

MELÆNA AS A COMPLICATION OF MALARIA.BY SURGEON-CAPTAIN H. DEMPSTER MASON, A.M.S.,
Karachi.

THE following cases, which are intended to illustrate one of the less frequent and more serious complications of malaria, have all occurred here within the last two years, during which period malarial diseases have not only affected a far larger number of soldiers than at any other period during the last decade, but the disease itself has proved of a far more virulent type, as exemplified by the profound cachexia following its attacks, the protracted period of convalescence, and the large number of men invalided either to the hills or to England.

Whether melæna is merely the outcome of a severe type of malaria acting on an already debilitated subject or not, it is a curious fact that up till 1893 not a single case had been recorded in the military hospital, whereas since then there have been no fewer than 23 cases up to date. There have been no cases among the women of the garrison, and out of a population of 200,000 not a single case has occurred at the native hospital. It occurs most commonly in men in debilitated health, the subjects of repeated and often long-continued attacks of ague after exposure to chill, less commonly in men who have only had ague once or twice, and that only lasting a few hours. In some it has occurred during the cold stage, when one would, from physiological reasons, naturally most expect it. In others it has occurred with no relation to the malarial attack whatever.

The onset is usually sudden, preceded for a short interval by crampy pains in the belly, accompanied by slight hæmatemesis; the latter symptoms are so uniform that, accompanied with the above-named previous history, they are almost pathognomonic.

In the minority of the cases only has there been any preliminary diarrhœa, but in the majority and severer class the first indication of impending danger has been the passage *per rectum* of large quantities of pure bright-coloured blood, the bowels acting in such rapid succession that in the space of a few minutes the patient has become completely blanched, with a cold clammy skin, running pulse, and every symptom of the severest form of collapse. The pain in the belly and cramps in the legs are most severe, reminding one of the algid stage of cholera.

When it occurs in sthenic patients recovery is surprisingly rapid; the man who, during an attack, has seemed actually at death's door, expresses himself the very next day as feeling perfectly well and fit for duty. This would appear to indicate that the hæmorrhage is of a salutary and safety-valve character. The term melæna is of course theoretically a misnomer. After collapse has set in the hæmorrhage usually ceases, whether treatment has been adopted or not, but in one case neither treatment nor collapse completely stayed the bleeding, which terminated fatally eight hours after the first appearance of blood. Most of the cases after the collapse stage make an uninterrupted though very tedious recovery.

The pathological condition of the whole intestinal tract of the fatal case was one of extreme acute congestion, which extended from the œsophageal end of the stomach to the cæcum in gradually increasing intensity; the mucous membrane was thickened, opaque, of a deep purple colour, with almost black patches on the valvulæ conniventes. About 5 or 6 inches down the jejunum were a series of very small acute shallow ulcers, with thin ragged edges. Throughout the large intestine the same condition existed excepting the ulceration. The spleen and liver were both enlarged, the former weighing 22 ozs., of a dark maroon colour, soft in texture, and acutely congested.

The treatment in all cases was directed towards combating the hæmorrhage and collapse, and has proved so successful that one marvels alike at its effects and the recuperative vitality of the British soldier.

DR. GARDINER ROBB has been appointed one of the Poor-law Medical Officers of Belfast, in succession to Dr. Jamieson, whose death from typhus fever we had recently occasion to record. There were several candidates, but Dr. Robb secured a very large majority at the first ballot.

MEMORANDA:

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

ACUTE BRONCHOCELE FOLLOWING INFLUENZA.

IN January, 1893, I attended a middle-aged clergyman for an ordinary attack of influenza. Three days after the temperature had fallen, he complained of pain in the throat with difficulty of breathing. I found that the temperature had again risen, and that there was an acute inflammatory enlargement of the thyroid gland. The skin was reddened, but not adherent to the gland. There was much stridor and slight dyspnoea. The whole mass moved freely when the patient swallowed. The enlargement appeared to be almost uniform, both lobes and the isthmus being enlarged. The swelling was treated with hot moist applications. Salicylate of soda and iodide of potassium were given internally. The swelling had gone down considerably in two or three days, but when I last saw the patient, more than eighteen months after the illness, there was still some enlargement of the isthmus. The case seems worth recording as a companion to that recorded by Dr. Russell in the *BRITISH MEDICAL JOURNAL* of May 4th.

Leeds.

C. W. SMEETON, M.R.C.S., L.R.C.P.

A CASE OF FATAL HÆMATEMESIS FROM ULCERATION OF GALL STONE INTO THE DUODENUM.

L. H., aged 52, of no occupation, had suffered from attacks of biliary colic for nine years, and on several occasions after the attacks had subsided gall stones had been found in the motions. The last attack of colic was nine months ago, and this had been exceptionally severe. An operation had been advised at this time but had been refused.

On March 24th, 1895, he had the first attack of hæmatemesis, when he vomited more than a pint of dark partially clotted blood.

I first saw him on April 8th, during the absence of his usual medical attendant, Mr. Jordison. His skin and conjunctivæ were jaundiced, and he had suffered for some time from intense irritation of the skin, but with this exception had been quite free from pain. The abdomen was flaccid and easily palpable, and no enlargement of the liver or gall bladder could be made out. The bowels were confined, the motions clay coloured, and the urine contained bile pigment. All the other organs were healthy; his appetite was fair, and he had no pain after food. The temperature was normal, the pulse 80. He had been allowed to get up for an hour or two for two days previously.

