

## MEMORANDA:

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

## MYXŒDEMA TREATED WITH THYROID TABLOIDS.

READERS who will "look here, upon this picture and on that," will see a faithful representation of some of the effects produced upon an old-standing case of myxœdema, by five weeks' treatment with thyroid extract (Burroughs and Wellcome's tabloids).

Mrs. S., aged 65, widow of a sailor, had been the subject of myxœdema for twenty years. As to her condition before treatment, it is enough to say that her symptoms were typical, but that visceral changes were not yet declared, nor had the mind sunk into a state of hebetude; that perhaps



Before treatment.

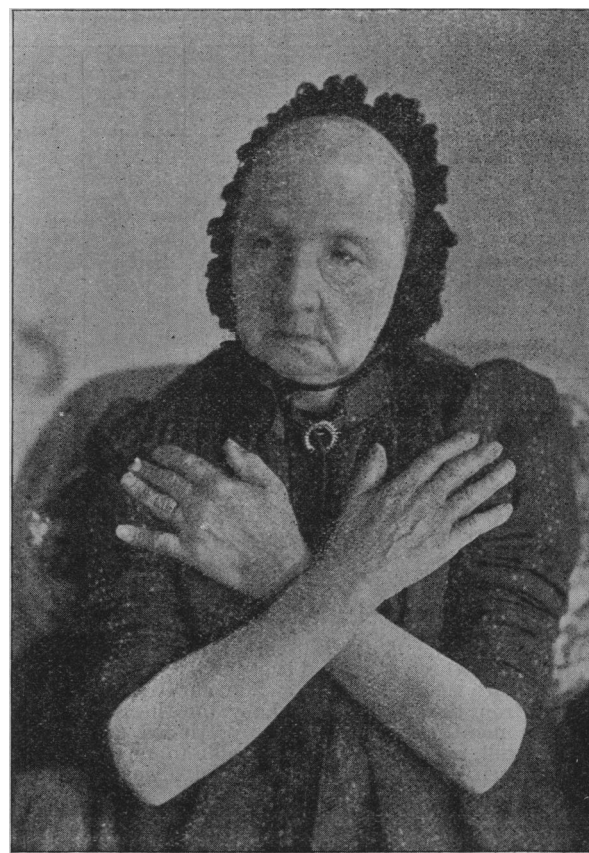
the most pronounced characteristic was the deterioration of the voice, and the least the alteration of the shape and size of the hands; and that she had long been bedridden. She had declined hypodermic injections of thyroid juice, and feeding with sheep's thyroid glands had failed, owing doubtless to the difficulty of securing their regular administration.

The tabloids, each containing five grains of the extract of sheep's thyroid glands, were first given on October 14th, 1893. Her daily dose was for the first week, two; for the next three weeks, three; and for the succeeding fortnight, four; since which time two have been taken daily; an allowance which must be made, I suppose, for the rest of her life.

After a few days' treatment she began to complain of pains in her limbs, the tongue became thickly coated, and, although the temperature never rose above 99°, she felt very

feverish and thirsty. Peeling of the cuticle began about this time, starting from the legs and extending over the whole surface, since which the skin has become, comparatively, soft and smooth. In a fortnight a very marked change was apparent, and by November 8th she had got over the sense of fever and thirst, the tongue was clean, the voice clear, and a condition of fretful moroseness had given place to cheerfulness and animation. The limbs and trunk had regained their normal size and, although weak, she was practically well.

By December 30th she got up every day and remained out of bed longer and longer. To-day she sang a song to me, and, considering her age and station, her performance was excellent, the intonation being remarkably true. The scalp examined showed a thick regrowth of hair, but "where the shining locks divide the parting line is," still, "all too wide." However, at 65 that has been seen independently of myxœdema.



After treatment.

The photographs were taken by Mr. Swain, of High Street, Broadstairs, who has retained the negatives.

THOS. F. RAVEN, M.R.C.S., L.R.C.P.,  
Honorary Secretary, East Kent District of the South-Eastern  
Broadstairs. Branch of the British Medical Association.

ON THE ADVANTAGE OF COMBINING DYES WITH  
URETHRAL INJECTIONS FOR OBSTINATE GLEET.

It will be admitted that by far the greater number of cases of gonorrhœa recover under the most ordinary of routine treatments; but it will be as readily conceded by most practitioners that a small proportion of gleets prove intractable, and drift from one hand to another. The morning discharge in these obstinate cases varies in significance. In the smaller number it is mere mucus—the secretion of the recently overstimulated urethral glands. In the larger pro-

portion, however, the thin gleet discharge emanates from definite patches of congestion, granular erosions, or from tracts of inflammation which occur behind some stricture of large calibre. Such changes of surface may be seen in all parts of the entire canal, from the opening of the bladder to the meatus. These diseased patches shed off the shreds of muco-pus which are so often seen in the morning urine in the shape of white flakes, banners, or threads. It is difficult for those who do not employ the electric urethroscope to say whether these patches or granular erosions are situated in the penile urethra, and are therefore accessible and curable by ordinary urethral injections; or whether they are located in the membrano-prostatic sections, and are therefore beyond the reach and control of the injections which the patient is able himself to employ. The additions of dyes to the injection settles this point for us; for by such means the flakes or threads are dyed. For some years I have been in the habit of providing each hospital patient with a colouring injection, in order to save the time which is necessary for the examination of the deep or posterior urethra with the electric prostatescope. The patient brings me the first part of the morning urine, and, if only coloured threads are visible in it, I know that the penile urethra is at fault, because in only about 6 per cent. can an injection, given without undue force, pass the opening of the membranous urethra. If only white threads appear, I realise that foci of the disease are in the deep or posterior urethra, and I at once attack the membrano-prostatic sections of the canal. Generally there is a mixture of white and coloured threads, and this bears out the more advanced teaching concerning gleet, that the posterior urethra is, in a large majority of cases, affected as well as the anterior. The dyes I use most commonly are tr. catechu  $\frac{v}{vii}$  ad  $\frac{3}{j}$ , and the liquid extract of red gum  $\frac{iv}{v}$  ad  $\frac{3}{j}$ ; watery solution of methyl violet, 1 in 3,000, can also be employed. Of course, if time is not an object, the practitioner can wash out the penile urethra himself into one glass, and cause the patient to pass water into another. By this means he will be able at once to see whether the posterior section is involved as well as the anterior.

