOL.

**PRACTICAL INSTRUCTION FOR PUBLIC HEALTH DIPLOMAS.**—Dr. E. Markham Skerritt (Dean of the Faculty of the Bristol Medical School) writes: In the leader on this subject in the *BRITISH MEDICAL JOURNAL* of June 6th you suggest that "it would be interesting to know how far the new system of pupilage has been accepted by medical officers of health generally and by their sanitary authorities." I am able to inform you

that the Faculty of the Bristol Medical School have just completed the arrangements for a post-graduate course of instruction in hygiene to meet the requirements of the General Medical Council for the diploma in Public Health. The course consists of the following sections: (1) Systematic lectures on hygiene; (2) lectures and demonstrations on sanitary appliances, on public health legislation, and on the powers and duties of sanitary authorities and their officers; (3) a laboratory course of lectures and demonstrations on hygienic chemistry and physics, and on bacteriology; (4) practical outdoor instruction under the medical officer of health for the city and county of Bristol, who has arranged with the Sanitary Committee of the Town Council for the admission of the students of this course to the practical sanitary work of the city in the capacity of pupil-assistants. In this department facilities will be afforded for the study of the diseases of the lower animals bearing upon public health.

**ROYAL COLLEGE OF SURGEONS OF ENGLAND.**—The following gentlemen, having passed the necessary examinations, and having conformed to the by-laws and regulations, were, at an ordinary meeting of the Council on Thursday, June 11th, admitted Fellows of the College:

Name.	Qualification.	Residence.	Date of Membership.
Pronger, C. E.	L.R.C.P.Lond.	1, Barkston Mansions, South Kensington.	Jan. 27, 1876.
Morley, E. J.	L.R.C.P.Lond.	8, The Terrace, Dockyard, Chatham.	Jan. 21, 1879.
Nance, H. C.	L.R.C.P.Lond.	City Hospital, Norwich.	May 18, 1880.
Turton, J.	L.S.A.	73, Preston Road, Brighton.	July 29, 1880.
Wallis, F. C.	M.B.Cantab.	18, St. James Street, W.	Jan. 25, 1883.
Hughes, A. W.	L.R.C.P.Lond.	Woodside, Musselburgh, N.B.	July 23, 1885.
Rayner, H. E.	L.R.C.P.Lond.	103, Sutherland Avenue, Maida Vale.	Oct. 23, 1885.
Herbert, H.	L.R.C.P.Lond.	Bombay Army.	April 19, 1886.
Stocks, W. P.	L.S.A.	24, The Crescent, Salford.	Nov. 10, 1887.
Heaton, G.	L.R.C.P.Lond.	33, Temple Row, Birmingham.	Feb. 9, 1888.
Lucas, A.	L.R.C.P.Lond.	39, Lansdowne Road, Bedford.	Feb. 9, 1888.
Teichmann, E.	L.K.Q.C.P.I.	The Workhouse, Springhill, Birmingham.	Feb. 9, 1888.
Roberts, J. L.	L.R.C.P.Lond.	The Asylum, Colchester.	May 10, 1888.
Housman, B. W.	L.R.C.P.Lond.	Taunton and Somerset Hospital, Taunton.	Aug. 2, 1888.
Campbell, J.	M.D., R.U.Ire.	5, Wellington Park Terrace, Belfast.	Nov. 8, 1888.
Macgregor, J. J.	M.B.Lond.	Royal Orthopaedic Hospital, W.	May 9, 1889.
Cobbett, L.	L.R.C.P.Lond.	Firfield, Weybridge.	Feb. 13, 1890.
Blacker, G. F.	L.R.C.P.Lond.	97, Shooters Hill Road, Blackheath.	July 28, 1890.
Johnstone, J.	M.B.Aberd.	Norman Road, Rusholme, Manchester.	July 28, 1890.
Kellock, T. H.	L.R.C.P.Lond.	61, Lambeth Palace Rd.	Feb. 12, 1891.
Ross, D. McC.	—	54, Upper Berkeley St., W.	Not a Member.
Dyall, T. J.	M.B.Lond.	452, Hackney Road, N.E.	Not a Member.

Seven other candidates passed the examinations, but not yet having attained the legal age (25 years), will receive their diplomas at future meetings of the Council. Thirteen candidates were referred.

The following gentleman having passed the necessary examinations, and having conformed to the by-laws and regulations, was, at the same meeting, admitted a Member:

Bates, J. C., L.R.C.P.Lond., 8, Knight's Hill, West Norwood.

The following gentlemen having passed the necessary examinations, and having conformed to the by-laws and regulations, were admitted Licentiates in Dental Surgery:

C. J. Allin, 11, College Street, St. Albans; C. F. Badcock, 108, Tottenham Court Road, W.; W. Birkett, 16, Crescent, Morecambe, Lancashire; C. J. Blaaberg, 2, Argyle Square, King's Cross; F. Breese, 3, Hillside, Crouch Hill, N.; T. A. Coys, 47, Bramah Road, Brixton; H. A. Forsyth, 54, Claverton Street, S.W.; A. C. Gask, 53, Fairholme Road, West Kensington; R. M. C. Harrison, 245, Camden Road, N.; F. Haynes, 2, Orkney Terrace, Southsea; D. Headridge, 279, Oxford Road, Manchester; M. F. Hopson, 65, Northbrook Street, Newbury; D. R. Jones, 33, Mansell Street, Swansea; P. A. Longhurst, The Woodlands, Barnes Common; L. M. Stocken, M.R.C.S. Eng., Winchester House, Uxbridge Road, W.; F. V. Walker, 26, Hall Gate, Doncaster; G. W. Welham, 265, Brixton Road, W.

Seventeen candidates were referred to their professional studies for six months.

**ERRATUM.**—In the Pass List of the Royal College of Physicians and Surgeons of Edinburgh and Faculty of Physicians and Surgeons of Glasgow, published in the *BRITISH MEDICAL JOURNAL* of May 9th p. 1048, col. 2, line 14, for "Dodgson" read "Hodgson."



Asylum, Old Trafford. In 1849 he published a treatise entitled *Results of an Investigation into the Causes of Blindness, with Practical Suggestions for the Preservation of the Eyesight*.

Dr. Crompton was an expert photographer, a *connoisseur*, and a bibliophile of wide tastes. In November, 1881, on the occasion of his leaving Manchester, a complimentary dinner was given to him, which was followed by the presentation of an address in which reference was particularly made to the interest, professional and otherwise, which for a number of years he had taken in local charities, and especially those for the relief of the blind.

