

at first have pointed to a malignant form of suppressed scarlet fever, which was, however, not prevalent in the district at the time; but there was such free diaphoresis, and the throat trouble was so slight and transient, that I felt, judging also from the other points of resemblance to the first series of cases, that I was certainly dealing with the same disease, although this patient lived at a distance of some seven or eight miles from the district in which the other cases occurred. This suggests the question of the duration of the incubation period in this disease. This last patient had spent a whole day in the previously-affected district in the month of May, 1892, and had then visited some of the houses in which fatal cases had occurred in 1891. In connection with this, I would mention that the first death in 1891 from this special form of influenza occurred on March 29th, and that the next death occurred on May 12th, and this patient was the son of the one who died on March 29th. If this son received the contagion by personal infection from his father, then there was an incubation period lasting from about March 29th till May 9th, when the son began to sicken. Again, if the patient who died on August 6th, 1892, received the contagion on his visit in May, 1892, to the infected district, then two clear months—June and July and some days—must have indicated the incubation period. I merely mention these facts, and leave the profession to draw any inference from them.

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

### ACUTE INVERSION OF UTERUS: SPONTANEOUS REDUCTION: RECOVERY.

On April 1st, 1892, I was called to attend Mrs. C., primipara, aged 33, married ten months. She had been in labour some time. Pains were slight, contractions irregular, and the second stage very slow. A male child of average size finally born twelve hours after the onset of labour; the cord was very short and thick.

About five minutes after the birth of the child the patient complained of severe bearing down, felt sick and faint, gave a shrill scream, and immediately the inverted uterus appeared below the vulva, with the placenta attached somewhat to the left of the fundus. The placenta was peeled off, and haemorrhage, which was free, stopped by hot water affusion. There was now marked collapse. An attempt was made at reposition, but handling the uterus caused intense pain and deeper symptoms of collapse. The condition of the patient becoming alarming, I sent for my friend Dr. McElwaine, and we again tried replacement, but so severe was the resulting collapse that we thought death had supervened. After about half a tumblerful of brandy had been got down the patient's throat she revived. The uterus was placed as far as possible in the vagina, further attempt at reposition being deemed dangerous.

April 2nd. The patient became stronger, and free from pain; there was oozing from the uterus, which was again protruding, a result of having been permitted to strain to pass urine. The womb was bathed and dusted with iodoform, replaced in the vagina, and antiseptic pads placed over the vulva. On consultation it was deemed advisable not to make any attempt at reduction till the patient was stronger and able to bear an anaesthetic. From this time till April 10th urine was drawn off daily, the vagina syringed with corrosive sublimate solution and iodoform, and salicylic wool pads applied. On April 11th an attack of pneumonia set in, the temperature rising to 104° F. On May 4th the patient was so far recovered that another attempt at reduction was made, but the organ was found to be so soft that the procedure appeared to be dangerous; further action was deferred until the uterus was completely involuted.

On July 1st the patient was seized with most acute pain in the vagina, sickness, and faintness. These symptoms stopped suddenly, and from this time oozing, which had been continuous, ceased; she lost the sense of weight in the vagina, and felt much better.

On October 29th the patient came to ask when I proposed doing the contemplated operation. I was astonished to find the uterus replaced, but slightly retroverted. The os was patulous, and the sound passed to a depth of 4½ inches. The patient felt strong and looked in good health; the catamenia had not appeared.

The occurrence of this, "one of the most formidable accidents of parturition" (Playfair), is very rare. In Rotunda Hospital, where I studied, it had not been seen once in 190,000 cases; C. von Borun had not seen one in 250,000. Byford writes that no more serious complication can occur. Cross states that, of 109 cases, all died, 73 deaths taking place in a few hours. Thomas regards spontaneous reduction as a curiosity, Cross denies that it could occur, while Barnes does not see why it should not happen in first and second degrees. Spiegelberg and Shaw had each one case, but I do not know the particulars.

Stonehouse, Devon. W. H. WATERFIELD, L.R.C.S. & P.I.

### CASE OF ACONITE POISONING.

AT 7.40 P.M. an urgent request was made to me to visit a married woman, aged about 40. I attended within five minutes, and found her retching violently in her garden. She was being attended to by two neighbours, who had given mustard and water to produce emesis. I was shown a 2-oz. stoppered bottle, about half full of Flemming's tincture (six times as strong as tinct. aconit. P.B.), from which the husband had seen the patient drink. Attempts to introduce a tube into the stomach increased the retching; tumblerfuls of warm water were therefore given repeatedly for twenty minutes, each draught being vomited. Sp. am. co. 3iss ex aqua was given and retained for a short time; the patient was then put to bed, and another dose of sal volatile given.

The symptoms were intense burning sensation in the praecordial and epigastric regions, a feeling of suffocation, and later a numb condition of face and hands. The physical signs were pallor of the face, staring appearance, and undiglistening of the eyes: the pupils reacted to light, and were of normal size; the pulse was full, 80.

About half an hour after I first saw the patient, the surface of the body and extremities were cold. An hour after poison had been taken, the pulse had become irregular, and had fallen to 60. At 8.30 P.M., tinct. bellad. 1/2oz. was given and repeated hourly, and cognac ½ oz. in milk was given at intervals of two hours through the night. At 9.30 P.M., the pulse was 60, the burning sensation was diminishing, the surface was warmer, but a "drawn" feeling in the face and tingling in the hands was felt. At 11 P.M., the tingling and numbness were passing off. The tinct. bellad. given every two hours.

The next morning at 8.30, patient (having slept for two hours) was tranquil, and all symptoms had gone. Pulse 72, regular.

REMARKS.—The drug, a teaspoonful of which the patient believes she swallowed, was taken on an empty stomach. As far as I could learn, emesis was brought on by the prompt action of the neighbours within five minutes of taking the poison.

Farningham, Kent.

T. F. HUGH SMITH, L.S.A.

### MEMBRANOUS ENTERITIS: OBSTRUCTIVE JAUNDICE.

I. H., a strongly-built man, 48 years of age, had been subject to occasional "bilious attacks," lasting a few days, during which his stools were clay coloured. This condition invariably terminated in vomiting, when he was entirely relieved. There was no history of biliary colic.

On February 26th he complained of pain and distension in the epigastrum, and nausea. On the next day jaundice was marked, and the stools were clay-coloured. Saline aperients and cupping over right lobe were prescribed, and the patient gradually improved up to March 2nd, when he insisted on leaving for the country.

On March 7th he returned. Jaundice was more intense, and there was pain in the region of the gall bladder, the liver more particularly the left lobe, was swollen. The temperature rose gradually, until on March 16th it reached 103°. He had several rigors, and the stools were white, and highly offensive. The bismuth prescribed previously was replaced by salicylate

of soda, and on March 19th the temperature began to fall, all other symptoms more or less subsiding.

On March 20th the temperature was normal. The stools contained a considerable amount of fine membrane and mucus. One small portion of membrane was slightly bile-stained; from that time the amount of bile gradually increased; occasional traces of blood were also found in stools. Pieces of membrane continued to pass for two days, the stools still highly offensive. On April 3rd the temperature began to rise, the pulse became full and bounding, thirst was marked. On April 5th the stools were white, the temperature reached 102°, and he had a rigor the same night. No reason could be ascribed for this change, as the diet had not been altered. Phenacetin (6 grs.) was administered; the patient perspired profusely, and described himself as much better next morning. The motions again contained a considerable amount of membrane and some bile staining. From that date up to April 17th gradual improvement took place. Pieces of membrane still passed, but the stools were less offensive and of good colour. The urine was found on March 29th to contain a good deal of albumen, but this almost entirely disappeared.