E. HURRY FENWICK, F.R.C.S.,  
Surgeon to the London and St. Peter's Hospitals.

#### THE TREATMENT OF PSORIASIS BY THYROID EXTRACT.

I HAVE tried the thyroid extract as yet in two cases of psoriasis only—the one a girl of 15, the other a married woman of 40.

The woman, aged 40, had been affected with the disease for 18 years. I treated her for nineteen consecutive days, during which I administered daily on the average  $22\frac{1}{2}$  minims of Brady and Martin's extract, which quantity is stated by the manufacturers to equal exactly one quarter of a sheep's thyroid gland. This dose is rather more than the double of Dr. Bramwell's average dose, and the duration of treatment extended well beyond the time by which, according to his cases, well marked improvement ought to occur. But I was not able to attribute to the thyroid treatment any influence whatsoever on the disease. The doses I gave varied on different days. However, on three of the days I gave  $\frac{30}{j}$  daily, on two of them  $\frac{35}{j}$  daily, on one of them  $\frac{40}{j}$ , on another  $\frac{45}{j}$  of the extract. In Dr. Bramwell's second and third cases he produced profuse shedding of scales within the same period (nineteen days) by a daily dose of five minims only.

The girl of 15 whom I treated had been previously under my care for psoriasis of seven years' duration, and had got quite well under external applications only by the end of August last. Since then the disease had again appeared, although in a much less degree than before, and, at the date that thyroid treatment was commenced, namely, October 23rd, consisted only of small spots scattered somewhat sparsely over the trunk and limbs. I treated her for a month, namely, until November 23rd; a period of 31 days, during which I administered on the average seventeen minims of the thyroid extract daily, which is nearly double Dr. Bramwell's average dose, or (considering the girl's age) is more than the double of it. As in the previous case, so in this case also, I was not able to attribute to the thyroid treatment effect of any kind on the disease. In this case equally, the doses given varied on different days. However, on six of the days I gave daily  $\frac{30}{j}$  of the extract, on two of them  $\frac{35}{j}$  daily, on one of them  $\frac{40}{j}$ , and on another  $\frac{45}{j}$ . The total quantity of extract, taken by the patient in the month, was very nearly the equivalent of six thyroid glands.

My patients were of the same sex as Dr. Bramwell's, they were respectively of about the same ages as his first and second cases, and I used the same preparation of the thyroid gland that he did; also I was particularly careful with this preparation. I obtained it direct from the manufacturers, who state that it will keep well for a fortnight; but I always

got it fresh every week, and I kept it in ice, in a refrigerator, so as to avoid still further any deterioration.

It is perhaps futile to speculate on the causes of the difference between my two cases and his three. Two of his cases were treated while summer was coming on; and in summer psoriasis is wont to be less marked than in winter, but this fact will not at all account for his records as they stand. Pregnancy will cause psoriasis to disappear completely within about ten days, but it is impossible to suppose that this was a factor in all of his three cases, especially in the third one. A very spare diet is capable of causing the disappearance of psoriasis, but Dr. Bramwell expressly states that no special diet was prescribed. A double dose, with mine, would not produce even a shadow of the effect that half the quantity, nay a quarter of the quantity, did with his patients.

BALMANNO SQUIRE.

Weymouth Street, W.

#### THE TREATMENT OF EPILEPSY.

WILL you allow me again to direct attention to the signal efficacy of a combination of potass. brom. with belladonna in the treatment of this distressing disease? A patient called on me this week whom I first saw at the outdoor department of the Glasgow Royal Infirmary, and who was then a terrible victim to epileptic attacks, occurring as they did with great severity, often more than once daily. He was put on the following treatment:  $\mathcal{R}$  Potass. bromidi  $\mathcal{Z}$ ss; tinct. belladonnæ  $\mathcal{Z}$ ij; infusi gentianæ co. ad  $\mathcal{Z}$ viii. M. Sig. cap.  $\mathcal{Z}$ ss ter in die.  $\mathcal{R}$  Camph. monobrom gr. xlviii; ext. gentianæ q. s. ut ft. massa, et div. in pil. xii Sig. cap. unam hora somni. This medicine was regularly taken, and he informed me the other day that he had not had a fit for ten months. I elsewhere pointed out that in cases of epilepsy and its pathological congeners, such as enuresis, spermatorrhœa, etc., there are probably hyperæmic patches in certain tracts of the nervous system, and that in consequence sensibility is preternaturally heightened in those situations. The bromides and belladonna act upon the nerve centres by stimulating the vaso-constrictor nerves, thus causing a relative anæmia and diminished sensibility. I believe this to be the explanation of the *modus medendi* of these agents.

