

## MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL, THERA- PEUTICAL, PATHOLOGICAL, ETC.

### IS CANCER CONTAGIOUS?

THE very able and interesting paper by Mr. D'Arcy Power on the subject of "Cancer Houses and their Victims" induces me to send you some brief particulars of apparent contagion which have come within my own knowledge. They may have been "mere coincidences," to quote Mr. Power's words, but yet seem worthy of being placed on record.

About twenty-two years ago a very distinguished hospital surgeon in Manchester, at the urgent request of a lady patient, attended daily to dress her cancerous breast until her death, which occurred at the end of about twelve months. He himself died within two years of cancer of the bladder. An intimate friend of my own, well known as an ophthalmic surgeon, personally attended his own wife, who had long been the subject of cancerous disease. She died in February, 1888, and her husband developed similar disease in the stomach, and died in August of the same year.

However difficult of explanation such cases may be, they are well worthy of our most serious attention.

J. WRIGHT BAKER,

Buxton. Consulting Surgeon to the Derbyshire Royal Infirmary.

### THE HEREDITY OF CANCER.

UNDOUBTEDLY one of the most important of the unsolved pathological problems is cancer. How, why, where, whence comes it? My experience of cancer has been rather opposed to the hereditary origin in the majority of cases, but occasionally you come across such a string of cases in one family, that you are compelled to admit the existence of a something more active than mere coincidence.

A young girl was brought by her grandmother to me; the family history was as follows. The girl's mother died of rapid cancer of the womb, aged 30. She was only ill six months, and previously the very type of robust health. Of the six children of this woman one only is living, the delicate girl above mentioned. The grandmother, aged 63, is healthy, but one of her brothers died of cancer of the lip, aged 35. Her father had a cancer taken out of his lip five years before he died of another complaint, aged 70. Another of his brothers died of cancer of the lip, and yet another of cancer of the hand. The father of these three died of cancer. Mrs. H., the grandmother of my patient, well remembers him dying. His father also died of cancer, so that we here have it in five generations. They all lived in different houses.

Blackpool.

WILLIAM HARDMAN.

### CASE OF PHTHISICAL CONSOLIDATION OF RIGHT LUNG WITH PARALYSIS OF RIGHT ARM.

L. D., aged 14, has suffered from phthisis for some months. There is consolidation of the upper half of the right lung. About two months ago she complained of severe pain in the right arm, chiefly down the inner side. In a week or two the arm and fingers became completely paralysed, and remained so till about a week ago, when movement began to return, the severe pain having ceased somewhat earlier. Movement returned first at the elbow-joint, then at the shoulder, and now she can move the thumb and wrist, but all the fingers still remain paralysed. It seemed to me that the brachial plexus was implicated in an inflammation of the cellular tissue consequent on the irritation caused by the pleurisy over the right apex. I painted the region of the brachial plexus and right apex with iodine, and had the arm wrapped in cotton wool, expecting that movement would gradually return.

Gamlingay, Cambridgeshire.

W. S. SYME, M.B., C.M.

### "EPILEPSY IN OLD AGE."

DR. MANSEL SYMPSON's very interesting cases of Epilepsy in Old Age recall to my memory some results which I arrived at some time ago whilst inquiring into the specific gravity of the blood of the insane, and the present seems an opportune moment for mentioning some of them.

I noticed that in those afflicted with epilepsy a distinct increase of one, two, or three degrees occurred at the time of the epileptic seizure.

The observations, conducted by a modification of Professor Roy's method, were somewhat protracted, 63 patients in all being taken for observation. Observations were made in 60 of these—once during freedom from fits and once during a seizure. The observations on the remaining 3 were made on thirty consecutive days, the patients being fed on a similar diet during the time. From the results so obtained<sup>1</sup> I had no doubt that a rise in the specific gravity occurred during the time of the seizure.

In old age, as in early youth, the blood increases in density. May not the epilepsy of old age be a display of the want of harmony of the nerve cells with their altered environment in the particular cases in which the disease supervenes?

W. JOHNSON SMYTH, M.D.,

Guards' Hospital, S.W.

Surgeon-Lieutenant A.M.D.

### PERSISTENT THYREO-GLOSSAL DUCT.

In connection with Mr. Morton's case of persistent thyreo-glossal duct, the following may be of interest.

A boy, aged 12, rejected by the army surgeons on account of a sinus in the neck, came to me in September, 1891. He complained of a hole in his neck "weeping" fluid like uncooked white of egg, and wished it cured so that he might enlist. Seven years earlier he noticed a lump the size of a marble in the front of the neck; a year later it was lanced, and "blood and matter" let out. The sinus had wept ever since. I found a transverse fold of skin projecting downwards just at the angle between the chin and the pomum Adami. On raising this fold a small hole, admitting a probe upwards for  $1\frac{1}{4}$  inch, was seen. On pinching up the skin about the orifice a thickened cord could be felt running upwards, which became pulled upon during deglutition. Nothing was to be seen or felt from the mouth; the thyroid gland was undoubtedly enlarged, the isthmus markedly so.

The duct was dissected and scraped out, but ineffectually, and as curdy pus continued to exude and the orifice was everted, in November, 1891, I dissected out the cord up to the thyro-hyoid membrane, and found it ended in the periosteum over the body of the hyoid bone. The cord was  $\frac{1}{4}$ th of an inch in diameter and 1 inch long, with a canal  $\frac{1}{4}$  inch long. During November the wound broke down and secreted stringy muco-pus till July, 1892, when the condition resembled a tuberculous sinus. The unhealthy area was included in an elliptical incision, which was extended down to the deep fascia covering the thyroid gland, and the diseased tissue completely extirpated. The wound healed soundly, and has remained so.

Three operations were required to cure this case, and why the second failed is curious, for, apparently, then the disease was thoroughly eradicated.

REGINALD H. LUCY, F.R.C.S.,  
Plymouth. Assistant-Surgeon, South Devon Hospital.

## REPORTS

ON

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

#### VICTORIA HOSPITAL, HULL.

#### CASE OF THYREO-GLOSSAL CYST TREATED BY EXCISION.

(Under the care of Mr. ALFRED PARKIN.)

J. S., aged 2 years and 9 months, was admitted on May 4th, 1894, for a small lump in the middle line of the neck. It was first noticed when the child was 6 months old, but since then had gradually increased in size.

On admission there was a globular median swelling, apparently about the size of a small cherry, situated over the thyroid cartilage, and extending deeply between the thyroid and the hyoid bone. It fluctuated readily and was obviously beneath the deep fascia. There was no pain on manipula-

<sup>1</sup> Vide *Journal of Mental Science*, 1891.

**THE CASE OF SURGEON-MAJOR H. G. GARDNER, MEDICAL STAFF.** In 1890 Surgeon-Major H. G. Gardner, then stationed in India, was refused leave home on urgent family affairs, but we have not before us the grounds of the refusal; the result, however, was that he felt compelled to retire on a gratuity after sixteen years of good service. He now finds himself debarred from further employment on the active list, although still retained on the list of those "liable to recall" to service in emergency. We would assume *a priori* that retirement by gratuity meant a clean severance, and did not involve liability to recall to service; but such does not seem to be the case, and retirement on gratuity is treated the same as on pension. We question the equity of this rule. As to reinstatement on full pay, which this officer desires, it is compassed about with many, and probably insuperable, difficulties. Even if it were allowed, we presume the first step would be refunding the gratuity. There have been instances in war time of officers who had resigned their commissions being reinstated, but these were prior to the days of retirement by gratuity with liability to recall. Commissions have often been resigned under private stress, and the step afterwards regretted. The case of Surgeon-Major Gardner, we fear, is one in point, but though the case is undoubtedly a hard one, we cannot suggest a remedy unless through the special grace of the authorities.

#### THE PRESIDENCY OF MIXED BOARDS IN INDIA.

THE Government of India have issued a reconstruction of the regulation as to Boards of Survey on hospital equipment, diets, etc. These will be composed of medical officers, but when the number of medical officers present at a station will not admit of this being carried out the Board may, at the discretion of the officer commanding the station, be composed of military and medical officers with a medical officer as President, or solely of military officers with the medical officer in attendance. It is something achieved that a military medical officer may be the President of a mixed board.

#### A MEDICAL STAFF CORPS OF EURASIANS.

AN article is devoted, in an Indian contemporary, to the needs of an Indian Medical Staff Corps, for efficient nursing in hospitals. The recruiting for this corps from domiciled Anglo-Indians and Eurasians is advocated, the recruits passing through the ranks to the subordinate medical department after becoming corporals and sergeants. If our memory serves us right some such scheme was long since advocated by Brigade-Surgeon-Lieutenant-Colonel Evatt, who supported the claims of Eurasians for this purpose.

## MEDICO-LEGAL AND MEDICO-ETHICAL.

#### EMPLOYERS' LIABILITY.

A CORRESPONDENT sends us a report of a case in the county court in which he was plaintiff. He stated in evidence that a partner in defendant's firm brought a man to his surgery to be attended to. The man was in defendant's employ, and he had very severely cut his finger at his work. The finger had to be amputated, and the man was laid up for two months. He sent the bill into the senior partner. He said he would not pay it, and plaintiff then said he would sue the firm. Defendant's counsel submitted that no liability had been made out. The partner appeared to have done what any man would have done; he took the injured man to the nearest doctor, but that did not make him liable. The judge gave judgment for the defendants, without costs. The fact that the man's employer had personally taken him to the surgery not unreasonably gave rise to the presumption that he would be responsible for the doctor's charges, in the absence of an express statement by him to the contrary. Indeed, it has been held that if a mere stranger directs a surgeon's attention to a poor man, he is liable to pay the surgeon's bill, but we doubt if this principle would now be upheld. It would always be desirable to have an express contract in cases like that of our correspondent (at any rate before entering on a continued attendance), unless it was intended to look to the patient only.