This case, undoubtedly one of gastro-duodenitis, with obstruction of gall duct, is of interest on the following account. After obstruction had taken place, the left lobe was noticed to increase entirely out of proportion to the right. At no time was there any vomiting, and only now and then a sense of nausea. The gall bladder was difficult to map out owing to fat in the abdominal wall, but it was certainly not increased in the perpendicular direction to any extent. The spleen was enlarged. I can find no mention made by Murchison of the profuse desquamative process occurring in the intestines, and the curious feature was that the tongue remained fairly moist throughout, and was only slightly coated with white fur in spite of the acute intestinal inflammation.

Cradock, Cape Colony.

P. C. DE WET, M.R.C.S.

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

### ROYAL INFIRMARY, NEWCASTLE-UPON-TYNE. CASE OF ABSCESS OF THE OVARY.

(Under the care of Dr. OLIVER and Mr. WILLIAMSON.)

[Reported by T. BEATTIE, M.B., House-Physician.]

C. L., aged 40, was admitted under Dr. Oliver's care complaining of a swelling in the left side of the pelvis, accompanied by pain of three months' duration. Her family history was good, and she had had ten children. She had never before had any serious illness. She began to menstruate at the age of 16, was married at 19, and had her first child ten months later. All her labours had been easy. The menses were regular between confinements; there had been no intermenstrual discharge. There was a history of three miscarriages, the first seventeen years ago, the second twelve years ago, and the last two years ago, all between the second and third months of pregnancy; from all of them she made a good recovery. Her last child was born three months before admission into the infirmary. It was an easy labour, and she was attended during this, as in previous confinements, by a midwife.

About a week before the last confinement she was seized with pain in the left side of the chest, but there had never been any pulmonary symptoms. The lochia continued for two days after the confinement, and then ceased permanently. Five days after the cessation of the discharge she had a severe rigor, and a week later another rigor, with pain in the left side of the pelvis, accompanied by vomiting. This pain had been present more or less ever since. A lump about the size of a pigeon's egg now gradually developed in the left iliac region. It was painful to the touch, and had increased only very slightly in size. There had been frequent shiverings, followed by cold perspirations. Micturition had at times been painful, and on two occasions there had been absolute

retention of urine, lasting for two days. There had been considerable loss of flesh.

We found her somewhat emaciated; appetite was bad, and there was considerable thirst; there was no vomiting, the bowels were constipated, the temperature was 98.6°. The heart and lungs were normal. The abdomen was not distended, the walls were flaccid, the area of liver and splenic dulness normal. Towards the left iliac region a hard, rounded mass could be felt rising out of the pelvis; it was tender on manipulation. On vaginal examination the uterus was found to be enlarged (the sound passed 4 inches) and drawn to the right. In the left *cul-de-sac* a tense elastic swelling could be felt extending from the left side of the uterus towards the pelvic wall, to which it seemed fixed. The right tube and ovary appeared to be normal. The urine was healthy. She had a few shiverings during our period of observation, and on one occasion her temperature rose in the evening to 101° F.

Abdominal section was performed by Mr. Williamson, and—with very great difficulty owing to the extent of adhesions—the swelling in the pelvis was removed along with the tube close to the uterus. On section, it was found to be an abscess of the ovary. The tumour was the size of a mandarin orange, and on splitting it open a cavity capable of containing a walnut was exposed, out of which thick yellow pus flowed. The cavity was lined with a yellow membrane like wash-leather. The abscess was surrounded by degenerated ovarian tissue. The surface of the ovary was covered by a thick layer of gelatinous organised lymph. The Fallopian tube was carefully examined and found to be perfectly intact.

Owing to the numerous adhesions a drainage tube was inserted, and, as there was a tendency to oozing, a plug of gauze was deeply and firmly placed in the left side of the pelvis. On removing the gauze on the following day very severe haemorrhage occurred, which, but for a speedy and firm renewal of the plugging, would soon have proved fatal. With the exception of this slight accident nothing subsequently occurred to mar the course of her recovery.

### FIFE AND KINROSS DISTRICT ASYLUM, CUPAR.

CASE OF ACUTE MANIA: SEPTICEMIA: DEATH.

(A. W. ANDERSON, M.B., C.M., Assistant Medical Officer.)

L. W., aged 41, single, factory worker, was admitted on October 6th, 1892. From the history it appears that the patient was always of a dull desponding disposition, but that after her father's death seven years ago she became much worse, and suffered from recurring attacks of depression. A few days previous to admission she began to get very unsettled, wandered about all hours disturbing her neighbours, and the day before admission became acutely maniacal. No hereditary predisposition. The medical certificates stated her to be very excited, talking and singing incoherently, not answering questions, and calling out in disjointed sentences about "Heaven;" that she was the "Queen of Glory," "Christ," and the "Ruler of Salvation," refusing to take her food, as it was "poisoned," and threatening to kill herself that she "might the sooner get to Heaven."

Physical examination on admission revealed nothing special. She was well nourished, and her general condition average. Temperature 98° F. Her mental condition was much as described in the medical certificates.

For some time after admission she was fairly quiet, but had occasional outbursts of shouting and jumping about in bed. After about a fortnight she had several acute attacks of diarrhoea—faeces watery, fetid, and clay-coloured. Temperature normal. When recovered from the diarrhoea she was even more noisy and excitable than previously.

On November 30th crops of furunculi came out all over her body; tongue furred and flabby. Mental condition did not alter.

On February 6th swelling of right foot was noticed, and, on suppuration being made out, an incision was made, and a large quantity of pus escaped.

On February 17th both legs and feet became oedematous, and, as patient continued in a state of unrest, mechanical restraint had to be applied. Several small abscesses formed at the terminal phalanges of different fingers, and these from time to time were opened.

## INQUESTS AND WORKHOUSES.

W. R. D. (Ireland) writes to say that the coroner in his county pays no fees for medical evidence given at inquests held on persons who die in the workhouse.

\*\* We have frequently commented on and replied to similar questions. We find the practice varies in different counties in England it is now generally admitted by the county councils that the medical officers in question are entitled to payment, and we are not aware that the statute law regulating these payments is different in Ireland.

## A HARD CASE.

F. F. A. writes: My assistant was summoned to attend a magistrate's court as witness in a case of assault. The case has been sent to the assizes (July). He has been ordered to attend, under a penalty of £50, to repeat his evidence. Being unwell (occasional attacks of malaria), he had arranged to take a sea voyage. Is there any way (legally) whereby he can be excused?

\*\* The only valid excuse for non-attendance in obedience to a recognition of illness so severe as to make travelling to court to give evidence dangerous to the health of the witness. Presumably a medical man would find a difficulty in giving a certificate that a patient suffering from intermittent malaria was unfit to attend a court of justice. Cannot the voyage be postponed till after the assizes?

WANDERER must charge only according to the terms of his contract whilst that contract or agreement exists. The former answer in the BRITISH MEDICAL JOURNAL, mentioned by "Wanderer," did not refer to conditions such as his letter describes.