## INDIA AND THE COLONIES.

### INDIA.

**CHOLERA AT ALLAHABAD.**—We regret to hear that an outbreak of cholera of a most virulent type had attacked the troops at Allahabad a couple of days before the mail left. It appears that for some weeks cholera has been prevalent in the adjacent district of Pertabgurh, the deaths amounting to nearly 200 a day. The disease spread to the Allahabad District, and the population was being carried off at the rate of from 100 to 150 a day. About May 10th a few cases occurred among the men of the 2nd Battalion Native Infantry; 1 man died and 2 recovered. The European troops remained free up to the morning of the 18th, and as Allahabad City and regimental bazaars were also free, it was hoped the troops would escape; but every possible precaution was taken by the military authorities, on the advice of the medical officers. Without any warning in the shape of premonitory cases of diarrhoea, the men of the South Wales Borderers (24th) were suddenly attacked on the morning of May 18th, and within forty-eight hours we hear there were no fewer than 40 cases, with 16 fatal ones, several others being considered hopeless. The company first attacked were at once sent under canvas outside the barracks, and arrangements were made to camp them forty miles out on the East Indian Railway line. This was done next day, and the following day the remainder of the regiment was sent out to the same place. The Royal Artillery, who had remained free, were sent into camp as a precautionary measure, this being considered necessary by the administrative medical officer. We learn that medical aid, in the shape of medical officers and apothecaries, had to be obtained from the nearest districts, and in the event of the disease spreading there will be the utmost difficulty in obtaining sufficient assistance. The Black Mountain Expedition and the Manipur business has already drained all the available medical officers and subordinates from the different stations, and in some districts there is not at present a single medical officer or apothecary on leave. What would happen should war break out on an extended scale on the Afghan frontier—and this might be the case at any moment—we cannot imagine. The hospital assistant class is so reduced that barely half the authorised numbers are available, and these men have been kept so constantly on active service in Burmah, Chin-Lushai, Manipur, the Black Mountain, etc., that many of them have died, while a large proportion are on sick leave. The Government of India seems systematically to starve the medical service, and not only keeps it undermanned, but treats the officers with parsimony and neglect. Whether this is a wise policy or not the next big war on the frontier will prove only too sadly, we fear.

## HOSPITAL AND DISPENSARY MANAGEMENT.

**HOSPITAL FOR INFECTIOUS DISEASES AT CARDIFF.** THE county borough of Cardiff is about to undertake the erection of an infectious hospital from plans prepared by the borough engineer, Mr. W. Harpur, based upon the requirements of Dr. Walford, medical officer of health. The site, which extends to twelve acres, is within a mile and a half of the centre of the town, and within a convenient distance from the docks. The hospital will be built on the pavilion system in single stories; each pavilion will contain twenty-two beds, and there will be one isolation pavilion, containing six beds, for

undeveloped cases. Each pavilion will contain two wards for males and females respectively, with ten beds in each ward, and each ward will have a small ward of one bed for special cases. Opening off each ward through a cross-ventilated lobby will be the ordinary sanitary conveniences. The nurses' room will be placed between the wards with inspection windows looking into all of them. On the south side of each pavilion is a covered balcony, and the wards will be heated by a central stove with steam coils at the sides. The isolation pavilion consists of a male and a female side, each consisting of two wards, one containing a single bed, and the other two beds, with nurse's bedroom between. Each portion has its own sanitary arrangements and movable baths. All the pavilions are connected with the administrative block by means of a covered footway. This block contains rooms for the medical officer, dispensary, rooms for visitors, matron's room, dining rooms, kitchens, etc., on the ground floor, and nineteen bedrooms on the first floor. The laundry will be provided with the most approved machinery, and there will also be special buildings for disinfection, stables, and mortuary. The plans are so arranged as to permit of future extension to accommodate five more main pavilions and one more isolation block. The administrative blocks will be constructed of sufficient size to accommodate the whole scheme when complete.

### WOMEN AND CHILDREN'S HOSPITAL, CORK.

DURING the past year 358 patients were treated in the wards, while 1,320 attended the extern department. In 1889 the work of the hospital was much impeded by an epidemic of scarlet fever, and in 1890-91 the entire work of the institution was brought nearly to a standstill owing to this disease, but it has now been completely stamped out. The introduction of infectious disease being inevitable in a children's hospital, the staff urge that a small ward, to be used for the immediate isolation of any suspected infectious case, should be provided. A small isolation ward, entirely disconnected from the main building would be sufficient to meet all requirements, and by immediately transferring any suspicious case of fever to this ward, the tendency of infectious disease to spread would be greatly diminished.

### BELFAST DISTRICT LUNATIC ASYLUM.

THE sixty-first annual report regarding this institution has just been issued by the resident medical superintendent, Dr. Alexander Merrick. On December 31st, 1889, the numbers in the asylum were 377 males and 276 females, total, 653. The admissions during 1890 were, males, 115; females, 85; total 200. Of these, 155 were cases of first attack, and 45 have been previously under treatment in asylums. Amongst the admissions, 13 cases are recorded as actively suicidal, and 32 cases as being complicated with physical disease. Of these, 4 cases were in an exhausted condition from voluntary abstinence which proved fatal in one case eight hours after admission. The discharges for the year numbered 161, being 83 males, and 78 females. Of these, 47 males and 43 females were discharged recovered, giving a percentage of 45.7 on the number admitted, and 10.2 on the total number under treatment. Sixty-four cases were discharged as improved; 4 of these were re-admitted, having relapsed; 3 cases, being quiet and harmless, though not improved, were taken home by their friends. Thirty-nine cases died during the year, being 4.5 per cent. on the total number under treatment. Of these, 16 died in the auxiliary asylum at Ballymena, from debility and chronic brain disease, and 23 died in the asylum: 7 from nervous exhaustion and debility, 4 maniacal exhaustion, 3 heart disease, 6 lung disease, 2 senile debility, and 1 from apoplexy. There was no infectious disease during the year, except 63 cases of influenza, all of whom made good recoveries. The question of providing increased accommodation for the insane poor of the district had been repeatedly before the Board of the asylum; as the result of communications entered into with the Belfast City Council and the grand jury of Co. Antrim, it has been decided to erect a separate asylum for the county district, reserving the present asylum for the insane poor of the City of Belfast. An estate of 100 acres has been secured for this purpose at Holywell, near Antrim. The gross outlay was £22 11s. 8½d. for each patient, for the year.