#### NEWSPAPER PUFFS AND [ADVERTS.]

FROM time to time, and with more frequency recently, advertisements may be seen in the agony columns of the newspapers in which Mrs. So-and-so expresses her thanks to numerous friends for their kind inquiries during her recent illness. The *Herts Advertiser* and *St. Albans Times* of May 26th shows that this custom may become a method of advertisement. Thus:

"Mrs. Spriggins, Park Street, thanks the many friends for their kindness during her late operation, performed most successfully by Dr. Wells of St. Albans.—[Advt.]"

It would be surprising if any medical man could suppose that so naive an announcement could increase his reputation with even the most guileless of the public. Mr. Wells will doubtless have the sympathy of his professional brethren, the more as the issue of this same paper on the next Saturday (June 2nd) contains another puff, this time without the addition "Advt." We would recommend Mr. Wells to use his influence with his patients and with the editor of the newspaper in question to prevent the future publication of "Adverts." and paragraphs of this kind, for they do not contribute to enhance the honour and dignity of the individual or of the profession to which he belongs.

Mr. Wells has a companion in misfortune in "Dr. Alexander, the specialist in diseases of the ear, throat, and nose," who finds the steps of his medical education described with some detail in a recent issue of the *Sun*. The paragraph referred to states the street in the City in which Dr. Alexander has consulting rooms, and adds that "in conjunction with a few others he has lately started an ear and throat hospital in the East End." We hear of this new hospital for the first time, and the names of the other members of the medical staff, and of the committee of management, are not mentioned. It appears, however, according to

the *Sun*, that "the poor will be treated gratis on presenting a letter of recommendation from a subscriber, while those who can afford to pay will be charged a small fee."

#### OBJECTION TO VACCINATION—A NOVEL PLEA.

At the Cambridge Police Court on June 15th Walter George Bell, assistant tutor of Trinity Hall, Cambridge, was summoned for non-compliance with a vaccination order. He set up a novel defence—that vaccination was inoculation, and by Section 32 of the Act of 1867 anyone is liable to one month's imprisonment for inoculation. Dr. Cooper said by that contention every medical man vaccinating was liable to imprisonment. The Bench inflicted a fine.

#### A CARD AND AN APOLOGY.

A CORRESPONDENT sent us recently a card containing an announcement as to a surgery, at which attendance was made at certain hours, and also the private residence of the practitioner. He stated that this card had been delivered personally from house to house. Under the circumstances we thought it well to communicate with the practitioner whose name appears on the card. In reply he informs us that the card was given to a few people in the neighbourhood of the surgery (now closed). He expresses regret at having taken the course mentioned, and adds that it will not be continued.

#### AN UNREMUNERATIVE ASSISTANTSHIP.

TOO OBLIGING.—As the unqualified assistant on appealing to his qualified friend A. was left to infer that no salary was attached to the "unqualified" assistantship, any attempt to enforce such a claim now would probably be unsuccessful. On receiving the indefinite intimation from A., the unqualified assistant should have addressed the principal B. on the subject, and if the reply were unsatisfactory should have arranged to retire from the unremunerated post at once.

#### MIDWIFERY ENGAGEMENTS AND FEES.

H. G. M. writes: Mrs. J. was confined earlier than she expected. Dr. N., the usual medical attendant, was sent for but was from home. Dr. H. was sent for and attended her. He had everything right and was preparing to leave the house when N. arrived. H. then handed over the case to N. There is a question between N. and H. as to how the fee is to be settled; is it to be divided or each to put in a different claim to Mr. J.? N. and H. are on friendly terms and each live five Irish miles from the case.

\*.\* Dr. N. and Dr. H. should be guided in the obstetric case referred to by the following rule: "When a practitioner is called in or otherwise requested to attend at an accouchement for another and completes the delivery or is detained for a considerable time he is entitled by custom (except in the case of illness, etc., provided for by Rule 3) to one half of the fee, but on the completion of the delivery or on the arrival of the pre-engaged accoucheur he should resign the further management of the case. In a case, however, which gives rise to unusual fatigue, anxiety, and responsibility, it is right that the accoucheur in attendance should receive the entire fee. Note.—In either event when the officiating accoucheur is a stranger or a non-acquaintance of the family doctor the full fee should be tendered to him."—Code, chap. ii, sec. 5, rule 12.

## UNIVERSITIES AND COLLEGES.

#### UNIVERSITY OF CAMBRIDGE.

DEGREES.—At the Congregation on June 11th the following degrees in Medicine and Surgery were conferred:

M.D.: D. W. Samways, M.A., late Fellow of St. John's; C. A. R. Sutton, M.A., Clare.

M.B. and B.C.: F. E. A. Colby, B.A., King's; W. G. Peck, B.A., Trinity; H. M. Tickell, B.A., Trinity; H. B. Hewitt, B.A., Clare; C. C. Webb, B.A., Clare; F. N. Day, B.A., Caius; W. J. Harris, B.A., Caius; C. E. Sparks, B.A., Caius.

FIRST EXAMINATION FOR MEDICAL AND SURGICAL DEGREES, Easter Term, 1894. Part II: *Elementary Biology*.—Alder, Pemb.; Barnicot, Pemb.; Bates, T. W., M.A., Queens'; Bentley, Joh.; Blyth, Trin. H.; Bond, G. W., Cla.; Braddon, W. V., Trin. H.; Brailley, Queens'; Brenan, Trin.; Briscoe, Pemb.; Bull, B.A., Gonv. and Cai.; Burfield, non-coll.; Burnand, Jes.; Chapman, Cla.; Child, Chr.; Clarke, J. S., Gonv. and Cai.; Coleman, Trin.; Davies, Gonv. and Cai.; Dunne, B.A., Queens'; Evans, W., Cla.; Foster, King's; Frend, Trin.; Fryer, Chr.; Gaitskell, Cla.; Greig, A. W., Jes.; Henderson, Gonv. and Cai.; Hopper, Gonv. and Cai.; Howitt, Joh.; Izard, Trin.; Jackson, Gonv. and Cai.; Killick, Trin.; Killick, Down.; Langton, J. M. E., Trin.; Lock, J. L., Gonv. and Cai.; Lock, P. G., Gonv. and Cai.; Lucas, Pemb.; McBryde, King's; McCaskie, Gonv. and Cai.; Martin, A. E., Down.; Martineau, Emm.; Maxwell, Trin.; Morgan, Joh.; Mummery, Gonv. and Cai.; Nixon, Gonv. and Cai.; Parker, Emm.; Pearson, Emm.; Pearson, Sid. Suss.; Pennington, Gonv. and Cai.; Percival, Joh.; Philbrick, Trin.; Ross, non-coll.; Rudman, King's; Salaman, Trin. H.; Sedgwick, R. E., Gonv. and Cai.; Shufflebotham, Trin.; Slack, Pemb.; Staynes, Chr.; Susman, Gonv. and Cai.; Taylor, J. G., King's; Taylor, E. C., Joh.; Thomas, T. P., Gonv. and Cai.; Ticehurst, Cla.; Tyler, Joh.; Topham, Chr.; Walker, King's; Walker, Cla.; Watson, D. P., Trin.; West, Chr.; Wilkin, B.A., Pemb.; Wilson, G. R., Trin.; Wisdom, Emm.; Worthington, Trin.

SECOND EXAMINATION FOR MEDICAL AND SURGICAL DEGREES, Easter Term, 1894. Part I: *Pharmaceutical Chemistry*.—Barham, Gonv. and Cai.; Beucher, Trin.; Brincker, Joh.; Browne, Cla.; Coleman, E. H., Joh.; Elliott, H. St. C., Trin.; Elliott, W. R., B.A. Joh. Ellis, Fet.;

Fraser, Gonv. and Cai.; Green, B.A., Down.; Gutch, B.A., Chr.; Harwood, Trin.; Home, Trin.; Horne, B.A., Trin.; Jones, H. G. T., John.; Kelling, Gonv. and Cai.; Letchworth, Emm.; Mayo, H. R., Gon. and Cai.; Mills, B.A., Cla.; Mullings, Chr.; Naish, B.A., Trin.; Nelson, B.A., Cla.; Nicholson, G. B., Cla.; Orton, Trin.; Perkins, B.A., Joh.; Reissmann, Joh.; Rowland, Down.; Sanderson, B.A., Cla.; Slade, B.A., Trin.; Stabb, Down.; Stanham, B.A., Trin.; Stawell, B.A., Trin.; Studd, Trin.; Sugden, Gonv. and Cai.; Thompson, A., B.A., Trin.; Turnbull, B.A., Gonv. and Cai.; Wingate-Saul, Trin.; Part II: *Human Anatomy and Physiology*.—Barraclough, B.A., Chr.; Bedford, B.A., Trin.; Blachford, B.A., Sid. Suss.; Briggs, B.A., John.; Brown, B.A., Pemb.; Butler, John.; Carter, A. B., B.A., Jes.; Elliott, A. E., B.A., John.; Green, B.A., Down.; Jephcott, B.A., Gonv. and Cai.; Kirk, B.A., Chr.; McCleary, B.A., Trin.; Moritz, B.A., Gonv. and Cai.; Ogilvie, B.A., Chr.; Paterson, B.A., Emm.; Roe, Pemb.; Rowland, B.A., Down.; Sandilands, B.A., Trin.; Stabb, B.A., Down.; Tebbis, B. N., Queens.; Tyrrell, B.A., Cla.; Wakefield, M.A., Trin.; Weaver, F. K., B.A., Trin.; Williamson, B.A., John.; Woolley, E. J., B.A., Gonv. and Cai.