## OBITUARY.

We regret to have to record the death of Mr. Simpson, M.R.C.S., L.S.A., of Coggeshall. Mr. Simpson, who was born in 1827, first entered a private bank at Bishop's Stortford, where he remained for some years. He afterwards entered at Charing Cross Hospital, where he gained several silver medals and the gold medal for the year 1851. After leaving the hospital he acted as assistant to the late Dr. Sinclair, of Halstead, and finally commenced to practise at Coggeshall in 1857, where he won for himself the esteem of everyone who came in contact with him. For upwards of thirty-six years he practised, until death put an end to his labours. During the last year his health began to fail, but he manfully stuck to his duties until a few months ago, when he had to take to his bed, from which he never rose. His death took place on the evening of May 16th, and was due to heart failure following on dilated heart and angina pectoris. Thirty years ago Dr. Gowers was his pupil, and to his extreme satisfaction attended him during his last illness. Mr. Simpson was medical officer for the parish, and was surgeon to many friendly societies. He was connected with nearly every philanthropic institution in the town. Amid much sympathy and sorrow his funeral took place on May 20th, and was largely attended. The deceased was twice married, and leaves a widow and two children.

DR. LUIGI FORNASINI, of Brescia, who recently died at the age of 80, was one of the recognised authorities on medical jurisprudence in the province of Lombardy. He was the author of an important work on the subject, entitled *Studi di Medicina Legale*, published at Brescia in 1877, and of other valuable works on hypochondriasis and hysteria, the hygienic condition of prisons, etc. Nor was his literary activity confined to matters connected with his profession. He was the author of a narrative poem in ottava rima, entitled *La cacciata del Duca d'Atene* (The Expulsion of the Duke of Athens), which is described as a work of very considerable merit. Dr. Fornasini practised at Brescia for more than fifty years; the first cholera epidemic which visited that city brought him into note, and he was afterwards medical superintendent of the prisons and chief physician to the Ospedale Civile.

We regret to have to announce the death of Dr. G. H. Manning, of Combmarlin, who expired on May 16th. The deceased held the degree of M.B.Dub., and was a district medical officer of the Barnstaple Union.

We regret to record the death of Mr. John Anwyl, of Amlwch, which took place, after a month's illness, on

May 20th. Mr. Anwyl held the diplomas of L.R.C.P. and L.R.C.S.Edin., and L.F.P.S.Glasg., all of which he obtained in 1890.

The death is reported of Mr. George Langley Tuthill, medical officer of the Portlaw Dispensary, from typhoid fever contracted in the discharge of his duties. The deceased obtained the diplomas of L.R.C.P. & L.R.C.S.I. in 1889.

## UNIVERSITIES AND COLLEGES.

## UNIVERSITY OF LONDON.

## M.B. PASS EXAMINATION: PASS LIST:

First Division.—G. F. Bergin, Bristol Medical School; F. P. S. Cresswell, B.Sc., Guy's Hospital; W. Edgecombe, University Colleges, Liverpool and London; H. Langdale, Owens College and Manchester Royal Infirmary; A. J. Martin, Mason College and General Hospital, Birmingham; A. Paine, St. Mary's Hospital; C. Paine, St. Mary's Hospital; N. C. Ridley, St. Mary's Hospital; C. H. Roberts, St. Bartholomew's Hospital.

Second Division.—C. B. Braithwaite, Guy's Hospital; J. B. Byles, University College; R. H. Castellote, University College; I. Costa, University College; A. J. Edge, St. Bartholomew's Hospital; C. A. Fuller, St. Mary's Hospital; R. C. Gully, St. Bartholomew's Hospital; E. G. Hall, Medical School and Royal Infirmary Bristol and Guy's Hospital; F. Hazell, Guy's Hospital; F. Johnson, St. Bartholomew's Hospital; H. D. Levick, St. Thomas's Hospital; A. G. Levy, University College; J. H. Muncaster, Guy's Hospital; J. E. Ramsay, University College; J. L. Sawers, University College; R. M. Smyth, St. Mary's Hospital; J. H. Sproat, Queen's and Mason Colleges, Birmingham; G. R. F. Stillwell, St. Thomas's Hospital; A. C. Ta'Bois, St. Bartholomew's Hospital; G. A. Watson, University College; S. Williams, University College; J. Williamson, St. Bartholomew's Hospital.

## ROYAL UNIVERSITY OF IRELAND.

## M.D. DEGREE EXAMINATION, SPRING, 1893.—D. M'Donnell, M.A., M.B.

THIRD EXAMINATION IN MEDICINE.—In addition to the winners of Exhibitions and Honours the following have been adjudged to have passed this examination:

Upper Pass Division.—J. O'Callaghan, Queen's College, Cork.

Pass Division.—R. H. Allen, Queen's College, Belfast; D. Barry, Queen's College, Cork; J. P. Cashman, Queen's College, Cork; L. A. J. Crinion, Catholic University Medical School; J. Cunningham, Queen's College, Belfast; Amelia G. Grogan, B.A., Royal College of Surgeons, Dublin; W. Herron, Queen's College, Belfast; W. Hunter, Queen's College, Belfast; Edith B. Joel, Royal College of Surgeons, Dublin; T. D. Luke, Queen's College, Belfast; J. H. M'Burney, Queen's College, Belfast; J. Munce, Queen's College, Belfast; D. O'Donnell, Queen's College, Cork; J. J. O'Shea, Queen's College, Belfast; J. D. Rice, Queen's College, Belfast; J. Roantree, Catholic University Medical School; P. J. Scannell, Queen's College, Cork; J. R. Thompson, B.A., Queen's College, Belfast; C. Turner, Queen's College, Cork, and University of Edinburgh; J. H. Whitaker, Queen's College, Belfast.

At the examinations in the Faculty of Medicine, Spring, 1893, the following Exhibitions and Honours have been awarded:

SECOND EXAMINATION IN MEDICINE.—Exhibitions.—First Class £25: W. J. MacKeown, Queen's College, Belfast. Second Class £15: S. T. Beggs, Queen's College, Belfast.

Honours.—First Class: W. J. MacKeown, Queen's College, Belfast. Second Class: S. T. Beggs, Queen's College, Belfast.

THIRD EXAMINATION IN MEDICINE.—Exhibitions.—First Class £30: J. Dundon, Queen's College, Cork. Second Class £20: E. P. M'Loughlin, B.A., Catholic University Medical School.

Honours.—First Class: J. Dundon, Queen's College, Cork; E. P. M'Loughlin, Catholic University Medical School. Second Class: T. J. O'Meara, B.A., Queen's College, Cork.

MEDICAL DEGREES EXAMINATION, M.B., B.C.H., B.A.O.—Exhibitions.—List of candidates who, upon their answering, were qualified for Exhibitions; the names of those disqualified by standing are marked with an asterisk.—First Class £40: \*A. J. M'A. Blaney, M.A., Catholic University Medical School; Emily Winifred Dickson, Royal College of Surgeons, Dublin. Second Class £25: W. J. Woods, Queen's College, Belfast.

Honours.—First Class: A. J. M'A. Blaney, M.A., Catholic University Medical School; Emily Winifred Dickson, Royal College of Surgeons, Dublin; W. J. Woods, Queen's College, Belfast. Second Class: R. L. Leaham, B.A., Queen's College, Belfast.

## ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE following gentlemen passed the First Professional Examination for the Diploma of Fellow in Anatomy and Physiology, at a meeting of the Board of Examiners, on Wednesday, May 17th:

Messrs. W. H. Brodie, M.D., C.M.Edin., Student of Edinburgh University and St. Mary's Hospital; W. L. Christie, M.R.C.S.Eng., M.D. New Zealand, of Otago University, New Zealand and King's College Hospitals; T. H. Ionides, M.R.C.S.Eng., L.R.C.P.Lond., of University College Hospital; A. Keith, of Aberdeen University and University College Hospital; H. A. Moffat, of Guy's Hospital; A. E. Reynolds, M.R.C.S.Eng., L.R.C.P.Lond., of University College Hospital; J. Smith, of Cambridge University and St. Thomas's Hospital; T. M. Thomas, of Guy's Hospital; and E. J. Toye, of St. Bartholomew's Hospital.

Eleven candidates were referred back to their professional studies for six months.

Passed on May 18th:

Messrs. H. L. Barnard, M.R.C.S.Eng., L.R.C.P. Lond., of London Hospital; F. Barrington, M.B. Edin., of Edinburgh University and University College Hospital; A. W. R. Cochrane, of St. Bartholomew's and St. Thomas's Hospitals; W. S. Handley, of Guy's Hospital; J. G. O. H. Lane, of Guy's Hospital; T. P. Legg, of St. Bartholomew's Hospital and Yorkshire College, Leeds; W. T. Lister, of Cambridge University and University College Hospital; M. G. Pearson, of St. Bartholomew's Hospital; A. B. Roxburgh, M.R.C.S.Eng., L.R.C.P. Lond., of Oxford University and London Hospital; H. B. Shaw, of University College and Yorkshire College, Leeds; G. H. Sowry, of St. Bartholomew's Hospital and Yorkshire College, Leeds.

Nine candidates were referred back to their professional studies for six months.

Passed on May 19th:

Messrs. L. T. Giles, of Cambridge University and St. Bartholomew's Hospital; F. K. Wilson, of Westminster Hospital; J. H. Cook, of University College Hospital; E. F. G. Tucker, of London Hospital; and C. J. Harnett, of Guy's Hospital.

Eleven candidates were referred back to their professional studies for six months.

Passed on May 20th:

Messrs. A. Dimsey, of University College Hospital; E. J. Dobbin, of Middlesex Hospital; and H. P. Godfrey, of Melbourne University. Seven candidates were referred back to their professional studies for six months.

Of the total number of candidates (106) for this examination, 41 passed and 65 were referred.

#### ROYAL COLLEGES OF PHYSICIANS AND SURGEONS OF EDINBURGH, AND THE FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW.

At the May sittings of the Conjoint Board of the Royal Colleges of Physicians and Surgeons of Edinburgh, and the Faculty of Physicians and Surgeons of Glasgow, the following gentlemen were admitted diplomates in Public Health: David Anderson, L.R.C.P. & S.Edin.; John Hight, M.D., Troon; William Robertson, M.D., Perth.

Alaric George Robertson, M.B. Edin., at the same time passed the First Examination for the same diploma.

#### ROYAL COLLEGES OF PHYSICIANS AND SURGEONS OF IRELAND.

THE DIPLOMA IN STATE MEDICINE.—In answer to "Health," we may mention that under the old regulations of the Royal College of Physicians of Ireland the following books were mentioned to indicate, approximately, the range of the subjects in which the candidate might be examined. The examination was not, however, necessarily confined to them:

1. *Law*.—The Public Health Acts, and the Acts incorporated therewith. The Artisans' Dwellings Acts. The Artisans' and Labourers' Dwellings Improvements Acts. The Vaccination Acts. *The Principles and Practice of the Laws of Evidence*, by Edmund Powell (W. Butterworth and Co.).

2. *Engineering and Architecture*.—*Dwelling Houses, their Sanitary Construction and Arrangements*, by W. H. Corfield (H. K. Lewis). *Our Homes*, edited by Shirley Murphy (Cassell and Co.). *On the Construction of Hospitals*, by Douglas Galton (Macmillan). *Report of the Local Government on Treatment of Town Sewage* (Hansard and Co.). *The Plumber and Sanitary Houses*, by S. Stevens Hellyer (Batsford). *Introductory Textbook of Geology*, by David Page (William Blackwood and Sons).

3. *Chemistry*.—*Elements of Experimental Chemistry*, by J. Emerson Reynolds (Longmans). *Lessons in Elementary Chemistry*, by Sir Henry Roscoe (Macmillan).

4. *Climatology, Meteorology, and the Geographical Distribution of Disease*.—*Elementary Meteorology*, by R. H. Scott (Kegan Paul, Trench, and Co.). *Handbook of Geographical and Historical Pathology*, by August Hirsch (London: H. K. Lewis, New Sydenham Society). *Physiography*, by Professor Huxley (Macmillan and Co.).

5. *Vital Statistics*.—*Vital Statistics*, by Dr. William Farr (London: Edward Stanford, 1885).

6. *Hygiene*.—*Manual of Practical Hygiene*, by the late Professor Parkes and the late Professor De Chaumont (London: J. and A. Churchill). *Manual of Public Health for Ireland*, by T. W. Grinshaw, R. O'B. Furlong, J. Emerson Reynolds, and J. W. Moore (Dublin: Fannin and Co.). *Manual of Hygiene and Sanitary Science*, by George Wilson (London: J. and A. Churchill).

7. *Medical Jurisprudence*.—*Principles and Practice of Medical Jurisprudence*, by Dr. Alfred S. Taylor (London: J. and A. Churchill).

#### ROYAL COLLEGE OF SURGEONS IN IRELAND.

ELECTION OF EXAMINERS.—The following gentlemen have been elected examiners for the ensuing year:—Anatomy and Surgery: John Barton, William Stoker, Sir William Stokes, William Thomson. Physiology and Histology: J. Alfred Scott. Biology: J. Alfred Scott. Chemistry and Physics: Robert J. Montgomery. Midwifery and Gynaecology: Samuel R. Mason. Ophthalmology: Arthur Henry Benson, Patrick Wm. Maxwell. Dentistry: John Barton, John J. Burgess, William Stoker, Henry Gregg Sherlock, Thomas Studley, Charles Wall. Diploma in State Medicine: Hugh A. Achinleck, D. Edgar Flinn, William Stoker (Morbid Anatomy), P. Crampton Smyly. Midwifery Diploma: Richard Thomas Hearn, Samuel R. Mason, Jeremiah O'Donovan. General Education: Frank J. Davys, Robert Morton.

#### SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, May, 1893.—The following candidates passed in:

Surgery.—A. W. V. Clarke, St. Thomas's Hospital; P. H. Court, Middlesex Hospital; R. A. Cowie, Cambridge and St. Thomas's Hospital; A. Delye, University College; S. Gresswell, St. Bartholomew's Hospital; F. J. V. Hall, Queen's College, Birmingham; E. C. B. Ibotson, Guy's Hospital; E. Johnstone, Owens College, Manchester; J. A. Procter, King's College; C. M. Rhodes, St. Mary's Hospital; T. J. S. Suffield, London Hospital.

*Medicine, Forensic Medicine, and Midwifery*.—H. J. Dean, London Hospital; F. J. V. Hall, Queen's College, Birmingham; F. Morris, Queen's College, Birmingham; C. Stewart, Durham; G. M. Turner, Cambridge and St. Thomas's Hospital; W. H. G. Wilkes, Birmingham.