I saw him again on the morning of March 10th, when he expressed himself as feeling better than he had done for some time. During the afternoon of that day he over-exerted himself, and at 6 P.M. I was sent for urgently on account of renewed hæmatemesis. When I arrived (a distance of two miles) he was collapsed and almost pulseless. He had vomited about a pint and a-half of semi-fluid dark blood, just as he was sitting down to tea. By means of injections of brandy and strychnine he rallied sufficiently to allow of his removal to bed.

At 8 P.M. he again vomited half a pint of dark blood, and passed unconsciously several loose motions containing partially decomposed blood. I injected gr. $\frac{1}{4}$ of morphine, and gr. $\frac{1}{2}$ of ergotin. I ordered these to be repeated every four hours, no food to be given by the mouth, but small pieces of ice to be sucked to relieve his intense thirst, and an ice-bag to be applied to the epigastrium. He had several hours' good sleep till 6 A.M. on March 11th, when he complained of faintness and dimness of sight, and soon afterwards vomited three pints of clotted blood, one clot showing a distinct cast of the pyloric end of the stomach and the upper part of the duodenum. He was much collapsed, with a weak and intermittent pulse. I saw him at 10 A.M. with Dr. Taylor, of Chester, and Mr. Jordison, and it was decided to continue the injections of morphine and ergotin every four hours. At about 3 P.M. he became restless, and further hæmatemesis took place at 4 and 7 P.M.; and he died at 9 P.M. on March

11th, nearly three weeks from the first onset of the hæmorrhage.

A partial *post-mortem* examination was permitted. The viscera were bile-stained; the liver was hard, and slightly contracted. The stomach contained a quantity of blood. The mucous membrane of the stomach was thickened, and there was no trace of any ulceration. The pylorus was normal. The gall bladder was small, contracted, and empty, and its walls thickened. On introducing the finger into the gall bladder it was found that it could be passed on easily into the duodenum directly, to which it was firmly adherent. Lying loose in the duodenum was an unfaceted gall stone, with a quantity of blood. The edges of the opening were soft, and probably of recent date. The gall stone measured $\frac{3}{4}$ by $\frac{1}{2}$ an inch, and weighed when dry 40 grains.

Malpas, Cheshire.

HENRY A. DUFFETT.

FRESH FRUIT IN CHRONIC DYSENTERY.

I SHOULD like to draw attention to the value of certain sorts of fresh fruit in the treatment of chronic dysentery. As far as I know, none of the textbooks on the subject (except Davidson's *Hygiene and Diseases of Warm Climates*) allude to this. From my own personal as well as professional experience I have found them of the greatest value. I may specify strawberries, grapes, figs, and, if they can be so classed, tomatoes, these being all seed fruits as distinguished from stone fruits. Of course they must be in absolutely good condition. For some years past I have made use of them largely in treating chronic dysentery and diarrhoea, with most happy results. I must own the idea is not original, but was impressed on me by the late Dr. Sausmarez Lacy, of Guernsey, who, I believe, had practised this treatment for many years. As the season for invalids from India and the tropics has now commenced, the suggestion may be of use to those of my brother practitioners who find diet a difficulty in such cases.

Folkestone.

ARTHUR DE BUTTS, L.S.A.Lond.

TRAUMATIC PNEUMOTHORAX.

HAVING read in the BRITISH MEDICAL JOURNAL of April 13th Mr. Lucas's two cases of traumatic pneumothorax, I am induced to send you brief notes of a case recently under my care.

On February 11th last I was called to see a young man, aged 20, who had received a blow from the end of a pole with which he was placing a belt on a pulley. He had been struck just above and to the outer side of the left nipple, about the lower edge of pectoralis major. He was then suffering from shock, and though I noticed the heart's sounds to be feeble, I thought it was due to the shock, and as he was dressed did not make a thorough examination.

Next day, however, I found the heart displaced to the right of the middle line quite an inch; percussion over the whole of the left side was hyper-resonant, the bell sound well marked, also metallic tinkling, vocal resonance was amphoric, while no breath sounds were audible. There was very little external evidence of the blow, nor were there any subjective symptoms beyond slight shortness of breath on exertion and the soreness of the bruise, which latter subsided in a few days. There was certainly no fractured rib. After a week or so the heart began to go back, but it was not until six weeks after the accident that things were in their normal condition.

Warrington.

A. W. HALL, L.R.C.P., etc.

VESICULAR HERPES OCCURRING ON THE GLANS PENIS IN TYPHOID FEVER.

HERPES occurring in the most common situation—the lips—is rare in typhoid fever; it is certainly very rarely met with in the situation here recorded. The patient, aged 22, on the twelfth day of the disease, informed me that on the previous day an eruption had appeared near the end of his penis, and that it came as a crop of six or seven "little blisters," which had since burst or been broken. On examination the remains of the vesicles were seen on the dorsum of the glans, close to the corona, kept moist by secretion under a rather long prepuce. There was no swelling of the inguinal gland, and no urethral discharge. There were no vesicles on the inner surface of the prepuce, nor was there any labial herpes. The

patient's evening temperature at this time was 102.2° F.; he was passing five loose motions on the average daily, and was slightly delirious. The eruption was dressed with a little boracic ointment, and healed in less than a week, leaving no trace.

Rickmansworth.

H. W. WEBBER, M.S., M.D.Lond.

REPORTS

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

THE LEICESTER INFIRMARY.

A CASE OF ENTERIC FEVER, WITH THROMBOSIS OF BOTH FEMORAL VEINS AND ABSCESES IN LUNG AND SPLEEN.

(Under the care of Dr. COOPER.)

