

to get rid of it, and this as rapidly as possible. The case already quoted (corroborated as it can be by many others) indicates how difficult this task is; for here we have an individual spending year after year under carefully selected climatic conditions, with "considerable improvement" of the local signs and general symptoms resulting, and yet with the bacilli apparently unaffected throughout. However pleasant it may be for such a patient to pass a winter in the sunny South, it is perfectly futile to expect that this short period of time is sufficient to influence these organisms. The too common practice of sending tubercle-bacillary subjects to spend a few months here or a few months there, in the hope that the bacilli will thereby be vanquished, is but dallying with the disease. Those who cannot afford to go in for a very prolonged, or may be perpetual course of climatic treatment, had far better husband their slender resources, and remain in this country in the society of their relatives and friends, and surrounded by home comforts.

### THE FORCIBLE FEEDING OF THE INSANE.

By WM. W. HERBERT, M.D.,

Assistant Medical Officer North Wales Counties Asylum, Denbigh.

ASYLUM physicians, and all who have to treat the insane, will have read with interest Dr. Neil's lucid and eminently practical paper upon artificial feeding, in the BRITISH MEDICAL JOURNAL for January 27th. Therein the account of the general management of the patient prior to and during the operation is complete in every detail, leaving nothing to be added.

Regarding the method of feeding employed—namely, a tube with attached funnel passed by the mouth—this plan is one much used, and I note that Dr. Neil, whilst disclaiming perfection, still gives it preference over others.

I have for years employed a procedure which has given me so much satisfaction that I can confidently recommend it to the notice of those who have to resort to forced alimentation. The requisites are:

(1) A Tosswill's siphon stomach pump, with two or three detachable feeding tubes of soft red rubber (gauge millimetric 25, 27, 29).

(2) A reservoir to contain the food. I use a large glass bottle that has once held sweets. To its mouth is fixed a leaden collar, with spout to steady tube and prevent acute flexion.

Use them thus (see accompanying photograph):—

(1) Place the patient on a bed on the floor, as described by Dr. Neil, underneath something upon which to hang the reservoir—for example, a gas bracket.

(2) Oil the tube well, and pass it by the nares. A twisting motion assists its descent, the head being kept flexed on the chest.

(3) Connect the feeding tube with that from the reservoir, set the siphon action going by pinching the tube and squeezing the ball, and the contents of the reservoir will run steadily and quickly into the stomach. I find that my arrangement delivers sixty ounces in as many seconds.

The advantages of nose over mouth feeding are:

(1) No injury is done to the mouth and teeth. However skilled the operator may be, the screw gag must cause more or less soreness and injury, especially when used for any length of time in a determined subject, and when *in situ* it frequently slips, embarrassing the operator and imperilling the tube.

(2) The patient seems to realise sooner that he is mastered.

The advantages of the siphon and ball over the simple tube with funnel or pump are:

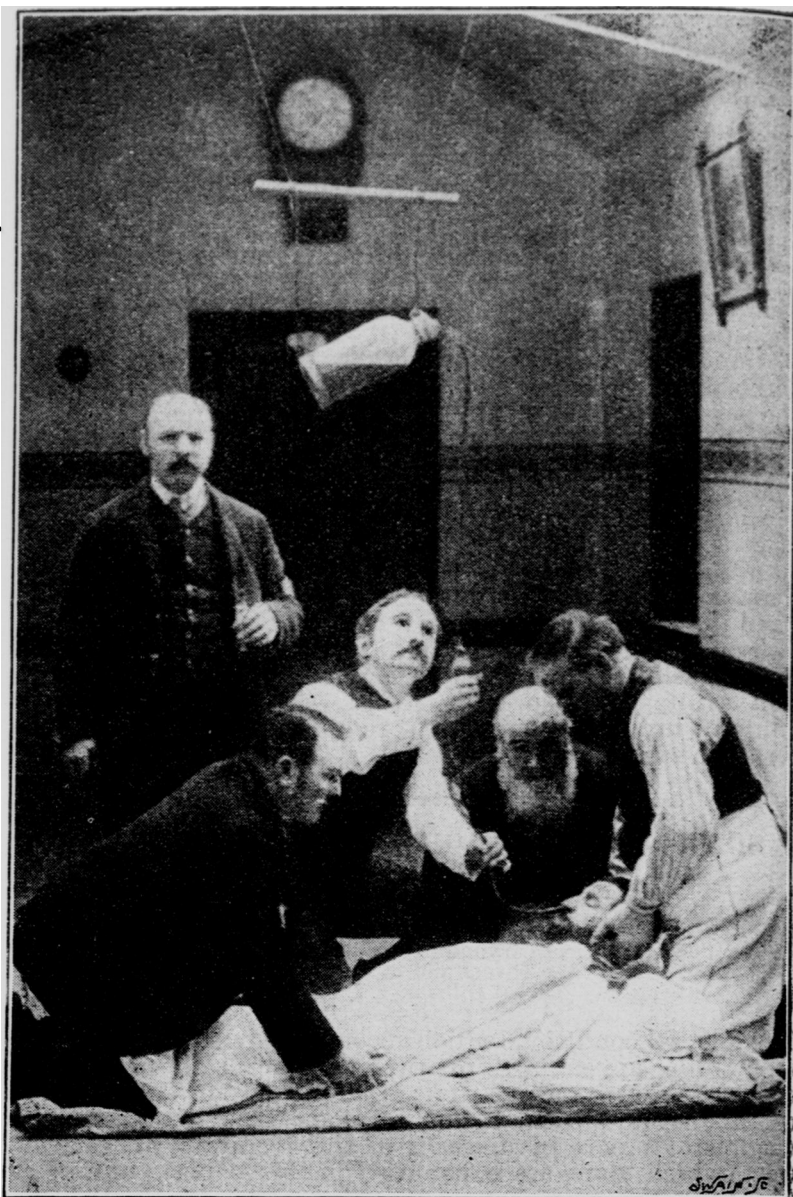
(a) A steady continuous flow, which can be diminished in volume, or rendered intermittent at will.

(b) Any obstruction in the tube is at once removed by squeezing the ball.

(c) The neatness and cleanliness of the operation, no messing or spilling of food being possible.

Tosswill's pump is simply a valveless Higginson's syringe, with piping several feet in length. By reversing the siphon action the stomach is unloaded rapidly and safely. Why

complicated and expensive pumps are in use whilst such a simple and handy one is available I am at a loss to understand.



That there may be nothing new in this method I am aware, but my knowledge of its efficacy, and belief that it is not practised as its merits deserve, have led to my communication.

### MEMORANDA:

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

FURTHER CASES OF DIPHTHERIA SUCCESSFULLY TREATED BY THE LOCAL APPLICATION OF SUBLIMED SULPHUR.

SINCE my contribution to the BRITISH MEDICAL JOURNAL of November 4th, 1893, I have attended 6 cases only, of all of which I now give particulars. They were of a severe type, and not far distant from each other.

CASE I.—On November 20th, 1893, I visited F. A. H., aged 6, son of a police constable, who was suffering from diphtheria; temperature 101°. I blew sublimed sulphur on to the membrane by means of an extemporised insufflator as previously, and I ordered a mixture of perchloride of iron and glycerine, with a liberal supply of fluid nourishment. The application was repeated several times daily. On the third day the child was almost convalescent, and made a rapid recovery.

CASES II, III, AND IV.—Next day I saw F. C., aged 11, temperature 104.2°; and W. J. C., aged 5, temperature 101.6°; and on the following day W. J. C., aged 8, temperature 100°, brothers, and children of a pharmaceutical chemist, suffering from diphtheria, with considerable prostration. I used the same application, mixture, and nourishment, also brandy, with

the result that in six days they were quite well. Towards the end, the temperature of the child aged 11, suddenly rose from normal to 103°, and again subsided.