*Medicine and Forensic Medicine*.—B. Saul, Charing Cross Hospital.

*Medicine and Midwifery*.—G. M. Hetherington, King's College.

*Forensic Medicine*.—R. Evans, University College; W. D. Johns, Durham; T. J. McDonald, Toronto; F. L. Underwood, University College.

*Midwifery*.—J. C. Bawden, Liverpool; A. Delye, University College; G. G. B. Hein, Charing Cross Hospital.

To Messrs. Bawden, Hall, Johns, Johnstone, Saul, Suffield, and Underwood was granted the diploma of the Society entitling them to practise Medicine, Surgery, and Midwifery.

#### HOSPITAL AND DISPENSARY MANAGEMENT.

##### LEICESTER PROVIDENT DISPENSARY.

THE *Leicester Daily Post* gave recently an account of the working of the above institution, though, like most of these institutions, it is not entirely self-supporting, but its resources have to be supplemented by bazaars, etc., and, still more unfortunately, the fees are too low. The latter circumstance, however, depends on causes which are both too numerous and too general to be dealt with in this place. One excellent feature in this dispensary is the large proportion of the members' payments which is handed over to the medical officers. Exclusive of nearly £600 paid for midwifery and dentistry, "which practically goes intact to the medical staff," the latter received in the current year over £3,342, being 3s. 4d. out of every 5s. paid by the members, that is, two thirds of their payments. This, however, when divided between the visits, which were over 80,000, will give only 6d. a visit. We earnestly hope that a time will come when medical men may be enabled to charge more adequate fees for attendance on the poor. It would, we believe, involve no hardship to them, and would be largely compensated by improved health and vigour. Meanwhile, the provident dispensary at Leicester seems a most favourable specimen of its class.

##### THE YORK LUNATIC ASYLUM.

*Narcotics*.—*Charitable Fund*.

DURING the year 1892 the daily average number of patients resident in this hospital for mental diseases was 131, whilst the number of patients admitted has been considerably in excess of the average. The recovery-rate, calculated on the admissions and excluding transfers, was 41.73 per cent., and the death-rate 7.23 per cent. on the total number under treatment. It is satisfactory to note that since 1884 Dr. Hitchcock has year by year held classes of instruction in ambulance and nursing work. Such instruction has now become an acknowledged duty on the part of the medical authorities of our lunatic asylums, and tends to raise immensely the status of the large body of men and women engaged in the onerous and important work of "mental nursing." In summarising the treatment employed during the last ten years, Dr. Hitchcock calls attention to the fact that, with a high rate of recovery as the result of his treatment, he has never found it necessary to use chloral or any of its allies, or any other sedative. In fact he goes further and states: "I believe if I had used these drugs my recovery-rate would not have been so high." With regard to the payment for the maintenance of patients, they are admitted at 2 guineas a week, but the Committee have at their disposal an income of about £400 a year from "Lupton's Charitable Fund," which enables them to make very considerable reduction in the payments for poorer Yorkshire patients. Probably, if this fact were more widely known of the value of this admirable charity, advantage would be more frequently taken of it.

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

THE income of the hospital from sources which may be called permanent has during the year increased by £348 2s. 1d., which includes a sum of £157 9s. 1d. from paying patients. The extern nursing realised £495 5s. during the year. The board have engaged premises for the treatment of extern patients at a short distance from the hospital, and this year 1,585 were treated—a number considerably above the average. A resolution was adopted at the annual meeting held last week in reference to the loss the institution had sustained by the death of Dr. Jackson Cummins, who from the beginning was one of the most valued supporters of the hospital, and conveying to the members of Dr. Cummins's family their deep sympathy under their sad bereavement.

##### COVENTRY PROVIDENT DISPENSARY.

THE *Coventry Herald* has published a very full account of the annual meeting of the above dispensary. We have already referred to a controversy which has been going on in the city with regard to the admission of all persons, irrespective of their pecuniary position, as members of this dispensary, on a subscription of 1d. a week, for which they are entitled, we believe, to medicine, attendance, and surgical treatment, in any illness, however severe and protracted—childbed excepted. The outcome of the annual meeting was that a resolution was carried, with only about half-a-dozen dissentients, in these terms: "That the dispensary being a self-supporting institution, the pecuniary position of any applicant for membership shall in future be no bar to admission." We must say that we regret this decision, since we believe that as far as it will operate at all, it will promote injustice and will tend to degrade the status of provident dispensaries. If our readers will turn to the *BRITISH MEDICAL JOURNAL* for April 15th, they will see reasons alleged against the justice of such a rule as would admit a rich man to medical and surgical treatment for the whole of his life at 4s. 4d. a year, which we hold to be perfectly sound, and to which we still adhere. Of course the reasoning on which the proposers of the above resolution relied is perfectly simple and obvious. They say, "We sell a certain article, namely,

and costs in each case. If there were any extenuating circumstances they do not appear in the report. This is not the first time that we have had to comment upon dangerous misconduct with regard to precautions against the spread of infection on the part of those connected with nursing institutions. For the sake of the many which are properly conducted it is well that speedy punishment should overtake the offenders; and it is well, too, that the profession and the public should be on their guard.

#### NOTIFICATION OF INFECTIOUS CASES ARISING IN ANOTHER DISTRICT.

DR. OGIER WARD (Tottenham) writes: Will you use your influence to obtain a much-needed amendment to the Notification of Infectious Diseases Act? I have recently had several cases of typhoid fever and of diphtheria in men who spend their day in town, and are only at home to sleep. Most are subordinates, who often dare not complain of insanitary conditions in their shops, warehouses, and offices, and yet the notification sent to the authorities here is futile when the cause is in the City. A clause might run thus: Notifiable disease occurring in persons engaged during the day in another district than that in which they reside must be notified to the medical officer of health for such other district, as well as to the officer for the home district. This would cover the case of children travelling to school.

\*\* There would be manifest advantage in the double notification in such instances as those mentioned. In practice it might often be difficult to define the meaning of the phrase "employed during the day in another district;" and, further, the notifier would sometimes be at a loss to know in what sanitary district the place of employment was included.

#### CERTIFICATION OF PAUPER LUNATICS IN SCOTLAND.

T. F. writes that a parochial board in Scotland has refused to pay its medical officer, whose salary does not include the examination and certification of lunatics, the usual fee for examination, by request of the inspector, of a pauper, on the ground that the patient was not after all removed under certification.

\*\* We have no doubt that our correspondent is legally entitled to the usual fee for certification of the lunatic, but it would be advisable for him to consider his own position and decide, with the advice of his law agent, as to the course he will adopt. The term "lunatic" is defined by the statute to include every person certified by two registered medical practitioners to be a lunatic, an insane person, an idiot, or a person of unsound mind; and a "pauper lunatic" is any lunatic on whose behalf an allowance is granted by a parochial board. The Board of Supervision is the central board in Scotland for the administration of the Poor Laws and public health. They have issued a statement for the guidance of inspectors of poor (relieving officers) to the following effect: "The granting of medical certificates under the Lunacy Acts does not form part of the duties which a medical officer under the Poor-law Act is bound to perform in consideration of his salary, and that the terms of the medical officer's appointment (engaged to sign these certificates without fee) were incompetent under the rules of participation in the medical relief grant." The following authorities may be consulted: (1) Tuke's *Dictionary of Psychological Medicine*, p. 1121; (2) Instructions to Inspectors of Poor, issued by General Board of Lunacy, p. 5; (3) Rules reissued by Board of Supervision to Parochial Authorities, p. 144.

