

place to overcome the shock was so successful that no one, on seeing the patient two hours after, would have diagnosed the condition except by careful examination of the liver dulness. The operation itself was conducted under light anæsthesia, the patient herself saying afterwards that she was conscious most of the time of what was going on, and it did not in any way depress the patient. Closure of the perforation by a purse-string suture was out of the question on account of the friability of the intestinal walls; longitudinal suture only was possible. The liver dulness was noted five hours after the operation to have returned down to a point one inch from the margins of the ribs.

The rapid onset of peritonitis, following an attempt to get out of bed, pointed to the conclusion that a second perforation had taken place; but, as none was found at the *post-mortem* examination, one must conclude either that it had been overlooked, or that the peritonitis had started from the second ulcer, from the base of which the peritoneum had already disappeared. The condition of the sutured bowel was in every way satisfactory, and it would have doubtless been better to have sutured the second ulcer at the same time, or to have scarified its base; the serious condition of the patient, however, necessitated a speedy termination of the operation.

The most noticeable feature at the operation was the appearance of the intestine, each ulcer being plainly indicated by a zone of brilliant injection, corresponding to its base, in the centre of a thickened oedematous portion of the gut, a condition quite different from the usual *post-mortem* appearance.

Although the patient was prostrated by a three weeks' illness, there was nothing in the abdominal wound, or in the sutured portion of the gut, to indicate any want of repairing power. The return of the delirium indicated that the course of the pyrexia had not yet ended; and the extensive ulceration of the intestine was a further proof of the intensity of the attack.

It is much to be regretted that, in a case promptly diagnosed and operated on only two hours after perforation had occurred, the result should have been so disappointing.

A FURTHER NOTE ON THE TREATMENT OF ABDOMINAL HYDATID DISEASE BY EVACUATION WITHOUT DRAINAGE.

By C. J. BOND, F.R.C.S.,
Surgeon to the Leicester Infirmary.

THE BRITISH MEDICAL JOURNAL for April 11th, 1891, contains an account of a method of treating abdominal hydatid cysts by incision and evacuation of the cyst contents, and the return of the adventitious cyst into the abdominal cavity without drainage. Since that was written Dr. Thomson, of Brisbane, and Dr. Gardner, of Melbourne, have reported cases, and the method seems to be recognised and practised in Australia. Judging, however, from the absence of published reports, I do not think that many cases have been so treated in England, and, as I feel convinced that the principle is sound, I am induced to record the following case which I have lately treated, and which gives further evidence of the safety of the proceeding:

A short time ago I opened the abdomen of a male patient, aged 36, who had suffered for some years from a swelling the size of a coconut in the right flank; the patient was in other respects healthy, and the symptoms produced were those of pain and pressure. One large and two smaller hydatid cysts were first found; the larger cyst contained clear fluid and daughter cysts, the smaller ones pultaceous material with chalky deposit; these three omental cysts were removed entire, the adhesions to colon and mesentery, though extensive, being separable. On further exploration, two more cysts were found in the liver on the under surface, one near the anterior edge and a larger one deeply placed near the transverse fissure. After packing the peritoneal cavity around, both cysts were incised and the pultaceous laminated material which formed their degenerated contents evacuated; some of the chalky *débris*, however, was very adherent to the

inner wall and was left; the interiors of the cysts were then thoroughly wiped out with carbolic lotion (1 in 20), rubbed over with iodoform, and left quite dry. No attempt was made to close the opening in either cyst, and the abdominal wound was closed without drainage. Recovery was rapid, the temperature remaining normal.

As I previously ventured to point out, the advantages of this method are very great; not only can deeply placed cysts be thus dealt with, which it would be very difficult or impossible to drain, but, in addition, a primary union and a rapid recovery are substituted for a tedious convalescence, with all the risks attending the drainage of a large cavity, and an open wound; the experience of this case further shows that not only may living cysts be so treated, but also those in which, following the death of the parasite, the contents are partly solidified.

At the present time it is no doubt safer to treat by the older method cysts in which suppuration has occurred, but even in these it may eventually be possible to thoroughly scrape and antisepticise the interior, after evacuation of the pus, and then to close the wound.

In conclusion, also, I would suggest, in suppurating cysts, or in abscess of the liver, that an exploratory abdominal section should be the first step, in preference to the introduction of a needle, for in this way it is sometimes possible to ascertain and locate the presence of a small area of adhesion to the diaphragm or abdominal wall over a suppurating cyst or abscess, and the latter can then be incised and drained through this area by means of a second incision between the ribs or through the abdominal wall.