CASE V.—On December 4th I was asked to see A. C., aged 38, mother of the three last mentioned children. She had well-marked diphtheria, and was very ill and weak, having nursed her children throughout. The same application and mixture were used. On December 9th she was well, and I ceased attendance.

CASE VI.—On November 8th, 1893, I visited A. E. B., aged 7, who had been ailing with "croup" for a couple of days. On examination no membrane could be seen, so he was treated for simple croup. On the 22nd I discovered a small portion of diphtheritic membrane low down in the larynx; but, notwithstanding that the sulphur was used, same mixture, beef-tea, brandy, milk, and egg, he expired on the 23rd, the temperature having suddenly fallen from 101° to 98°. Had the membrane appeared in view earlier he might have been saved, as I feel fully convinced that sulphur will destroy diphtheritic membrane when brought into contact with it.

I did not use the extemporised insufflator (which I destroy after each application) on all occasions, but simply threw the sulphur down the throat while the patient was in the recumbent posture. I might mention that in some of the cases a very small quantity of the sulphur was burnt in the room, chiefly as a disinfectant.

ROBERT FAIR FRAZER, L.R.C.P.I., L.R.C.S.I.  
Lavender Hill, S.W.

#### A CASE OF OYSTER POISONING.

H. P., about 32 years of age, ate eight oysters for supper, remarking at the time that one of them was bad. Others of the same lot were eaten by other persons with impunity and appeared to be quite fresh. Symptoms of poisoning commenced about twelve or fourteen hours later with pain in the back, soon followed by violent pains in the stomach, frequent vomiting, and intense thirst. The bowels did not act. These symptoms continued until the following morning, when the pulse, which had been small and quick, became almost imperceptible, the fingers shrunken, the nails blue. The tongue was at that time dark and swollen, and swallowing difficult. There were occasional spasms of the arms. A little later the jaw became set and soon, after a sudden struggle for breath, he died, forty-one hours after eating the oysters.

At the *post-mortem* examination the heart was found to be very soft and relaxed and containing fluid blood. The kidneys and spleen were also very soft and congested. The stomach empty and darkly congested. The peritoneum was thickly studded with flecks of lymph.

EDWARD CASEY, M.D.

Windsor.

#### THE TREATMENT OF LEUCOCYTHÆMIA.

In the *BRITISH MEDICAL JOURNAL* of July 16th, 1892, I described a case of apparent cure of splenic leucocythæmia by arsenic, administered in very large doses. It is time to give the sequel.

The patient had resumed work, in apparently robust health, in April of that year, and continued well up to June. In the following September I was called to see her again, and found her extremely anæmic, the skin being of a very dark tint. She was suffering from vomiting and diarrhoea, and on examination I found the spleen and liver again much enlarged.

She was at once confined to bed, and the arsenical treatment resumed. For about two months both organs continued to increase in size, until the spleen reached to within three finger's breadths of the pubes. It appeared to fill two-thirds of the abdomen, its anterior edge standing up like a rock. The liver extended down to the ilium. The spleen then commenced to recede in a remarkable manner. In one week it diminished 2 inches all round. Then it enlarged again in an unaccountable way. All sorts of variations and combinations of arsenic were tried, with quinine, iron, phosphorus, etc.; galvanism, faradism, and pancreatic feeding—as the motions were often oily or imperfectly digested.

In March, 1893, the patient was worse than six months before. So I tried a new departure in the administration of spleens. First sheep spleens raw and lightly cooked were tried; these soon disagreed with the patient. Next rabbit spleens; these were taken fresh, twelve at a time, and placed in 12 drachms of glycerine; one spleen with a teaspoonful of "juice" once or twice daily. At first there was an apparent improvement, each dose was followed by a rise in tempera-

ture of one or two degrees, and a feeling of warmth. As the patient was getting disgusted with them, Messrs. Brady and Martin kindly prepared an extract for hypodermic injection. This appeared to "do something" for a while, but no real benefit resulted.

I next tried (in May) if marrow would be of any avail. Yellow and red were accordingly prepared by slowly melting before the fire (1) the shafts of the leg bones, and (2) the heads of the leg bones and the vertebrae of mutton. Both preparations were readily taken, but without any result either as regards the general symptoms or the size of the liver or spleen. In despair I gave a trial to thyroid extract, and a prolonged test to the "*fluide testiculaire*." At first the patient appeared to derive decided benefit from the latter; but, like all other remedies, it failed, and the patient died in November last, apparently from mechanical ascites and exhaustion.

Now, from the last chapter something, I think, may be learned. During the two months prior to her death there was drawn from the peritoneal cavity not less than 60 pints of serum; yet after each tapping she rapidly, though temporarily, regained strength. The disease, therefore, is not "an error of nutrition."

Saddleworth.

COLIN CAMPBELL.

#### RETAINED PESSARY.

THE case published in the *BRITISH MEDICAL JOURNAL* of February 17th by Mr. Eastes brings to my mind a case of retained pessary, which presented itself to me while I was holding the appointment of resident obstetrical officer at Charing Cross Hospital some years ago.

The patient, a middle-aged woman, came to the out-patient room to have a Zwanke's pessary, which she had been wearing for some considerable time, removed. Finding unusual difficulty on attempting this, I had the patient anæsthetised, when I found the following condition: The anterior lip of the os uteri had passed through one of the fenestræ of the pessary and had become adherent to the vaginal wall below, so that the instrument was held by a loop formed of the cervix uteri, vagina, and adhesions. Having broken down these adhesions, I removed the pessary.

Brighton.

JAMES TURTON, F.R.C.S.

#### EPIDEMIC JAUNDICE.

THE remarks of Dr. W. Hall Calvert in the *BRITISH MEDICAL JOURNAL* of February 3rd have interested me greatly, as for some time I have been considering the same question owing to the similarity of several cases which I have had under my care to those which came under the notice of Dr. Calvert.

Between September 18th and October 21st, 1893, I had 7 cases of jaundice among my patients. Of these 2 were adults and the remaining 5 were children. On December 12th, 1893, I had an eighth case of jaundice, the patient this time being a little girl. The ages of the children varied from 2½ to 8 years.

Now in 5 of my cases, including the two adults, I have no doubt that the jaundice followed upon an attack of influenza. In all the symptoms of influenza and of jaundice were well marked. With regard to the remaining 3 cases I cannot speak so strongly. They were all in one family but at different times, one taking ill just after another got better. Two of the children showed no signs of influenza previous to the attack of jaundice, but only the *malaise* one often finds in children with a slight cold. The third child, however, certainly had a cold, but the symptoms were not such as to lead me to the conclusion that I had to deal with a case of influenza. Still there is an element of doubt in this last case.

Taking all these cases together I am forced to the conclusion that jaundice may be one of the sequelæ of influenza.

Garliestown.

WILLIAM SEMPLE YOUNG, M.B.Glas.

PASTEURISM IN NEW YORK.—The statistics of the Pasteur Institute of New York, published by the director, Dr. Paul Gibier, show that during 1893 the number of persons treated was 85, of whom 26 had been bitten by animals proved experimentally to be rabid, 11 by animals recognised clinically to be suffering from rabies, and 48 by animals suspected of being rabid. No death occurred.

and the resolution carried. The action of the Council in the matter thus became the action of the Union in general meeting assembled. The words in Art. 3, Subsec. III, of the memorandum, stating that the objects of the Union comprise that of advising and defending or assisting members of the Union in proceedings, were not limited to defending or assisting members in proceedings in connection with persons who were outside the Union. Then came Article 3, which spoke of such assistance, etc. This article, too, could not be limited to cases between members and outsiders, not even by implication. In the present case Dr. Bloxham, having at one time desired the advice and aid of the Union, afterwards recalled his application and changed his mind, as he was entitled to do. That the assistance of the Union could only be given to a member seemed a proposition which scarcely required to be stated. Whether it was advisable to interfere between members was a matter of policy for the Council, and one with which, in point of law, the Court was not concerned. The words "due investigation" in Article 39 did not involve a hearing if the member himself was not desirous of obtaining the aid of the Union. Moreover, in his opinion, the Council had a discretion, even if he had asked to be heard. As to the argument that the assistance in Union amounted to an unlawful maintenance of another man's litigation, the answer to that was that the action was not a maintenance action of any form. There was, moreover, nothing in the affidavits or any suggestion that the motion involved a question of maintenance. Consequently the defendants had not come prepared to meet such a case.