## MEDICAL NEWS.

THE fourth annual meeting of Belgian laryngologists and otologists will be held at Ghent on June 4th.

THE first annual meeting and dinner of the London and Counties Medical Protection Society, Limited, will be held at the Frascati Restaurant, Oxford Street, London, on Thursday, June 15th.

SIR JOSEPH LISTER has been elected an honorary member of the Hungarian Academy of Sciences. A similar honour was at the same time conferred on Professor Du Bois-Reymond, of Berlin.

MEDICAL INSPECTOR J. RUFUS TRYON has been appointed Surgeon-General of the United States Navy in the place of Dr. John Mills Brown, who retired on May 10th. Surgeon-General Tryon entered the service in 1863.

THE Duke of York presided on May 18th at the annual dinner in aid of the funds of the Great Northern Central Hospital, held at the Hôtel Métropole. Donations to the amount of £5,425 were announced by the Secretary.

THE will of the late Lord Derby has been proved, the net amount of the personal estate being estimated at £1,802,000. Among other legacies, he has bequeathed £2,000 to the University of London; £2,000 to University College, London; £2,000

to Trinity College, Cambridge; £2,000 to University College, Liverpool; and £1,000 to the Brompton Hospital for Consumption.

LAST year, as may be remembered, a hospital ship visited the coast of Labrador, and was able to render to the fishermen services which would have been greater if the resources of the party had been larger. The hospital ship is about to start again, and on this occasion Dr. Grenfell, who has the direction of the medical arrangements, will be accompanied by two other medical men, and will have the assistance of two nurses.

WE are asked to state that the general meeting of the St. George's Hospital Graphic Society will be held on Tuesday, May 30th, at 2.30 P.M. By permission of the Board of Governors, the annual exhibition will be held in the Board Room of the hospital, and will be open immediately after the meeting, and will remain open till the end of the week. Visitors are admitted on presentation of their cards on Tuesday and Wednesday from 3.30 P.M. till 5.30 P.M.; and on Thursday, Friday, and Saturday from 10.30 A.M. till 5.30 P.M. The Society was started to encourage drawing, painting, photography, and the arts of representation in general amongst St. George's men, and the annual exhibition is strictly limited to the works of members.

LEPROSY IN PORTUGAL.—At a recent meeting of the Lisbon Sociedade das Ciencias Medicas, Dr. Zeferino Falcao suggested that the Society should institute an inquiry into the prevalence and distribution of leprosy in Portugal, and the best means of checking its spread. It appears that some years ago the Society called on the Government to make an inquiry on the subject; but the wheels of the official machine are hard to set in motion, and the Society has now expressed its intention of taking the matter into its own hands. Dr. Falcao has been requested to draw up a schedule of questions which will be sent to all medical practitioners and local authorities throughout Portugal.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently passed away are Dr. Conrad Wilhelm von Struve, formerly City Physician at Kremenschug (Russia), a son of the celebrated astronomer Professor Friedrich Wilhelm Struve, of Dorpat, aged 72; Dr. Francesco Felici, of Rome, a young laryngologist rising into distinction; Dr. Kölle, of Nancy, another promising laryngologist, aged 26; Dr. Humbert, Surgeon to the Hôtel Dieu of Rive de Gier, and consulting physician at Aix les Bains, aged 64; Dr. B. Shurtliff Shaw, physician to the Massachusetts General Hospital, and for fifty years a prominent practitioner in Boston (U.S.); Lieutenant-Colonel and Deputy Surgeon-General Ely McClellan, of the United States Army, who did distinguished service in the civil war, and made important contributions to the literature of military surgery; and Dr. Jacob Moleschott, Professor of Physiology in the University of Rome, and Senator of the Kingdom of Italy, aged 70.

BRITISH MEDICAL TEMPERANCE ASSOCIATION.—The annual meeting was held, under the presidency of Dr. B. W. Richardson, on May 19th at the Temperance Hospital. It was stated that 28 new members had joined during the past year, and that, after allowing for loss by deaths and resignations, there were 418 members, 86 student associates, and 1 non-medical associate—an increase of 2 members; 272 of the members practised in England, 51 in Scotland, 78 in Ireland, and 17 abroad. A discussion on alcohol and cholera was opened by the President, who condemned the administration of alcohol in all stages of the disease as enhancing the risk of a fatal issue. There was invariably a decrease of temperature in cholera, no more marked symptom being present in the earlier stages, and the tendency of alcohol to lower temperature rendered it, from a physiological point of view, injurious in treatment. In the reactive fever alcohol was still more deleterious. The discussion was continued by Brigadier-Surgeon Pringle, Dr. Morton, Dr. Ridge, Dr. Norman Kerr, Surgeon-General Francis, and Dr. H. Smith.

ANTIVIVISECTORS.—Lord Ernest Hamilton presided at the annual meeting of the London Antivivisection Society, held in the banqueting room of St. James's Hall. The audience

consisted of about 200 persons, of whom between 30 and 40 were men. The chief speakers were: Dr. F. S. Arnold, Dr. Fox, Dr. Wall, Dr. Berridge, the Rev. Dr. Adamson, Rev. Nevison Loraine, Rev. J. M. Sungan, Rev. C. J. Stuart Rotton, Colonel Lockwood, M.P., Mr. R. T. Reid, M.P., Mr. Glandy, Q.C., and Mr. J. Craig, jun. The line adopted by the speakers was that the gain to surgical knowledge was in inverse ratio to the suffering inflicted upon dumb animals, and that cruelty was cruelty, whether practised by the physiologist or dirty little boy, and as such should be punished. The meeting, which lasted nearly three hours, passed unanimously resolutions declaring vivisection to be contrary to the teaching of true science, and that any results claimed to have been obtained did not justify its practice, which had been useless, fallacious, and misleading, and that the time had now come for the appointment of a Royal Commission to inquire into the working and administration of the "Act to Amend the Law relating to Cruelty to Animals."

CLINICAL SOCIETY OF LONDON.—The annual meeting of this Society is to be held this (Friday) evening, when officers and members of Council for the coming year will be elected, and the Council's report for the past year will be presented. The report states that the members now number 522; whilst the treasurer's statement of accounts shows an increased balance in the Society's favour. The Council congratulates the Society on the report on the Periods of Incubation and Contagiousness of certain Infectious Diseases, recently distributed to the members; and particularly thanks Dr. Broadbent, the Chairman of the Committee, and Dr. Dawson Williams, its Honorary Secretary and Editor, for their large share in this good work. The following are the names of the officers and council proposed for election. (The gentlemen whose names are marked with an asterisk were not on the Council, or did not hold the same office, during the year 1892-93.) *President*: \*J. W. Hulke, F.R.S. *Vice-Presidents*: C. Bastian, M.D., F.R.S.; Sir G. Buchanan, M.D., F.R.S.; A. B. Duffin, M.D.; J. G. Glover, M.D.; John Langton; \*R. W. Parker. *Treasurer*: W. M. Ord, M.D. *Council*: T. Barlow, M.D.; W. H. Day, M.D.; \*H. Handford, M.D.; D. W. C. Hood, M.D.; T. R. Jones, M.D.; \*H. M. Murray, M.D.; A. T. Myers, M.D.; W. Pasteur, M.D.; \*S. Phillips, M.D.; F. Roberts, M.D.; \*Dawson Williams, M.D.; W. Anderson; W. H. Bennett; A. A. Bowlby; G. Buckston Browne; \*W. Arbuthnot Lane, M.S.; G. H. Makins; \*B. Pitts, M.C.; \*A. W. Mayo Robson; \*Frederick Treves. *Honorary Secretaries*: W. B. Hadden, M.D., A. Pearce Gould, M.S.