from whooping-cough, 85 from measles, 38 from diarrhoea, 35 from diphtheria, 25 from "fever" (principally enteric), 23 from scarlet fever, and one from small-pox. These 359 deaths were equal to an annual rate of 2.0 per 1,000; in London the zymotic rate was 2.0, and corresponded with the mean rate in the twenty-seven provincial towns. No deaths resulted from any of the zymotic diseases in Wolverhampton or Derby; in the other towns the rates ranged from 0.4 in Sunderland and 0.5 in Norwich to 2.9 in Preston, 3.7 in Manchester, 3.8 in Huddersfield, and 4.0 in Liverpool. Measles caused the highest proportional fatality in Portsmouth and Bristol; scarlet fever in Huddersfield and Halifax; and whooping-cough in Oldham, Preston, Huddersfield, Manchester, and Liverpool. The mortality from "fever" showed no marked excess in any of the twenty-eight towns. Of the 35 deaths from diphtheria in these towns, 24 occurred in London and 3 in Sheffield. A fatal case of small-pox was recorded in London, but not one in any of the twenty-seven provincial towns; 16 small-pox patients were under treatment in the Metropolitan Asylums Hospitals on Saturday, June 6th. The number of scarlet fever patients in the Metropolitan Asylums Hospitals and in the London Fever Hospital on the same date was 885, against 927 and 916 at the end of the preceding two weeks; 66 new cases were admitted during the week, against 66 and 88 in the previous two weeks. The death-rate from diseases of the respiratory organs in London was equal to 6.8 per 1,000, and was more than double the average.

#### HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday, June 6th, 919 births and 651 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had declined in the preceding three weeks from 24.1 to 23.3 per 1,000, rose again to 25.3 during the week under notice, but was 3.0 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 Leith and Perth, and the highest in Greenock and Paisley. The 651 deaths registered in these towns included 72 which were referred to the principal zymotic diseases, equal to an annual rate of 2.8 per 1,000, which exceeded by 0.8 the mean zymotic death-rate during the same period in the large English towns. The highest zymotic death-rates were recorded in Glasgow, Dundee, and Paisley. The 304 deaths registered in Glasgow included 18 from measles, 13 from whooping-cough, and 2 from diphtheria. Five fatal cases of measles were recorded in Paisley, and 5 of whooping-cough in Dundee. The death-rate from diseases of the respiratory organs in these Scotch towns was equal to 5.5 per 1,000, against 6.8 in London.

#### HEALTH OF IRISH TOWNS.

IN sixteen of the principal town districts of Ireland the deaths registered during the week ending Saturday, May 23rd, were equal to an annual rate of 21.6 per 1,000. The lowest rates were recorded in Wexford and Armagh, and the highest in Waterford and Galway. The death-rate from the principal zymotic diseases averaged 1.2 per 1,000. The 141 deaths registered in Dublin were equal to an annual rate of 20.8 per 1,000 (against 26.4 and 25.5 in the preceding two weeks), the rate for the same period being 27.5 in London and 23.3 in Edinburgh. The 141 deaths in Dublin included 4 which were referred to the principal zymotic diseases (equal to an annual rate of 0.6 per 1,000), of which 2 resulted from typhoid fever, and 2 from whooping-cough.

In sixteen of the principal town districts of Ireland the deaths registered during the week ending Saturday, May 30th, were equal to an annual rate of 21.2 per 1,000. The lowest rates were recorded in Kilkenny and Galway, and the highest in Belfast and Londonderry. The death-rate from the principal zymotic diseases averaged 0.8 per 1,000. The 127 deaths registered in Dublin were equal to an annual rate of 18.8 per 1,000, against 25.5 and 20.8 in the preceding two weeks, the rate for the same period being 28.9 in London and 19.1 in Edinburgh. The 127 deaths in Dublin included 1 which was referred to diarrhoea, but not one to any other of the principal zymotic diseases.

## MEDICAL NEWS.

THE annual meeting of Swiss alienists will be held at Münsterlingen and Kreuzlingen on June 18th and 19th.

THE *conversazione* given by the President, Council, and teaching staff of University College, London, will be held this year on June 30th.

THE prizes of the London School of Medicine for Women will be distributed by Lady Reay, C.I., on June 23rd, at 4.30 P.M.

DR. F. C. ANDREW, of Bolton, died from influenza on June 7th, after three days' illness. He was 28 years of age, and had only been in practice in Bolton for one year.

DR. HENRY PENTLAND, medical officer of Rynn Dispensary, has been presented with an address, accompanied by a writing table and purse of sovereigns as marks of the high esteem in which he is held by all classes of Rynn and surrounding district.

By a recent ordinance of the Bavarian Government patients in necessitous circumstances are granted a reduction of railway fare in going to or from hospitals or other public medical institutions. They are henceforth to be charged at the same rate as the special third-class fares allowed to soldiers.

A MOVEMENT is on foot for the establishment of a Society of Hygiene in Havana. There can be no doubt that such a society will have ample scope for its energies in the capital of Cuba.

THE Russian Government has presented Miss Fanny Fowke with a bronze medal for her paper on Industrial Schools in connection with Boarding-out, sent to the Fourth International Congress on Education, held recently in St. Petersburg.

DR. H. WELCH, the medical officer of health for the borough of Blackpool, has resigned his appointment, owing to continued ill health, and the Town Council have decided to appoint a successor, at a salary of £300 per annum, the successful applicant to devote the whole of his time to his duties.

TRINITY COLLEGE, DUBLIN, TERCENTENARY DINNER.—The graduates of the University of Dublin, resident in England, will dine together at the Middle Temple on Wednesday, June 17th, at 7 P.M., under the presidency of Lord Ashbourne. This is the tercentenary anniversary of the foundation of the University. Dr. Phineas Abraham, 2, Henrietta Street, and Mr. J. Gordon McCullagh, Goldsmith Building, Temple, are the Honorary Secretaries.

NURSING SCHOOL AT KENSINGTON INFIRMARY.—A scheme for the training of probationers at the Kensington Infirmary has been accepted by the Local Government Board, which provides that at the expiration of three years each probationer, upon passing the prescribed examinations, will receive a certificate of nursing. They will be instructed in theoretical and practical nursing by the medical staff. It has been found that any period of training short of three years is unsatisfactory.

THE Queen's Hospital, Birmingham, has decided to start an externe nursing department, a course which it is believed will be of advantage to the hospital and to the staff and other practitioners in Birmingham. One of the difficulties of provincial hospitals is to retain the bulk of their nurses, whose training is completed but for whom wards cannot be provided, and their employment as private nurses will certainly assist in this desirable purpose.

MEDICO-PSYCHOLOGICAL ASSOCIATION.—The next examination in England for the certificate in Psychological Medicine will be held at Bethlem Hospital, London, on July 16th, at 11 o'clock in the morning. The examination for the Gaskell Prize will take place on the following day at the same place. Examinations will be held in Scotland on July 14th at the Morningside Asylum, Edinburgh, on July 16th, at Gartnavel Asylum, Glasgow, and on July 25th at the Royal Asylum, Aberdeen. Candidates are requested to give fourteen days' notice to Dr. Urquhart, Murray's Asylum, Perth, if they wish to be examined in Scotland, and to Dr. Fletcher Beach, Darenth Asylum, Dartford, if they wish to be examined in England.