#### A DEFINITION OF "INFAMOUS CONDUCT IN A PROFESSIONAL RESPECT."

ALLINSON v. GENERAL COUNCIL OF MEDICAL EDUCATION AND REGISTRATION.

Court of Appeal, February 23rd, 1894.

(Before the Master of the Rolls, Lord Justice Lopes, and Lord Justice Davey.)

THIS was an action for a declaration that the decision of the defendants directing the erasure of the plaintiff's name from the *Medical Register* was invalid and void; for an injunction to restrain the defendants from erasing the plaintiff's name, or allowing the same to remain erased from the *Medical Register*, and from publishing such decision; and for a *mandamus* to compel the defendants to restore the plaintiff's name to the *Medical Register*. Upon the complaint of the Medical Defence Union, Limited, the plaintiff received notice on May 14th, 1892, to appear before the Council and answer a charge of "having been guilty of infamous conduct in a professional respect," the particulars of the alleged conduct being that the plaintiff had systematically sought to attract practice by a system of advertisements. Dr. Philipson was a subscribing member and vice-president and guarantor of the Medical Defence Union, and an active member thereof, and as vice-president was *ex officio* a member of the executive committee thereof, and the Medical Defence Union intrusted the management of their affairs to the executive committee. On May 3rd, 1892, Dr. Philipson was elected a member of the General Medical Council, when he gave notice for resignation of his membership of the Medical Defence Union, but by the rules of the Union the resignation did not take effect for two months. Dr. Philipson took no part in the proceedings of the Executive Committee of the Medical Defence Union, and did not take part in getting up the complaint against the plaintiff. The Secretary of the Medical Defence Union appeared before the defendant Council in support of the complaint. Dr. Philipson attended the inquiry as a member of the Council on May 28th, 1892, and the Council directed the plaintiff's name to be erased from the *Medical Register* upon the ground that he had been guilty of "infamous conduct in a professional respect." The present action was tried before Mr. Justice Collins, who gave judgment for the defendants. The plaintiff appealed.

The Master of the Rolls, according to the report in the *Times*, said that the question was, Could Dr. Philipson reasonably be suspected of bias? Technically, perhaps, his resignation would not be complete for two months, but, looking at the substance of the thing, he had, as far as in him lay, resigned his membership. Under these circumstances Dr. Philipson could not reasonably be suspected of bias, and this contention failed. The second point raised was that there was no evidence that the plaintiff was guilty of infamous conduct in a professional respect. The Master of the Rolls was prepared to adopt a definition prepared by Lord Justice Lopes, not as exhaustive, but as applicable to this case—namely, if a medical man in pursuit of his profession had done something with respect to it which would reasonably be regarded as infamous by his professional brethren of repute, that would be evidence of infamous conduct in a professional respect. The question was not whether that which the medical man had done would be infamous if done by someone outside the medical profession. The conduct must be infamous "in a professional respect." There must be conduct which, if done by a medical man in his profession, either as regards his patients or his professional brethren, might be infamous conduct in a professional respect. In his opinion there was evidence upon which the defendants could say the plaintiff had tried to defame his brother practitioners, and had tried to induce suffering people to refrain from going to them, and, instead, to come to him, and thus to enable him to get the fees which otherwise they would have got. Therefore, there was evidence upon which the defendants were justified in finding that the plaintiff was guilty of infamous conduct in a professional respect, and their decision was final, and could not be reversed. The Lords Justices delivered judgment to the same effect.

#### PATENTS.

A PATENTEE BUT NOT A PRACTITIONER.—Lest our correspondent's designation of himself should prove misleading, we deem it well to remark that, although not in actual practice, he is nevertheless an old graduate of a distinguished University, and holds an official medical appointment.

With reference to the subject of his letter (which, consisting of 5 closely written large 8vo pages, is too long for insertion in our limited space), in which he observes: "Surely, if it be a code which is to be binding on the intelligence and consciences of such a body as the medical profession, we should at least know something as to its origin

and the grounds on which its claims to obedience are founded," we are tempted to ask: Can it be that he has not even seen, much less read, the work? Such would appear to be the case, otherwise he may have noted in the preface the true nature of its origin and general purport, the principles on which it is based, and its assumed claim to the confidence of the profession. Moreover, after being critically revised and approved by several distinguished members of the profession in Great Britain and Ireland (including the late Sir Thomas Watson, who accepted the dedication, Sir George E. Paget, Sir Robert Christison, and other eminent representative practitioners, living and deceased), it has been in continuous use for fourteen years, and so far valued as not only to have passed through three editions, but impelled the "Ordine dei Sanitari della Provincia di Milano" to solicit, through the medium of Dr. Giuseppe Colombo, of Milan, permission to translate it into Italian. A copy of this, as also of the English Code, is in the British Medical Association Library. Further, if our correspondent had been, as stated, "a diligent peruser of the BRITISH MEDICAL JOURNAL," he could scarcely have failed to have seen our reviews of the work. In reference, also, to the "editorial deliverances on ethical matters being so frequently based upon the Code," a legitimate reason, therefore, may be found in the reply to a correspondent which appeared in the BRITISH MEDICAL JOURNAL of November 12th, 1892, p. 1087, under the heading of "Repeated Inquiries on the same Subject."

As regards the one material point in the impugned Code, namely, the prohibitory rule to hold a patent for a surgical instrument, we referred the question to the author, who, in reply, observes that the prohibition was, he believes, introduced into the original Code issued by Dr. Percival, at a period (1807) when patents were very costly, and would have so enhanced the retail price as to have virtually inhibited its use. The interdiction, moreover, was embodied in the Code of the American Medical Association in 1847; he, therefore, did not feel justified in excluding it from the one in question. In view, however, of the present greatly diminished cost of a patent, he sees no valid reason for retaining the prohibitive rule, and proposes its abrogation.

YOUNG PRACTITIONER (Bournemouth), and MEDICO (co. Clare).—For an answer to our respective correspondents on the subject of patents, we would refer them to the concluding paragraph in above.

A MEMBER.—In view of the fact that the husband A. has notified B. that he does not desire him to attend his family, and will refuse to make any further payment, we apprehend that B. would not be able to enforce payment for any future attendance.

A. E. D. asks whether he can legally secure a fee under the following circumstances: I was engaged by a lady to attend her in her approaching confinement. I agree to do so, and take a note of the engagement, with the probable date when it was expected to occur. She some time afterwards engaged another medical gentleman for the same purpose. The confinement comes off, he attends, and I get no information.

\*.\* An action would probably lie for breach of contract, although it is very doubtful if more than nominal damages would be recovered. We are not aware of any action of the kind having been brought.

SENEX.—Whether payment could be legally enforced or not is a question for a solicitor; it is obvious that our correspondent is bound in honour to carry out his agreement.

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF CAMBRIDGE.

HONORARY DEGREE.—The degree of Doctor of Science, *honoris causa*, will on March 6th be conferred on Dr. S. Ramón y Cajal, Professor of Histology in the University of Madrid, who is to deliver the Croonian Lecture at the Royal Society on March 8th.

ELECTORAL BOARDS.—The following appointments of electors to professorships are announced: *Chemistry*, Lord Rayleigh; *Anatomy*, Sir G. M. Humphry; *Downing of Medicine*, Dr. D. MacAlister; *Physics*, Sir G. G. Stokes; *Surgery*, Professor J. Chiene, Edinburgh; *Pathology*, Sir James Paget.