**FIRST EXAMINATION FOR M.B. AND B.C., Easter Term, 1894.** *Chemistry and Physics*.—Alder, Pemb.; S. Bennett, Down.; Bentley, Emm.; W. V. Braddon, Trin.; W. P. S. Branson, Trin.; Brennan, Trin.; Brooke, Pemb.; Bull, B.A., Cai.; Burfield, non-coll.; Burnand, Jes.; Cheadle, Cai.; E. M. Clark, Trin.; Coleman, Trin.; J. G. Cooke, Sid. Suss.; Davies, Cai.; W. Evans, Cla.; Foster, King's; Fox, Emm.; Fraser, Jes.; Fryer, Chr.; Fuge, B.A., Sel.; Glenn, Pemb.; Greig, Jes.; Hawkins, Emm.; Hay, Cai.; Howitt, John.; Izard, Trin.; Killick, Down.; P. G. Lock, Cai.; McCaskie, Cai.; Martineau, Emm.; Marwell, Trin.; Mickelthwait, Trin.; Murison, B.A.; Trin.; Nixon, Cai.; Orme, Cai.; Paterson, Cai.; Pearson, Sid. Suss.; Philbrick, Trin.; Pitkin, Ayer's; Reynolds, Trin.; Roberts, Cla.; Ross, non-coll.; Rudman, King's; Saloman, Trin.; H.; Schreiner, Down.; R. E. Sedgwick, Cai.; Seyfang, Pet.; Sharples, Cai.; Shuffelbotham, Trin.; Style, Emm.; Susmann, Cai.; T. P. Thomas, Cai.; Tyler, John.; Walker, Cla.; Ware, Pemb.; D. P. Watson, Trin.; A. G. Wilson, Cai.; T. Wood, Cai.

**ST. JOHN'S COLLEGE.**—Mr. F. Villy, B.A., scholar of St. John's College, has been elected to the Hutchinson Studentship for Research in Pathology.

**APPOINTMENTS.**—The following appointments in the department of Natural Science and Medicine are announced: Mr. A. E. Shipley, Christ's, to be University Lecturer in Invertebrate Morphology; Mr. S. Ruhemann, Caius, to be University Lecturer in Organic Chemistry; Mr. J. J. Lister, St. John's, to be University Demonstrator of Comparative Anatomy.

#### UNIVERSITY OF LONDON.

**OPPOSITION TO THE NEW RECONSTRUCTION SCHEME.**—The London University Defence Committee, of which Mr. H. M. Bompas, Q.C., is Chairman, has issued an appeal to graduates of the University asking them to express an opinion, on a postcard, against the scheme of reconstruction proposed by the Royal Commission, and approved as to its general principles by the Senate and Convocation of the University. The main grounds of objection mentioned are: (1) that an Imperial examining board is desirable, and that (2) it is impracticable to blend satisfactorily an Imperial examining board with a local teaching university, but that (3) a separate local and teaching university would not necessarily be objectionable; (4) that the University of London is discharging its present functions in an eminently successful and satisfactory manner; and that (5) unnecessary change of a fundamental character is likely to be unjust to graduates, discouraging to those in course of graduation or contemplating matriculation, and generally prejudicial to the reputation and usefulness of the University. In support of the last objection it is boldly alleged that "graduates have a kind of vested interest in the reputation of the University." Upon the points mentioned under (1), (2), and (3) it is pointed out that three members of the first Commission and two of the second arrived at the opinion that it is impossible to combine in one university two functions so inconsistent as an Imperial examining and a local teaching university.

#### UNIVERSITY OF ABERDEEN.

**UNIVERSITY COURT.**—At a meeting of the Aberdeen University Court, held last week, Colonel Ramsay, of Barra, presiding, the reasons of dissent by Principal Sir William Geddes against the repeal of the ordinance fixing the site of the classes, were answered by Lord Provost Stewart, Dr. Angus Fraser, and Mr. C. B. Davidson, to whom the matter was remitted. Professor MacWilliam was granted leave of absence from the July professorial examination owing to ill-health. Professor J. T. Cash had consented to act as his substitute, and the Court agreed. The Court concurred in the view entertained by the Commissioners: "That the preliminary as well as all the other University examinations in each case be held at the seat of the University."

#### ROYAL COLLEGE OF SURGEONS OF ENGLAND.

The following gentlemen were, at the ordinary meeting of the Council on Thursday, June 14th, elected examiners for the ensuing year in the subjects indicated.

##### First Examination:

*Elementary Anatomy*: L. A. Dunn, M.B., B.Sc.Lond., F.R.C.S.Eng., Guy's Hospital; W. H. H. Jessop, M.B.Cantab., F.R.C.S.Eng., St. Bartholomew's Hospital; J. E. Lane, F.R.C.S.Eng., St. Mary's Hospital; H. F. Waterhouse, M.D., C.M.Edin., F.R.C.S.Eng., Charing Cross Hospital.

*Elementary Physiology*: J. R. Bradford, M.D., D.Sc.Lond., M.R.C.S.Eng., University College Hospital.

*Elementary Biology*: H. P. Dean, M.B., B.Sc.Lond., F.R.C.S.Eng., London Hospital; T. W. Shore, M.D., B.Sc.Lond., M.R.C.S.Eng., St. Bartholomew's Hospital.

##### Second Examination:

*Anatomy*: R. C. Lucas, M.B., B.Sc.Lond., F.R.C.S.Eng., Guy's Hospital; G. H. Makins, F.R.C.S.Eng., St. Thomas's Hospital; W. J. Walsham, F.R.C.S.Eng., St. Bartholomew's Hospital; A. H. Young, M.B., C.M.Edin., F.R.C.S.Eng., Owens College, Manchester.

*Physiology*: W. D. Halliburton, M.D., B.Sc.Lond., M.R.C.S.Eng., King's College Hospital; D.A. Power, M.B.Oxon., F.R.C.S.Eng., St. Bartholomew's; W. G. Spencer, M.B., M.Sc.Lond., F.R.C.S.Eng., Westminster Hospital.

##### First Professional Examination for the Fellowship:

*Anatomy*.—W. Anderson, F.R.C.S.Eng., St. Thomas's Hospital; W. F. Haslam, F.R.C.S.Eng., Mason College, Birmingham; W. H. A. Jacobson, M.B., M.Ch.Oxon., F.R.C.S.Eng., Guy's Hospital; C. B. Lockwood, F.R.C.S.Eng., St. Bartholomew's Hospital.

*Physiology*.—J. Barlow, F.R.C.S.Eng., St. Mungo's College, Glasgow; C. H. Golding-Bird, M.B.Lond., F.R.C.S.Eng., Guy's Hospital; B. T. Lowne, F.R.C.S.Eng., Middlesex Hospital; W. Stirling, M.D., C.M.Edin., Owens College, Manchester.

##### Final Examination:

*Midwifery*.—W. Duncan, M.D.Brux., M.R.C.P.Lond., F.R.C.S.Eng., Middlesex Hospital; M. Handfield-Jones, M.D.Lond., M.R.C.P.Lond., M.R.C.S. St. Mary's Hospital; G. E. Herman, M.B.Lond., F.R.C.P.Lond., F.R.C.S.Eng., London Hospital; A. J. McC. Routh, M.D.Lond., M.R.C.P.Lond., M.R.C.S.Eng., Charing Cross Hospital.

##### Diploma in Public Health:

Part I.—G. Turner, M.B.Cantab., M.R.C.S.Eng., L.R.C.P.Lond., Guy's Hospital.

Part II.—Sir G. Buchanan, M.D.Lond., F.R.C.P.Lond., London Fever Hospital.

And Mr. H. Morris, F.R.C.S.Eng., Middlesex Hospital, was elected a Member of the Court of Examiners for a period of five years.

The following gentlemen, having passed the necessary examinations, and having conformed to the By-laws and Regulations, have been admitted Fellows of the College:

Hamerton, G. A., M.D.Brux., L.R.C.P.Lond.	Sichel, G. T. S., L.R.C.P.Lond.
Clarke, E., M.D.Lond.	Henry, E., L.R.C.P.Lond.
Cadman, A. W., L.R.C.P.Lond.	Jones, G. D. E., L.R.C.P.Lond.
Howse, P. W. M., L.R.C.P.Lond.	Lister, T. D., L.R.C.P.Lond.
Green, C. D., M.D.Lond.	Christie, W. L., M.D.New Zealand
Griffith, J., L.R.C.P.Lond.	Beben, F., M.B.Cantab., L.R.C.P.Lond.
Westmacott, F. H., L.R.C.P.Lond.	Boyd, T. H., M.B.Melb.
Littler, R. M., L.R.C.P.Lond.	Buchanan, J. S., M.B.Glasg., L.R.C.P.Lond.
Mahood, A. E., M.B.R.U.I.	Wilkinson, G., M.B.Cantab., L.R.C.P.Lond.
Hall, J. M., M.D.R.U.I.	Grimsdale, H. B., M.B.Cantab., L.R.C.P.Lond.
Hogarth, R. G., L.R.C.P.Lond.	Leathes, J. B., M.B.Oxon., L.R.C.P.Lond.
Ouston, T. G., L.R.C.P.Lond.	Keith, A., M.D.Aberd.
Purvis, W. P., M.B.Lond., L.R.C.P.Lond.	Rutter, F. B., M.B.Durh., L.R.C.P.Lond.
Armstead, H. W., M.B.Lond., L.R.C.P.Lond.	Rigby, G. O., M.B.Melb.
Seven other candidates passed the examination, but not having yet complied with the by-laws, will receive their diplomas at future meetings of the Council, and twenty-three candidates were referred.	Barrington, F., M.B.Edin.

The following gentlemen having previously passed the necessary examinations, and having now attained the legal age of 25 years, were admitted Fellows of the College:

Adams, E. W., L.R.C.P.Lond.	Rutter, F. B., M.B.Durh., L.R.C.P.Lond.
Weir, A. N., L.R.C.P.Lond.	
The following gentleman having passed the necessary examinations was admitted a Member of the College:	
Delve, A., L.S.A., University College Hospital.	