Since this was written I have operated on two more cases of liver hydatids by the method of evacuation without drainage, with rapid convalescence in both instances.

MEMORANDA:

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

AN OPERATION FOR THE RADICAL CURE OF HERNIA.

MR. GREIG SMITH, in pointing out the difference of the kinds of adhesions, has explained the reason why a most unscientific operation which I do for the radical cure of hernia gives me such excellent results. Briefly described, when the operation is deliberately undertaken I make a vertical incision, and take great care to keep outside the peritoneum. Then search for the ring, invaginate the sac on my finger, keep it there by means of a large Spencer Wells forceps, and stitch up in a jumble the opening in the abdominal wall (namely, muscle, fibrous tissue, and peritoneum; I like my needle to scrape the bone), then the skin incision. Such is the operation I do in a femoral hernia. In a strangulated femoral hernia I insert a flat broad and thick director through the opening on the femoral vein side, and pass it right round the sac, keeping outside if I possibly can (I never nick Gimbernat's ligament), reduce the hernia, and stitch up in the above way.

In inguinal I do the same thing, that is, keep outside the sac, do not bother about separating the sac from the cord, pass the director into the abdomen on the outer side of sac, reduce the hernia, ligature the neck of the sac, and leave it lying on the inner side of the canal, so as not to squeeze the cord so tightly, and stitch up carefully in the same clumsy fashion. Judging from results the operation has been very successful in my hands. I have done nineteen (femoral) radical cures and seven strangulated herniæ (four femoral and three inguinal), with one death, which was due to gangrene of the bowel. None of these patients wear trusses, as they do not need them. I have done these operations during the last three years, and got the hint for this clumsy fashion of stitching from Lawson Tait and Martin (of Berlin), both of whom respect the peritoneum very little. All these operations were done without antiseptics, and some in very unhygienic surroundings.

Ashton-under-Lyne.

FREDERICK W. MANN, M.B.

City Hospital last year the mortality had been only 6.20 per cent. of the number admitted, which it was stated was less than almost any hospital in this country. Seven fresh cases of small-pox were reported for last week, and 2 deaths. There were 13 deaths from measles, and 1 from scarlatina. Leith reported 2 new cases of small-pox.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

MEDICAL GOVERNOR.—The Council of the Senate have appointed W. B. Ransom, M.D., of Trinity College, to be a governor of the High School, Nottingham, for five years.

DEGREES.—At a congregation, on January 17th, the following medical degrees were conferred:—*M.B.*: G. B. Woodroffe, Caius; A. K. Gordon, King's; W. H. Allen, Christ's; H. W. Beedham, Christ's. *B.C.*: A. K. Gordon, W. H. Allen, H. W. Beedham, and G. E. W. Cotter, Trinity.

SHUTTLEWORTH SCHOLARSHIP.—A scholarship on this foundation in Botany and Comparative Anatomy, value £55 a year for three years, will be awarded in March, 1895. Candidates must be medical students of Cambridge of not less than eight terms' standing, and must be prepared to migrate to Caius College if they are not already members thereof. Candidates are to send their names to one of the tutors of Caius College by March 1st.

EXAMINING BOARD IN ENGLAND BY THE ROYAL COLLEGES OF PHYSICIANS AND SURGEONS.

THE following gentlemen passed the First Examination of the Board in the subjects indicated at the quarterly meeting of the Examiners, under the "Five" Years' Regulations:

PART I. Chemistry and Physics.—G. W. Alltree, King's College, London; F. S. G. Bayly, St. Thomas's Hospital; V. T. C. Bent, Guy's Hospital; F. M. Bingham, St. Thomas's Hospital; C. E. Blackstone, Middlesex Hospital; W. F. Boyle, Charing Cross Hospital; E. W. Browne, St. Thomas's Hospital; E. H. Bullen, St. Mary's Hospital; J. G. Churton, University College, Liverpool; W. E. Cooper, University College, London; S. D. A. Corbett, St. George's Hospital; W. A. C. Cox, St. Mary's Hospital; V. J. Crawford, Guy's Hospital; H. E. Crawley, Oxford University; W. C. C. Davies, St. Mary's Hospital; J. T. De Cotcau, Guy's Hospital; Q. B. De Freitas, King's College, London; R. E. Drake-Brockman, St. George's Hospital; H. L. Driver, St. George's Hospital; G. M. Eastment, Middlesex Hospital; A. R. Evans, University College, Cardiff; E. O. Faulkner, St. Mary's Hospital; T. B. Fawley, Yorkshire College, Leeds; F. R. Featherstone, Guy's Hospital; T. H. Glaze, Mason College, Birmingham; B. Gowing, Yorkshire College, Leeds, and Firth College, Sheffield; C. P. Grindle, St. Mary's Hospital; F. H. Hand, St. George's Hospital; H. N. Horton, Middlesex Hospital; E. Hudson, Owens College, Manchester; N. A. A. Hughes, Yorkshire College, Leeds; J. W. Illius, St. Bartholomew's Hospital; H. S. Langdon, Middlesex Hospital; C. Lees, Charing Cross Hospital; A. M. Macintosh, St. Mary's Hospital; E. Merry, London Hospital; R. Michell, Guy's Hospital; A. S. Morley, St. George's Hospital; C. B. Moss-Blundell, St. Thomas's Hospital; C. H. Newton, St. Thomas's Hospital; R. G. Newton, Oxford University; J. C. S. Oxley, St. Thomas's Hospital; H. A. Parker, St. Thomas's Hospital; B. G. Patch, St. Thomas's Hospital; N. Pern, St. Thomas's Hospital; N. R. Phillips, London Hospital; S. C. Pritchard, King's College, London; J. J. Rodil, Guy's Hospital; C. M. Row, University College, London; E. R. Row, Guy's Hospital; W. H. Rutherford, St. Thomas's Hospital; A. A. Smith, Guy's Hospital; H. Smith, Mason College, Birmingham; H. C. Sturdy, Guy's Hospital; P. Tatchell, St. Bartholomew's Hospital; A. F. Tredgold, London Hospital; A. L. Vaughan, St. Bartholomew's Hospital; P. Vosper, King's College, London; A. F. Weston, St. George's Hospital; and N. Williams, Otago University and Guy's Hospital.

PART II. Practical Pharmacy.—A. Brown, King's College, London; C. B. Horsburgh, University College, Bristol; H. R. Humby, St. Bartholomew's Hospital; W. H. McMullen, King's College, London; S. Mason, St. Bartholomew's Hospital; S. Page, Mason College, Birmingham; A. G. Reid, London Hospital; F. J. W. Sass, St. Mary's Hospital; G. S. Simpson, Guy's Hospital; C. A. Sprawson, King's College, London; R. Storrs, St. Bartholomew's Hospital; P. Tatchell, St. Bartholomew's Hospital; A. F. Tredgold, London Hospital; N. Unsworth, St. Thomas's Hospital; and L. E. Whitaker, St. Bartholomew's Hospital.

PART III. Elementary Biology.—W. H. Agar, University College, London; H. St. A. Agate, St. Mary's Hospital; J. Ainscow, Owens College, Manchester; F. E. Anley, Charing Cross Hospital; E. C. Austin, St. Mary's Hospital; J. M. Barlet, St. Mary's Hospital; H. C. Batchelor, Guy's Hospital; J. H. Beasley, Mason College, Birmingham; A. M. Brind, Mason College, Birmingham; E. Bullen, St. Mary's Hospital; H. B. Carr, Guy's Hospital; D. P. Chapman, Charing Cross Hospital; F. Coleman, Charing Cross Hospital; W. A. C. Cox, St. Mary's Hospital and School of Science, Cheltenham; A. M. Dalzell, St. Bartholomew's Hospital; F. A. Davies, Mason College, Birmingham; G. Dewick, St. Thomas's Hospital; M. S. Double, Charing Cross Hospital; L. C. Driscoll, Charing Cross Hospital; W. F. Fedden, St. Paul's School, London; S. W. Garne, Charing Cross Hospital; W. R. P. Goodwin, St. Mary's Hospital; W. E. Gribbell, St. Mary's Hospital; H. Hipwell, Middlesex Hospital; J. E. Humphreys, Charing Cross Hospital; E. S. Jones, University College, Cardiff; J. A. Kilpatrick, University College, Cardiff; E. B. Kirkconnel, Owens College, Manchester; A. B. Kirkman, Guy's Hospital; W. A. Lamborn, Middlesex Hospital; C. Lees, Charing Cross Hospital; A. Lister-Kaye, Guy's Hospital; H. E. D. Lloyd, St. Bartholomew's Hospital; D. McIntyre, Owens College, Manchester; M. M. Martin, St. Bartholomew's Hospital; G. D. Maynard, St. Mary's Hospital; A. C. Newport, Charing Cross Hospital; W. H. Passmore, Charing Cross Hospital; H. I. Pinches, St. Paul's