PHYSIOLOGY.—We regret to learn that Dr. A. Sheridan Lea is prevented by ill-health from examining in physiology for the Natural Sciences Tripos and Second M.B. Examination. Dr. Shore, of St. John's College, has been appointed in his place.

ADDENBROOKE'S HOSPITAL.—At a General Court of Governors, held on February 26th, a new body of rules and by-laws for the government of the hospital, prepared by a committee consisting of Dr. D. MacAlister, Dr. Waraker, Dr. Besant, and Mr. Hattersley, and introducing many valuable improvements, was unanimously adopted and confirmed.

### ROYAL COLLEGE OF SURGEONS IN IRELAND.

FELLOWSHIP EXAMINATIONS.—The following gentleman having passed the necessary examination has been admitted a Fellow of the College:—Mr. William John Russell, L.R.C.P.I. and L.R.C.S.I. The following gentlemen have passed the primary part of the examination for the Fellowship of the College:—Mr. Patrick Thomas Bolger, L.R.C.P.I. and L.R.C.S.I., and Mr. Jeremiah Dowling, L.R.C.P.I. and L.R.C.S.I.

THE ordinary receipts for the year 1893, exclusive of legacies, were £1,264 14s. 5d., while the expenditure was £10,102 14s. 3d., the deficiency being met by utilising various legacies received during the year. The chairman announced that the rebuilding of the front and the new laundry was making satisfactory progress, and that the committee hoped to arrange for the opening ceremony to take place in the autumn. In the meantime he urged all present to assist in raising the sum of about £7,000 still needed to meet the expenses incurred in connection with the works, and thus enable the new buildings to be opened free from



debt. The committee of management, finance committee, treasurer, and auditors were elected for the ensuing year, and a vote of thanks to the chairman brought the meeting to a close.

#### SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, February, 1894. The following candidates passed in:

*Surgery.*—T. W. W. Burgess, St. Bartholomew's Hospital; J. C. Cook, Middlesex Hospital; R. Evans, University College; R. S. Fairbank, King's College; J. Friend, Leeds; H. E. E. M. A. Greene, Royal Free Hospital; W. G. R. Macaulay, St. Thomas's Hospital; W. Mettham, Sheffield; D. S. Owen, London Hospital; G. H. Pearce, St. Thomas's Hospital; P. L. G. Skipworth, St. Bartholomew's Hospital; F. E. A. Webb, St. Bartholomew's Hospital; C. J. Wills, Liverpool.

*Medicine, Forensic Medicine, and Midwifery.*—C. P. Allen, Middlesex Hospital; F. R. S. Cosens, London Hospital; A. Douglas, Birmingham; H. A. Julius, St. Thomas's Hospital; F. W. Rock, St. Bartholomew's Hospital; J. A. Stainsby, London Hospital.

*Medicine and Forensic Medicine.*—D. W. Jones, Charing Cross Hospital.

*Medicine and Midwifery.*—F. E. A. Webb, St. Bartholomew's Hospital.

*Medicine.*—E. S. Chilcott, St. Mary's Hospital.

*Forensic Medicine and Midwifery.*—F. E. H. Keogh, St. Mary's Hospital; E. Smallwood, Liverpool; W. S. Webb, London Hospital.

*Forensic Medicine.*—E. S. L. Lovell, Charing Cross Hospital; F. L. Taylor, Aberdeen.

*Midwifery.*—H. Andrae, University College; H. E. E. M. A. Greene, Royal Free Hospital; H. R. Walker, King's College.

To Messrs. Allen, Andrae, Evans, Fairbank, Pearce, Smallwood, Stainsby, Walker, Wills, and Miss Greene was granted the diploma of the Society.

## OBITUARY.

### WILLIAM LEISHMAN, M.D., F.F.P.S.G.,

Emeritus Professor of Midwifery in the University of Glasgow.

LAST week we recorded with much regret the death of Dr. Leishman, who, until lately, occupied the Chair of Midwifery in the University of Glasgow. Dr. Leishman was, as they say in Scotland, "a son of the manse," his father being minister of Govan, one of the best parishes in Scotland, and now occupied by the Rev. Dr. John Macleod. Born in 1833, Dr. Leishman became a student of Glasgow University, where he graduated M.D. with honours in 1855. He began practice in Glasgow as a general practitioner, devoting, however, special attention to midwifery and gynaecology. An early appointment to the professorial staff of Anderson's College, that training school of many of the older, and some of the present, professors of the University, marked him out as a specialist in the department he had chosen for particular study, of which he soon became an acknowledged authority and ornament. When the Chair in the University, occupied for twenty-eight years by Dr. John M. Pagan, became vacant, it fell by natural selection to Dr. Leishman, who in turn held it for a quarter of a century.

As early as 1860 he had contributed various articles dealing with obstetrical subjects to the journals of the time, but four years before his appointment to the University a more ambitious product of his pen appeared in the form of an essay entitled the "Mechanism of Parturition," and in 1870 he published his well-known *System of Midwifery*, of which there have been four English and three American editions. Dr. Leishman was engaged on a fifth edition when his health gave way, necessitating, a year and a-half ago, a retirement from work, which all hoped to be only temporary, but which, six months ago, compelled his resignation of the Chair and of other public duties, and which has, so soon afterwards, been followed by his death.

Dr. Leishman was a Licentiate of the Royal College of Surgeons of Edinburgh and a Fellow of the Glasgow Faculty of Physicians and Surgeons; he was Vice-President of the Obstetrical Society of London, and a Corresponding Fellow of the Obstetrical Societies of Edinburgh and London. In Glasgow, he was Consulting Physician to the Maternity Hospital, Physician to the Dispensary for Diseases of Women of the Western Infirmary, and to the Sick Children's Hospital.

But however admittedly distinguished and esteemed in his profession, Dr. Leishman was held in honour on much less restricted grounds. A man of wide reading, familiar with more than his native tongue, and his familiarity with it revealed itself in the simple grace of all his speech, his bearing and conversation spoke as clearly of a high culture, which reading, however much and varied, cannot always impart. Intellectually stable, physically dignified, courteous, if reserved, in manner, he possessed a combination of qualities

that could hardly fail to command attention and ensure respect. It was not, therefore, only because of his professional eminence that his brethren held him in honour, nor simply the lucidity of his teaching that wrung respect from his students, in a day when students were not too prone to respect a professor simply as such. He never seemed to forget that his students might learn from him much more than the mere subject which it was at the moment his business to teach. Students could not fail to observe the scrupulous care with which, while demonstrating some diseased condition in the person of a patient, he endeavoured to avoid as much as possible adding to the unpleasantness of the situation to the person concerned without losing the benefit of what is euphemistically called "clinical material." Indeed, if his students criticised at all his clinical instruction, it was on the ground that his affection for "clinical material" was held in too tight a check by his respect for the personal sufferer.

In his later years Professor Leishman was enabled, owing to the confidence reposed in him by his professional brethren and his colleagues, to render much service to the profession in the General Medical Council, and to the University in the Court and Senate. This brief notice of his work cannot be closed better than by quoting part of a graceful tribute to his memory paid by one of his oldest colleagues. Of him Professor Gairdner writes: "He was almost an ideal councillor, but it was necessary to have lived and worked alongside of him for a number of years to learn the secret of his combined strength and suavity. It was not at all because Dr. Leishman disliked or was afraid of controversy that his words were usually, if not always, on the side of peace and harmony, and yet carried great weight. It was because they carried great weight, and were always kept studiously free from personal considerations, that they tended on the whole in the direction of peace and amity. He liked to look at a subject all round, and to see what was reasonably to be said on every side of it. He had strong convictions—personal, political, and academic—and never hesitated in expressing them; but he was entirely above, and incapable of, the exaggerations that spring from a heated and ill-considered partisanship. Hence among his colleagues his judgment was felt to be one that could be relied upon in all circumstances. It was safe, and in the main conciliatory, without being weak or colourless. And even his enemies (if he had any) must at once have come to know that here was a man whom it was of no use to try to fight with the weapons of detraction and abuse, because he not only did not use these himself, but surrounded all his words and his doings with an impersonal atmosphere against which such venomous shafts fell powerless, because the man himself was invulnerable in his sense of duty and public spirit."