LIVERPOOL ROYAL INFIRMARY: "OLD RESIDENTS' DINNER."—The former house-surgeons and house-physicians of the "Old Royal Infirmary," Liverpool, dined together recently. This is the first occasion on which an attempt has been made to gather together those gentlemen who have resided at various times in the Old Infirmary, the difficulty being that they are scattered all over the country and colonies, and are settled in practice. The record of house-surgeons dates from 1833, and from that date to 1889 there have been 122 residents, of whom the oldest now alive is Dr. Nottingham, of Whitchurch, who held office from 1837 to 1840, and who sent a letter regretting his absence. Forty-six sat down to dinner, the senior "old resident" present being Dr. A. T. H. Waters, who held office from 1854 to 1856, and at the present time is honorary consulting physician to the infirmary. Mr. Reginald Harrison was in the chair, and proposed the toast of "The Royal Infirmary," to which Dr. Glynn responded. The toast of "The Old Residents" was given by Mr. Mitchell Banks in very happy terms, and replied to by Dr. Waters, who in the course of his remarks gave an interesting account of his first appointment to the infirmary and of the state of the institution at that time. Cordial votes of thanks were given to Mr. Harrison for presiding, and to Dr. Gemmell for inaugurating a meeting which had brought so many old friends together.

**MEDICAL DEFENCE UNION.**—A meeting of the East Anglian and Midland Division will be held at the New Theatre of Anatomy and Physiology, Cambridge, on Thursday, June 18th, at 2.30 p.m. Agenda: The President, Dr. E. Barnes, will deliver an address; the Secretary's report for 1890-91 will be read and officers for the ensuing year elected; Dr. D. B. Balding, Royston, will propose, "That this meeting recommends that active measures be taken to complete the organisation of the division, and increase the number of members;" Mr. C. E. Abbott, Braintree, will propose, "That members of the division be requested in the event of any legal difficulty arising, to forward at once a statement of the facts either to the divisional president, a county president, or the divisional secretary, as most convenient to them, and are advised to take no steps personally, unless they have been advised thereon."

### MEDICAL VACANCIES.

The following Vacancies are announced:

- ARMAGH UNION.**—Medical Officer for Workhouse. Salary, £100 per annum, and £20 yearly as Medical Superintendent Officer of Health. Election on June 16th.
- BEDFORD GENERAL INFIRMARY AND FEVER HOSPITAL.**—Resident Surgeon, double qualifications. Salary, £100 per annum, with apartments, board and washing. Applications to the Secretary, by July 1st.
- BIRMINGHAM DENTAL HOSPITAL.**—Honorary Dental Surgeon. Must be registered under the Dentists Act, and hold diploma in Dental Surgery. Applications to W. A. Addisell, Honorary Secretary, 112, Edmund Street, Birmingham, by June 13th.
- BRISTOL CITY LUNATIC ASYLUM.**—Second Assistant Medical Officer; double qualifications; unmarried. Salary, £120 per annum, with furnished apartments, board, and washing. Applications to the Chairman of the Visiting Committee, Council House, Bristol, by June 13th.
- COUNTY OF ABERDEEN.**—Medical Officer for the County, whose services may also be made available as Chief Medical Officer of the eight Districts of the County; must hold no other appointment; must reside in Aberdeen. Salary as County Medical Officer, £400 per annum, and a further £100 if appointed Medical Officer for the eight Districts of the County. Applications (thirty in number and thirty copies of testimonials) to the County Clerk, County Buildings, Aberdeen, by June 15th.
- DERBYSHIRE GENERAL INFIRMARY.**—Resident Assistant House-Surgeon. Appointment for six months; board and washing provided, and £10 bonus. Applications to the House-Surgeon, by June 14th.
- DORSET COUNTY ASYLUM.**—Assistant Medical Officer for the second asylum. Salary, £120 per annum, with board and furnished apartments. Applications to the Medical Superintendent by June 18th.
- EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E.**—House-Surgeon. Board and lodging provided. Applications to Samuel Whitford, Secretary, by June 25th.
- EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E.**—Assistant Physician. Applications to Samuel Whitford, Secretary, by June 25th.
- GENERAL HOSPITAL, Birmingham.**—Assistant House-Surgeon. Residence, board and washing provided, no salary; appointment for six months. Applications to Dr. J. D. M. Coghill, House Governor, by June 27th.
- GENERAL HOSPITAL, Birmingham.**—Assistant Surgeon. Appointment for three years, honorarium, £100 per annum. Applications to Dr. J. D. M. Coghill, House Governor, by June 27th.
- GENERAL INFIRMARY AT GLOUCESTER AND GLOUCESTERSHIRE EYE INSTITUTION.**—House-Surgeon; double qualifications. Salary, £100 per annum, with board, lodging, and washing. Applications to the Secretary by June 30th.
- GENERAL INFIRMARY, Leeds.**—Resident Medical Officer. Salary, £100 per annum, with board, washing and lodging. Applications to Mr. E. Ward, Secretary to the Faculty, by June 27th.
- GENERAL INFIRMARY, Leeds.**—Resident Casualty Officer. Salary, £100 per annum, with board, washing and lodging. Applications to Mr. E. Ward, Secretary to the Faculty, by June 27th.
- GUY'S HOSPITAL, S.E.**—Five additional Assistant Dental Surgeons; must be L.D.S. Eng. Applications to the Dean by July 1st.
- HORTON INFIRMARY, Banbury.**—House-Surgeon and Dispenser. Salary, £60 per annum, with board and lodging. Applications to T. H. Davis, Honorary Secretary, 27, Marlborough Road, Banbury, by June 20th.
- LIVERPOOL NORTHERN HOSPITAL.**—Assistant House-Surgeon, double qualifications. Salary, £70 per annum, with residence and maintenance in the house. Applications to the Chairman of the Committee, by June 24th.
- LUNATIC HOSPITAL, The Coppice, Nottingham.**—Assistant Medical Officer, unmarried, and not more than 26 years of age. Salary, £100 per annum, with board, apartments, attendance and washing. Applications to Dr. Tate, Medical Superintendent, by June 30th.
- MALTON UNION.**—Medical Officer of Health for the Malton Rural Sanitary Authority. Salary, £100 per annum.
- MOUNTMELLICK UNION, Clonsalee Dispensary.**—Medical Officer. Salary, £120 per annum and fees. Applications to Mr. R. H. Corbett, Honorary Secretary, Ballykaneen. Election will take place on June 17th.