School, London; T. B. Rhodes, Mason College, Birmingham; I. J. Roche, Charing Cross Hospital; D. P. Rockwood, University College, London; C. M. Row, University College, London; H. M. Scott, Charing Cross Hospital; J. E. Simpson, University College, London; P. N. Smith, St. Mary's Hospital; S. J. Smith, Charing Cross Hospital; F. Southam, Mason College, Birmingham; G. B. A. Speirs, St. Mary's Hospital; F. H. Sprague, St. Mary's Hospital; G. W. Stone, St. Bartholomew's Hospital; H. C. Tayler, St. Mary's Hospital; W. A. Thompson, Owens College, Manchester; G. P. Tonge, St. Paul's School, London; P. L. Vawdrey, St. Bartholomew's Hospital; A. D. B. Von Rosen, St. Mary's Hospital; C. B. Wagstaff, Charing Cross Hospital; H. V. Wells, St. Mary's Hospital; B. B. Westlake, Guy's Hospital; A. F. Weston, St. George's Hospital; L. E. Whitaker, St. Bartholomew's Hospital; T. R. Wilshaw, Mason College, Birmingham; and H. C. Woodcock, St. Mary's Hospital.

PART IV. Elementary Anatomy.—F. B. Alderson, Firth College, Sheffield; E. C. Barnes, London Hospital; W. H. I. Bathurst, King's College, London; J. B. Bradley, Mason College, Birmingham; J. F. E. Bridger, St. Mary's Hospital; H. S. Clogg, University College, Cardiff; R. S. Cocke, King's College, London; F. A. Davies, Mason College, Birmingham; E. B. Dowsett, Guy's Hospital; W. V. C. Francis, Westminster Hospital; S. W. Garne, Charing Cross Hospital; B. Gowing, Firth College, Sheffield, and Yorkshire College, Leeds; W. G. Hamilton, St. Bartholomew's Hospital; G. A. Herklots, University College, London; R. J. Hogan, London Hospital; W. B. Hope, Guy's Hospital; J. E. Humphreys, Charing Cross Hospital; E. S. Jones, University College, Cardiff; J. Jones, University College, London, and Mr. Cooke's School of Anatomy and Physiology; N. H. Joy, St. Bartholomew's Hospital; T. T. Kelly, Guy's Hospital; J. McClintock, King's College, London; D. McIntyre, Owens College, Manchester; A. R. McLachan, Guy's Hospital; M. M. Martin, St. Bartholomew's Hospital; G. D. Maynard, St. Mary's Hospital; C. F. B. Moggridge, St. Thomas's Hospital; A. C. Oliver, University College, Cardiff; N. R. Phillips, London Hospital; A. G. Reid, London Hospital; A. Ricketts, University College, London; W. E. Rutledge, University College, London; A. L. Scott, St. Bartholomew's Hospital; S. J. Smith, Charing Cross Hospital; T. W. Smith, Charing Cross Hospital; G. W. Stone, St. Bartholomew's Hospital; H. Stuart, University College, London; A. M. Thomas, Guy's Hospital and Durham University; D. J. Thomas, London Hospital; N. Unsworth, St. Thomas's Hospital; W. H. Unwin, Charing Cross Hospital; J. F. Walker, London Hospital; C. B. Wagstaff, Charing Cross Hospital; T. R. Wilshaw, Mason College, Birmingham; and E. Yoxall, Mason College, Birmingham.

SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, January, 1895.—The following candidates passed in:

Surgery.—R. B. Allen, St. Mary's; C. M. Beadnell, Guy's; W. S. Dibbs, Leeds; A. Douglas, Birmingham; R. H. Hayes, Guy's; P. S. Kesteven, St. Bartholomew's; W. A. Montgomery, St. Thomas's; A. T. Petry, Leeds; E. P. Staples, St. Mary's; T. Stevens, Charing Cross; G. S. Taylor, Manchester; J. M. Troup, King's.

Medicine, Forensic Medicine, and Midwifery.—H. W. Clark, St. Mary's; T. S. Collin, Manchester; L. C. Dillon, King's; W. MacLellan, St. Mary's; G. P. U. Prior, King's; J. H. Whitaker, Belfast.

Medicine and Forensic Medicine.—O. W. Gange, University College.