Dr. Leishman has left a widow, three daughters, and a son, surgeon-captain in the Army Medical Staff, at present on service in India.

WE regret to announce the death of Professor ALBERT LÜCKE, one of the leading surgeons in Germany, which occurred on February 20th. Dr. Lücke was Professor of Surgery in the University of Strassburg. He was the colleague of Billroth in the editorship of that remarkable work, the *Deutsche Chirurgie*, and contributed largely to surgical literature in other ways.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently passed away are Professor J. Uffelmann, Director of the Hygienic Institute in the University of Rostock; Dr. H. A. Abelin, Emeritus Professor in the Carolina Medico-Chirurgical Institute of Stockholm; Dr. R. B. S. Hargis, of Pensacola, Florida, some time President of the Florida Medical Association, a noted authority on yellow fever, and a considerable contributor to medical literature, aged 75; Dr. J. F. Hartigan, United States Consul at Trieste, and formerly for many years Coroner's Physician for the District of Columbia; Dr. J. W. Pittinos, of Philadelphia, formerly lecturer on chemistry and materia medica in the Medical College of that city; and Dr. J. C. Armentrout, Professor of Physiology in the Keokuk (United States) Medical School.

## MEDICAL NEWS.

THE sixteenth annual meeting of the Home Hospital Associations will be held at the Fitzroy Home, at 4 P.M., on March 15th, when Mr. Christopher Heath will take the chair.

AT the Council meetings held since the vacation of the London and Counties Medical Protection Society about 500 new members have been elected. At one meeting over 150 were accepted. A large number are now awaiting election.

THE annual Congress of the British Institute of Public Health will be held in London from July 26th to 31st next. It will be arranged in five sections: Preventive Medicine, Chemistry and Climatology, Engineering and Building Construction, Municipal and Parliamentary, and Naval and Military Hygiene.

ST. PETERSBURG MEDICAL SOCIETY.—The St. Petersburg Medical Society, at its annual meeting on February 6th, elected Dr. W. Stolz President, and Dr. W. Ocks Vice-President. The Society now numbers 18 honorary, 71 ordinary, and 21 corresponding members. During the ten years it has been in existence the Society has held 120 meetings.

THE LATE DR. CRANSTOUN CHARLES.—At the adjourned inquest on the late Dr. Cranstoun Charles, concerning whom an obituary notice appeared in the *BRITISH MEDICAL JOURNAL* of February 3rd, evidence was given by Dr. Stevenson, who stated that in his opinion Dr. Charles had taken between one and one and a-half grains of morphine, which poison would be especially fatal with anyone suffering, as the deceased was, from lung disease. To one accustomed to take morphine this would not appear an excessive dose. The jury returned a verdict of accidental death.

SWISS UNIVERSITIES.—The total number of students in the medical faculties of the universities of Switzerland at present is 1,009, of whom only 643 are Swiss. The students are distributed among the several schools as follows: Basle, 157 men, 3 women; Berne, 172 men, 43 women; Geneva, 173 men, 67 men; Lausanne, 83 men, 21 women; Zürich, 216 men, 74 women. Professor Laskowski's statistics, recently quoted in the *BRITISH MEDICAL JOURNAL*, with the gloomy prognosis which they imply, do not appear to have driven the female students entirely away from Geneva.

FREE SANITARY LECTURES.—Dr. Hunter, in his annual report for 1893 to the Pudsey Local Board, makes mention of a series of free lectures for the people, given by himself in his official capacity, and by four health officers of neighbouring sanitary districts, the five representing the areas joined to maintain the Calverley Joint Hospital, namely, Eccleshill, Calverley, Farsley, Idle, and Pudsey. The subjects chosen were "The Germs we Suffer From," "The Water we Drink," "The Food we Eat," "The Air we Breathe," and "The House we Live In." Each health officer repeated his lecture in each of the five towns, and the courses were well attended. The experiment, which deserved the success which attended it, is worthy of being repeated elsewhere.

SANATORIA FOR TUBERCULOUS PATIENTS IN FRANCE.—There are ten seaside sanatoria for tuberculous patients in France. The oldest, largest, and best known of these is at Berck-sur-Mer; it contains 1,034 beds. Then comes one at Arcachon, with 300 beds; one at Banyuls-sur-Mer, with 200; the Pen-Bron hospital opposite Croisic, with 160; the departmental Asylum of Ste. Eugénie at Cap Breton, with 100; the René Sabrant Sanatorium at Hyères, with 100; the Saint-Pol Sanatorium, near Dunkirk, with 80; the Jean Dolfus Sanatorium at Cannes, with 45; and two small sanatoria at Cette and at Ver-sur-Mer in the department of Calvados. The total number of beds in sanatoria for tuberculous patients in France is therefore about 1,800.

THE HUNTERIAN SOCIETY.—At the annual meeting of the Hunterian Society a vote of thanks was passed to the President, Mr. F. Gordon Brown, and to the other officers of the Society. The officers for the ensuing year were then elected as follows: *President*: C. J. Symonds, M.S., M.D. *Vice-Presidents*: John Poland, Henry J. Thorp, John S. E. Cotman,

Peter Horrocks, M.D. *Treasurer*: F. Charlewood Turner, M.D. *Trustees*: H. I. Fotherby, M.D.; F. M. Corner. *Librarian*: Arthur T. Davies, M.D. *Orator*: Patrick Manson, M.D., C.M., LL.D. *Secretaries*: R. Hingston Fox, M.D.; T. Horrocks Openshaw, M.S. *Council*: F. Gordon Brown, James Galloway, M.D.; Hope Grant, T. Mark Hovell, Francis R. Humphreys, Thomas Marshall, M.B.; G. Newton Pitt, M.D.; George W. Potter, M.D.; F. J. Smith, M.D.; R. G. Tatham, Alfred H. Tubby, M.S.; John F. Woods. *Auditors*: S. H. Appleford, M.D.; Francis R. Humphreys, R. Clement Lucas, B.S.; F. J. Smith, M.D.

THE NATIONAL DENTAL HOSPITAL.—The new hospital recently erected at the corner of Great Portland and Devonshire Streets was formally opened on February 24th by the Duke of York. After an introductory speech by the Earl of Strafford, His Royal Highness said he was glad to hear of the good work done by the National Dental Hospital. Whatever might be the criticism sometimes passed on the establishment of so-called "special hospitals," he felt sure that dental hospitals could not be open to objection. He dwelt on the practical nature of the instruction given to students at the institution, and referred in graceful terms to the munificent action of the Dowager Lady Howard De Walden, who had borne the entire cost (nearly £10,000) of building the hospital. The Duke and his party were shown over the building by the Dean of the hospital, Mr. Sidney Spokes, and expressed satisfaction with the excellence of the arrangements.

PRIZE.—A prize of 10,000 roubles (£1,000) is offered by Count Orloff-Davidoff for the discovery of a remedy "perfectly certain to cure or to protect horned beasts against cattle plague." The efficacy of the remedy is to be proved by the same standard as those known to science as protective against small-pox, anthrax, swine fever, etc. The award of the prize is in the hands of the Curator of the Imperial Institute of Experimental Medicine of St. Petersburg acting on the advice of a committee of experts selected for the purpose. The competition is open to the whole world with the exception of active members of the above named institute. The description of the proposed remedy must be clear and complete; it must be sent in, under the ordinary conditions as to concealment of the identity on the part of the author, on or before January 1st, 1897. The award of the prize will be made on January 1st, 1899. If no remedy satisfies the Committee, a further competition will take place, and the award made on January 1st, 1902.