- NEWCASTLE-ON-TYNE DISPENSARY.**—Visiting Medical Assistant, double qualifications. Salary, £120 per annum. Applications to the Honorary Secretary, by June 23rd.
- NORFOLK COUNTY ASYLUM, Thorpe, Norwich.**—Junior Assistant Medical Officer; unmarried. Salary, £100 per annum, with board, lodging, and washing. Applications to the Medical Superintendent.
- NORFOLK COUNTY ASYLUM, Thorpe, Norwich.**—Temporary Assistant Medical Officer. Board, lodging, and washing provided. Applications to the Medical Superintendent.
- NORTH WEST LONDON HOSPITAL, Kentish Town Road, N.W.**—Assistant Resident Medical Officer. Applications to Alfred Craske, Secretary, by June 30th.
- PARISH OF ST. LEONARD, SHOREDITCH.**—Clinical Assistant for Infirmary; double qualifications. Salary, £40 per annum, with rations, furnished apartments, and washing. Applications, endorsed "Clinical Assistant," to Robert Clay, Clerk's Office, 213, Kingsland Road, N.E.
- QUEEN'S COLLEGE, Birmingham.**—Medical Tutor and Demonstrator of Anatomy; must devote his whole time. Applications to Professor B. C. A. Windle, Dean of the Medical Faculty, by July 4th.
- QUEEN'S COLLEGE, Birmingham.**—Demonstrator of Anatomy. Applications to Professor B. C. A. Windle, Dean of the Medical Faculty, by July 4th.
- ROYAL FREE HOSPITAL, Gray's Inn Road.**—Junior Resident Medical Officer, double qualifications; board and residence provided, no salary. Applications to C. W. Thies, Secretary, by June 22nd.
- ROYAL HOSPITAL FOR DISEASES OF THE CHEST, City Road, E.C.**—House-Physician; appointment for six months. Salary at the rate of £40 per annum, with board and lodging. Applications to John Harrold, Secretary, by June 13th.
- ROYAL SOUTH HANTS INFIRMARY, Southampton.**—Assistant to the House-Surgeon. Board and lodging provided. Applications to T. A. Fisher Hall, Secretary, by June 20th.
- ROYAL SOUTH LONDON OPHTHALMIC HOSPITAL, St. George's Circus, S.E.**—Honorary Assistant Surgeon. Applications to the Secretary by June 15th.
- ROYAL WESTMINSTER OPHTHALMIC HOSPITAL, King William Street, West Strand.**—Clinical Assistants. Appointments for six months. Applications, to the Secretary, by June 27th.
- SUSSEX COUNTY HOSPITAL, Brighton.**—Surgeon. Must be Fellow or Member of the Royal College of Surgeons of England, Edinburgh, or Ireland. Applications to Lieutenant-General E. F. Bouchier, Secretary, by June 17th.
- SUSSEX COUNTY HOSPITAL, Brighton.**—Assistant Surgeon. Must be Fellow or Member of the Royal College of Surgeons of England, Edinburgh, or Ireland. Applications to Lieutenant-General E. F. Bouchier, Secretary, by June 17th.
- 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.
- VICTORIA HOSPITAL FOR SICK CHILDREN, Queen's Road, Chelsea.**—Assistant Physician to the Out-patients; appointment for five years. Applications to the Secretary, by June 27th.
- VICTORIA HOSPITAL FOR SICK CHILDREN, Queen's Road, Chelsea.**—Physician to the In-patients. Applications to the Secretary, by June 27th.
- VICTORIA UNIVERSITY.**—Holt Professorship of Physiology. Salary, £375 per annum, plus share of students' fees. Applications to the Registrar, University College, Liverpool, by June 27th.
- WESTERN GENERAL DISPENSARY, Marylebone Road, N.W.**—Second House-Surgeon, unmarried. Salary, £50 per annum, with board and residence. Applications by June 18th.
- WEST LONDON HOSPITAL, Hammersmith Road.**—House-Physician. Appointment for six months. Board and lodging provided. Applications to R. J. Gilbert, Secretary-Superintendent, by June 26th.
- WEST LONDON HOSPITAL, Hammersmith Road.**—House-Surgeon. Appointment for six months. Board and lodging provided. Applications to R. J. Gilbert, Secretary-Superintendent, by June 26th.
- WOLVERHAMPTON EYE INFIRMARY.**—House-Surgeon. Appointment for twelve months. Honorarium of £25, with rooms, board, and washing. Application to W. Blake Burke, Secretary, by June 15th.
- YORK COUNTY HOSPITAL.**—Assistant House-Surgeon. Salary, £40 per annum, with board and residence. Applications to C. E. Pinfold, Secretary, by June 18th.

### MEDICAL APPOINTMENTS.

- ABRAM, J. Hill, M.D., L.R.C.P. Lond.,** appointed Pathologist to the Liverpool Royal Infirmary, *vice* A. Barron, M.B. Lond., M.R.C.S. Eng., resigned.
- BARLING, Gilbert, F.R.C.S. Eng.,** appointed Honorary Surgeon to the General Hospital, Birmingham, *vice* T. H. Bartleet, deceased.
- BICKERSTETH, R. A., M.B. Lond., M.R.C.S. Eng.,** appointed Honorary Assistant Surgeon to the Royal Infirmary, Liverpool.
- BRABAZON, A. B., M.D. Aberd., L.R.C.S.I.,** appointed Senior Physician to the Royal Bath Mineral Water Hospital.
- BUTT, Francis John, M.B., C.M. Edin.,** appointed Vaccination Officer to the North Eastern District of the Chester Union, *vice* Dr. Haining, deceased.
- CHAPMAN, Charles William, M.D. Durh., M.R.C.S. Lond.,** appointed Honorary Physician to the Farrington General Dispensary.
- COUPLAND, Mr. W. H.,** appointed Assistant House-Surgeon to the North Staffordshire Infirmary and Eye Hospital, Hartshill, *vice* J. T. Gillett.



CUNNINGHAM, C. L., L.R.C.S., L.M. Edin., reappointed Medical Officer for the Port of Newhaven.

DAVIS, Arthur N., L.R.C.P., etc., Resident Medical Officer in charge of Dorset County Asylum, Forstow, appointed Medical Superintendent to the New Asylum for the Borough of Plymouth.

DAWES, G. H., L.R.C.P. Lond., M.R.C.S. Eng., appointed Medical Officer of the Central District of the Sheffield Union, *vice* W. Collier, resigned.

DICKINSON, George, M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Surgeon to the Warneford Hospital, Leamington Spa, *vice* Philip Hicks, M.D.