[Reported by MICHAEL B. FOSTER, M.R.C.S., L.R.C.P.,
House-Physician.]

R. G., a labourer, was admitted on August 3rd, 1894, with a history of seven days in bed, the prominent symptoms being diarrhoea and pain in the belly. He had been ailing for a previous week with headache and pains in the limbs and back. On admission most of the signs and symptoms of enteric fever were present. Spots were well out, large, and numerous. The splenic edge was felt just below the costal margin. The urine contained a large trace of albumen. There were no signs of bronchitis.

Fresh spots appeared on the next four days. For the first seven days nothing of special note occurred. The temperature was continuously between 103° and 104°; the pulse 108, soft; the tongue thickly furred, tending to become dry; the stools light and pea-soupy, four to five a day. The urine remained albuminous.

On the next three days there were morning remissions of temperature of 1°, with slight improvement in the general symptoms. On August 13th (ten days after admission and in the fourth week of illness) the patient had a rigor, which was repeated on the next two days. The temperature ran up to 104°, 104.6°, and 105° respectively. Swelling and oedema of the left leg and thigh were then noticed, with a tender, hard cord in the left groin, over the femoral vein; his general condition was worse, the motions and urine were passed in bed. The tongue was dry and cracked; the pulse 128, small and feeble, and he wandered at night. The urine contained one-eighth albumen.

For the next four days the patient's condition improved. The pulse was stronger (108). The motions—which had resumed a normal colour, though loose and liquid—were passed naturally. The tenderness and swelling of the left leg and thigh appeared to be subsiding, but the cord still persisted. The temperature was more or less continuous 102° to 103°.

On August 20th the patient had another rigor, followed by two on the next day. On examining the chest, dullness at the left base was noticed, reaching up to the scapular angle. The breath sounds were very faint in this situation, and a few liquid rales were present. There was no cough or expectoration; the respirations were 24.

From this time the patient's appearance and condition differed considerably from that noticed during the earlier part of his illness. The pulse was very feeble (132), the tongue dry and cracked, and the face pinched and grey. The motions and urine were passed in bed. He muttered at times and was in a condition of semistupor. The belly was quite flat and the stools dark in colour.

For the next week the temperature was of septic type, 102-103° at night, normal in the morning. No more rigors occurred, but the patient was much weaker, drowsy, and wandering by day and night. The pulse was thready (140). The physical signs at the left base remained the same. The urine contained one-eighth of albumen.

On August 31st swelling and oedema of the right leg occurred, with a tender hard cord in the right groin and prominent superficial veins over the lower part of the

Surgeon-Lieutenant H. D. Brook, 20th Middlesex (Artists') Rifles, is promoted to be Surgeon-Captain, May 15th.

The Volunteer Officers' Decoration has been conferred upon the following officers: Surgeon-Captain A. T. BRAND, M.D., 2nd Volunteer Battalion the East Yorkshire Regiment; Surgeon-Majors WILLIAM WILSON and WILLIAM FREW, M.D., 1st Volunteer Battalion the Royal Scots Fusiliers; and Surgeon-Captain JAMES STEPHEN, M.D., 3rd (The Buchan) Volunteer Battalion the Gordon Highlanders.

VOLUNTEER MEDICAL STAFF CORPS.

SURGEON-LIEUTENANT P. O. HAYNES, the Woolwich Company, to be Surgeon-Captain, May 15th.

MEDICO-LEGAL AND MEDICO-ETHICAL.

BONESETTERS AND MEDICAL TESTIMONIALS.

THE medical men who have allowed their names, addresses, and qualifications to be attached to testimonials in favour of a bonesetter's liniment and, further, have permitted such testimonials to be freely circulated in handbills, should be dealt with by the bodies from which they obtained their diplomas. Failing which, steps should be taken to bring their conduct before the General Medical Council. An action would probably lie against the bonesetter if evidence could be obtained to prove the alleged libel, but the expense of such action would be heavy.

PUBLIC EXPRESSION OF GRATITUDE.

A CORRESPONDENT sends us an advertisement of a most curious character, which he states was cut out from the *South Bucks Free Press* of April 27th. In this, one Josiah P. Starling returns thanks to his friends for their sympathy, and then continues as follows: "Especially does he feel deeply indebted to his earnest painstaking doctor (Dr. Fleck), who, not only by his skill, but by his Christian, kindly manner, has, under the blessing of the 'Great Physician,' been the means of rescuing a life which was fast ebbing away. God grant that he may live long to spread health and happiness around him." Here follow the address and date, and the injunction: "N.B.—Please read Psalm cxvi." The insertion in such an advertisement of a reference to him must, we feel sure, have been extremely distasteful to Dr. Fleck, who might do well to induce his patient to let it be equally well known that the advertisement was inserted without Dr. Fleck's authority.

SCHOOL FEES AND INFECTION IN SCHOOLS.

A SINGULAR point has arisen in the course of a case in Bristol County Court with regard to the administration of the rule intended to guard boys at the Bristol Grammar School from infectious disease. The suit was brought by the governors of the institution to recover £4, one term's fees, for the son of Mr. W. Alford, a Clifton solicitor. It was contrary to the rule to receive scholars from a home where infection existed unless a medical certificate that there was no danger was sent. One of the masters at the school kept a house of boarders, and measles having broken out there, isolation was promptly resorted to, and the boys not affected continued attending school. Other boys in the school took measles, from what source could not be said, and one lad of Mr. Alford's also became ill. Mr. Alford (who himself strictly obeyed the rule) considered the regulation for the common protection had been broken, and took his son away when he ascertained the facts. No notice having been given (in accord with the contract) to withdraw the pupil, the fees were claimed and the action resulted. Mr. Weatherly, one of the counsel in the matter, stated that he could find no such case in the law books. The judge thought the rule directed against careless parents and not binding on the schoolmaster who kept the boarding house. He saw nothing to set aside the contract, and therefore gave judgment in favour of the school governors with costs on the highest scale.