Medicine and Midwifery.—A. H. Trevor, Guy's.

Medicine.—M. T. Archdall, Charing Cross; T. Watts, Manchester.

Forensic Medicine.—T. Morris, Liverpool.

Midwifery.—W. J. H. Dawson, St. Thomas's; P. S. Kesteven, St. Bartholomew's.

To Messrs. Allen, Archdall, Clarke, Dillon, Douglas, Hayes, MacLellan, Morris, Prior, and Stevens, was granted the diploma of the Society, entitling them to practise Medicine, Surgery, and Midwifery.

OBITUARY.

ROBERT A. GOODSIR, M.D.

ON January 17th at Edinburgh Robert Anstruther Goodsir, one of the few remaining links with the past, died at the age of 71 years. Few men had in his time played so many parts. His grandfather was a Scotch clergyman; his father a skilful Scotch physician, who had four sons, one the great Edinburgh anatomist Goodsir, another the subject of the present notice, a third also a member of the medical profession, the fourth a clergyman.

Robert Goodsir began life in a London banking house, but soon returned to Edinburgh to follow medicine like his two brothers. He must have been a notable student, for he was a President of the Edinburgh Royal Medical Society. His brother Harry was surgeon in Sir John Franklin's ill-fated expedition of 1845. In 1849 Robert, anxious if possible to learn something of the fate of his brother, joined the Dundee whaler *Advice* as ship's surgeon. When he returned from his vain eight months' voyage he published an account of it; but a few months later, in 1850, he again started for the Arctic regions as surgeon on board the *Lady Franklin*. The net result of this voyage was the discovery of Franklin's winter quarters for 1845-46.

Still later he started for Australia on gold intent. The

ship was wrecked off the Needles; all were rescued and ultimately reached land. Again he adventured, and after several vicissitudes reached the gold fields, but did not make a fortune. He became squatter, he was this and that, he was in perils oft, but enjoyed all. He sojourned in the South Seas, he travelled in Siberia, in Russia, and in many lands, and ultimately settled in Edinburgh some ten years ago. There his circle was small but choice, and there was no choicer spirit in it than Robert Goodsir. He was a man of inexhaustible alertness of mind, and he had stories rare and many which he told in first rate style. Often he promised to set them down, but we fear he has gone without doing so, and the world is by much the poorer, for his writing would have been of a kind not often seen now.

PHILIP GEORGE PHILPS, M.R.C.S.Eng.

THE death is reported of Mr. Philip G. Philps at the age of 51. The deceased took the diplomas of M.R.C.S.Eng., L.S.A., in 1864, and practised for some twenty-four years in Peckham. About six years ago he changed his residence to Kensington. Soon afterwards he had a severe attack of influenza, from which he never seems to have completely recovered. He suffered ever afterwards from various heart troubles. Mr. Philps leaves a widow, three daughters, and a son.

MUCH regret has been felt in Bristol respecting the sad death of Mr. CHARLES WHITEFIELD, M.R.C.S., L.S.A. The circumstances stated at the inquest were tragic. Mr. Whitefield was of a highly nervous temperament, and was worried by his practice not proving so good as he expected. This was accentuated by pressure from his landlord for rent due at Christmas. He paid part of the amount, but next morning was horrified by the entry of the bailiffs, and felt the degradation, as he regarded it, so keenly that he at once took a large dose of prussic acid and died immediately. The coroner's jury regarded it as a case of temporary insanity, and expressed great sympathy with the widow, on whose behalf a local fund has since been opened. Public feeling ran so high about the matter that the landlord's house was mobbed, and an effigy supposed to represent him carried through the streets. Hundreds of people attended Mr. Whitefield's funeral.

MEDICAL NEWS.

ON May 15th Professor von Dittel, the distinguished surgeon of Vienna, will complete his 80th year. A committee has been formed to arrange for the proper celebration of the occasion. A medal, bearing the likeness of the *Altmeister* is to be struck in his honour.

THE will of Dr. William Withers Moore, F.R.C.P., D.C.L., formerly President and President of Council of the British Medical Association, late of Burgess Hill, Sussex, was proved on January 12th by his eldest son, William Withers Moore, the surviving executor. The testator gave all his real and personal estate equally among his children. Estate duty was paid upon a net capital of upwards of £53,000.