DILLON, L. G., M.D., M.Ch. Irel., appointed Medical Officer for the Dawson District of the Easington Union.

DOYLE, Henry Martin, M.R.C.P., L.R.C.S., L.S.A. Lond., appointed Medical Superintendent of the Newcastle (New South Wales) Hospital.

ELLIS, W. McDonogh, M.D. Brux., L.R.C.P. Lond., M.R.C.S., appointed Honorary Medical Officer to the Eastern Dispensary, Bath, *vice* Mr. W. S. Walker, deceased.

EVANS, J. Durance, L.R.C.P. Edin., M.R.C.S., appointed Surgeon to the Victoria Ironworks and Collieries, Ebbw Vale.

FORD, Frank Chubb, M.R.C.S., L.R.C.P., appointed House-Physician to the City of London Hospital for Diseases of the Chest, Victoria Park.

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

GORDON, John, M.D., M.B., C.M. Aberd., reappointed Parochial Medical Officer, St. Nicholas Parish, Aberdeen.

GRANT, Frederick, L.R.C.P. Edin., M.R.C.S., reappointed Medical Officer to the Market Harborough Union.

HOOD, James Jarvie, M.B., and C.M. Glas., appointed Honorary Medical Officer to the Albert Memorial Hospital, Wollongong, N.S.W.

LARKHAM, E. T., M.R.C.S. Eng., L.R.C.P., appointed Assistant Medical Officer to the Infirmary of the Salford Union, *vice* E. A. Shaw.

LITTLEJOHN, H. Harvey, M.A., M.B., C.M., B.Sc., F.R.C.S. Eng., appointed Medical Officer of Health for Sheffield, *vice* Dr. Theodore Thomson, resigned.

LOTHBURY, Charles John, L.R.C.P. Lond., L.R.C.P., L.R.C.S. Edin., appointed Resident Medical Officer to the Dunstable Friendly Benefit Societies' Medical Association.

MACLEOD, C. G., M.B., C.M., appointed House-Surgeon to the Royal Westminster Ophthalmic Hospital, King William Street, W.C., *vice* J. Urquhart Black, M.B., C.M.

MARRIOTT, Charles W., M.D., M.R.C.S., appointed Physician to the Royal Berks Hospital, Reading, *vice* Dr. Banham, resigned.

MEREDITH, John, M.D., L.R.C.S. Edin., appointed Medical Officer for the First District of the Wellington (Somerset) Union.

PIGOTT, Frederick K., L.R.C.P., L.R.C.S. Edin., appointed Medical Officer for the St. Chad's District of the Atham Union, *vice* Dr. Smith, deceased.

SAUNDERSON, Robert, M.D., C.M. Glas., appointed Medical Officer to the Royal Constabulary in Edenderry, Esker, and Cloncullogue.

SCROGGIE, John George, M.B., C.M. Aberd., reappointed Medical Officer St. Nicholas Parish, Aberdeen.

SHORT, Thomas Sydney, M.B. Lond., D.P.H. Camb., M.R.C.S., L.S.A., appointed Assistant Physician to the General Hospital, Birmingham.

SMITH, George, M.B., C.M. Edin., appointed Medical Officer for the Grey's District of the Henley Union.

STAUNTON, M. C., M.B., etc., Royal University of Ireland, reappointed House-Surgeon to the Mater Misericordiae Hospital, Dublin.

STURB, E. C., F.R.C.S., appointed Resident Assistant Surgeon to St. Thomas's Hospital, *vice* H. B. Robinson, M.D., M.S. Lond.

TOVEY, R. N., L.R.C.P. Edin., L.F.P.S. Glas., appointed Medical Officer for the Leigh District of the Marley Union.

TWIGG, F. G., L.S.A., appointed Deputy Medical Officer for the Mewborough District of the Doncaster Union, and also Medical Officer to the Local Branch of the Railway Servants' Mutual Provident Society, Mewborough.

WILSON, Mr., appointed Medical Officer of Health for Midsomer Norton.

YATES, Peter, M.D., appointed Surgeon to the Police of the County Borough of Bolton, *vice* Dr. Eaton, resigned.

## DIARY FOR NEXT WEEK.

### MONDAY.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Professor Reginald Harrison: On Observations on Stone in the Bladder, Enlarged Prostate, and Urethral Stricture. Lecture I.

LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. R. Marcus Gunn: Diseases of the Orbit. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Dr. Voelcker: Pathological Demonstration.

THE PUBLIC HEALTH MEDICAL SOCIETY, 101, Great Russell Street, W.C., 6 P.M.—Annual Meeting.

### TUESDAY.

LONDON POST-GRADUATE COURSE, Bethlem Royal Hospital, 2 P.M.—Dr. Percy Smith: General Paralysis of the Insane. Examination Hall, Victoria Embankment, 5 P.M.—Mr. Jonathan Hutchinson: The Treatment of Lupus.

ROYAL STATISTICAL SOCIETY, Museum of Practical Geology, 28, Jermyn Street, S.W., 7.45 P.M.—Mr. Noel A. Humphreys: Results of the Recent Census and Recent Death-rates in the Largest English Towns.

### WEDNESDAY.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Professor Reginald Harrison: On Observations on Stone in the Bladder, Enlarged Prostate, and Urethral Stricture. Lecture II.

LONDON POST-GRADUATE COURSE, Hospital for Consumption, Brompton, 4 P.M.—Dr. Hector Mackenzie: Alcoholic Phthisis, with Clinical Cases. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. A. Q. Silcock: Retinal Affections.

ROYAL MICROSCOPICAL SOCIETY, 8 P.M.

### THURSDAY.

LONDON POST-GRADUATE COURSE, National Hospital for the Paralysed and the Epileptic, Queen Square, 2 P.M.—Mr. R. Brudenell Carter: Ocular Symptoms in Nervous Disorders. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Mr. R. Marcus Gunn: The Common Eye Diseases of Children and their Treatment. London Throat Hospital, Great Portland Street, 8 P.M.—Mr. George Stoker: Laryngeal Growths.

BRITISH GYNÆCOLOGICAL SOCIETY at Newcastle-on-Tyne, 4.30 P.M.—Discussion on Surgical Treatment of Diseased Uterine Appendages, to be opened by Mr. Rutherford Morison, F.R.C.S.; Dr. Engelman (St. Louis) will discuss the treatment in connection with mental and nervous disturbance. Public Dinner at 7.30 P.M.

### FRIDAY.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Professor Reginald Harrison: On Observations on Stone in the Bladder, Enlarged Prostate, and Urethral Stricture. Lecture III.