IRISH GUARDIANS AND DOCTOR'S FEES.

AT the Dingle Quarter Sessions last week, Dr. Hayes, of Tralee, brought an action against the Board of Guardians for fees which they had declined to pay. The plaintiff had been summoned by the medical officer (Dr. Behan) to help him in a case in which the patient's eye had been blown out and his arm shattered by a gunpowder explosion, so that amputation was necessary. The guardians refused to pay on the ground that Dr. Behan had not acted on the authority of a medical relief ticket. Judge Shaw said in his opinion the guardians, and not the employer, were liable for the fees. A dispensary doctor was not bound to wait for a medical relief ticket in an urgent case. It would be a scandalous thing if that were so, that a patient should be allowed to die while the doctor was waiting for the relieving officer or any other person to give him leave to attend. The dispensary regulations and the Medical Charities Act were very clear on the point, and were not capable of being misconstrued. As to the power of a dispensary doctor to call assistance, they were not clear, but it was very evident that unless he was allowed to use his own discretion in such matters, very often serious results would occur, and life probably be lost. A dispensary doctor was, in his opinion, clearly entitled to use his own discretion in all urgent cases, and had power to call in all requisite assistance, and in this case Dr. Behan had not exceeded his power in any way. Dr. Hayes had charged a very moderate fee indeed for his services, and was entitled to be paid. He gave a decree with costs and expenses.

CHANGE OF ADDRESS.

HELENSBURGH.—If Dr. A. Gordon Ingram had been a young, inexperienced graduate, ignorance of the medico-ethical rule in question might not unfairly have been pleaded in extenuation; but, in view of the fact that he is a practitioner of some twelve or thirteen years' standing, no such excuse can justly be urged for contravening it by notifying his change of residence in the lay press. This change should

have been communicated to his patients by an autograph note or *fac-simile*, or by an ordinary address card, as advised in the *BRITISH MEDICAL JOURNAL* of April 27th under the heading of "Change of Address," p. 956, col. 2.

AN URGENT CASE AND SUBSEQUENT ATTENDANCE.

ASSISTANT B. writes that in the absence of his principal A. he was sent for to attend X., who is an old patient of A.'s. The case was urgent, and when Assistant B. arrived he found that several other doctors had been called in, and had rendered temporary assistance. One, C., continues in attendance, stating that he has been asked so to do by some of X.'s friends. X.'s wife desires B. to attend until A. returns.

. Assuming, as we do, that the above statement conveys a true version of the facts, there cannot, in our opinion, be the slightest doubt that C. is not justified in continuing his attendance, and especially in view of the fact that it is contrary to the wish of the wife of the patient.

THE CIRCULATION OF TESTIMONIALS.

C. writes: A. has recently started practice in a village where, before his coming, there was one doctor (B.) only. A servant from one of the houses in the neighbourhood consults him, whereupon he gives her copies of testimonials he received from various members of the staff of his hospital. One of these copies the servant gives to her mistress, who in turn shows it to her own doctor (C.), who lives in a village some miles distant. Is A.'s conduct in thus distributing testimonials justifiable?

. If our correspondent will refer to the *Ethical Code*, chap. ii, sec. 1, rule 3, he will find it distinctly laid down that to adduce or distribute—except when seeking a hospital or other public appointment—testimonials of skill is justly held to be incompatible with the honour and dignity of the profession, and to correspond with the ordinary practice of charlatans.

FREE ATTENDANCE ON THE FAMILIES OF MEDICAL MEN.

A MEMBER FOR THIRTY YEARS.—Although it is not in accord with professional custom to charge for attendance on the son of a brother practitioner, our correspondent will find, on referring to the following rule¹ that it is optional with the attendant practitioner to do so or not: "All legitimate practitioners of medicine, their wives, and children while under the paternal care, are entitled, not as a matter of right, but by professional courtesy, to the reasonable and gratuitous services—railway and like expenses excepted—of the faculty resident in their immediate or near neighbourhood. In the case also of near relatives, who are more or less dependent upon a professional brother (other than wealthy), it will likewise be well, at his request, to forego or to modify the usual fee. On the other hand, a son or a daughter altogether independent of the father, or the widow and children of a practitioner left in affluent or well-to-do circumstances, should be charged as ordinary patients, unless feelings of friendship, or other special reasons, render the attendant practitioner averse to professional remuneration; in such case the rule need not apply. Moreover, if a wealthy member of the faculty seeks professional advice, and courteously urges the acceptance of a fee, it should not be declined, for no pecuniary obligation ought to be imposed on the debtor which the debtor himself would not wish to incur."

DELTOID.—The principle of the above rule applies equally, and should be extended to registered students of medicine, whether such be the sons of medical men or otherwise.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

WALSINGHAM MEDAL.—The Lord High Steward has generously offered to continue the annual award of the Walsingham Medal for the best original research in Botany, Geology, Zoology, or Physiology, presented by a graduate of the University under the standing of M.A. Essays are to be sent to Professor Newton by October 10th, 1895.