DRY METHODS OF SANITATION.—A discussion on this very important practical subject will take place at the sessional meeting of the Sanitary Institute on Wednesday, February 13th, at 8 p.m. The subject will be introduced by Dr. G. V. Poore, whose excellent and entertaining volume on *Rural Hygiene* is largely occupied with the description of practical methods of dealing with the disposal of refuse and excreta in country places by the "dry" system. The chair will be taken by Sir Thomas Crawford, K.C.B. Visitors wishing to attend can, we are informed, obtain tickets on application to the Secretary of the Sanitary Institute, Margaret Street, Regent Street, W.

MEDICAL VACANCIES.

The following vacancies are announced:

CANCER HOSPITAL (FREE), Fulham Road, S.W.—House-Surgeon. Appointment for six months. Salary, at the rate of £50 per annum, with board and residence. Applications to the Secretary by February 4th.

CENTRAL LONDON OPHTHALMIC HOSPITAL, 238A, Gray's Inn Road, W.C.—House Surgeon. Applications to the Secretary by February 12th.

DEWSBURY AND DISTRICT GENERAL INFIRMARY, Dewsbury.—House-Surgeon, doubly qualified. Salary, £80 per annum, with board and residence. Applications to the Chairman of the House Committee, by February 6th.

GENERAL HOSPITAL FOR SICK CHILDREN, Pendlebury, Manchester.—Junior Resident Medical Officer, doubly qualified. Salary, £80 per annum, with board and lodging. Appointment for one year. Applications to the Chairman of the Medical Board, by February 6th.

HOSPITAL FOR DISEASES OF THE THROAT, Golden Square, W.—Registrar and Pathologist. Appointment for six months, which may be renewed. Honorarium of 25 guineas a year is attached to the appointment. Applications to the Secretary by February 1st.

LONGFORD UNION.—Medical Officer for the Workhouse. Salary, £80 per annum. Applications to the Clerk of the Union before 11 o'clock on January 26th.

NEATH URBAN DISTRICT COUNCIL.—Medical Officer of Health for the Borough. Salary, £30 per annum. Applications to Edwin C. Curtis, Town Clerk, by February 5th.

NORTH-EASTERN HOSPITAL FOR CHILDREN, Hackney Road, Shore-ditch, N.E.—Junior House-Physician; doubly qualified. Appointment for six months. No salary, but board and lodging (including washing) provided. Applications to the Secretary, 27, Clement's Lane, E.C., by February 13th.

PARISH OF ROUSAY AND EGILSHAY.—Resident Medical Officer. Salary, £51 per annum. Applications to the Inspector of the Poor, Rousay, by January 31st.

ROYAL SOUTH LONDON DISPENSARY.—Surgeon in Ordinary to visit patients at their own homes. Honorarium, £20 per annum. Applications to the Committee of Management, at the Dispensary, St. George's Circus, S.E., before January 31st.

SALFORD ROYAL HOSPITAL.—House-Surgeon. Salary, £100 per annum with board and residence. The Junior House-Surgeon is a candidate, and in the event of his being appointed, there will be a vacancy in the post of Junior House-Surgeon. Salary, £50 per annum, with board and residence. Candidates must be doubly qualified. Applications to the Secretary by February 2nd.

STAFFORDSHIRE GENERAL INFIRMARY, Stafford.—House-Surgeon, doubly qualified. Salary, £100 per annum, with board, lodging, and washing. Appointment for two years, subject to direction of the General Committee. Applications to the Secretary of the Infirmary, Lloyds Bank, Limited, Staffordshire, by February 6th.

SUFFOLK GENERAL HOSPITAL, Bury St. Edmunds.—Honorary Assistant Medical Officer. Applications to the Chairman of Committee by February 4th.

UNIVERSITY OF EDINBURGH.—Additional Examiners in Natural History and Clinical Surgery. Period of office four years. Salary, £75 per annum in each case, with £10 per annum for travelling and other expenses in the case of an additional examiner not resident in Edinburgh or the immediate neighbourhood. An additional allowance is made to the Examiner in Natural History for examining for Graduates in Arts. Applications to L. J. Grant, Interim Secretary, University Court, University of Edinburgh, by February 6th.

WIRRAL CHILDREN'S HOSPITAL, Woodchurch Road, Birkenhead.—House-Surgeon. Salary, £50 a year, with board, lodging on the premises, and washing. Applications to P. W. Atkin, Honorary Secretary, 25, Lord Street, Liverpool, by January 30th.

MEDICAL APPOINTMENTS.

AITKEN, C. J. H., M.B., C.M., appointed House-Surgeon to the Edinburgh Royal Maternity and Simpson Memorial Hospital.