D. CAMPBELL BLACK, M.D.,  
Professor of Physiology in Anderson's College Medical School,  
Glasgow.

#### BLENNORRHAGIC URETHRAL STRICTURE IN A YOUNG SUBJECT.

A. B., a boy aged 5 years, was brought to London in May, 1891, for treatment. There was extreme difficulty in micturition, and the urine was constantly dribbling away. No. 4 mm. bougie was obstructed, then firmly grasped, and held at the commencement of the deep urethra. The meatus was capacious, and the urethra was not sensitive.

The disease had existed for three years; urethritis, with much pain, swelling, and thick yellow discharge had appeared when the child was only 2 years. The discharge lasted for ten months, and the symptoms of coarctation gradually followed.

I found the stricture very rebellious to dilatation, and unyielding to any but tapering metal instruments. As treatment progressed, I ultimately succeeded, however, in arriving at the usual conditional cure with the latter instruments.

The urethritis was, of course, the cause of the stricture, but close questioning and examination of the urine failed to elicit the cause of the urethritis. The mother, however, stated that the nurse suffered from a yellow discharge at the time. She is quite sure there was no traumatism.

In this connection I may be permitted to draw attention to an adaptation of Brunton's auriscope for endoscopic use, which I have used for some time past. Its great merit is economy and dual utility. I have fixed a small electric lamp into the "improved illuminating hand lamp," vide Arnold's *Catalogue*, p. 108, 1885, and apply this lamp into the funnel of the auriscope. I have modified and elongated the specula. I find it easy also to adapt the instrument, if desired, to "aero-urethroscopy," the funnel-shaped tubes plugging the meatus, and so preventing escape of air after inflation.

Crouch End. JAMES MACMUNN.

was the pupil a master loves to have; and I shall miss him sorely. To watch such a mind expand and to help it ever so little is one of the dearest pleasures a schoolmaster can have.

"I know, too, how entirely loyal he was; true and genuine to the very core.....There is only one thought and word about him among all who are worthy to judge. He was not an ordinary conventional character, the kind that wins popularity with his peers; but he has won a deeper and more worthy regard than that.

"I can say nothing, I know, to comfort you; the one true comfort is to know that he was just what he was, and to have the hopes and assurances that come from that knowledge."

PROFESSOR THEOPHILO FERREIRA, of Lisbon, who recently died of influenza, began life, like the late Professor Peter, as a compositor. By indefatigable work he qualified himself for the post of teacher in a primary school. Here he found time to study medicine, and he took his degree in 1879. Whilst actively pursuing the practice of his profession he took a leading part in educational and municipal affairs. The city of Lisbon owes much to his zeal as a sanitary reformer. Dr. Ferreira was a member of the Portuguese Cortes, and an "Alderman" of the Municipal Council of Lisbon.

DR. W. S. LEAD, the oldest practitioner of St. Joseph, in the State of Missouri, who died recently, was the largest owner of slaves in that State before the civil war. He was a somewhat eccentric man, and after the slaves were liberated he erected small shanties for them all over the city. These he let to them for a rent of a few dollars a month. Many of these are still standing on land now worth hundreds of dollars a square foot, and are occupied by some of Dr. Lead's old slaves or their descendants.

THE death is announced of Dr. Samuel Henry Bailey, of Nottingham, at the age of 43. He became L.S.A. in 1874, M.B., C.M., A.B. in 1875, and in 1877 he took the degree of M.D. A.B. Some years ago the deceased had a severe attack of rheumatic fever, which left behind it a permanent weakness. The deceased leaves a widow and three children.

THE death is reported of Dr. T. H. Waterworth, of Southwark, who died on Christmas Day, at the age of 68. The deceased took the diploma of L.S.A. 1849, and that of M.R.C.S. Eng. in 1850; in 1860 he took the M.D. King's Coll., Aberdeen. He was formerly Medical Officer of Health for St. George-the-Martyr, Southwark, and Surgeon to the old Horsemonger Lane Gaol. At the time of his death he was Surgeon to the Surrey Dispensary.

DEATHS IN THE MEDICAL PROFESSION ABROAD.—Among the members in the medical profession in foreign countries who have recently passed away are Dr. Isaac N. Kerlin, since 1864 Medical Superintendent of the Pennsylvania Training School for Feeble Minded Children, aged 59; Dr. Leopold Hlavacek, of Chlumetz, on whom the Gold Cross for distinguished service had been conferred by the Emperor of Austria, aged 73; Dr. L. N. Luck, a prominent member of the Yates County (U.S.) Medical Society, aged 50; Dr. A. P. Meylert, of Wilkesburne, Pennsylvania, who was Medical Director of the Army of Ohio under Sherman, on whose staff he served throughout his campaigns, aged 57; Alexandra Petrowa, of Sebastopol, one of the first ladies to enter the medical profession in Russia when permission was granted to women to study medicine in St. Petersburg, aged 49; Dr. Josef Böhm, Professor of Botany in the University of Vienna; Dr. Fischer, assistant in the Natural History Museum of Paris, and a distinguished palaeontologist, aged 59; Dr. Henry Bronson, of New Haven, Ex-President of the Medical Society of Connecticut, aged 89; Dr. Valentin Korisoko, of Bereska, in the Tschernigow Government of Russia, of diphtheria caught from a patient, aged 26; Dr. W. Gray Palmer, one of the best known physicians of Washington, aged 69; Dr. J. H. L. S. Germain, of Ste Hyacinthe, Canada, author of several works on medical subjects, and founder and first president of the Medico-Chirurgical Association of the District of Ste

Hyacinthe, aged 60; and Dr. W. H. Jackson, for many years Head Surgeon to the New York Hospital, and the oldest member of the New York College of Physicians and Surgeons, aged 83.