DEGREES.—At the Congregation on May 6th the following degrees in Medicine and Surgery were conferred:

M.D.—J. A. Arkwright, M.A., Trinity; J. Attlee, M.A., St. John's; L. G. Glover, M.A., St. John's.
M.B.—J. J. Powell, M.A., Clare; W. Thomas, B.A., Christ's; L. G. Davies, B.A., non-coll.
B.C.—J. J. Powell, W. Thomas.

UNIVERSITY OF LONDON.

MEETING OF CONVOCATION.

THE annual meeting of Convocation was held on Tuesday last at the University building. Mr. E. H. BUSK was re-elected Chairman, and Mr. H. E. Allen clerk.

Professor S. P. THOMPSON presented the report of the Annual Committee, which was accepted without discussion.

Mr. H. M. BOMPAS, Q.C., moved the following resolution:

"That the three resolutions contained in paragraphs 7, 10, and 12 of the *Minutes* of the Meeting of Convocation held on January 22nd, 1895, are hereby rescinded, this House being of opinion that if a local teaching university for London be desirable, it ought to be constituted apart from the existing University of London." He said that a question had arisen upon which the interests of the provinces and of London differed as regarded the members of that Uni-

¹ Code, chap. ii, Sect. 2, Rule 1.

versity, inasmuch as it was proposed that special privileges should be given to the London colleges and the London graduates. He felt that the meeting in January last was composed entirely of London graduates, and he desired to give country graduates this opportunity of discussing the scheme and voting upon it. The question which he desired to raise had not been put to the University fairly and straightly before. The examinations of the University were now open to all the world, candidates coming to it from all parts and from other universities. If made a teaching university, its examinations must tend to be greatly to the advantage of London students, and could not remain the scrupulously fair tests they were at present. He thought London should have a teaching university; but it should be a separate body, if in the new university attendance at lectures was to count instead of examinations alone as a means of obtaining a degree. At present every man, whether he came from the London Colleges or whether he taught himself, and whether examined in London or Calcutta, felt that he was subjected to an equal and fair standard. This had been the foundation of the University's great success and the unique value of its degrees. The Gresham scheme proposed to alter that entirely, and if carried out it would establish an examination of such a character that those trained in the London Colleges would have an advantage over those trained elsewhere. A teaching university for London was required, but it should be separate from the present University. It had been argued that if such another university were established the present University would lose its students; he ventured to think that was an entire mistake. On the contrary, if their University were converted into a teaching university they would certainly lose their country graduates.

Mr. H. H. COZENS HARDY, Q.C., M.P., strongly opposed the resolution. He said that if he thought the scheme would put an end to non-collegiate students he would oppose it; but, as he thought those students should be in association with a university of the highest reputation, he opposed Mr. Bompas's proposition. For years Convocation had voted in favour of association with the coming teaching university. The details of the scheme had been discussed *ad nauseam*. Mr. Bompas had said that the January meeting was composed entirely of London graduates. This he emphatically denied. There had been a larger number of graduates then present than he remembered ever having seen before except on one occasion. The scheme had been approved after immense care and discussion, and he trusted they would not now make themselves the laughing-stock of the country by rescinding their former vote.

Dr. H. L. HART seconded the motion of Mr. Bompas, which was opposed by

Dr. J. G. FITCH, who said that he was confident the Government intended to adhere to the principle of protecting the interests of non-collegiate students. He knew that the University had been of the greatest possible assistance to schoolmasters and scholars all over the country; and the scheme for the new university would not lessen that usefulness. Convocation should not now interpose any further difficulty in the way of the realisation of the scheme, which would solve a problem. Difficult, indeed, but not, as some seemed to suppose, insoluble. Their University could adapt itself to the circumstances of the times; and they must "take the tide when it served or lose their venture."

The resolution was opposed by Mr. J. E. H. COTTON and Mr. T. C. LOWE, who considered that the country graduates possibly saw the real bearing of the question better than the graduates living in the metropolis. He considered that the points in favour of Mr. Bompas's resolution were that it was honest, embodied good policy, since it would attract men to their University, and would lead to the speedier formation of the much-desired teaching university in London, since the Gresham scheme was likely to be contested at every point.

Mr. THOMAS said that the two Universities in the North of England had excluded non-collegiate students because their inclusion was considered to be thoroughly impracticable.

Mr. H. HANFORD said that if the balance of power in the Gresham scheme could be taken from the teachers many of those now opposing it would vote for it.

Dr. H. L. SNOW asked why they should sacrifice all the advantages of the present Imperial University by the adoption of a fundamentally diverse constitution.

The Rev. Principal CAVE said that Nonconformist Colleges did not wish a cheaper or easier degree than that of the present University. If another university were constituted in London, to which the Colleges were affiliated, their University would be starved, only self-taught students would come to it; he, therefore, should strongly oppose the resolution.

After some further discussion, Mr. BOMPAS said, in reply, that Mr. Cozens Hardy and Mr. Fitch had both remarked that if they thought the proposed change would be inimical to the non-collegiate students they would not support it; he himself failed to see how it was possible for it to be adopted without that result to those students.

Upon a division, 117 votes were recorded for the resolution, and 238 against it. The resolutions of January consequently stand as passed. It was further resolved that the names of graduates voting should be printed in the report.

The CHAIRMAN announced that the nomination of a list of three persons to be submitted to Her Majesty for the selection therefrom of a Fellow of the University had resulted as follows: For Dr. T. B. Napier, 1,231 votes; for Mr. H. H. Cozens-Hardy, Q.C., M.P., 733 votes; and for Mr. Greig, 30 votes.

Mr. W. J. SPRATLING proposed that a special Committee of Convocation be appointed for the purpose of further reviewing the scheme for London Local Examinations.