AMBROSE, Alexander, M.D., LL.D., B.A., B.Ch., D.P.H. Cantab., appointed Medical Officer of Health for the Urban District of Buckhurst Hill.

BAILEY, W. H., M.B. Lond., M.R.C.S. Eng., appointed Medical Officer for the East Dulwich District of the Parish of St. Giles Camberwell.

BARROW, V. E., L.R.C.P., L.R.C.S. Edin., appointed Medical Officer for the Sampford Peverell District of the Tiverton Union.

BROOKSBANK, Hugh J., B.A. Cantab., appointed House-Surgeon to the Victoria Hospital for Children, Queen's Road, Chelsea.

BRYCE, William H., M.B., C.M., appointed House-Surgeon to the Edinburgh Royal Maternity and Simpson Memorial Hospital.

CHILD, Edwin, M.R.C.S., L.S.A., reappointed Medical Officer of Health to the New Malden Urban District Council.

COPBLAND, F., M.R.C.S., L.R.C.P., appointed Junior House-Physician to the Westminster Hospital.

ELAM, George, M.D. Dub., B.S., M.R.C.S., L.R.C.P., appointed Honorary Surgeon to the Invalid Asylum, Stoke Newington, *vice* C. A. James, M.R.C.S., L.R.C.P., D.P.H., appointed Consulting Surgeon.

ELLIOTT, J., M.D., B.Sc. Lond., appointed Honorary Physician to the Chester General Infirmary, *vice* Mr. Dobie, resigned.

ELLIS, H. D'Arcy, L.R.C.P. Edin., M.R.C.S. Eng., reappointed Medical Officer of Health to the Brierley Hill Urban District Council.

HODGES, James, M.R.C.S. Eng., L.S.A., appointed Senior Medical Officer to the Suffolk General Hospital.

JACOB, E. L., M.R.C.S. Eng., appointed Medical Officer of Health for Leatherhead.

JAMES, Brindley J., M.R.C.S. Eng., L.R.C.P.I., appointed Medical Referee to the Hammersmith District of the Royal London Friendly Society, and Medical Officer to the St. Mary's Training College, Brook Green, Hammersmith.

KINGSTON, P. J., M.R.C.S., L.R.C.P. Lond., appointed an Honorary Medical Officer to the Yeovil and District Hospital and Dispensary, *vice* R. Aldridge, M.D. Edin., M.R.C.S., resigned.

LAWFORD, John Boaring, F.R.C.S.Eng., appointed Ophthalmic Surgeon to St. Thomas's Hospital.
MACNAB, Robert, M.D.Glasg., F.R.C.S.Edin., appointed Honorary Consulting Medical Officer to the Suffolk General Hospital.
MAHOOD, A. E., M.B.R.U.I., M.Ch., appointed Medical Officer for the Northam District of the Bideford Union.
MORTEN, Miss Honnor, appointed Lecturer on First Aid and Hygiene, under the Technical Education Board of the London County Council.
OLIPHANT, Frank, M.B.Edin., appointed Junior House-Surgeon to the Chesterfield Hospital.
PEARCE, A. Channing, M.B.Lond., appointed House-Physician to the Victoria Hospital for Children, Queen's Road, Chelsea.
STEPHENS, Edward, L.R.C.P.Edin., L.M., reappointed Medical Officer of Health to the Chard Rural Sanitary District, and Medical Officer for the Ilminster District of the Chard Union.
STOCKER, Mr. J. W., appointed Medical Officer for the No. 6 District of the Romford Union.
THOMSON, J. A. M., L.R.C.P., L.R.C.S.I., appointed Medical Officer of Health to the Bradford-on-Avon Rural Sanitary Authority. *vice* William Adye, M.D.Edin.
WALKER, H. Secker, F.R.C.S., appointed Lecturer on Ophthalmology and Otolary at the Yorkshire College, Leeds.
WHITE, Octavius, M., M.R.C.S., L.S.A., appointed Medical Officer to the Royal Naval College, Eltham.
MORRISON, J. T. J., M.A.M.B., B.C.Cantab., F.R.C.S.Eng., appointed Assistant to the Chair of Surgery in the Mason College, Birmingham.
ERRATUM.—The notification of the appointment of Mr. C. W. Vine, last week, should have read "appointed Relieving Officer to the Portsea Island Union," instead of District Medical Officer.