## PUBLIC HEALTH

AND

### POOR-LAW MEDICAL SERVICES.

#### PROSECUTION FOR EXPOSING INFECTIOUS PATIENTS.

Two summonses recently taken out by the Exmouth Local Board have been dismissed with costs. It appears that the defendant, his wife, and two children were seen by a medical man on November 13th, and were certified by him to be suffering from diphtheria. Defendant and his wife were told not to send the children to school, but no further directions seem to have been given to the patients. The defendant was driven in a public conveyance on November 18th, and was seen walking about on November 21st, although he had been cautioned by the sanitary inspector with regard to isolation and not going out on the previous day. Under those circumstances it appears *prima facie* clear that defendant had rendered himself liable to a penalty under Section 126 of the Public Health Act, which enacts that it is unlawful for any person while suffering from any dangerous infectious disorder wilfully to expose himself without proper precautions in any street, public place, shop, inn, or public conveyance. The matter was, however, to some extent complicated by the fact that the medical witnesses for the prosecution appeared in some doubt as to the accuracy of the diagnosis, it being ascertained that the certifying practitioner had notified 14 cases in the neighbourhood, none of which had proved fatal, and it being hinted that this and other facts raised the presumption that defendant was not suffering from diphtheria. If the magistrates took the view that it was not clear that the defendant was suffering from a dangerous infectious disease their decision is intelligible; otherwise it is difficult to understand why the summonses were dismissed.

#### HEALTH OF ENGLISH TOWNS.

In thirty-three of the largest English towns, including London, 5,280 births and 4,469 deaths were registered during the week ending Saturday, December 30th. The annual rate of mortality in these towns, which had declined from 28.6 to 24.7 per 1,000 in the preceding three weeks, further fell to 22.6 last week. The rates in the several towns ranged from 15.6 in Preston to 49.3 in Plymouth. In the thirty-two provincial towns the mean death-rate was 22.2 per 1,000, and was 1.1 below the rate recorded in London, which was 23.3 per 1,000. The zymotic death-rate in the thirty-three towns averaged 2.4 per 1,000; in London the rate was equal to 3.0 per 1,000, while it averaged 2.1 in the provincial towns, and was highest in Oldham, Birkenhead, and Plymouth. Measles caused a death-rate of 2.0 per 1,000 in Birkenhead and in Norwich; whooping-cough of 2.5 in Birkenhead and 5.4 in Plymouth; and "fever" of 1.6 in Sunderland. The 101 deaths from diphtheria in the thirty-three towns included 79 in London, and 3 each in Manchester, Sheffield, and Newcastle-upon-Tyne. Small-pox caused 5 deaths in Birmingham, 3 in Bristol, 3 in Bradford, and 1 each in Nottingham and in Oldham, but not one in London. There were 93 small-pox patients under treatment in the Metropolitan Asylums Hospitals and in the Highgate Small-pox Hospital on Saturday last, December 30th, 1893, against 128, 118, and 100 at the end of the preceding three weeks; 14 new cases were admitted during the week, against 22 and 23 in the preceding two weeks. The number of scarlet fever patients in the Metropolitan Asylums Hospitals and in the London Fever Hospital on Saturday last was 2,988, against 3,129, 3,102, and 2,993 at the end of the preceding three weeks; 262 new cases were admitted during the week, against 295 and 285 in the preceding two weeks.

#### HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday, December 30th, the 615 deaths registered in eight of the principal Scotch towns were equal to an annual rate of 21.8 per 1,000, against 23.0 and 22.3 in the preceding two weeks. This rate was 0.8 per 1,000 below the mean rate during the same period in the large English towns. Among these Scotch towns the death-rates ranged from 19.6 in Edinburgh to 36.0 in Perth. The zymotic death-rate in these towns was equal to 2.3 per 1,000; the highest rates were recorded in Dundee and Perth. The 265 deaths registered in Glasgow included 8 from scarlet fever, 8 from whooping-cough, and 3 from diphtheria.

#### WATERCLOSET FLUSHING CISTERN REGULATIONS.

It appears likely that some satisfactory result will at no distant date accrue from the attention which has been called during the past year to the anomalies of the existing law relating to the flushing capacity of watercloset cisterns. Sec. 21 of the Regulations under the Metropolitan Water Act of 1871 provides that "every watercloset cistern or watercloset service box hereafter fitted or fixed, in which water supplied by the company is to be used, shall have an efficient waste-preventing apparatus so constructed as not to be capable of discharging more than 2 gallons of water at each flush." This regulation certainly serves to check undue waste of water, but it appears to have been framed with a view to safeguarding the interests of the water companies rather than those of public health. It fixes a maximum which must not be exceeded, but it is contended that it is of equal, if not greater, importance that there should be a minimum, below which the flushing capacity should not be allowed to fall. It is, moreover, alleged that the minimum required for satisfactory clearance of watercloset pan, house drain, and disconnecting trap actually exceeds the maximum allowed by the existing law.