The following gentlemen having passed the necessary examinations were admitted Licentiates in Dental Surgery:

Allworth, A. L., M.R.C.S.Eng., Guy's Hospital and National Dental Hospital	Nicholls, R. E., Charing Cross and National Dental Hospitals
Barrett, C., Charing Cross and National Dental Hospitals	Nichol, J. M., M.R.C.S.Eng., Yorkshire College, Leeds, and Dental Hospital
Britten, A., Mason College and Dental Hospital, Birmingham	Pare, J. W., M.D.Edin., Edinburgh University and Guy's Hospital
Constant, F. C., Guy's Hospital	Park, W. H., Charing Cross and Dental Hospitals
Davison, T. S., Guy's Hospital	Peake, G. A., M.R.C.S.Eng., Royal Infirmary, Dental Department, Bristol
Dodson, A. R., Charing Cross and Dental Hospitals	Pilcher, W. H., Guy's Hospital
Farmer, F. M., Middlesex and National Dental Hospitals	Prideaux, H. S., Charing Cross and Dental Hospitals
Flintan, F. R., Charing Cross and Dental Hospitals	Reeve, H. G. C., Middlesex and Dental Hospitals
Halliday, H. D., Middlesex and Dental Hospitals	Rispin, W., Charing Cross and Dental Hospitals
Harding, H. P., Royal Infirmary and Dental Hospital, Liverpool	Robinson, G. E. J. A., University and Dental Hospital, Dublin
Henry, P. F., Guy's Hospital	Sibson, A. B., Owens College and Victoria Dental Hospital, Manchester
Holden, A., Owens College and Victoria Dental Hospital, Manchester	Snappe, J., University College and Dental Hospital, Liverpool
Hills, W. E., Guy's Hospital	Soper, F. A., Middlesex and Dental Hospitals
Huckle, A. H. H., Guy's Hospital	Taylor, E. H. P., Middlesex and Dental Hospitals
Humphreys, H. F., Guy's and Dental Hospitals	Thornton, R., Guy's Hospital
Jones, G. W., Guy's Hospital	Trewby, H. W., Middlesex and Dental Hospitals
Lees, J. A., Owens College and Victoria Dental Hospital, Manchester	Tyrell, A. J., Guy's Hospital
McFarlane, J. S., Charing Cross and National Dental Hospitals	Van der Pant, H. W., Charing Cross and Dental Hospitals
Mackley, E. H. A., Middlesex and Dental Hospitals	Willis, G. N., Guy's Hospital
Miller, Q. H., Charing Cross and Dental Hospitals	Young, E. E., Charing Cross and Dental Hospitals
Moore, G. P., M.B.Dub., Trinity College, Dental Hospital, Dublin, and National Dental Hospital	
Musgrave, G. M., Guy's Hospital	

Twenty-four candidates were referred back to their professional studies.

## MEDICO-PARLIAMENTARY.

## HOUSE OF COMMONS.

*Charitable Trusts Acts Amendment Bill.*—This Bill was read a third time and passed.

*Cholera and Inoculation.*—Mr. H. FOWLER, in answer to Mr. S. SMITH, said it was true that M. Haffkine had, with the consent of the Government of India, inoculated a large number of persons in that country with a view to the prevention of cholera. He was not aware of the precise nature of the substance which he used, but, before he commenced operations, the details of his process were submitted to the medical advisers of the Government of India, who, being satisfied that it was absolutely harmless, and recognising the benefit which would accrue to India if the experiment succeeded, recommended that it should be allowed to be tried. No person, native or European, had been inoculated except with his consent or by his wish. The permission of the Secretary of State for India was neither given nor asked. M. Haffkine was a Russian subject, and was recommended as a distinguished man of science by the Russian Ambassador to the good offices of the Government. He had no information as to whether the Russian Government refused to allow him to inoculate people in Russia.

## OBITUARY.

SAMUEL WILLIAM NORTH, M.R.C.S.Eng., L.S.A.,

Medical Officer of Health, York.

It is with deep regret that we record the death of Mr. S. W. North, of York, which took place on June 16th. The deceased never seemed really well since he had an attack of influenza in the spring of 1891. His later illness dates from December, 1892, since which time he has been constantly under medical treatment. Mr. North, who was in his 69th year, was born at Birstwith, near Knaresborough, and went to York as a young man. He studied at the old York School of Medicine, which ceased to exist a number of years since. In his earlier days the system of apprenticeship to the practice of medicine was not extinct, and he was apprenticed to Dr. Gibson. Subsequently Mr. North established himself in practice in York, and in March, 1873, was appointed medical officer to the York Corporation, and on the Public Health Act coming into force he was appointed medical officer of health to the city of York, a post he held up to the time of his death. For some years the deceased was secretary to the York Medical Society, and was four times its president. Mr. North became L.S.A. in 1850, M.R.C.S.Eng. two years later, and L.M. in 1853. He was president of the Yorkshire Association of Medical Officers of Health, senior surgeon to the York Dispensary, surgeon to the York Union Workhouse and Fever Hospital, medical officer of health for the York Urban District, medical visitor to private lunatic asylums in the North Riding of Yorkshire, and in 1873-74 was president of the Yorkshire Branch of the British Medical Association. The funeral took place on June 19th.

The death is reported of Dr. ROBERT BOWES MALCOLM, of Edinburgh. He was educated at Edinburgh University, where he took the degree of M.D. in 1831; he became F.R.C.P. Edin. in 1840. He was a Fellow of the Royal Society of Edinburgh. The deceased, who had attained the ripe age of 86, retired from the active duties of his profession seven years ago owing to failing health. The funeral took place on June 9th.

**DEATHS IN THE PROFESSION ABROAD.**—Among the members of the medical profession in foreign countries who have recently died are Dr. William B. Dodson, of Philadelphia, the oldest graduate of Jefferson Medical College, aged 93; Dr. C. A. Mercier, of New Orleans, a physician distinguished for his literary gifts and attainments; and Dr. Samuel T. Hubbard, physician to the Presbyterian Hospital, New York, one of the original members of the New York Academy of Medicine (founded in 1847), and at different times secretary, trustee, and vice-president of that body, aged 85.

**THE LATE DR. JOLLY.**—The interment of the remains of the late Dr. Jolly, of Birmingham, took place at Kingswood Chapel, Hollywood, on June 13th, in the presence of a large gathering of professional and other friends.

PUBLIC HEALTH  
AND  
POOR-LAW MEDICAL SERVICES.

## HEALTH OF ENGLISH TOWNS.

In thirty-three of the largest English towns, including London, 6,068 births and 3,183 deaths were registered during the week ending Saturday, June 16th. The annual rate of mortality in these towns, which had declined from 17.7 to 16.9 per 1,000 in the preceding three weeks, further fell to 15.9 last week. The rates in the several towns ranged from 10.2 in Leicester and 10.6 in Derby to 20.5 in Nottingham and 22.1 in Wolverhampton. In the thirty-two provincial towns the mean death-rate was 15.8 per 1,000, and was slightly below the rate recorded in London, which was 16.0 per 1,000. The zymotic death-rate in the thirty-three towns averaged 2.2 per 1,000; in London the rate was equal to 2.8 per 1,000, while it averaged only 1.8 per 1,000 in the thirty-two provincial towns, and was highest in Birmingham, Liverpool, Nottingham and Salford. Measles caused a death-rate of 2.0 in West Ham and 2.8 in Nottingham; scarlet fever of 1.8 in Wolverhampton; and whooping-cough of 1.1 in Sunderland and 1.4 in Cardiff. The 60 deaths from diphtheria in the thirty-three towns included 43 in London, 4 in Liverpool, and 2 each in West Ham and in Manchester. Six fatal cases of small-pox were registered in Manchester and 5 in Birmingham, but not one in London or in any other of the thirty-three large towns. There were 204 small-pox patients under treatment in the Metropolitan Asylums Hospitals and in the Highgate Small-pox Hospital on Saturday last, June 16th, against 238, 244, and 227 at the end of the preceding three weeks; 40 new cases were admitted during the week, against 69, 58, and 42 in the preceding three weeks. The number of scarlet fever patients in the Metropolitan Asylums Hospitals and in the London Fever Hospital on Saturday last was 2,190, against 2,271, 2,377, and 2,232 at the end of the preceding three weeks; 238 new cases were admitted during the week, against 218 and 264 in the preceding two weeks.

## HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, June 16th, 874 births and 509 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 20.3 and 19.3 per 1,000 in the preceding two weeks, further declined to 17.9 last week, but exceeded by 2.0 per 1,000 the mean rate during the same period in the large English towns. Among these Scotch towns the death-rates ranged from 12.0 in Perth to 20.1 in Aberdeen. The zymotic death-rate in these towns averaged 2.2 per 1,000, the highest rates being recorded in Aberdeen and Leith. The 256 deaths registered in Glasgow included 13 from whooping-cough, 7 from measles, and 2 from diphtheria. Five fatal cases of small-pox were recorded in Leith, 1 in Dundee, and 1 in Aberdeen. Four deaths from diphtheria occurred in Edinburgh.

## THE VENTILATION OF SEWERS.

A SHORT article which appeared in the BRITISH MEDICAL JOURNAL of May 19th, on this subject has brought upon us a certain amount of correspondence, and among other communications one from Huddersfield, describing Riley's patent trap and system of sewer ventilation. This is an arrangement by which every fall spout is carried upwards above the level of the building and a water-sealed trap is interposed between the spout and the eaves trough which receives the water from the roof.