#### MEDICAL VACANCIES.

The following vacancies are announced:

CENTRAL LONDON OPHTHALMIC HOSPITAL, 238A, Gray's Inn Road, W.C.—House-Surgeon. Applications to the Secretary by June 6th.

CHELSEA HOSPITAL FOR WOMEN, Fulham Road, S.W.—Physician to out-patients. Applications (on forms to be obtained) to A. C. Davis, Secretary, by June 5th.

CHILDREN'S HOSPITAL, Steelhouse Lane, Birmingham.—Resident Medical Officer.—Salary, £70 per annum, with board, washing, and attendance; and Resident Surgical Officer. Salary, £50 per annum, with board, washing, and attendance. Applications to the Secretary by May 31st.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—House-Physician. Appointment for six months. Board, residence, and allowance for washing provided. Applications to the Secretary at the office, 24, Finsbury Circus, E.C., by June 8th.

COVENTRY AND WARWICKSHIRE HOSPITAL, 10, Hay Lane, Coventry.—House-Surgeon, doubly qualified. Salary, £100 per annum, with board, rooms, and attendance. Assistant House-Surgeon. Honorarium, £15, with board, rooms, and attendance. Applications to Arthur Seymour, Secretary, by May 31st.

EAST LONDON HOSPITAL FOR CHILDREN, Glamis Road, Shadwell, E.—House-Surgeon. Board and lodging provided. Applications to the Secretary by July 6th.

GENERAL HOSPITAL, Nottingham.—Assistant House-Surgeon. Appointment for six months. Board, lodging, and washing provided. Applications to the Secretary by June 1st.

GENERAL INFIRMARY, Northampton.—House-Surgeon; doubly qualified, unmarried, and not under 23 years of age. Salary, £125 per annum, with furnished apartments, board, attendance, and washing. The Assistant House Surgeon is a candidate, and in the event of his appointment, the court will proceed to the election of an Assistant House Surgeon. Salary, £80 per annum, furnished apartments, board, attendance, and washing. Applications to the Secretary by June 10th.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton.—Assistant-Physician. Applications to Henry Dobbin, Secretary, by June 7th.

HOSPITAL FOR SICK CHILDREN, Newcastle-on-Tyne. Resident Medical Officer: doubly qualified. Salary, £60 per annum, with board, lodging, and laundry. Applications to Robert J. Gibson, Secretary, by June 5th.

MARTLEY UNION.—Medical Officer for the Leigh District. Salary, £55 per annum and extra fees, prescribed by the Local Government Board. Applications to A. W. Knott, Clerk, at the Board Room, Martley, by June 6th.

MASON COLLEGE, Birmingham.—Professor of Pathology. Applications to Geo. H. Morley, Secretary, by June 3rd.

METROPOLITAN HOSPITAL, Kingsland Road, N.E.—Ophthalmic Surgeon, must be F.R.C.S. Eng. Applications to Charles H. Byers, Secretary, by June 9th.

NORTH-EASTERN HOSPITAL FOR CHILDREN, Hackney Road, N.E.—Junior House Surgeon, doubly qualified. Appointment for six months. Salary at the rate of £30 per annum. Applications to Alfred Nixon, Secretary, 27, Clement's Lane, E.C., by June 10th.

ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.—Junior Resident Medical Officer. House-Surgeon: doubly qualified. Appointment for six months. Board, residence, and washing provided. Applications to the Secretary by June 19th.

ROYAL INFIRMARY, Bristol.—Honorary Assistant Physician. Applications and testimonials to J. F. Shekleton, Secretary and House-Governor (who can forward a list of the Committee of Election) by June 10th.

ROYAL VICTORIA HOSPITAL, Bournemouth.—Ophthalmic Surgeon. Applications to the Secretary by July 1st; and a House Surgeon-Secretary. Salary, £100 per annum and board for the latter. Applications to the Chairman of Committee by July 1st.

ST. GEORGE'S HOSPITAL, S.W.—Assistant Physician and Assistant Surgeon. Applications to Chas. L. Todd, Secretary, by June 3rd.

ST. GEORGE'S HOSPITAL, S.W.—Visiting Apothecary. Applications to the Secretary by May 27th.

STOCKTON ON-TEES HOSPITAL AND DISPENSARY.—House-Surgeon, non-resident, doubly qualified. Salary, £200 per annum. Applications to Thos. Bradley, Secretary, by May 30th.

SUNDERLAND INFIRMARY.—Honorary Medical Officer to the Convalescent House at Heatherdene, Harrogate; doubly qualified. Applications to the Chairman of the Medical Board by June 6th.

VICTORIA HOSPITAL FOR SICK CHILDREN, Queen's Road, Chelsea, S.W.—Surgeon on the in-patient staff and Surgeon on the out-patient staff. Appointment for five years. Applications to Commander Blount, R.N., Secretary by June 17th.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL, Wolverhampton.—Resident Assistant. Appointment for six months. Board, lodging, and washing provided. Applications inscribed "Application for Resident Assistant" to the Chairman of the Medical Committee by June 5th.

#### MEDICAL APPOINTMENTS.

ADAMS, Samuel Hoppus, M.D. Lond., M.R.C.S., appointed Medical Officer of the Bedford and Kempston District of the Bedford Union.

ALEXANDER, S., M.D., B.Chr. Irel., appointed Medical Officer for the Fifth District of the Belfast Dispensary.

BATES, James C., M.R.C.S., appointed Medical Officer of the First (A) District of the Croydon Union.

DONALD, James, M.R.C.S. Eng., L.S.A., appointed Medical Officer of the Workhouse of the Kingston Union.

DONELLY, Michael A., F.R.C.S.I., appointed Visiting Surgeon to the Westmorland Lock Hospital, Dublin, vice Rawdon Macnamara, M.D. Dub., deceased.

FULTON, J., M.B., B.Chr. Irel., appointed Medical Officer for the Eleventh District of the Belfast Dispensary.

GRIFFITHS, Wm. Hughes, M.R.C.S. Eng., L.S.A., reappointed Medical Officer of Health for Hinckley Urban Sanitary District.

HARRISON, H. L., M.B.Camb., M.R.C.S., appointed Medical Officer of Health for the Kinson Urban Sanitary District of the Poole Union.

HARWOOD, Charles, M.D., L.R.C.S. Edin., reappointed Medical Officer of Health to the Shardlow Rural Sanitary District.

JAMISON, D., M.B., B.Chr. Irel., appointed Medical Officer for the Tenth District of the Belfast Dispensary.

KENNEDY, Dr., appointed *pro tem.* Medical Officer of the Combe Martin District of the Barnstaple Union, vice G. Manning, deceased.

LEACHMAN, Dr., appointed Medical Officer of Health for the Horsham Urban Sanitary District.