The new by-laws of the London County Council provide for the "effectual flushing and cleansing of the pan, basin, or other receptacle

and for the prompt and effectual removal therefrom and from the pan connected therewith of any solid or liquid filth," etc. This by-law would, however, appear to be governed by Sec. 21 of the Regulations above alluded to, and assuming a 2-gallon flush to be insufficient for the "effectual flushing and cleansing" contemplated, the by-law is of no avail.

A careful series of experiments has been conducted by a committee of the Sanitary Institute with a view to determining the quantity of water required to flush a water-closet, and the committee arrive at the conclusion that the minimum quantity of flushing water should be fixed at 3 gallons, and that the maximum should be not less than  $3\frac{1}{2}$  gallons. The London County Council has made inquiry into the matter, and has decided to recommend that the waste-preventing apparatus should be "so constructed as to be capable of discharging 3 gallons of water at each flush." The Council resolved on December 12th, 1893, to communicate this and certain other suggested amendments of the regulations under the Metropolis Water Act of 1871 to the Local Government Board. Some alteration of Regulation 21 will presumably be made. There seems to be a clear case for a fixed minimum flush; and the Sanitary Institute experiments, detailed in a special report issued recently, appear conclusive as to the inadequacy of 2 gallons. They show, moreover, that  $2\frac{1}{2}$  gallons give a marked improvement as compared with 2 gallons, and that 3 gallons give a still better result than  $2\frac{1}{2}$ . There can be no objection to a fixed maximum, provided it exceeds the minimum demanded by public health requirements.

#### SALARIES OF HEALTH OFFICERS.

THE *Western Mercury* has some emphatic remarks upon the absurdity of the pittance paid by way of salary to medical officers of health in urban districts. As a particular instance, it states that the proposal to advance the salary of the medical officer of health for St. Austell, at present £15, was successfully opposed by a Mr. Peters. There are many "Mr. Peters" about, and it is not only in Cornwall that their attempts to stifle or starve sanitary work are made. What quantity—and quality—of work any given Mr. Peters would himself be prepared to do for £15 per annum is perhaps beside the mark; but, at all events, what is needed from the medical officer of health can only be fractionally paid for by that modest sum. Presumably Mr. Peters and his friends would like to see only £15 worth of work done.

#### NEW METROPOLITAN FEVER HOSPITAL.

It is estimated that the Metropolitan Asylums Board's new fever hospital at Hither Green, Lewisham, will cost something like £100,000, exclusive of the £22,500 paid for the site. There are to be beds for 500 patients, provision being made for 352 scarlet fever cases and 112 diphtheria and enteric fever patients, while 38 beds will be for isolation purposes. The institution is to be called the Park Hospital.

#### INFECTIOUS HOSPITAL CONSTRUCTION.

F. J. B.—The memorandum issued by the Local Government Board on the Provision of Isolation Hospital Accommodation, with appended block plans, price 2d. (Messrs. Eyre and Spottiswoode), and the report issued by the same Board, On the Use and Influence of Hospitals for Infectious Disease, Parliamentary Command Paper, 3,290, of 1882, and since reissued, contain information of the kind required. Other recent works treating of hospital construction are vol. iv of Burdett's *Hospitals and Asylums of the World* (Churchill), and Sir D. Galton's *Healthy Hospitals* (Lewis).

#### NOTIFICATION BY SEVERAL PRACTITIONERS.

M. O. H.—We regard the Notification Act as requiring certification by every legally qualified medical practitioner "attending on or called in to visit" a private patient, whom he knows to be suffering from a notifiable disease, notwithstanding the fact that the attendance has been given free of charge.

## MEDICO-PARLIAMENTARY.

#### HOUSE OF COMMONS.

*Glanders.*—Mr. T. H. BOLTON asked the President of the Board of Agriculture whether he could give the House any further information as to the increase or decrease of glanders in the metropolis; and whether, if there had not been any material decrease, he would make representations to the London County Council with a view to a reconsideration of their policy (with regard to compensation) in dealing with the disease.—Mr. GARDNER, in reply, said that he was happy to say that still further improvement had been shown in the number of horses reported to have been attacked with glanders since he replied to the similar question addressed to him on December 10th, 1893. The number of outbreaks reported and animals attacked during the past nine weeks had been 154 and 214 respectively, as compared with 194 and 394 during the corresponding period of 1892. This being the case, he could not, with any advantage, make the further representations to the London County Council which the hon. member suggested.

## UNIVERSITIES AND COLLEGES.

#### ROYAL COLLEGE OF SURGEONS, EDINBURGH.

THE annual examination in *Materia Medica* and Therapeutics for the gold medal presented to the College by Colonel William Lorimer Bathgate, in memory of his late father, Mr. William McPhune Bathgate, F.R.C.S.E., took place on October 28th last, and it has now been announced that the medal has been gained by Miss Sarah Brown McMorde, student of medicine, Edinburgh. Three candidates appeared.

## MEDICAL NEWS.

**SMALL-POX AT LEITH.**—Twenty new cases of small-pox were reported by medical practitioners in the week ending December 30th, 1893.

THE London County Council have purchased a site at Bexley whereon to erect a new lunatic asylum for the accommodation of 2,000 patients.

THE University and Extra-Academical Medical classes at Edinburgh meet after the Christmas recess on Tuesday, January 9th.