The intention is that the fall spouts, being directly connected with the drain, shall serve as ventilators to it, and that the trap shall prevent any sewer gases from escaping under the troughing, or entering beneath the slates or tiles. This is interesting as showing how many minds are working in the direction of sewer ventilation, but we need hardly point out how very different a proposal this is from that of using the soil pipe as a ventilator. If the soil pipe is to be used for sewer ventilation it is essential that the other drains of the house must either be a separate system, cut off from the sewer by an intercepting trap, or must enter the soil drain through such a trap. According to Riley's system, however, sewer air would be carried to every point where fall spouts go, and although, so long as the trap water in the traps does not dry up, the foul air might not escape under the eaves, every joint in the spouting which might leak would become a point of danger.

The risk attending every attempt to ventilate a sewer by means of a pipe carried up the side of a house is that the joints may be deficient. Even in the case of a single soil pipe being so used this is a difficulty; how much more so if every fall spout is to be made use of. Moreover, it must be borne in mind that even in our climate the occurrence of two or three weeks of dry weather is not unknown, and in that time even if the water in the trap did not dry up, it would become seriously contaminated. For these reasons we cannot recommend the adoption of this device. Whatever pipe is used to ventilate a sewer must be kept air tight, and whatever trap is used to keep sewer gases out of a house should, if possible, be charged by some source besides roof water, so that its contents may be changed even in dry weather.

## WIMBLEDON HOSPITAL PROPOSALS: A DEADLOCK.

THE proposals of the Wimbledon Local Board to erect permanent hospital accommodation for infectious diseases out of borrowed money has come to a strange and unsatisfactory conclusion. The scheme was to provide a hospital at a cost of some £8,000, small-pox being excluded. Just as the whole affair had the appearance of finality about it, a member of the local board very properly took exception to the plan which his colleagues were about to adopt in regard of the isolation of small-pox cases—namely, to use an iron structure only some 100 feet from the permanent hospital site. In response to a request from headquarters for a map of the site and its surroundings in relation to adjacent houses, the

Wimbledon Board, according to the local press, were going to content themselves with saying nothing about the iron structure. To this Mr. Neller objected, and on his writing to the Local Government Board as to the small-pox building proposed to be used, that Board, of course, desired to know the truth of the allegation. The columns of the *Surrey Independent* supply the last chapter to the story. On learning that the Local Government Board could not sanction a loan for a scheme which would embody the use for small-pox of the iron building in question, the Sanitary Committee have reported in favour of taking no further action under loan sanction, and their recommendation has been adopted. With the evidence which is being daily chronicled to the effect that small-pox when isolated in proximity to other diseases tends largely to spread to the sufferers from those other diseases, it is difficult to see how the local board could have contemplated the use of a building for small-pox purposes so close to a hospital for other infections. Clearly, the central board could not sanction such a scheme. Dr. Seaton is reported to have said that no small-pox hospital should be erected within half a mile of one for other diseases. We would certainly say that it should not be erected within that distance from any large aggregation of people, even in health. At least this is the lesson which we have been learning these two years past. Under these circumstances we are sorry to see that the Wimbledon authority have not agreed to meet the Croydon authorities in an attempt to find a suitable site for small-pox hospital purposes.

#### PROPOSED NEW INFECTIOUS HOSPITAL FOR BRIGHTON.

SEVEN years ago a temporary sanatorium for the treatment and isolation of infectious diseases was erected at Brighton to meet a pressing emergency. The necessity for a permanent building is now admitted, and at a recent meeting of the Town Council the Sanitary Committee submitted a scheme for the enlargement of the present site by the purchase of ten acres of ground. Unfortunately, the Council did not at once accept this very reasonable report, but we trust that the delay which has thus been caused may not be of long duration. The possession of an adequate infectious hospital accommodation is an essential part of the provision against infectious disease which every town ought to make; in no town does the urgency for such provision appear greater than in one to which invalids resort in search of health.

#### SANITARY CONDITION OF SUTHERLANDSHIRE.

THE annual report of the medical officer of health for Sutherlandshire states that in some points the condition of that county is behind many others. He writes that no isolation hospital of any kind exists in the county; there is no place where the county council could invite any medical man to place his patients if he thought it right to isolate them. Only Helmsdale is able to boast of having a scavenger. The report states that last year there was a large increase in the number of cases of infectious disease, and in the opinion of the medical officer the death-rate is far too high for a wholly rural county.

#### SMALL-POX IN SCOTLAND.

DURING last week 25 new cases of small-pox were reported in Edinburgh, against 17 in the previous week. There were no deaths. Since June 16th at least 28 more cases have been notified. There are now 85 patients in the Small-Pox Hospital, 72 adults and 13 children.

At a meeting of the Public Health Committee of the Edinburgh Town Council, held on June 19th, it was reported that an application had been made to Her Majesty's Board of Works for permission to erect a temporary small-pox hospital or hospitals in the Queen's Park. Meanwhile temporary wards are being built and furnished in one of the City public playgrounds.

The first Edinburgh case of small-pox, the starting point of the present epidemic, occurred on January 17th, and the infection in this case, as in several subsequent cases, undoubtedly came from Leith.

In Leith last week 20 new cases were reported and 5 deaths. We have no report subsequent to mid-day of Saturday.

A case of small-pox is reported from East Lothian.

In addition to the small-pox epidemic Edinburgh appears to be threatened with an outbreak of scarlet fever, 51 cases having been reported last week.

A motion has been brought before the Town Council of Leith, and withdrawn in connection with the health officering of the borough. The motion had for its object the securing of the whole time of the health officer; but, far from meeting with support it fell very flat, and its proposer voluntarily withdrew it. Leith has a population of some 70,000 persons, and now that compulsory notification is in force there would be a distinct gain in having as health officer a medical man free from the trammels of private practice. Such an officer would secure in larger degree than is at present possible the confidence of his professional brethren. Besides, there are other public duties which might well be entrusted to him as they fell vacant, and it would be feasible to obtain efficient services for, say, a salary of £500 per annum. Such a sum would not be extravagant.

#### SMALL-POX SPREAD BY A BOOK.

In his annual report for 1893, Dr. McNicoll, health officer of St. Helen's, has drawn attention to a case showing the extreme diffusibility of small-pox. A building society's book was kept under the pillow of a small-pox patient until his death. It was then taken in charge by his son, who lived in another part of the town, and was kept without disinfection for four weeks in his house. Being a saleable article, it was taken and offered to an artisan, who kept it overnight. While there this artisan's wife perused the book, with a result that, fourteen days later, she developed the rash of small-pox.

**MEDICAL MAGISTRATE.**—Dr. James Davison, of Ballinakill, has, on the recommendation of Viscount de Vesce, been appointed to the Commission of the Peace for the Queen's County.

## INDIA AND THE COLONIES.

### INDIA.

**WATERBORNE TYPHOID.**—The *Times of India* reports that there has been an outbreak of typhoid fever among the garrison at Nowshera, seven cases altogether having ended fatally. On the cause of the epidemic being inquired into, it was found that out of ten wells from which water was being taken for drinking purposes, seven were more or less contaminated with impurities. These were forthwith shut down, and since then there has been a marked amelioration in the condition of the troops, pointing to the water being the source of the infection.

### NATAL.

**LEGISLATION FOR INEBRIATES.**—A Bill, drafted on the lines of our Inebriates Acts, 1879 and 1888, has just passed a first reading in the Legislative Assembly of Natal. In this measure provisions are incorporated for the carrying out of the proposals of our Association Inebriates Legislation Committee. *Inter alia*, the Governor and Council have power to establish and maintain a retreat at the public cost; any judge or resident magistrate can commit to the retreat, for a period of not less than six months or more than two years, any person found to be an inebriate according to the terms of the Act, on application from a relative or friend of the alleged inebriate, or from a Natal constable. In addition, of his own motion, a resident magistrate can so commit to a retreat anyone who may have been convicted of drunkenness several times before him, whom he may deem to be an inebriate as defined by the Act. Persons convicted of drunkenness and sentenced to imprisonment may also be transferred to a retreat, on a certificate from the Colonial Secretary after receiving medical evidence that the convicted person is a proper subject for treatment in an institution for inebriates. In the case of voluntary applicants a declaration before one magistrate is valid.

## MEDICAL NEWS.

THE Goldsmiths' Company have made a further donation of £100 to the Royal Hospital for Incurables.

THE University of Halle will celebrate the second centenary of its foundation on August 2nd, 3rd, and 4th of the present year.

**SUCCESSFUL VACCINATIONS.**—Mr. Henry Caudwell, Public Vaccinator for the Nos. 1 and 2 Districts of the Woodstock Union has been awarded the grant for successful vaccination.

THE Accademia dei Lincei of Rome has divided the prize of £400 offered by the King of Italy between Professor Guido Tizzoni, of Bologna, and Professor Luciani, of Rome, for their researches in the domains of experimental pathology and physiology.

WE are glad to hear that Sir Richard Quain and other leading members of the profession are making an appeal to the Government for a pension for the widow of Dr. A. H. Hassall, whose services in the prevention of adulteration and as the founder of the National Hospital for Consumption at Ventnor were so conspicuous and valuable.

**GLANDERS.**—At the Westminster Police Court on June 12th the Shrewsbury and Talbot Cab Company were summoned at the instance of the London County Council for not giving timely notice of an outbreak among their stud of glanders and farcy, and were fined £40, half the penalty to go to the County Council.

ON behalf of the building fund of the Dental Hospital of London, Leicester Square, an exhibition of pictures by prominent artists is to be held from June 25th to Monday, July 2nd, in the Royal Institute of Painters in Water Colours, Princes Hall, Piccadilly. Many well-known vocalists and musicians will appear during the week.