AMERICAN JOTTINGS.—Dr. W. V. Cooke, of Evansville, Indiana, while making bacteriological investigations accidentally infected himself, and died of tetanus.—Ohio has 18 medical colleges, Missouri and Illinois 17 each, and New York 16.—The total number of medical societies in the United States is given as 1,260. Of these New York has 175 and Ohio 90.—The State Legislature of Virginia at present numbers 8 medical practitioners among its members.—The American papers report that on December 29th, 1893, the operation of putting up a fracture of a femur in a lion was successfully performed at the New York College of Veterinary Surgeons. The formidable patient was kept quiet by a hypodermic injection of morphine.—The New York Courts have decided that no newspaper or institution has a right to use the name or portrait of any individual for advertising purposes without his consent.—Judge Richard Clark, of the Atlanta Criminal Court, has abolished the custom of witnesses being sworn by kissing the book.—According to the *American Lancet* the authorities of the military and naval schools at West Point and Annapolis are so impressed with the dangers of football as played in these days that they have forbidden the cadets to play it.—The *Boston Medical and Surgical Journal* of January 4th states that on November 21st, 1893, a man, aged 31, suffering from severe spinal symptoms, was admitted into St. Luke's Hospital, New York. The man stated that fifteen months before he had shot himself in the back of the neck with a pistol. After his death, which occurred on December 20th, 1893, a bullet was found embedded in the base of the skull. The cause of death was pressure on the spinal cord by vertebral dislocation together with spinal meningitis, the lesions being the result of the injury caused by the bullet, which had remained in the body for sixteen months.

**PROFESSOR KOVÁCS OF BUDA-PESTH.**—Dr. Joseph Kovács, Professor of Clinical Surgery in the University of Buda-Pesth, celebrated the twenty-fifth anniversary of his appointment to that chair on February 25th. The event was made the occasion of much congratulatory ceremony and festivity on the part of the pupils and numerous admirers of the eminent Hungarian surgeon. He was presented with his portrait and a *Festschrift* of papers by his former assistants, many of whom are now teaching in the two Hungarian universities, which will form a permanent record of the jubilee. The King of Hungary (more generally known perhaps as the Emperor of Austria) has conferred on Professor Kovács the Commander's Cross of the Francis Joseph Order in recognition of his distinguished services. Professor Kovács has taken a leading part in the promotion of measures for improving the status of the medical profession in Hungary, and it is mainly due to his influence and exertions that medical councils for the protection of the rights and interests of the profession, and for the maintenance of a high standard of professional ethics, are about to be established by the Hungarian Legislature.

**MEDICAL SOCIETY OF LONDON.**—The following is the list of the officers and councillors for the session 1894-5, as nominated by the Council. The ballot will take place at the general meeting to be held on Monday next, March 5th, at 8 p.m. : *President*: Sir William Bartlett Dalby. *Vice-Presidents*: Frederick T. Roberts, M.D., Frederick Tieves, Sidney Coupland, M.D., and Henry Hugh Clutton. *Treasurer*: Arthur Edward Durham. *Librarian*: William Henry Allchin, M.D. *Honorary Secretaries*: Charles B. Lockwood and Amand Routh, M.D. *Honorary Secretary for Foreign Correspondence*: Heinrich Port, M.D. *Council*: William Anderson, Henry Frederick Bailey, W. Mitchell Banks (Liverpool), Howard Barrett, William Henry Bennett, John Syer Bristowe, M.D., F.R.S., G. Buckston Browne, John Cahill, F. Swinford Edwards, E. Hurry Fenwick, Archibald E. Garrod, M.D., F. de Havilland Hall, M.D., Frederick W. Hewitt, M.D., Edward D. Mapother, M.D., William Marshall, M.D., William A. Meredith, H. Montague Murray, M.D., Edward J. Nix, M.D., William Pasteur, M.D., Charles H. Ralfe, M.D.

### MEDICAL VACANCIES.

The following vacancies are announced :

- BELGRAVE HOSPITAL FOR CHILDREN**, 77 and 79, Gloucester Street, Pimlico, S.W.—House-Surgeon. Board, lodging, fuel, and light provided. Applications to Percy Gates, Honorary Secretary, by March 7th.
- BRADFORD CHILDREN'S HOSPITAL**.—House-Surgeon (to dispense); doubly qualified. Salary, £70, with board, residence, and washing. Applications and testimonials to C. V. Woodcock, Secretary, by March 12th.
- CARLOW DISTRICT LUNATIC ASYLUM**.—Assistant Medical Officer. Salary, £100 a year, and emoluments valued at £100 per annum. Election on March 9th.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST**, Victoria Park, E.—House-Physician. Board, residence, and allowance for washing. Appointment for six months. Applications to T. Storrar-Smith, Secretary, by March 8th.
- CITY ORTHOPEDIC HOSPITAL**, Hatton Garden.—Honorary Surgeon; must be a Fellow of the Royal College of Surgeons of England or of Edinburgh. Also Two Honorary Assistant Surgeons; must be either Fellows or Members of the Royal College of Surgeons of England or of Edinburgh. Applications, addressed to the Committee at the Hospital, by March 12th.
- CLAYTON HOSPITAL AND WAKEFIELD DISPENSARY**.—House-Surgeon (Junior); unmarried. Honorarium, £40 per annum. Applications and testimonials to the Honorary Secretary by March 6th.
- COOMBE LYING-IN HOSPITAL**, Dublin.—Assistant Master. Tenure of office three years; premium to Master £230. Applications and testimonials to the Master, Coombe Hospital, Dublin.
- COUNTY ASYLUM**, Prestwich, Manchester.—Assistant Medical Officer; unmarried. Salary commencing at £100 per annum, increasing to £200 by successive yearly increments of £25, with apartments, board, attendance, and washing. Applications to the Superintendent.
- COUNTY OF NORTHUMBERLAND**.—Medical Officer of Health. Salary, £500 per annum, with travelling expenses. Appointment for three years. Applications and testimonials, endorsed "Medical Officer," to C. D. Forster, Clerk to the Council, by March 24th.
- DENTAL HOSPITAL OF LONDON**, Leicester Square, W.C.—Assistant Dental Surgeon. Applications to J. Francis Pink, Secretary, by March 12th.
- HOSPITAL FOR SICK CHILDREN**, Great Ormond Street, Bloomsbury, W.C.—House-Surgeon to Out-patients (non-resident). Appointment for six months, but the holder will be eligible for a second term of office. Salary, 25 guineas. Applications and testimonials to Adrian Hope, Secretary, by March 20th.

**JOINT COUNTIES LUNATIC ASYLUM**, Carmarthen.—Medical Superintendent. Salary, £500 per annum, with unfurnished house, garden produce, fire, light, and washing. Applications and testimonials to be forwarded to W. Morgan Griffiths, Solicitor, Carmarthen, by March 21th.

**LONDON HOSPITAL**, E.—Physician. Applications must be sent to G. Q. Roberts, House-Governor, by March 5th.

**LONDON TEMPERANCE HOSPITAL**, Hampstead Road, N.W.—Assistant Resident Medical Officer. Appointment for six months. No salary, but residence in the hospital, board and washing, and an honorarium of 5 guineas. Applications and testimonials to E. Witson Taylor, Secretary, by March 8th.

**MILLER HOSPITAL AND ROYAL KENT DISPENSARY**, Greenwich Road, S.E.—Junior Resident Medical Officer. The post is tenable for six months, with prospect of re-election for the same period. Salary, £30 per annum, with board, attendance, and washing. Applications and testimonials to Major-General G. R. Roberts, Honorary Secretary, by March 10th.

**OWENS COLLEGE**, Manchester.—Professor of Zoology. Applications to the Council of the College, under cover to the Registrar, by April 3rd.