THE INTERNATIONAL MEDICAL CONGRESS AT ROME.—The Committee has opened at Rome a special office to provide lodgings for Congress members at hotels and private houses. Members can apply also on the same purpose to Messrs. Thos. Cook and Son, Piazza Martiri, Rome, who have been requested by the Executive Committee to satisfy such applications when made in time. Excursions will be arranged in Rome under the guidance of Professor Forbes. Congress members intending to see Naples and Sicily can travel from Rome to Naples with 50 per cent. reduction on the usual railway fares, and can join the excursions which will be arranged by the Naples Agency of Messrs. Thos. Cook and Son. This agency will arrange an undetermined number of excursions to Pompeii, Vesuvius, Capri, Sorrento, Castellamare, and Baïæ, and three to Sicily with the following itinerary: Naples, Messina, Catania, Faormina, Girgenti, Syracuse, and Palermo.

#### MEDICAL VACANCIES.

The following vacancies are announced:

CENTRAL LONDON OPHTHALMIC HOSPITAL, Gray's Inn Road, W.C.—House-Surgeon. Applications, with testimonials, to the Secretary before January 8th.

CHESHIRE COUNTY ASYLUM, Upton, near Chester.—Junior Assistant Medical Officer. Salary, £120 per annum, with board, lodging, and washing. Applications and testimonials by January 15th, to Dr. Davidson, Medical Superintendent.

CITY OF MANCHESTER.—Medical Officer of Health. Salary, £850 per annum. Applications and testimonials endorsed "Medical Officer of Health," to be delivered to the Lord Mayor, Town Hall, Manchester, by January 18th.

COSFORD UNION, Suffolk.—Medical Officer and Public Vaccinator for the Boxford District. Salary, £50 per annum, exclusive of usual extra medical fees. Must reside in the District. Applications to Alfred Newman, Clerk to the Guardians, Union offices, Hadleigh, Suffolk, by January 11th.

DENTAL HOSPITAL, OF LONDON, Leicester Square.—Dental Surgeon; must be a Licentiate in Dental Surgery. Applications to J. Francis Pink, Secretary, by January 8th.

HORTON INFIRMARY, Banbury.—House-Surgeon and Dispenser, duly qualified and registered. Salary, £60 per annum, with board and lodging. Applications and testimonials to C. H. Davids, 21, Marlborough Road, Banbury, by January 6th.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST.—House Physicians. Applications and testimonials to the Secretary by January 18th.

ISLE OF WIGHT UNION.—Medical Officer for the Ryde District. Salary, £110 per annum, with usual extra fees. Applications to the Clerk, Isle of Wight Union, Newport, Isle of Wight, by January 17th.

LIVERPOOL INFIRMARY FOR CHILDREN, Myrtle Street, Liverpool.—House Surgeon. Salary, £85 per annum, with board and lodging. Applications and testimonials to be sent by January 22nd.

LIVERPOOL NORTHERN HOSPITAL.—Assistant House-Surgeon. Salary, £70 per annum, with residence and maintenance in the house. Applications and testimonials to be sent to the Chairman of Committee by January 16th.

NAAS UNION.—Clane and Timahoe Dispensary.—Medical Officer. Salary, £95 per annum and residence, with £15 yearly as Medical Officer of Health, registration and vaccination fees. Applications to the Assistant Honorary Secretary, Mr. Jno. Healy, Firmount, Clane. Election on 15th inst.

NORTH-EASTERN HOSPITAL FOR CHILDREN, Hackney Road, N.E.—Physician, must be Fellow or Member of the Royal College of Physicians of London. Applications to the Secretary by January 11th.

SHILLELAGH UNION. Hacketstown and Coolkenno Dispensary.—Medical Officer. Salary, £120 per annum, with £15 yearly as Medical Officer of Health, together with registration and vaccination fees. Applications to Mr. William Jones, Honorary Secretary, Woodside, Hacketstown. Election on 13th inst.

SURREY DISPENSARY, Great Dover Street, S.E.—Surgeon. Honorarium, £52 10s. per annum. Applications to J. Harrison, 179, Bermondsey Street, S.E., before January 9th.

UNIVERSITY COLLEGE OF SOUTH WALES AND MONMOUTHSHIRE.—Lecturer on *Materia Medica* and Pharmacy. Stipend, £50 a year. Applications to Ivor James, Registrar, by January 27th.

**VICTORIA HOSPITAL FOR SICK CHILDREN**, Queen's Road, Chelsea, S.W.—House-Surgeon and House-Physician to the In-patients. Honorarium, £50 each per annum, with board and lodging in the hospital. Applications to the Secretary by January 13th.

**WORCESTER GENERAL INFIRMARY**.—Physician. Appointment for seven years. Applications to the Executive Committee under cover to the Secretary, Mr. W. Stallard, Worcester Chambers, Pierpoint Street, Worcester, by January 6th.

### MEDICAL APPOINTMENTS.

**ASHER**, Alexander, M.B., C.M. Edin., appointed Joint Medical Officer to the Thurso Parochial Board *vice* Dr. Craven, deceased.

**BARTON**, Samuel J., M.D. Dub., appointed Medical Officer of Health for the St. Faith's Rural Sanitary District, *vice* Shephard Thomas Taylor, M.B. Lond., resigned.

**CAMPBELL**, Robert, B.A., M.B.I., M.R.C.S. Eng., L.R.C.P. Lond., appointed Visiting Surgeon to the Chester General Infirmary.

**COCKER**, Arthur, L.D.S.I. & Edin., appointed Dental Surgeon to Shibden Industrial School, Halifax.

**COLGAN**, Francis Philip, L.R.C.P., L.R.C.S.I., appointed Medical Officer to the Carlow Fever Hospital, *vice* C. W. McDowell, M.D., deceased.