**DONATIONS AND BEQUESTS.**—The Goldsmiths' Company have made a grant of £100 to the Royal Westminster Ophthalmic Hospital. An anonymous donor has contributed £2,000 for the cost of one house at the Royal National Hospital for Consumption, Ventnor, in memory of two daughters who died from consumption. The late Miss Ann Green Gertrude Rolleston has by her will bequeathed, among other charitable gifts, £1,000 each to the Royal Sea Bathing Infirmary at Margate, the General Hospital (Birmingham), St. Marylebone Home for Incurables, the Hospital for Diseases of the Throat (Golden Square), and the Samaritan Free Hospital for Women and Children (Marylebone Road), and £500 to the Birmingham and Midland Eye Hospital.



**PROPOSED FLOATING HOSPITAL ON THE MEDWAY.**—An inquiry was held by Dr. H. T. Bulstrode, one of the medical inspectors of the Local Government Board, at Rochester, on June 13th, with regard to the application of the Rochester Town Council (the port sanitary authority for the river Medway) for authority to raise a loan to purchase a ship to serve as a hospital for the isolation of cases of cholera and other infectious diseases occurring in shipping. The inspector will report to the Board.

**THE Chapter of the Grand Priory of the Order of the Hospital of St. John of Jerusalem in England** has, with the approval of His Royal Highness, the Prince of Wales, Grand Prior of the Order, selected the undermentioned as Honorary Associates or Honorary Serving Brothers of the Order, in recognition of services rendered to the Order in connection with its ambulance department, the St. John Ambulance Association, and the selection has received the approval and sanction of Her Majesty the Queen, the Sovereign Head and Patron of the Order: *Honorary Associates:* Fleming Mant Sandwith, M.D., Cairo; Matthew Baines, M.D., London; William John Stephens, L.R.C.P., and Henry Algernon Hodson, L.R.C.P., Brighton Centre, St. John Ambulance Association; Edmond West Symes, M.D., Halifax; Henry Hammond Smith, M.R.C.S., Stourbridge; Robert John Collie, M.D., Metropolitan; William Duncan, L.R.C.P., Bristol; George Middlemiss, M.D., Darlington; Harry Pennington Hallows, M.D., Doncaster; Mrs. Walter Rowley, Honorary Secretary Ladies' Classes, Leeds Centre. *Honorary Serving Brothers:* Henry Charles Dring, St. John Ambulance Brigade, Metropolitan Corps; John Harrison Buckley, St. John Ambulance Brigade, Leicester Corps.

**"HARMLESS" MEDICINES.**—An inquest held recently at Darlington upon a child 4 years old illustrated in a very shocking manner the fallacy of regarding medicinal preparations containing opium or morphine as being harmless. The mother of the child procured from a chemist some cough medicine, of which she administered a dose to the child, who, finding it agreeable, took from the bottle a further quantity equal to four or five additional doses. The consequence was the child died of morphine poisoning, and, as the bottle of cough mixture was not labelled poison, some question arose as to whether proper precautions had been taken by the chemist who sold it. A juror expressed the opinion that all the labels in the world would not have stopped the child from taking too large a dose; but the warning of a poison label might have induced the child's mother to keep the bottle out of his reach, and it would certainly have saved the chemist from any suspicion of negligence. In giving the usual verdict of death by misadventure, the jury very properly desired a recommendation to be made to all chemists that no mixture containing morphine should be sold without a label setting forth the fact being attached to the bottle. The duty of observing that precaution is incumbent on every chemist, and its neglect is a punishable offence, which ought more frequently to engage the attention of the police authorities than it does.

**AMERICAN JOTTINGS.**—The widow of the late Dr. Hayes Agnew has given 25,000 dollars to the University Hospital of the University of Pennsylvania in honour of her late husband. —According to the *Boston Medical and Surgical Journal*, a man was shot in the chest recently at Erie, Pennsylvania, and lived seventy hours after the infliction of the wound. The *post-mortem* examination showed that the bullet had passed through the left ventricle. —At the request of the Senators and Representatives from Louisiana, the United States Secretary of War has given New Orleans and the State of Louisiana the right to use the Government military reservation at Fort Pike as a hospital for lepers. —The following notice has been issued by an American Medical Society to its members: "Members are respectfully reminded that in the discussion of papers each speaker is limited to five minutes, and will confer a favour by sending their names to the President." The meaning is so excellent as to more than atone for the slight deviation from strict grammatical propriety. —The practice of the Chicago hospitals of giving indiscriminate surgical aid has led to such serious abuses that the La Salle County Medical Society lately passed resolutions calling the attention of the authorities of the

hospitals to the existing abuse, and requesting that no patient be admitted without a statement from some local practitioner of good repute, setting forth his financial condition, and if it shall appear that he is able to pay a legitimate fee that he be required to do so.—Free and independent citizens in some parts of the United States seem to be inclined to deal strenuously with the small-pox question. According to the *Chicago Medical Standard*, a negro suffering from that disease was not long ago lynched near El Dorado, Arkansas, as a prophylactic measure. The same paper states that at Chicago a policeman asked for a permit to shoot a delirious small-pox patient, apparently supposing that the principle applicable to mad dogs was the right way of dealing with the subjects of variola. On the other hand, antivaccinationists at New York have been urging forcible resistance to vaccination. In this they are supported by a recent judicial decision that the compulsory vaccination ordinance (under which more than 5,000 persons were not long ago vaccinated in one quarter of Brooklyn in a single evening) is unconstitutional.

### MEDICAL VACANCIES.

The following vacancies are announced:

- BALROTHERY UNION.**—Medical Officer to the Workhouse. Salary, £90 per annum, together with £10 yearly as Consulting Medical Officer of the Union. Applications to Mr. James Stack, Clerk of Union. Election on June 27th.
- BRIGHTON, HOVE, AND PRESTON DISPENSARY.**—House-Surgeon for the parent establishment. Salary, £140 per annum, with furnished apartments, coal, gas, and attendance, but no board. Applications and testimonials to J. W. Stride, Assistant Secretary, before July 10th.
- CHELTENHAM GENERAL HOSPITAL.**—Junior House-Surgeon, unmarried, doubly qualified. Salary, £40 per annum, with board and apartments. Applications to Mr. F. W. Hayward Butt, Honorary Secretary and Treasurer, by June 23rd.
- COUNTY ASYLUM, Rainhill, near Liverpool.**—Assistant Medical Officer, to act as *Locum Tenens* for about two months. Salary, £22 2s. per week, with board, lodging, etc. Applications to the Medical Superintendent.
- COUNTY ASYLUM, Whittingham, Preston.**—Assistant Medical Officer. Salary, £100 a year, with apartments, board, and washing. Applications and testimonials to the Superintendent before June 27th.
- CROYDON GENERAL HOSPITAL.**—House-Surgeon. Appointment for two years. Salary, £100 per annum, increasing £10 per annum up to £120. Applications and testimonials to the Secretary, J. Jones, by July 8th.
- DARENTH SCHOOLS FOR IMBECILES, near Dartford, Kent.**—First Assistant Medical Officer, doubly qualified. Salary, £160 per annum, rising £20 annually to £200, with board, furnished attendance, and washing. Applications, on forms to be obtained at the office of the Board, Norfolk House, Norfolk Street, Strand, W.C., to T. Duncombe Mann, Clerk to the Board, at the offices, by June 23rd.
- EDENDERRY UNION, EDENDERRY DISPENSARY.**—Medical Officer. Salary, £120 per annum, with £25 yearly as Medical Officer of Health, together with vaccination and registration fees. Applications to G. C. Tyrrell, J.P., Honorary Secretary. Election on June 26th.
- GENERAL INFIRMARY, GLOUCESTER AND GLOUCESTERSHIRE EYE INFIRMARY.**—Assistant House-Surgeon. Appointment for six months, eligible for re-election. No salary, but board, residence, and washing provided. Applications to H. P. Pike, Secretary, by June 27th.
- METROPOLITAN ASYLUMS BOARD WESTERN HOSPITAL FOR FEVER PATIENTS, Seagrave Road, Fulham, S.W.**—Assistant Medical Officer. Salary, £15 per month, with board, lodging, attendance, and washing. Forms of application may be obtained at the offices of the Board, Norfolk House, Norfolk Street, Strand, W.C., which must be accompanied by testimonials, and sent to T. Duncombe Mann, Clerk to the Board, on or before Thursday, June 28th.
- NEWPORT AND MONMOUTHSHIRE INFIRMARY, Newport, Mon.**—House-Surgeon, doubly qualified. Salary, £100 per annum, with board and residence. Applications to the Secretary by June 23rd.
- ROYAL ALBERT EDWARD INFIRMARY, Wigan.**—Junior House-Surgeon. Salary, £80 per annum, with apartments, rations, and washing. Applications and testimonials to Will. Taberner, General Superintendent and Secretary, before June 27th.
- ROYAL LONDON OPHTHALMIC HOSPITAL, Moorfields.**—Curator, non-resident. Appointment for one year; renewable. Salary, £120 per annum. Applications to the Secretary by June 30th.
- ST. LUKE'S HOSPITAL, London, E.C.**—Clinical Assistant. Appointment for six months. Board and residence provided. Applications to Percy de Bathe, M.A., Secretary.
- SALTERS' COMPANY.**—Research Fellowship in Experimental Pharmacology. Annual value of £100, and is tenable in the Medical School of St. Thomas's Hospital. Applications to the Secretary to the Medical School, St. Thomas's Hospital, S.E., before June 30th.
- SALTERS' COMPANY.**—Research Fellowship in Chemistry. Annual value of £100, tenable in the Research Laboratory of the Pharmaceutical Society. Applications to Professor Dunstan, F.R.S., Director of the Research Laboratory of the Pharmaceutical Society, 17, Bloomsbury Square, W.C., before June 30th.