Mr. T. TYLER seconded the proposition.

After some discussion an amendment was proposed by Dr. B. E. DAWSON, and seconded by Mr. H. M. BOMPAS, Q.C., "That it is inopportune at the present time to further proceed with the consideration of any scheme for local examinations" was put to the meeting and carried by a two-thirds majority.

The voting for the annual committee for the ensuing year resulted in the adoption of the list of names in all the Faculties, exactly as recommended in the circular issued by the committee of graduates (chairman, Mr. H. H. Cozens-Hardy) favourable to the scheme of the Gresham University Commission, and constituted in April, 1894. The following gradu-

ates in Medicine were elected: Mr. Stanley Boyd, Dr. J. Rose Bradford, Mr. H. G. Howse, Dr. H. M. Murray, Dr. A. E. Sanson, Mrs. M. A. D. Scharlleb, Dr. T. W. Shore, Mr. W. G. Spencer, Dr. F. Taylor, Dr. N. I. C. Tizard, and Mr. H. J. Waring.

Through an error in counting the votes on the part of the scrutineers of the ballot, the names of two of the above graduates were omitted from the list of graduates elected as it was first announced by the Chairman, and two other members were declared elected. But the error was afterwards rectified by the scrutineers, and the correction announced by the Chairman.

UNIVERSITY OF GLASGOW.

EXAMINERS FOR MEDICAL DEGREES.—The University Court, at their meeting on May 9th, made the following appointments of Examiners for Degrees in Medicine: Mr. Henry Edward Clark, M.R.C.S., to be Examiner in Clinical Surgery; and Dr. Thomas D. Savill, M.R.C.P. & S., D.P.H., to be Examiner in Clinical Medicine. Each appointment was made for the term of three years.

ROYAL UNIVERSITY OF IRELAND.

EXAMINATION FOR THE M.B., B.CH., B.A.O. DEGREES.—SPRING, 1895.—The Examiners have recommended that the following candidates be adjudged to have passed the above-mentioned examination:

Upper Pass.—J. A. Craig, Queen's College, Belfast; W. Hanna, M.A., Queen's College, Belfast; T. Houston, B.A., Queen's College, Belfast; A. Trimble, Queen's College, Belfast; and J. H. Whitaker, Queen's College, Belfast.

Candidates marked with an asterisk may present themselves for the Further Examination for Honours.

Passed.—R. H. Allan, Queen's College, Belfast; W. T. D. Allen, Catholic University School of Medicine and Royal College of Science; J. Booth, Queen's College, Cork; J. D. Boyd, Queen's College, Belfast; J. P. Cashman, Queen's College, Cork; J. A. Clements, Queen's College, Galway, Catholic University School of Medicine, and Medical School, Edinburgh; L. A. J. Crinion, Catholic University School of Medicine; W. Herron, Queen's College, Belfast; J. Huston, B.A., Queen's College, Belfast; T. J. W. A. Johnston, Queen's College, Belfast; J. Lowry, Queen's College, Belfast; J. H. McBurney, Queen's College, Belfast; C. McCarthy, Queen's College, Cork; J. W. McHenry, Queen's College, Belfast; D. J. O'Connor, M.A., Queen's College, Cork; J. Roanree, Catholic University School of Medicine; D. Somerville, B.A., Queen's College, Belfast.

The following have also been recommended to pass examination for the M.D. degree:

H. W. Cunningham, private study; J. Eldon, St. Bartholomew's Hospital, London; J. S. Morrow, B.A., Queen's College, Belfast, and private study.

Examination for M.Ch. degree:

J. Eldon, St. Bartholomew's Hospital, London.

SECOND EXAMINATION IN MEDICINE. SPRING, 1895.—The Examiners have recommended that the following candidates be adjudged to have passed the above-mentioned examination:

Upper Pass.—N. J. Blaney, Catholic University School of Medicine; R. T. Booth, Queen's College, Cork; E. J. Butler, Queen's College, Cork; G. E. Charles, Queen's College, Cork; A. Grahame, Queen's College, Belfast; J. B. Slattery, Queen's College, Cork; G. K. Smiley, Queen's College, Belfast.

The above candidates may present themselves for the Further Examination for Honours:

Pass.—R. Ahern, Queen's College, Cork; Dora E. Allman, Queen's College, Cork; W. L. Armstrong, Queen's College, Belfast; W. Cahill, Queen's College, Cork; H. L. Craig, Queen's College, Belfast; J. Dorgan, Queen's College, Cork; J. Duff, Catholic University School of Medicine; H. Hanna, B.A., Queen's College, Belfast; G. C. R. Harbinson, Queen's College, Belfast; J. C. B. Hayes, Queen's College, Cork; J. J. Hill, Queen's College, Cork; S. Hill, Queen's College, Belfast; G. A. Hogg, Queen's College, Belfast; F. S. Irvine, Queen's College, Belfast; W. E. J. Jones, Queen's College, Belfast; J. N. Lynch, Queen's College, Cork; E. McDonnell, Queen's College, Cork; D. Murphy, Queen's College, Cork; P. M. O'Meara, B.A., Queen's College, Cork; and Catholic University School of Medicine; G. A. Hogg, Queen's College, Belfast; J. Scott, Queen's College, Belfast; W. J. Sweeney, Royal College of Surgeons, School of Physic Trinity College Dublin, and Royal College of Science, Dublin; S. Waddell, Queen's College, Galway; J. E. Whyte, Queen's College, Belfast.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE following gentlemen passed the First Professional Examination for the Diploma of Fellow, at a meeting of the Board of Examiners, on Monday, May 13th:

W. E. Bennett, L.R.C.P.Lond., M.R.C.S.Eng., Mason College, Birmingham, and St. Bartholomew's Hospital; A. H. Burgess, Owens College, Manchester; R. Campbell, M.B.R.U.Irel., L.R.C.P.Lond., M.R.C.S.Eng., Queen's College, Belfast; J. L. Dick, M.B.Édin., L.R.C.P.Lond., M.R.C.S.Eng., Edinburgh University and St. Bartholomew's Hospital; and W. B. H. Wood, Mason College, Birmingham.