**CUTCLIFFE**, Montagu, M.R.C.S., L.R.C.P. Lond., appointed Medical Officer for the Northtawton District of the Okehampton Union, *vice* P. W. Hislop, M.B., C.M. Edin., resigned.

**DENSHAM**, H. Bryan, M.B., C.M. Edin., appointed Honorary Surgeon to the Stockton-on-Tees and Thornaby Hospital, *vice* R. W. Foss, M.D., deceased.

**DUNCAN**, Robert Bruce, M.D., B.S. Dunelm., appointed Resident Medical Officer to the Newcastle-on-Tyne Workhouse, *vice* R. F. Craggs, M.D. Dunelm., resigned.

**FARMER**, Edward John, B.A., M.B., B.Ch. Dubl., appointed Assistant Medical Officer to the Kolar Gold Fields, Mysore State, India.

**FARR**, Ernest Augustus, L.R.C.P. Lond., M.R.C.S. Eng., appointed Medical Officer of Health for the Andover Urban Sanitary District.

**GARDNER**, Harold, M.R.C.S. Eng., L.R.C.P. Lond., appointed Resident Medical Officer to the Chelsea Hospital for Women, Fulham Road.

**GOSAGE**, W. Herbert, M.R.C.S. Eng., L.R.C.P. Lond. (late House-Surgeon), appointed House-Physician to the Westminster Hospital.

**GRIFFITH**, R. Glyn, M.R.C.S. Eng., appointed Chief Medical Officer to the East Indian Railway.

**HAMILTON**, Richard, M.B., M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Surgeon to the Chester General Infirmary.

**HOGG**, Gustave Heuze, M.B., C.M. Edin., appointed House-Surgeon to the General Hospital, Hobart, Tasmania.

**HUDSON**, C. Leopold, F.R.C.S., appointed Aural Surgeon at Middlesex Hospital.

**JONES**, F. Felix, M.R.C.S. Eng., L.S.A. & D.P.H. Lond., reappointed Medical Officer of Health for the combined districts of the Llanfyllin Union.

**KENWOOD**, Harry Richard, M.B., C.M. Edin., L.R.C.P., D.P.H. Eng., appointed Medical Officer of Health for the Finchley Urban Sanitary District of the Barnet Union, *vice* James Turlie, M.D. Edin., resigned.

**KINGSBURY**, Edward, B.A. Dub., M.D., appointed Medical Officer for the Stapleford District of the Shardlow Union.

**LAKE**, William Wellington, M.R.C.S. Eng., D.P.H. Camb., appointed Medical Officer of Health for the Woking Urban Sanitary District of the Guildford Union.

**MARR**, James, M.B., appointed Medical Officer for the Parish of Greenlaw, *vice* P. Kynoch, L.R.C.P., L.R.C.S. Edin., deceased.

**MASSON**, William, M.B., C.M. Aberd., appointed Medical Officer and Public Vaccinator to the Cottingham and Wellerby District of the Sculcoates Union, Hull; Medical Officer of Health to the Cottingham Local Board; and District Medical Referee to the Prudential Assurance Company, Limited.

**MATHESON**, R. M., M.B., C.M. Edin., appointed House-Surgeon to Nobles Hospital, Douglas, Isle of Man.

**MAY**, C. G., M.D., M.R.C.P., appointed Assistant Physician to the Grosvenor Hospital for Women and Children, S.W.

**MOLINEUX**, James, M.D. St. And., M.R.C.S. Eng., appointed Medical Officer of Health to the Sculcoates Rural Sanitary Authority.

**MOXHAM**, Marcus Camplin, L.R.C.P. Lond., M.R.C.S. Eng., appointed Medical Officer for the Stickney District of the Spilsby Union.

**MURRAY**, John, M.B., F.R.C.S., appointed Surgical Registrar to Middlesex Hospital.

**ORMEROD**, Edward B., M.R.C.S., L.S.A. Lond., appointed Surgeon to employees of the Appantoo Gold Mining Co., Limited, Gold Coast Colony, S. Africa.

**PARKER**, Charles, M.B., C.M. Edin., appointed House Surgeon to the Launceston Hospital, Tasmania.

**POTTS**, James Ashford, M.B. Edin., M.R.C.S., appointed Honorary Surgeon to the Ross Cottage Hospital, *vice* Brigade-Surgeon Doig, retired.

**RAWSON**, Edward A., M.B.T.C.D., M.Ch., appointed Medical Officer to the Workhouse of the Carlow Union, *vice* C. W. McDowell, M.D., deceased.

**RICKETTS**, Thos. Frank, B.Sc. Lond., M.D., appointed Medical Superintendent of the Hospital Ships of the Metropolitan Asylums District, *vice* R. A. Birdwood, M.A., M.D. Camb.

**ROBERTS**, C. Hubert, F.R.C.S., M.B. Lond., M.R.C.P., appointed Casualty Physician to St. Bartholomew's Hospital.

**SCOTT**, Sack Noy, M.R.C.S., L.R.C.P., D.P.H.R.C.P. Lond., appointed Medical Officer to the No. 5 District of the Plympton Union, *vice* J. B. Jacob, M.B. Dub., resigned.

**SHEPHERD**, A. W., L.R.C.P., L.R.C.S.I., appointed Medical Officer of Health for Cowbridge.

**SINCLAIR**, Walter W., M.B. Aberd., reappointed Senior House-Surgeon to the Birmingham and Midland Eye Hospital, Birmingham.