SUNDERLAND BOROUGH LUNATIC ASYLUM.—Medical Superintendent, doubly qualified. Salary, £350 per annum, with furnished house, board for self and wife (if married), washing, coals, light, two servants, and use of garden. Applications, endorsed "Medical Superintendent," to Fras. M. Bowey, Clerk to the Visiting Committee, Town Hall, Sunderland, by June 30th.

UNIVERSITY COLLEGE, DUNDEE, St. Andrews University.—Professor of Chemistry. Applications to R. N. Kerr, Secretary, by July 7th.

UNIVERSITY OF ABERDEEN.—Examiners in Medicine. Applications and testimonials to Robert Walker, Secretary of the University Court, on or before July 4th.

UNIVERSITY OF EDINBURGH.—Chemical Assistant to Professor of Physiology. Salary, £180 per annum. Applications to the Secretary of the University Court before July 1st.

WESTMINSTER HOSPITAL MEDICAL SCHOOL.—Demonstrator of Anatomy. Applications to Mr. Spencer, the Dean, before July 10th.

WEST NORFOLK HOSPITAL, King's Lynn.—House-Surgeon, who will also act as Secretary to the Weekly Board. Salary, £80, rising £10 annually to £100, with board, residence, and washing. Applications and copies of testimonials to S. R. Lister, Secretary, by July 7th.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL, Wolverhampton.—Resident Assistant. Appointment for six months. Applications, inscribed "Application for Resident Assistant," to the Chairman of the Medical Committee by June 25th.

### MEDICAL APPOINTMENTS.

ADAMS, A. M., L.F.P.S.Glasg., L.R.C.P.Lond., appointed Medical Officer to the Lanark Poorhouse.

ARLIDGE, Mr. J., appointed Honorary Assistant Ophthalmic Surgeon to the North Staffordshire Infirmary.

ATKINSON, G. C., M.R.C.S.Eng., appointed Medical Officer and Public Vaccinator for the Long Clawson District of the Melton Union, *vice* Dr. Swain, resigned.

BULLOCK, Charles Penny, M.A.Oxon., L.R.C.P.Lond., M.R.C.S.Eng., appointed Deputy Coroner for Oswestry.

COWAN, Mr. John J., appointed Medical Officer of the Knightwick District of the Martley Union.

DALZIEL, T. Kennedy, M.B., C.M.Edin., F.F.P.S.Glasg., appointed Honorary Surgeon to the Glasgow Royal Hospital for Sick Children.

DEANS, William, M.B., C.M.Aberd., reappointed Medical Officer of Health to the Ramsbottom Local Board.

DICKSON, J. W., M.B., B.C.Cantab., appointed Anaesthetist to the Grosvenor Hospital for Women and Children, Vincent Square, S.W.

EGLINTON, George W., L.R.C.P.Edin., L.F.P.S.Glasg., reappointed Medical Officer of Health to the Street Local Board.

GALE, Arthur Knight, L.R.C.P.Lond., M.R.C.S.Eng., reappointed Medical Officer of Health to the Ecclesall Bierlow Rural Sanitary Authority.

HAMILTON, W. Crosbie, M.B., C.M.Edin., appointed Junior House-Surgeon to the Blackburn and East Lancashire Infirmary.

HOLT, H. Mainwaring, M.R.C.S., L.S.A., D.P.H., reappointed Medical Officer of Health to the Malton Urban Sanitary Authority.

HOPSON, Montagu F., L.D.S.Eng., appointed Dental Surgeon to the Hampstead Hospital.

KENDALL, N. F., M.R.C.S.Eng., L.R.C.P.Lond., appointed Assistant Medical Officer of the Workhouse and Infirmary of the Woolwich Union.

KEYWORTH, Arthur F., M.R.C.S., L.R.C.P.I., appointed Certifying Factory Surgeon for the Marple District, *vice* J. Johnson Bailey, M.D.Giessen, F.R.C.S.Edin., resigned.

LIVESAY, A. W. B., M.B., C.M.Edin., appointed House-Surgeon to the Royal Victoria Hospital, Bournemouth, *vice* G. G. Clarke, M.R.C.S., resigned.

MCALLUM, S. G., M.D.Edin., C.M., appointed Medical Officer for the Ford District of the Glendale Union.

MALONEY, Mr. P. J., appointed Medical Officer for the Wickham District of the Fareham Union.

MATTHEWS, Mr. S. P., appointed Medical Officer for the Southwark District of the Fareham Union.

MAUDE, Charles E., M.B., C.M.Edin., appointed Senior House-Surgeon to the Blackburn and East Lancashire Infirmary, *vice* W. Briant, M.B., C.M., resigned.

NICOLL, J. M., M.B., C.M.Edin., appointed Medical Officer of Health for the Borough of Jarrow, and Medical Superintendent to the Borough Hospital.

PARSEY, Mr. E. W., appointed Assistant Medical Officer of the Workhouse and Infirmary of the Parish of Paddington.

PERCIVAL, T., M.R.C.S.Eng., appointed Medical Officer for the Knottingley District of the Pontefract Union.

PHILLIPOTS, Herbert, M.D., L.R.C.P.Lond., M.R.C.S.Eng., appointed Surgeon to the Ealing Cottage Hospital.

POTTER, James C., L.R.C.P., L.R.C.S.Eng., appointed Medical Officer of the No. 7 District of the Tendring Union.

POWELL, A. F. M., M.B., C.M.Edin., appointed Medical Officer and Public Vaccinator to the No. 1 District of the Parish of Sedgley, in the Dudley Union, *vice* Dr. Ballenden, resigned.

ROBERTSON, D. W., L.R.C.P.Edin., L.M., M.R.C.S.Eng., reappointed Medical Officer of Health to the Pickering Local Board.

SEEN, A. W., M.D., B.S.Lond., F.R.C.S.Eng., appointed Senior Resident Medical Officer to the Glamorgan and Monmouthshire Infirmary, Cardiff.

STOREY, J. A., L.R.C.P.Edin. and L.R.C.S.I., appointed Medical Officer for the Dunstable and Tattenhoe Districts of the Luton Union, and Medical Officer of Health to the Dunstable Town Council, *vice* E. T. Thompson, resigned.

TOOGOOD, Frederick S., M.D.Lond., M.R.C.S.Eng., appointed Medical Superintendent of the Infirmary of the Lewisham Union.

WEBB, William Henry, M.D.Durh., L.R.C.P.Lond., M.R.C.S.Eng., appointed Medical Officer of Health to the Kingsbridge Rural Sanitary Authority.

WELDON, W. Jephson, M.B.Dub., M.Ch., appointed Medical Officer to the Workhouse of the Gorey Union.

### DIARY FOR NEXT WEEK.

#### MONDAY.

LONDON POST-GRADUATE COURSE, Bacteriological Laboratory, King's College, W.C., 3 to 5 P.M.—Lecture. Practical Work: Erysipelas and Suppuration. Cultivations of Streptococci. London Throat Hospital, Great Portland Street, 8 P.M.—Mr. George Stoker: Impaired Movements of the Vocal Cords.

#### TUESDAY.

LONDON POST-GRADUATE COURSE, Bethlem Royal Hospital, 2 P.M.—Dr. Corner: Gout, etc.

THE CLINICAL MUSEUM, 211, Great Portland Street.—Open at 2, Lecture at 4.

ROYAL COLLEGE OF PHYSICIANS OF LONDON, 5 P.M.—Dr. Pavy: The Croonian Lectures on a New Departure in connection with Diabetes. Lecture III.

#### WEDNESDAY.

POST-GRADUATE LECTURES, Metropolitan Hospital, N.E., 5 P.M.—Mr. Wallis: Some Diseases of the Testis and Scrotum.

POST-GRADUATE COURSE, West London Hospital, Hammersmith Road, W., 5 P.M. Mr. Paget: Surgical Cases.

LONDON POST-GRADUATE COURSE, Hospital for Diseases of the Skin, Blackfriars, 1 P.M.—Dr. Payne: Affections produced by Animal Parasites.

#### THURSDAY.

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

ROYAL COLLEGE OF PHYSICIANS OF LONDON, 5 P.M.—Dr. Pavy: The Croonian Lectures on a New Departure in connection with Diabetes. Lecture IV.

#### 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 3s. 6d., which sum should be forwarded in post-office order or stamps with the notice not later than Wednesday morning, in order to insure insertion in the current issue.*

#### BIRTHS.

BRYDEN.—On June 15th, at 21, Harmer Street, Milton-next-Gravesend, the wife of Richard J. Bryden, M.R.C.S.Eng., L.S.A.Lond., of a daughter.

LAWSON.—At Jaminaville Resolis, Ross-shire, N.B., on the 14th inst., the wife of L. Gordon Lawson, L.R.C.P.Edin., L.R.C.S.Edin., of a daughter.

MANN.—On 15th inst., at 19, Newgate Street, Chester, the wife of Alfred Mann, M.D., of a son.

SANDWITH.—On the 18th inst., at Cairo, the wife of Dr. F. M. Sandwith, of a son.

WHITTINGDALE.—June 14th, at Brecon House, Sherborne, Dorset, the wife of J. F. L. Whittingdale, B.A., M.B.Cantab., M.R.C.S., of a son.

#### MARRIAGES.

HARDING.—HAWKINS.—At East Finchley Congregational Church, by the Rev. L. G. Hassé, Moravian Minister, J. A. Harding, L.R.C.P., M.R.C.S., L.S.A., to Elizabeth Phoebe, elder daughter of C. H. Hawkins, Esq., of Harwell House, Fortis Green, N.

ROLLESTON—OGILVY.—June 18th, at Christ Church, Lancaster Gate, W., by the Rev. Hugh Hammer, B.A., Humphry Davy Rolleston, M.D., F.R.C.P., Fellow of St. John's College, Cambridge, eldest son of the late Professor Rolleston, M.D., F.R.S., of Oxford, to Lisette Ella, daughter of F. M. Ogilvy, Esq., of 62, Queen's Gardens, Hyde Park, W.