Fifteen gentlemen were referred back to their professional studies for six months.

Passed on Tuesday, May 14th:

A. E. Atkinson, L.R.C.P.Lond., M.R.C.S.Eng., Middlesex and St. Thomas's Hospital; W. R. Battye, University Colleges, Bristol and London; D. L. F. Davies, Middlesex Hospital; E. S. E. Hower, St. Bartholomew's Hospital; and T. H. Molesworth, Cambridge University and St. Bartholomew's Hospital.

Fifteen gentlemen were referred back to their professional studies for six months.

THE following are the arrangements for the Final Examination for the Fellowship, for which 47 candidates have entered their names:

Monday, May 20th, Written Examination, at Examination Hall, 1.30 to 5.30 P.M.

Tuesday, May 21st, Clinical Examination, at Examination Hall, 2.30 to about 6.30 P.M.

Wednesday, May 22nd, Operations, at Examination Hall, 1.30 to about 6 P.M.

Thursday, May 23rd, Surgical Anatomy, at Examination Hall, 2 to about 4.15 P.M.

Friday, May 24th, Pathology, at Royal College of Surgeons, 5 to about 8 P.M.

Saturday, May 25th, Pathology, at Royal College of Surgeons, 5 to about 8 P.M.

Candidates will be required to attend on each of the first four days, and on Friday or Saturday.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

HEALTH OF ENGLISH TOWNS.

In thirty-three of the largest English towns, including London, 6,494 births and 3,585 deaths were registered during the week ending Saturday, May 11th. The annual rate of mortality in these towns, which had declined from 35.0 to 17.5 per 1,000 in the nine preceding weeks, rose again to 17.7 last week. The rates in the several towns ranged from 12.9 in Swansea, 13.5 in Brighton and in Hull, and 13.6 in Sunderland to 23.9 in Halifax, 24.5 in Preston, and 25.8 in Plymouth. In the thirty-two provincial towns the mean death-rate was 18.4 per 1,000, and exceeded by 1.8 the rate recorded in London, which was only 16.6 per 1,000. The zymotic death-rate in the thirty-three towns averaged 1.7 per 1,000; in London the death-rate was equal to 1.7 per 1,000, and corresponded with the mean rate in the thirty-two provincial towns, among which the highest zymotic death-rates were recorded in West Ham, Bolton, and Plymouth. Measles caused a death-rate of 1.3 in West Ham and in Newcastle-upon-Tyne, 2.6 in Bolton, and 3.5 in Plymouth; and whooping-cough of 1.5 in Salford and 1.6 in Burnley. The mortality from scarlet fever and from "fever" showed no marked excess in any of the large towns. The 65 deaths from diphtheria in the thirty-three towns included 38 in London, 6 in West Ham, 4 in Birmingham, 3 in Liverpool, and 3 in Wolverhampton. No fatal case of small-pox was registered either in London or in any of the thirty-two provincial towns. There were 33 small-pox patients under treatment in the Metropolitan Asylums Hospitals and in the Highgate Small-pox Hospital on Saturday last, May 11th, against 35, 37, and 34 at the end of the three preceding weeks; 6 new cases were admitted during the week, against 4, 12, and 8 in the three preceding weeks. The number of scarlet fever patients in the Metropolitan Asylums Hospitals and in the London Fever Hospital, which had been 1,514, 1,469, and 1,413 at the end of the three preceding weeks, was 1,438 on Saturday last, May 11th; 179 new cases were admitted during the week, against 162, 132, and 107 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday, May 11th, 947 births and 540 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 20.6 and 20.9 per 1,000 in the two preceding weeks, declined to 18.7 last week, but exceeded by 1.0 per 1,000 the mean rate during the same period in the large English towns. Among these Scotch towns the death-rates ranged from 16.2 in Dundee to 27.8 in Leith. The zymotic death-rate in these towns averaged 2.0 per 1,000, the highest rates being recorded in Paisley and Leith. The 246 deaths registered in Glasgow included 12 from whooping-cough, 2 from scarlet fever, and 1 from small-pox. Eight fatal cases of measles and 1 of small-pox were recorded in Edinburgh, and 9 of measles in Leith.

PENSIONS FOR POOR-LAW MEDICAL OFFICERS.

LAMBEA asks the following questions:

1. Are Poor-law medical officers at present entitled to a pension after having served a certain number of years?

2. If so, what is the time they must serve before becoming so entitled?

3. If a pension is granted, must the recipient reside in any special place?

4. If medical officers are not now entitled to a pension, is it probable that within a few years legislation will render them so?

*** Poor-law medical officers at present only become entitled to a pension if such is granted by the guardians and the grant is confirmed by the Local Government Board. As a general rule no pension can be granted for less than twenty years' service. We are not aware of any restriction as to residence if a pension is once awarded.

It is impossible for us to say what future legislation will effect in reference to this subject. There is a Bill now before the House which, if passed, will in the future make pensions compulsory after long service.