LENNON, E. E., M.R.C.P., L.M., L.R.C.S.I., appointed Medical Officer to the Meath Hospital and County Dublin Infirmary.

MCCABE, John, L.R.C.S.I., L.A.H. Dub., appointed Medical Officer to the Cavan Union.

MCLEOD, P. B. H., M.D., C.M., D.P.H. Aberd., reappointed Parochial Medical Officer South Division, New Deer, Aberdeenshire.

MITCHELL, A., M.B., C.M. Aberd., reappointed Parochial Medical Officer for New Deer, Aberdeenshire.

PIRIE, William Rattray, M.B., C.M., M.A., late Resident Physician and Surgeon, Aberdeen Royal Infirmary, appointed House-Physician and Surgeon Hospital for Sick Children, Aberdeen.

PRIOR, E. T., M.R.C.S., appointed Medical Officer of Health for the Rural Sanitary District of the Loddon and Clavering Union.

SEVESTRE, Robert, B.A.Cantab., M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Physician to the Metropolitan Hospital, Kingsland Road, N.E.

SHEPHERD, Dr., appointed Medical Officer for the Hainton District of the Louth Union.

THORNTON, George, M.D. Edin., M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Surgeon to the Metropolitan Hospital, Kingsland Road, N.E.

WALLACE, A., M.D. Aberd., L.R.C.S. Edin., reappointed Parochial Medical Officer for Forglen.

WALSH, P. F., L.R.C.P. I., L.R.C.P. I., L.M., appointed Medical Attendant to the Royal Irish Constabulary at Callan.

WEAR, Algernon E. L., M.B., B.S. Durh., appointed Resident Medical Officer to the Public Dispensary, Leeds, vice Lionel West, M.R.C.S. Eng., resigned.

WHITE, Frank Faulder, L.R.C.P. Lond., F.R.C.S. Eng., appointed Surgeon to the Coventry and Warwickshire Hospital, vice Milner M. Moore, M.D., resigned.

WHITE, J. A. T., M.R.C.S. Eng., L.R.C.P. Lond., appointed Assistant House-Surgeon to the Metropolitan Hospital, Kingsland Road, N.E.

### DIARY FOR NEXT WEEK.

#### MONDAY.

LONDON POST GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. R. Marcus Gunn: Cataract.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Dr. J. Rose Bradford (Arris and Gale Lecturer): The Physiology of the Kidney. Lecture I.

#### TUESDAY.

LONDON POST GRADUATE COURSE, Bethlem Royal Hospital, 2 P.M.—Dr. Percy Smith: Climacteric and Senile Insanity. Hospital for Diseases of the Skin, Blackfriars, 4 P.M.—Dr. Payne: Erythema and Allied Affections.

#### WEDNESDAY.

LONDON POST GRADUATE COURSE, Hospital for Consumption, Brompton, 4 P.M.—Dr. C. Y. Biss: Chronic Pneumonia. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. A. Quarry Silcock: Glaucoma, with illustrative cases.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Dr. J. Rose Bradford (Arris and Gale Lecturer): The Physiology of the Kidney. Lecture II.

#### THURSDAY.

LONDON POST GRADUATE COURSE, Hospital for the Paralysed and Epileptic, Queen Square, 2 P.M.—Dr. Tooth: Muscular Atrophy. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Mr. Donald Gunn: Affections of the Ocular Muscles in Children. Central London Sick Asylum, Cleveland Street, 5.30 P.M.—Dr. Russell Reynolds: Clinical Lecture. London Throat Hospital, 204, Great Portland Street, 8 P.M.—Mr. W. R. H. Stewart: Hygiene of the Ear.

#### FRIDAY.

LONDON POST GRADUATE COURSE, Bacteriological Laboratory, King's College, 11 A.M.—Professor Crookshank: Lecture—Cholera. Practical Work—Sections. Commia Bacilli. Hospital for Consumption, Brompton, 4 P.M.—Dr. C. Y. Biss: The Heart in Renal Disease.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Dr. J. Rose Bradford (Arris and Gale Lecturer): The Physiology of the Kidney. Lecture III.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY, West London Hospital, 8 P.M.—Specimens by Dr. Campbell Pope. Mr. T. R. Atkinson: A case of Cyst of the Right Kidney. Dr. C. W. Chapman: A case of Morbus Cordis. Dr. M. Dockrell: (1) Case of Adenoma Sebaceous; (2) Case of Molluscum Contagiosum. Mr. C. B. Keetley: A case of Severe Congenital Talipes Equino-Varus operated on by open incision seven years ago. Mr. R. Lake: A case of Adenoma of Thyroid in a Male. Dr. Henry Sutherland: Three cases of Morbus Cordis and others.

#### SATURDAY.

LONDON POST GRADUATE COURSE, Bethlem Royal Hospital, 11 A.M.—Dr. Hyslop: Alcoholic Insanity.

### BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 2s. 6d., which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.

#### BIRTH.

WAINWRIGHT.—On May 19th, at Folkestone, the wife of Lennox Wainwright, M.D., L.R.C.P., M.R.C.S., L.S.A., of a daughter.

#### MARRIAGES.

CAMERON—HUNTER.—At 51, Minto Street, Edinburgh, on May 16th, Albert Cameron M.B., C.M. Edin., of Elms Road, Clapham Common, London, only surviving son of the late James Cameron, of Moscow, to Susan Hay, younger daughter of the late James Hunter.

ROBERTS—WATTS.—On May 18th, at All Saints' Church, Colchester, by the Rev. T. G. Gardiner, M.A., John Lloyd Roberts, M.D., B.S., B.A., B.Sc. Lond., F.R.C.S. Eng., of 110, Princes Road, Liverpool, to Maude Rose, youngest daughter of L. J. Watts, Esq., of Colchester.

#### DEATHS.

BECK.—On May 21st, at Isleworth, Middlesex, Marcus Beck, M.S., F.R.C.S., Professor of Surgery, University College, London, aged 49.

JOWERS.—On Wednesday, May 17th, at Birch House, Hayward's Heath, Frederick William Jowers, F.R.C.S., of 27, Old Steine, Brighton.

### 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.

EAST LONDON HOSPITAL FOR CHILDREN. *Cyclical Day*.—F., 2.

GREAT NORTHERN CENTRAL. *Hours of Attendance*.—Medical and Surgical, M. Tu. W. Th. F., 2.30; Obstetric, W., 2.30; Eye, M. Th., 2.30; Ear, Tu. 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*.—M. 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, 2; 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., 1.30 S., 2; (Obstetric), Th., 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 Day*.—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., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopaedic, 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; Orthopaedic, W., 2; Dental, Tu. S., 9. *Operation Days*.—Th., 1; (Ophthalmic), F., 1.15.

ST. MARY'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; Orthopaedic, 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; (Orthopaedic), W., 11; (Ophthalmic), F., 9.

ST. PETER'S. *Hours of Attendance*.—M., 2 and 5, Tu., 2, W., 5, Th., 2, F. (Women and Children), 2, S., 4. *Operation Days*.—W. and F., 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. Th., 1.30; S., 2.

SAMARITAN FREE FOR WOMEN AND CHILDREN. *Hours of Attendance*.—Daily, 1.30. *Operation Day*.—W., 2.20.

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; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electric, Tu., 10, F., 4; Skin, F., 2; Throat and Nose, S., 10. *Operation Days*.—Tu., 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.