SANKEY—MÉVILLE.—On the 12th inst., at 'All Soul's, South Hampstead, by the Rev. Richard King and the Rev. Canon Floyd, Julius Ivor Sankey, M.R.C.S., L.R.C.P. etc., of Brencley, Kent, second son of the late George Sankey, M.R.C.S., L.S.A., of Maidstone, to Violet, youngest daughter of Frederic L. Méville, of 36, Albion Road, South Hampstead.

#### DEATH.

WILSON.—On June 7th, at Ashville, Mid-Calder, Edinburgh, Alexander Wilson, M.A., M.D., aged 45.

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

- CANCER, Brompton (Free).** *Hours of Attendance.*—Daily, 2. *Operation Days.*—Tu. S., 2.
- CENTRAL LONDON OPHTHALMIC.** *Operation Days.*—Daily, 2.
- CHARING CROSS.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M., 1.30; Dental, M. W. F., 9; Throat and Ear, F., 9.30. *Operation Days.*—W. Th. F., 3.
- CHELSEA HOSPITAL FOR WOMEN.** *Hours of Attendance.*—Daily, 1.30. *Operation Days.*—M. Th., 2.
- EAST LONDON HOSPITAL FOR CHILDREN.** *Operation Day.*—F., 2.
- GREAT NORTHERN CENTRAL.** *Hours of Attendance.*—Medical and Surgical, M. Tu. W. Th. F., 2.30; Obstetric, W., 2.30; Eye, M. Th., 2.30; Ear, Tu. F., 2.30; Diseases of the Skin, W., 2.30; Diseases of the Throat, Th., 2.30; Dental Cases, W., 2. *Operation Day.*—W., 2.
- GUY'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu., 1; Skin, Tu., 1; Dental, daily, 9; Throat, F., 1. *Operation Days.*—(Ophthalmic), M. Th., 1.30; Tu. F., 1.30.
- HOSPITAL FOR WOMEN, Soho.** *Hours of Attendance.*—Daily, 10. *Operation Days.*—M. Th., 2.
- KING'S COLLEGE.** *Hours of Attendance.*—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, daily, 1.30; o.p., Tu. W. F. S., 1.30; Eye, M. Th., 1.30; Ophthalmic Department, W., 2; Ear, Th., 2; Skin, F., 1.30; Throat, F., 1.30; Dental, Tu. Th., 9.30. *Operation Days.*—M. F. S., 2.
- LONDON.** *Hours of Attendance.*—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p., W. S., 1.30; Eye, Tu. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9. *Operation Days.*—M. Tu. W. Th. S., 2.
- LONDON TEMPERANCE HOSPITAL.** *Hours of Attendance.*—Medical, M. Tu. F., 2; Surgical, M. Th., 2. *Operation Days.*—M. Th., 4.30.
- METROPOLITAN.** *Hours of Attendance.*—Medical and Surgical, daily, 9; Obstetric, W., 2. *Operation Day.*—F., 9.
- MIDDLESEX.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, M. Th., 1.30; o.p., M. F., 9; W., 1.30; Eye, Tu. F., 9; Ear and Throat, Tu., 9; Skin, Tu., 4, Th., 9.30; Dental, M. W. F., 9.30. *Operation Days.*—W., 1.30, S., 2; (Obstetrical), Th., 2.
- NATIONAL ORTHOPÆDIC.** *Hours of Attendance.*—M. Tu. Th. F., 2. *Operation Day.*—W., 10.
- NORTH-WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, F., 2; Dental, F., 9. *Operation Day.*—Th., 2.30.
- ROYAL EYE HOSPITAL, Southwark.** *Hours of Attendance.*—Daily, 2. *Operation Days.*—Daily.
- ROYAL FREE.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Dental, Th., 9. *Operation Days.*—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.
- ROYAL LONDON OPHTHALMIC.** *Hours of Attendance.*—Daily, 9. *Operation Days.*—Daily, 10.
- ROYAL ORTHOPÆDIC.** *Hours of Attendance.*—Daily, 1. *Operation Day.*—M., 2.
- ROYAL WESTMINSTER OPHTHALMIC.** *Hours of Attendance.*—Daily, 1. *Operation Days.*—Daily.
- ST. BARTHOLOMEW'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, W. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopædic, M., 2.30; Dental, Tu. F., 9. *Operation Days.*—M. Tu. W. S., 1.30; (Ophthalmic), Tu. Th., 2.
- ST. GEORGE'S.** *Hours of Attendance.*—Medical and Surgical, M. Tu. F. S., 12; Obstetric, Th., 2; o.p., Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopædic, W., 2; Dental, Tu. S., 9. *Operation Days.*—Th., 1.
- ST. MARK'S.** *Hours of Attendance.*—Fistula and Diseases of the Rectum, males, S., 3; females, W., 9.45. *Operation Days.*—M., 2, Tu. 2.30.
- ST. MARY'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.45; o.p., 1.30; Obstetric, Tu. F., 1.45; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopædic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electro-therapeutics, Tu. F., 2; Dental, W. S., 9.30; Consultations, M., 2.30. *Operation Days.*—Tu., 1.30; (Orthopædic), W., 11; (Ophthalmic), F., 9.
- ST. PETER'S.** *Hours of Attendance.*—M., 2 and 5, Tu., 2, W., 5, Th., 2, F. (Women and Children), 2, S., 4. *Operation Days.*—W. and F., 2.
- ST. THOMAS'S.** *Hours of Attendance.*—Medical and Surgical, daily, exc. W. and S., 2; Obstetric, Tu. F., 2; o.p., W. S., 1.30; Eye, Tu., 2; o.p., daily, exc. S., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu. F., 1.30; Children, S., 1.30; Dental, Tu. F., 10. *Operation Days.*—W. S., 1.30; (Ophthalmic), M., 2.30, F., 2; (Gynaecological), Th., 2.
- SAMARITAN FREE FOR WOMEN AND CHILDREN.** *Hours of Attendance.*—Daily, 1.30. *Operation Day.*—W., 2.30.
- THROAT, Golden Square.** *Hours of Attendance.*—Daily, 1.30; Tu. and F., 6.30. *Operation Day.*—Th., 2.
- UNIVERSITY COLLEGE.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetrics, M. W. F., 1.30; Eye, M. Th., 2; Ear, M. Th., 9; Skin, W., 1.45, S., 9.15; Throat, M. Th., 9; Dental, W., 9.30. *Operation Days.*—W. Th. 1.30; S., 2.
- WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, Tu. Th. S., 2; Ear, Tu., 10; Orthopædic, W., 2; Diseases of Women, W. S., 2; Electric, Tu., 10, F., 4; Skin, F., 2; Throat and Nose, S., 10. *Operation Days.*—Tu. F., 2.30.
- WESTMINSTER.** *Hours of Attendance.*—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1; Eye, Tu. F., 9.30; Ear, M., 9; Skin, W., 1; Dental, W. S., 9.15. *Operation Days.*—Tu. W., 2.

## LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

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

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

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

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

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

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

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

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

### QUERIES.

R. A. writes: I am desirous of placing in an asylum or other home an imbecile boy, aged 19, for whom £30 a year could be paid.

#### THE DUTIES OF UNQUALIFIED ASSISTANTS.

M.R.C.S.ENG. asks: What are the duties that an unqualified assistant can legally perform for his principal?

\* \* An unqualified assistant may dispense and keep books, but he must not treat patients "as if he were duly qualified."

#### A COVERING QUESTION.

IN DOUBT writes: Supposing that a registered medical practitioner sold his practice to a non-medical man, would it be legal or illegal for me to continue the management of the practice for the purchaser?

\* \* Several cases analogous to that described have come before the General Medical Council, and have been decided adversely to the qualified practitioner involved.

#### OPERATION FEES IN CLUB CASES.

A COUNTRY MEMBER writes: What is the customary fee for removing an injured eye in the case of a member of a well-to-do club under chloroform? Is £2 2s. (the amount allowed) sufficient for such an operation?

\* \* It can scarcely be said there is any customary fee for operations under the circumstances mentioned by our correspondent. Members of sick benefit societies can usually claim the personal services of their surgeon without any extra remuneration. A fee of two guineas would be a reasonable allowance for an anaesthetist, as a surgeon could not be expected to operate and give chloroform simultaneously. If any club allowed an extra fee for operations, we think the principle of "not looking a gift horse in the mouth" would apply, and that it would be inadvisable to criticise the amount.

### ANSWERS.

REFERENCE.—We cannot undertake the invidious task of selecting the best modern works on the subjects named, which comprise a majority of the subjects of the medical curriculum.

MEDICUS.—A practitioner who certifies that a child has been vaccinated by him, when in fact it has been vaccinated by someone else, is liable to be prosecuted for the offence.

W. H.—The following works on biology will be found useful by a first year's student preparing for the first examination of the Conjoint Board: *Textbook of Elementary Biology*. By Dr. H. J. Campbell. London: Swan Sonnenschein and Co. 6s. Or, *A Course of Practical Elementary Biology*. By John Bidgood, B.Sc., F.L.S. London: Longmans, Green and Co. 4s. 6d.

#### ASTHMA.

T. M. writes in reply to "E. S." to recommend for true paroxysmal asthma residence in London or Paris.

#### WEAK-MINDED CHILDREN.

G. P., W.P.M.B.—If a child is not an idiot, we fear there is no institution where it would be received.

#### DEODORISING CATHETERS.

IN reply to our correspondent's question as to the best method of cleaning catheters, a "Hospital Surgeon" recommends the use of a stilette fitted with a metal point, with flat ends, and a quarter of an inch in length. The metal point is made to fit exactly the bore of the tube, and the