**SPILSBURY**, Francis J., L.R.C.P.I., L.R.C.S. Edin., appointed Medical Officer for the Hogsthorpe District of the Spilsby Union.

**WATTERSON**, John Wm., M.B., C.M. Edin., appointed Medical Officer for the Morecambe District of the Lancaster Union.

**WEBB**, Wm. H., M.D. Durh., appointed Medical Officer of Health to the Kingsbridge Local Board.

**WEST**, Valdemar S., M.A., M.B., B.C. Cantab., appointed House-Surgeon to the North-Eastern Hospital for Children, Hackney Road.

**WILSON**, J. C., L.R.C.P., L.R.C.S. Edin., appointed Medical Officer for the Haworth District of the Keighley Union.

**YEARSLEY**, P. Macleod, F.R.C.S. Eng., appointed Honorary Aural Surgeon to the Farringdon General Dispensary.

### DIARY FOR NEXT WEEK.

#### MONDAY.

**MEDICAL SOCIETY OF LONDON**, 8.30 P.M.—Mr. W. Anderson: Case of Multiple Ankylosis of the Joints of both Lower Extremities, with Muscular or Cutaneous Atrophy. Dr. P. Atraham: Observations on the Use of Thyroid Gland in the Treatment of Diseases of the Skin.

**ODONTOLOGICAL SOCIETY OF GREAT BRITAIN**, 8 P.M.—Annual Meeting. Election of Officers. President's Valedictory Address. Casual Communications.

#### TUESDAY.

**ROYAL MEDICAL AND CHIRURGICAL SOCIETY**.—Dr. H. Howship Dickinson: Albuminuric Ulcerations of the Intestines. Mr. J. Hutchinson, jun.: Abdominal Section for Intestinal Obstruction due to Hydatid Cysts.

#### WEDNESDAY.

**LARYNGOLOGICAL SOCIETY OF LONDON**, 20, Hanover Square, W., 5 P.M.—Annual General Meeting. Election of Officers and Council. Cases, etc.: Dr. Bronner: (1) Osseous Nasal Obstructions removed by Cutting Trephine; (2) Aseptic Laryngeal Syringes. Dr. Percy Kidd: (1) Recurrent Papillomata of Larynx Twice Operated on by Thyrotomy; (2) Angioma of Larynx. Mr. L. A. Lawrence: (1) Hypertrophy of Posterior Faucial Pillars; (2) An Intralaryngeal Mirror. Dr. Scanes Spicer: (1) Multiple Papillomata of Larynx removed from a Child, aged 8; (2) Papilloma of Uvula. Mr. W. R. H. Stewart: Carcinoma of the Esophagus. Mr. Charters J. Symonds: (1) A Doubtful Laryngeal Case; (2) Diffuse Syphilitic Laryngitis. Dr. Watson Williams: Epithelioma of Soft Palate. Annual Dinner at the Café Royal at 7.15.

**HUNTERIAN SOCIETY**, 8.30 P.M.—Dr. Fletcher Beach: Sporadic Cretinism, illustrated by specimens. Mr. Openshaw: Twenty-two Consecutive Cases of Amputation of the Breast.

#### THURSDAY.

**BRITISH GYNÆCOLOGICAL SOCIETY**, 8.30 P.M.—Annual Meeting. Election of Officers. Dr. Benington: Notes of a Case of Ruptured Tubal Gestation, Operation Eighteen Months previously for a similar condition. President's Valedictory Address.

**NORTH LONDON MEDICAL AND CHIRURGICAL SOCIETY**, Great Northern Central Hospital, 8.30 P.M.—Dr. Remfry: On the Use of Ergot. Dr. Beevor: A case of Cerebral Tumour.

#### FRIDAY.

**CLINICAL SOCIETY OF LONDON**, 8.30 P.M.—Dr. Soltan Fenwick: Acute Phthisis following Destruction of Mucous Membrane of the Stomach by Corrosive Fluids. Dr. W. J. Tyson: A case of Suppurating Hydatid of the Liver opened through the Chest. Dr. J. W. Washbourn and Dr. E. W. Goodall: Cases of Membranous Inflammation of the Throat during Scarlet Fever. Dr. Hale White: Diphtheritic Peripheral Neuritis causing Sudden Death.

### BIRTHS, MARRIAGES, AND DEATHS.

*The charge for inserting announcements of Births, Marriages, and Deaths is 8s. 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.*

#### BIRTH.

**BEARDELEY**.—On December 28th, 1893, at The Esplanade, Grange over Sands, the wife of R. H. Beardsley, L.R.C.P., L.R.C.S. (E.), L.F.P.S.G., F.R. Met. Soc., of a son.

#### MARRIAGE.

**HEWLETT—STRATTON**.—On December 28th, at Christ Church, East Sheen, by the vicar, the Rev. Albert S. Shutte, M.A., Richard Tanner Hewlett, M.D., M.R.C.P., Demonstrator of Bacteriology in King's College, London, to Louise, elder daughter of Frederick Stratton, of St. Anne's, East Sheen, S.W.

#### DEATHS.

**GULL**.—On January 2nd, at 2, Gloucester Street, Portman Square, Susan Anne, Dowager Lady Gull, widow of the late Sir William Gull, Bart., M.D., aged 74, after two days' illness.

**WILKINSON**.—On December 24th, at 33, Avenue Road, Grantham, Thomas Marshall Wilkinson, surgeon, F.R.C.S.E., late of Lincoln, in his 51st year.