LONDON POST-GRADUATE COURSE, Bacteriological Laboratory, King's College, 11 A.M. to 1 P.M.—Professor Crookshank: Lecture: Erysipelas and Inflammation. Practical Work: Streptococci. Hospital for Consumption, Brompton, 4 P.M.—Dr. Hector Mackenzie: Clinical Demonstration: Graves's Disease. Great Northern Central Hospital, 8 P.M.—Dr. Galloway: Demonstrations of Morbid Anatomy: Heart and Circulatory System.

BRITISH LARYNGOLOGICAL AND RHINOLOGICAL ASSOCIATION, 11, Chandos Street, W.

BRITISH GYNÆCOLOGICAL SOCIETY at Newcastle-on-Tyne, 10 A.M.—Reading and discussion of papers: Professor Auvar (Paris): Some Points in the Treatment of Endometritis. Professor Oliver (Newcastle) and Dr. W. C. Grigg: Puerperal Septicæmia. Dr. Smyly (Dublin): Cases of Fæcal Fistula. Other papers by local and metropolitan members. 5 P.M.—Visit to Royal Infirmary; Operations.

### SATURDAY.

LONDON POST-GRADUATE COURSE.—Bethlem Royal Hospital, 11 A.M.—Dr. Percy Smith: 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.

COWEN.—On April 8th, at Bangalore, the wife of Surgeon W. A. Cowen, Army Medical Staff, of a daughter.

THOMPSON.—On June 3rd, at 9, Dover Street, Hull, the wife of Staff-Surgeon William Thompson, H.M.S. *Audacious*, of a daughter. Stillborn.

### MARRIAGES.

BRADSHAW—O'HARA.—On June 2nd, at St. Mark's, Dalston, London, by the Rev. Richard Solomon, M.A., Albert Bradshaw, L.R.C.P.E., L.R.C.S.E., and L.F.P. & S.G., of Gilsland, youngest son of Surgeon-Major Bradshaw, J.P., Carrick-on-Shannon, to Amy Parker, youngest daughter of the late R. C. O'Hara, of Edinburgh.

DAVIDSON—GRANT.—On June 10th, in Park Church, Glasgow, by the Rev. Donald McLeod, D.D., one of Her Majesty's chaplains, assisted by the Rev. Henry Grey Graham, minister of Hyndland Church. Alexander Gordon Davidson, M.A., M.D., Warrle, Aberdeenshire, to Jane Napier, youngest daughter of Richard R. Grant, Esq., 3, Hillside Gardens, Glasgow.

GOSTLING—RAY.—On June 3rd, 1891, at the parish Church of St. John the Baptist, Buckhurst Hill, by the Rev. Prebendary Gordon Calthrop, of St. Augustine's, Highbury New Park, assisted by the Rev. T. W. Peile, Rev. J. Lankester, and the Rev. Leonard Coulter, Thomas Preston Gostling, M.R.C.S., L.R.C.P., Worcester, to Margaret McCall, daughter of H. H. Ray, Esq., of Ilrox, Buckhurst Hill.

HIRD—TAYLOR.—On June 4th, at the Parish Church, Huddersfield, by the Rev. Canon Bardsley, Vicar of Huddersfield, Frederick Robert Hird, M.R.C.S. and L.R.C.P. Lond., of Esplanade Gardens, Scarborough, to Adeline, elder daughter of the late Frederick Nelson Taylor, of Newsome.

SNAPE—HALM.—On June 3rd, at Marylebone Church, Ernest A. Snape, L.R.C.P. Lond., of Welbeck Street, W., to Mary, only daughter of the late F. Halm, of Mexico, and of Mrs. Halm, York Terrace, Regent's Park.

### DEATHS.

COOPER.—On May 21st, at 12, Albion Street, Hull, Henry Cooper, Knt. M.D., J.P., aged 84 years.

HAINING.—May 12th, at 82, Foregate Street, Chester, William Haining M.D., in his 47th year. (No cards.)

STRUTHERS.—At 39, Charlotte Street, Leith, on June 6th, James Struthers, M.D., F.R.C.P.E., aged 69 years. Friends will kindly accept this (the only) intimation.

## HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

- CANCER, Brompton (Free).** *Hours of Attendance.*—Daily, 2. *Operation Days.*—Tu. S., 2.
- CENTRAL LONDON OPHTHALMIC.** *Operation Days.*—Daily, 2.
- CHARING CROSS.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M., 1.30; Dental, M. W. F., 9; Throat and Ear, F., 9.30. *Operation Days.*—W. Th. F., 3.
- CHELSEA HOSPITAL FOR WOMEN.** *Hours of Attendance.*—Daily, 1.30. *Operation Days.*—M. Th., 2.30.
- EAST LONDON HOSPITAL FOR CHILDREN.** *Operation Day.*—F., 2.
- GREAT NORTHERN CENTRAL.** *Hours of Attendance.*—Medical and Surgical, M. Tu. W. Th. F., 2.30; Obstetric, W., 2.30; Eye, Tu. Th., 2.30; Ear, M. F., 2.30; Diseases of the Skin, W., 2.30; Diseases of the Throat, Th., 2.30; Dental Cases, W., 2. *Operation Day.*—W., 2.
- GUY'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu., 1; Skin, Tu., 1; Dental, daily, 9; Throat, F., 1. *Operation Days.*—(Ophthalmic), M. Th., 1.30; Tu. F., 1.30.
- HOSPITAL FOR WOMEN, Soho.** *Hours of Attendance.*—Daily, 10. *Operation Days.*—M. Th., 2.
- KING'S COLLEGE.** *Hours of Attendance.*—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, daily, 1.30; o.p., Tu. W. F. S., 1.30; Eye, M. Th., 1.30; Ophthalmic Department, W., 2; Ear, Th., 2; Skin, F., 1.30; Throat, F., 1.30; Dental, Tu. Th., 9.30. *Operation Days.*—Tu. F. S., 2.
- LONDON.** *Hours of Attendance.*—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p., W. S., 1.30; Eye, Tu. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9. *Operation Days.*—M. Tu. W. Th. S., 2.
- LONDON TEMPERANCE HOSPITAL.** *Hours of Attendance.*—Medical, M. Tu. F., 2; Surgical, M. Th., 2. *Operation Days.*—M. Th., 4.30.
- METROPOLITAN.** *Hours of Attendance.*—Medical and Surgical, daily, 9; Obstetric, W., 2. *Operation Day.*—F., 9.
- MIDDLESEX.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, M. Th., 1.30; o.p., M. F., 9. W., 1.30; Eye, Tu. F., 9; Ear and Throat, Tu., 9; Skin, Tu., 4, Th., 9.30; Dental, M. W. F., 9.30. *Operation Days.*—W., 1, S., 2; (Obstetrical), W., 2.
- NATIONAL ORTHOPÆDIC.** *Hours of Attendance.*—M. Tu. Th. F., 2. *Operation Day.*—W., 10.
- NORTH-WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, Tu., 2; Dental, F., 9. *Operation Day.*—Th., 2.30.
- ROYAL FREE.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Dental, Th., 9. *Operation Days.*—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.
- ROYAL LONDON OPHTHALMIC.** *Hours of Attendance.*—Daily, 9. *Operation Days.*—Daily, 10.
- ROYAL ORTHOPÆDIC.** *Hours of Attendance.*—Daily, 1. *Operation Day.*—M., 2.
- ROYAL WESTMINSTER OPHTHALMIC.** *Hours of Attendance.*—Daily, 1. *Operation Days.*—Daily.
- ST. BARTHOLOMEW'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, W. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopædic, M., 2.30; Dental, Tu. F., 9. *Operation Days.*—M. Tu. W. S., 1.30; (Ophthalmic), Tu. Th., 2.
- ST. GEORGE'S.** *Hours of Attendance.*—Medical and Surgical, M. Tu. F. S., 12; Obstetric, Th., 2; o.p., Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopædic, W., 2; Dental, Tu. S., 9. *Operation Days.*—Th., 1; (Ophthalmic), F., 1.15.
- ST. MARK'S.** *Hours of Attendance.*—Fistula and Diseases of the Rectum, males, W., 8.45; females, Th., 8.45. *Operation Day.*—Tu., 2.
- ST. MARY'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.45; o.p., 1.30; Obstetric, Tu. F., 1.45; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopædic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electro-therapeutics, Tu. F., 2; Dental, W. S., 9.30; Consultations, M., 2.30. *Operation Days.*—Tu., 1.30; (Orthopædic), W., 11; (Ophthalmic), F., 9.
- ST. PETER'S.** *Hours of Attendance.*—M., 2 and 5, Tu., 2, W., 2.30 and 5, Th., 2, F. (Women and Children), 2, S., 3.30. *Operation Day.*—W., 2.
- ST. THOMAS'S.** *Hours of Attendance.*—Medical and Surgical, daily, exc. W. and S., 2; Obstetric, Tu. F., 2; o.p., W. S., 1.30; Eye, Tu., 2; o.p., daily, exc. S., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu. F., 1.30; Children, S., 1.30; Dental, Tu. F., 10. *Operation Days.*—W. S., 1.30; (Ophthalmic), Tu., 4, F., 2; (Gynæcological), Th., 2.
- SAMARITAN FREE FOR WOMEN AND CHILDREN.** *Hours of Attendance.*—Daily, 1.30. *Operation Day.*—W., 2.30.
- THROAT, Golden Square.** *Hours of Attendance.*—Daily, 1.30; Tu. and F., 6.30; *Operation Day.*—Th., 2.
- UNIVERSITY COLLEGE.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetrics, M. W. F., 1.30; Eye, M. Th., 2; Ear, M. Th., 9; Skin, W., 1.45, S., 9.15; Throat, M. Th., 9; Dental, W., 9.30; *Operation Days.*—W. Th., 1.30; S., 2.
- WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, Tu. Th. S., 2; Ear, Tu., 10; Orthopædic, W., 2; Diseases of Women, W. S., 2; Electric, Tu., 10, F., 4; Skin, F., 2; Throat and Nose, S., 10. *Operation Days.*—Tu. F., 2.30.
- WESTMINSTER.** *Hours of Attendance.*—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1; Eye, M. Th., 2.30; Ear, M., 9; Skin, W., 1; Dental, W. S., 9.15. *Operation Days.*—Tu. W., 2.

## LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

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

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

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

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

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

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

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

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

### ANSWERS.

A. H. B.—We have no further information with regard to the "telephone stethoscope."

R. J. (Chesterfield): Application might be made to the National Orthopædic Hospital, 234, Great Portland Street, or to the Royal Orthopædic Hospital, 297, Oxford Street.

### NOTES, LETTERS, Etc.

JUSTICE has omitted to enclose his card.

#### A NEW SPECIALITY.

THE tide of specialisation is ever flowing. The Kansas Medical College has established a Chair of "Railway Surgery."

#### NATIONAL HEALTH SOCIETY.

At the request of the Marchioness of Waterford, a course of six lectures on "Home Nursing" will be delivered by one of the Society's trained nurses at 30, Charles Street, St. James's Square, S.W., commencing on Wednesday, June 10th, at 11.30 A.M.

#### THE LATE CHANCELLOR OF THE UNIVERSITY OF LONDON.

AN appeal for subscriptions for a statue of the late Lord Granville, to be erected within the precincts of the Houses of Parliament, has been issued by a strong Committee. It is believed that many graduates of the University of London will be glad to contribute. Subscriptions may be sent to either of the honorary secretaries—the Hon. R. Meade, Colonial Office, and Sir T. H. Sanderson, Foreign Office, or to Messrs. Barclay, Bevan, and Co., 1, Pall Mall East.

#### MEDICAL PRACTICE IN BRAZIL.

SINCE the beginning of the present year all European or other foreign medical men wishing to practise their profession in any part of Brazil are compelled to pass the Brazilian "State examination." Titular or honorary members of foreign learned bodies are, however, exempt from this formality. This saving clause would appear to open the door sufficiently wide for most respectable practitioners. It would be interesting, however, to know exactly what is included in the term "foreign learned body."

#### ADHERENT PLACENTAL MEMBRANES.

DR. H. T. BATCHELOR sends the following addendum to his note published in the BRITISH MEDICAL JOURNAL of April 4th, p. 786: As the placenta was being removed, it having been expelled naturally, it was felt that a portion of the membranes was tearing away and being left behind. With the fingers and thumb at the os traction was made, and a segment of the uterine wall was dragged down. The membranes now peeled off, and the uterus regained its shape. The adherent portion was carefully examined, and instead of being smooth and glistening on both surfaces, was rough and shaggy on one, over an area having a diameter of about one inch, proving the extent of the adhesion.

#### ILLEGAL PRACTICE OF MEDICINE ON A DEAD BODY.

A NICE point of law has lately been debated before a French Court. The question was whether an operation on a dead body by an unqualified person came within the meaning of the enactment forbidding the illegal practice of medicine. It appears that a pregnant woman had just died, the cause of death not being stated. The curé of the village, who had been with her in her last moments, induced a neighbour who was in the room to perform a Caesarean section on the corpse with the view of saving the child. The operation was successful; but the operator was haled before the magistrate, and fined 15 francs for having been guilty of illegal practice of medicine.

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

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