**ROXBURGH DISTRICT ASYLUM**, Melrose, N.B.—Assistant Medical Officer. Salary, £100 per annum, with board, lodging, and washing. Applications and testimonials to Dr. Carlyle Johnstone, Medical Superintendent.

**ROYAL HOSPITAL FOR DISEASES OF THE CHEST**, City Road, E.C.—House-Physician. Appointment for six months. Salary at the rate of £40 per annum, with board and lodging. Applications and testimonials to the Secretary by March 14th.

**ROYAL SOUTH HANTS INFIRMARY**, Southampton.—House-Surgeon. Salary, £100 per annum, with board and lodging. Applications with testimonials to the Secretary, T. A. Fisher-Hall by March 10th.

**ROYAL SURREY COUNTY HOSPITAL**, Guildford.—House-Surgeon. Salary, £80 per annum, with board, lodging, and laundry. Applications to the Honorary Secretary by March 10th.

**ST. THOMAS'S HOSPITAL**.—Resident Assistant Physician. Applications and testimonials to Mr. E. M. Hurdy, Treasurer's Clerk, by March 10th.

**SIR PATRICK DUN'S HOSPITAL**, Dublin.—Honorary Assistant-Physician in charge of out-patients. Applications to C. B. Ball, M.D., by March 8th.

**TORBAY HOSPITAL**, Torquay.—Honorary Ophthalmic Surgeon. Applications and testimonials to the Honorary Secretary by March 17th.

**TOWER HAMLETS DISPENSARY**.—Resident Medical Officer. Salary, £120 per annum, with furnished rooms, coals, gas, and attendance. Applications to D. F. Matheson, Secretary, Tower Hamlets Dispensary, White Horse Street, Stepney, E., by March 7th.

**TUNBRIDGE WELLS GENERAL HOSPITAL**.—Resident House-Surgeon. Also to act as Secretary. Must be unmarried. Salary, £100 per annum, with board, furnished apartments, gas, firing, and attendance. Applications and testimonials to Henry Harris, Assistant Secretary at the General Hospital, by March 13th.

### MEDICAL APPOINTMENTS.

- ADAM**, Walter, M.B. Edin., appointed Assistant Medical Officer to the Grahamstown Asylum, Cape Colony.
- ARNOLD**, G. J., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Throat of St. Thomas's Hospital (extension).
- BAHER**, E. Cresswell, M.B. Lond., appointed Surgeon to the Royal Ear Hospital, Frith Street, W.
- BOYD**, R., M.B., C.M. Glasg., appointed Assistant House-Surgeon to the Infirmary for Children, Liverpool.
- CALDWELL**, J. C., M.B. Edin., appointed Resident Medical Officer to the Albany General Hospital, Grahamstown, South Africa.
- CARVER**, J. R., M.A., M.B., B.Sc. Cantab., appointed Clinical Assistant in the Special Department for Diseases of the Ear of St. Thomas's Hospital.
- CHEATLE**, A. H., F.R.C.S. Eng., appointed Assistant-Surgeon to the Royal Ear Hospital, and Aural Clinical Assistant to King's College Hospital.
- COLLCUTT**, A. M., M.A., M.B., B.C. Cantab., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Ear of St. Thomas's Hospital.
- CORBOULD**, V. A. L. E., M.R.C.S., L.R.C.P., appointed Resident Obstetrical Officer at Charing Cross Hospital.
- CUFF**, A. W., B.A. Cantab., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Throat of St. Thomas's Hospital.
- DEYNS**, C. J., M.R.C.S. Eng., L.S.A., appointed Medical Officer for the 5th District of the Newport Pagnell Union, *vice* J. S. Johnson, resigned.
- DICKSON**, A. H., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.
- DUNN**, D. S., M.D., appointed Medical Officer to the Warboys District of the St. Ives Union.
- HAINSWORTH**, E. M., B.Sc. Lond., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital.
- HEWETT**, J. W., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.
- HICKS**, T. W., L.R.C.P., M.R.C.S., appointed Senior Obstetric House-Physician to the St. Thomas's Hospital.
- HOOPER**, George H., M.R.C.S., L.R.C.P., appointed House-Physician at Charing Cross Hospital.

JAFFE, C. S., M.B., B.S.Lond., L.R.C.P., M.R.C.S., appointed Junior Obstetric House-Physician to St. Thomas's Hospital.

LEVICK, H. D., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer of the Whitechapel Union, *vice* R. J. Marshall, resigned.

LODGE S., jun., M.D.Durh., appointed Special Assistant-Surgeon to the Bradford Eye and Ear Hospital, *vice* Andrew Little, M.B., C.M.Aberd.

MACKINTOSH, W. A., M.B.Edin., C.M., appointed Medical Officer to Simpson's Asylum, Pleau, Stirling, *vice* George Leslie, M.D., deceased.

MAXWELL, Raymond, M.B., C.M.Edin., appointed House-Physician to the Northern Hospital, Liverpool.

MERRY, W. J. C., M.A., M.B., B.Ch.Oxon, appointed Resident House-Physician to St. Thomas's Hospital.

MILTON, A. R. O., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital.

MUIR, Robert D., L.R.C.P.Lond., M.R.C.S., appointed Medical Officer to the Out-Patients at the Miller Hospital, Greenwich, and Royal Kent Dispensary.

MUSSEN, A. A., M.B., B.Ch.Dubl., appointed Assistant House-Surgeon to the Northern Hospital, Liverpool.

O'DEA, M.B., B.Ch., appointed Medical Officer of the 3rd District of the Abingdon Union, *vice* J. H. Daly, deceased.

OFFORD, J. A., M.R.C.S.Eng., L.R.C.P.Lond., appointed Government Medical Officer at Fiji.

OLDMEADOW, L. J. H., M.B., C.M.Edin., appointed House-Surgeon to the Northern Hospital, Liverpool.

PATERSON, D. R., M.D., M.R.C.P.Lond., appointed Honorary Physician to the *Hamadryad* Seaman's Hospital, Cardiff.

PERSHOUSE, F., L.R.C.P., M.R.C.S., appointed Non-Resident House-Physician to St. Thomas's Hospital.

PRESTON, Lionel L., M.B. and B.S.Dunelm, appointed Honorary Medical Officer to the Ryde Dispensary, and Medical Officer to the Ryde Provident Dispensary, *vice* J. Menham Pletts, M.D., resigned.

RICHARDSON, S. W. F., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital.

RUSSELL, A. E., L.R.C.P., M.R.C.S., appointed Resident House-Physician to St. Thomas's Hospital (extension).

SANDALL, T. Edward, B.A.Cantab., M.R.C.S., L.R.C.P., appointed House-Surgeon at Charing Cross Hospital.

TAYLOR, Gerard C., M.A., B.C.Camb., appointed Senior House-Surgeon to the Infirmary for Children, Liverpool.

THOMPSON, G. W., B.A., M.B., B.C.Cantab., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital.

WHITAKER, J. Ryland, B.A., M.B.Lond., L.R.C.P. and L.R.C.S.Edin., appointed Lecturer on Anatomy at the School of Medicine, Minto House, Edinburgh, *vice* Dr. Symington, resigned.

WHITFIELD, David W., M.R.C.S., L.R.C.S.I., appointed Medical Officer and Public Vaccinator to the Ironbridge District of the Madeley Union, *vice* James Procter, M.R.C.S., L.S.A., deceased.

WINDSOR, W. C., M.A., M.B., B.C.Cantab., appointed Non-Resident House-Physician to St. Thomas's Hospital.

WINSTON, W. B., B.Sc.London., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Skin of St. Thomas's Hospital (extension).