DIARY FOR NEXT WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Dr. Percy Kidd: On a Successful Case of Paracetent Pericardii. Dr. E. Cautley: The Treatment of Empyemata in Children, based on an Analysis of Eighty-six Cases.

TUESDAY.

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

WEDNESDAY.

WEST LONDON POST-GRADUATE COURSE, West London Hospital, W., 5 P.M.—Dr. Seymour Taylor: Cases of Thoracic Aneurysm.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, 3 P.M.—Lecture by Dr. Gowers.

THURSDAY.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM, 8.30 P.M.—Card specimens at 8 P.M. by Messrs. Hodge and Ridley, Mr. Lawford, Dr. Argyll Robertson, Mr. Marcus Gunn, and Mr. E. Clarke. Papers: M. Darier: Subconjunctival Injections of Mercury. Mr. Jessop: Two Cases of Diphtheritic Ophthalmia Treated by Klein's Antitoxin. Mr. Wray: Removal of the Lens in High Myopia with a Case of—25 D. Dr. G. Ogilvie: A Case of Double Optic Atrophy with Peculiar Visual Fields. Dr. G. Mackay: Eyesight and the Public Services.

HARVEIAN SOCIETY, 8.30 P.M.—Mr. Frederick Treves: A Series of Cases of Removal of the Appendix for Relapsing Typhlitis.

FRIDAY.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY, 8.30 P.M.—Mr. C. Bucknill: A Case of Cow-pox in Man. Mr. Keetley: On Intestinal Affections requiring Surgical Treatment. Card specimens by Dr. Abraham, Messrs. Keetley and Bidwell.

WEST KENT MEDICO-CHIRURGICAL SOCIETY, 8.15 P.M.—Dr. Morgan Dockrell: Cutaneous Syphilis.

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 ensure insertion in the current issue.

BIRTH.

DEANE.—On January 8th, at Scothorne Villa, near Lincoln, the wife of Samuel R. Deane, surgeon, etc., of a son.

MARRIAGE.

PRINCE-WILTSHIRE.—On the 15th inst., at Bradwell Church, Great Yarmouth, by the Rev. J. F. Hastings, B.A., brother-in-law of the bride, assisted by the Rev. John Walker, M.A., rector of Bradwell, Hugh Tennant, second son of the late Thomas Tennant Prince, of Laurel Lodge, Barnet, to Edith Alice, third daughter of Charles Henry Wiltshire, of Bradwell House, Great Yarmouth.

DEATHS.

CARPENTER.—On December 28th, 1894, at Staim Creek, Brit. Honduras, Amelia Carpenter, the beloved wife of P. T. Carpenter, Esq., M.R.C.S. Eng., assistant colonial surgeon, of peritonitis.

HICKS.—On January 17th, 1895, at Oakhurst, Bexhill, in his 58th year, John Abernethy Hicks, L.F.P.S. & L.M.Glasg., L.S.A.Lond., son of the late John Hicks, surgeon, of Emsworth, Hants, and son-in-law of the late Charles Davenport, surgeon, of Abridge and Chigwell Row, Essex. Interred at Epping, Essex.

HOURS OF ATTENDANCE AND OPERATION DAYS
AT THE LONDON HOSPITALS.

CANCER, Brompton (Free). *Hours of Attendance.*—Daily, 2. *Operation Days.*—Tu. F. 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. F., 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; (Obstetric), Th., 2.
NATIONAL ORTHOPÆDIC. *Hours of Attendance.*—M. Tu. Th. F., 2. *Operation Day.*—W., 10.
NORTH-WEST LONDON. *Hours of Attendance.*—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, 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., 2. *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, M. Th., 2; o.p., Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopædic, W., 2; Dental, Tu. S., 9. *Operation Days.*—Th., 1; (Ophthalmic), F., 1.15.
ST. MARK'S. *Hours of Attendance.*—Fistula and Diseases of the Rectum, males, 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; (Gynæcological), Th., 2.
SAMARITAN FREE FOR WOMEN AND CHILDREN. *Hours of Attendance.*—Daily, 1.30. *Operation Day.*—W., 2.30.
THROAT, Golden Square. *Hours of Attendance.*—Daily, 1.30; Tu. and F., 6.30; *Operation Day.*—Th., 2.
UNIVERSITY COLLEGE. *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetrics, M. W. F., 1.30; Eye, M. Th., 2; Ear, M. Th., 9; Skin, W., 1.45, S., 9.15; Throat, M. Th., 9; Dental, W., 9.30; *Operation Days.*—Tu., W. Th., 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.