## DIARY FOR NEXT WEEK.

## MONDAY.

LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. W. Lang: Squint. Bacteriological Laboratory, King's College, W.C., 3 to 5 P.M.—Lecture: Tetanus, Rabies, and Cholera. Practical work: Examination of Comma Bacilli, Chemical and other Tests. London Throat Hospital, Great Portland Street, 8 P.M.—Mr. George Stoker: Impaired Movements of the Vocal Cords.

MEDICAL SOCIETY OF LONDON, 8 P.M.—General Meeting for the Election of Officers and Councillors. 8.30 P.M., Ordinary Meeting. Dr. Lewis Jones: On the Electrical Treatment of Infantile Paralysis. Dr. Wallis Ord and Mr. Herbert J. Waterhouse: A Case of Acute Meningitis, diagnosed as Tuberculous, treated by Trephining and Drainage of the Sub-arachnoid Space.

ODONTOLOGICAL SOCIETY OF GREAT BRITAIN, 8 P.M.—Mr. T. E. Constant: Dental. Casual communications.

## TUESDAY.

LONDON POST-GRADUATE COURSE, Bethlem Royal Hospital, 2 P.M.—Dr. Corner: Impulsive Insanity, Homicidal Insanity, Moral Insanity.

PATHOLOGICAL SOCIETY OF LONDON, 8.30 P.M.—Adjourned Debate on Rodent Ulcer by Dr. Radcliffe Crocker, Dr. Colcott Fox, Mr. Walter Spencer, Dr. Norman Walker, Mr. Rubert Boyce, Mr. H. B. Robinson, Mr. Cecil Beadles. Mr. J. Hutchinson, jun.: Deformity of Shoulder Girdle. Card specimens: Mr. Cecil Beadles.

## WEDNESDAY.

LONDON POST-GRADUATE COURSE, Hospital for Diseases of the Skin, Blackfriars, 1 P.M.—Dr. Payne: Ringworm and Vegetable Parasitic Diseases. Hospital for Consumption, Brompton, 4 P.M.—Dr. C. Theodore Williams: Diagnosis of Pulmonary Tuberculosis. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. A. Stanford Morton: Ocular Paralyses.

OBSTETRICAL SOCIETY OF LONDON, 8 P.M.—Specimens will be shown by Dr. William Duncan, Dr. Leith Napier, and others. Dr. Robert P. Harris: A Plea for the Practice of Symphysiotomy, based upon its Record for the past Eight Years (communicated by Dr. Lewers). Dr. Gow: On the Relation of Heart Disease to Menstruation.

NATIONAL HEALTH SOCIETY, 53, Berners Street, W., 4 P.M.—Dr. Solomon Smith: The Prevention of Consumption.

POST-GRADUATE COURSE, West London Hospital, Hammersmith, W., 5 P.M.—Dr. Aldren Turner: Some Syphilitic Spinal Lesions.

## THURSDAY.

LONDON POST-GRADUATE COURSE, National Hospital for the Paralysed and the Epileptic, Queen Square, 2 P.M.—Mr. Victor Horsley, F.R.S.: Surgery of the Nervous System. Hospital for Sick Children, Great Ormond Street, 3.30 P.M.—Dr. Lubbock: Selected Medical Cases. Central London Sick Asylum, Cleveland Street, 5.30 P.M.—Mr. John Hopkins: Cases in the Wards.

BRITISH GYNÆCOLOGICAL SOCIETY, 8.30 P.M.—Specimens: Mr. Jessett: (1) Uterus removed *per Vaginam* for Malignant Disease; (2) Uterus removed *per Vaginam* for Multiple Fibroma. Dr. Purcell: (1) Uterus removed *per Vaginam*; (2) Portion of Uterus removed by Supravaginal Amputation—both for Malignant Disease. Dr. Macnaughton Jones: A Gynæcological Question of Importance in Forensic Medicine relating to the Hymen.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM.—Living and card specimens at 8 P.M. by Mr. Spencer Watson, Mr. J. B. Lawford, Mr. H. Work Dodd, Mr. Juler, Mr. Cowell and Mr. John Griffith, and Mr. Priestley Smith. 8.30 P.M., Continuation of the Discussion on Mr. Jonathan Hutchinson's paper on School Ophthalmia. Mr. Hill Griffith: Some Cases of Orbital Tumours. Mr. R. Williams: (1) A Case of Rapidly Growing Tumour of the Orbit; (2) A Case of Epithelioma, with Photographs; (3) A Case of Double Optic Neuritis.

NORTH LONDON MEDICAL AND CHIRURGICAL SOCIETY, Great Northern Central Hospital, 9 P.M.—Dr. Patrick Manson: On the Diagnosis of Tropical Diseases seen in London, illustrated by lantern slides. Mr. Evan Jones: On Tubal Pregnancy, Rupture, Abdominal Section, Recovery.

## FRIDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption, Brompton, 4 P.M.—Dr. C. Theodore Williams: Varieties of Pulmonary Cavities.

CLINICAL SOCIETY OF LONDON, 8.30 P.M.—Mr. Mansell Moullin: A Case of Cerebral Abscess. Mr. Battle: Three Cases of Extradural Hæmorrhage. Mr. C. B. Lockwood: Excision of Part of a Dislocated Internal Semilunar Fibro-cartilage of the Knee; Account of Result Twenty-one Months Afterwards. Dr. W. Cayley and Mr. Bland Sutton: A Case of Perforation of the Bowel in Typhoid Fever, treated by washing out the Peritoneal Cavity and excising the Perforation. Mr. Christopher Heath: Two Cases of Rectangular Ankylosis of the Hip-joint treated by Operation.

## SATURDAY.

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

## BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 5s. 6d., which sum should be forwarded in post-office order or stamps with the notice not later than Wednesday morning, in order to insure insertion in the current issue.

## BIRTHS.

BELL.—At 14, Hope Street, Edinburgh, on February 19th, 1894, the wife of J. S. Bell, M.B.Edin., The Green, Lockerbie, of a daughter.

HOUSEMAN.—At the Manor House, Houghton-le-Spring, Durham, on February 15th, the wife of James Gilpin Houseman, M.D., prematurely, of a son, stillborn.

PUGH.—On January 23rd, at 3, Upper Rock Gardens, Brighton, the wife of J. W. Pugh, M.B.Lond., M.R.C.S., L.S.A., of a son.

WASHBOURN.—On February 12th, at 15, Trinity Square, S.E., the wife of J. Wychenford Washbourn, M.D., of a daughter.

## MARRIAGES.

LIVINGSTONE-WATSON.—At Renfield Free Church, Glasgow, on February 21st, by the Rev. Wm. M. MacGregor, M.A., assisted by the Rev. J. Irving, M.A., Innellan, and Rev. T. Crerar, North Leith, Jno. Livingstone, M.D., Barry, Glamorganshire, to Mary Evelyn Bissett, second daughter of J. Watson, Esq., Cluniter, Innellan.

KENNEDY-COX.—At Foggyley, Dundee, on February 28th, by the Rev. A. B. Connel, D.D., assisted by the Rev. Theodore Marshall, M.A., James Martin Kennedy, M.D., Aberford, Leeds, to Annie Elizabeth, second daughter of William Cox, of Snaigow, Dunkeld.

TAYLOR-HODGKINSON.—February 28th, at St. Philip's Church, Sheffield, by the Rev. W. Lechmere Tudor, B.A., E. Edmund Taylor, M.D., to Ethel, youngest daughter of Mr. George Hodgkinson, of Upperthorpe. No cards.

## DEATHS.

VAUGHAN.—On February 24th, at Crewe Cottage, Crewe, Lilian, the beloved wife of Alfred Ellis Vaughan, aged 29.

WASHBOURN.—On February 26th, at 15, Trinity Square, S.E., Nellie Florence, the wife of J. Wychenford Washbourn, M.D., aged 22.

WHEELER.—On February 26th, at 11, Museum Terrace, Chelmsford, Daniel D. Wheeler, M.R.C.S.Eng., L.S.A., aged 75.