MEDICAL SUPERINTENDENT.—The point has been well threshed out amongst the Poor-law Officers in their *Journal*, and it is considered that it would be unwise to revive the question. The getting the principle of superannuation acknowledged is nearer accomplishment than ever, and it is well not to let trivial matters interfere with united efforts. Mr. Rutherglen, the President of the Poor-law Officers' Association, has worked hard in the cause, and has welcomed the medical officers' accession warmly, and it would not be acting right for the medical element to throw obstacles in the way.

DR. T. H. REDWOOD asks for information as to the birth-rate and the death-rates, general and infantile, and zymotic, urban and rural, for all England and Wales, for the year 1894. If the rate under 5 years, including under 1 year, could be given also, all the better.

*** The following are the rates for England and Wales, 1894:

Birth-rate	= 29.6 per 1,000 living.
Death-rate	= 16.6 " "
Zymotic rate	= 1.76 " "
Urban death-rate	= 17.1 " "
Rural	= 15.6 " "
Deaths under 1 year of age	= 137 per 1,000 births.

The death-rate under 5 years of age is not yet available.

MEDICO-PARLIAMENTARY.

HOUSE OF LORDS.

The University of London.—Lord PLAYFAIR introduced a Bill for the purpose of reconstituting the University of London. After recapitulating the action of the two Royal Commissions which have reported on this question, he stated that the Bill proposed to carry out the recommendation of the last Royal Commission that the reconstitution should be carried out by legislative authority, that was, by a Statutory Commission. The scheme was elaborate, and the Bill gave power to the Statutory Commission to carry out the necessary adjustments to ensure that justice should be done to all interests. The plan of giving such powers to a Statutory Commission was an old one, as it had already been followed in the case of the Universities of Oxford and Cambridge and the Scottish Universities. There was no intention to interfere by the Bill with the Imperial character of the existing University. The power of the University to examine and grant degrees to students external to London would be preserved by a clause in the Bill. The names of the Statutory Commissioners would be inserted in the Bill before the House was asked to read it a second time.—Some conversation subsequently took place, in the course of which Viscount CROSS and the Marquis of SALISBURY complained that proper notice had not been given of the intention to introduce the Bill, and also that Lord Playfair had made a speech in introducing the Bill.—Lord PLAYFAIR protested that he had given due notice, and eventually the Bill was read a first time.

Midwives Registration Bill.—Lord BALFOUR moved the second reading of this Bill. He said that in this country alone in Europe was no care or supervision exercised over the calling of the midwife. Any woman might undertake and continue that calling. Even the fact that a woman had been convicted upon a criminal charge would not justify any authority in preventing her continuing to practise. The mortality amongst the mothers who employed these women was much greater than it ought to be; and disease, both in mothers and children, resulted from incompetent attendance during childbirth. The report of the Select Committee of the House of Commons (1892-3) showed that midwives did attend women of the humbler classes in great numbers without the supervision of qualified medical men; that a great number of them were untrained, and that the mortality and injuries from their want of skill was greater than it should be. He read a letter from Sir John Williams in which were enumerated the sources of this mortality, and the opinion was expressed that the mortality of childbed among the poorer classes would be greatly reduced if the women who attended possessed an elementary knowledge of midwifery. Lord Balfour then described the provision of the Bill (which was issued on May 9th, and published in the *JOURNAL* of May 11th); he believed that the effect of the Bill would be to teach these women to send for medical advice, and that such a Bill was a matter of crying necessity in the interests of public health, as well as in those of common humanity.—Lord THRING expressed the hope that the Bill should be referred to a Select Committee, and due care taken to see that midwives were properly represented on the Council.—Lord PLAYFAIR said that the Government had no objection to the general principle of the Bill, but considered that several important amendments might be necessary. One point of weakness was the attempt to define "natural labour." Further, he thought it would be difficult to limit the application of the term "midwife," one of the oldest words in the English language. Clauses 8 and 12 were so elaborate that he feared in practice they would prevent the success of the Bill. He concluded by asking Lord Balfour to postpone the further consideration of the Bill for a short time, so as to enable the Government to consider what amendments should be put down before the Committee stage.—Lord BALFOUR acquiesced, and the Bill was then read a second time.

HOUSE OF COMMONS.

Tuberculosis Commission.—Mr. KNOWLES asked the Speaker's ruling with regard to a clerical error which appeared on the notice paper. A motion standing in his name (Tuberculosis Royal Commission) appeared as a notice of motion instead of as a motion on going into Committee of Supply, and he wished to know whether that clerical error could be now corrected.—Mr. CALDWELL, as a matter of order, wished to know if it was competent at this stage to alter the motions on going into Committee of Supply, regarding which alterations members had had no notice.—The SPEAKER said he understood from the hon. member that a mistake had been made in the printing of the paper, the motion in question being put down as a substantive motion, whereas it should have appeared as an amendment on going into Committee of Supply. The matter would be put right in the evening paper if no substantial objection was taken.

MEDICAL NEWS.

DR. FANCOURT BARNES was elected Consulting Physician to the British Lying-In Hospital at a general meeting of the Governors on May 7th.

THE Society of Obstetrics and Gynæcology of Bordeaux, in organising a Congress for August 8th, on the occasion of the Exposition, has elected Dr. Robert Barnes "President d'Honneur" of the Congress.

THE annual exhibition of the St. George's Hospital-Graphic Society, which is strictly limited to the works of members, will be opened in the Museum of the hospital immediately after the annual meeting, which is to be held on May 28th, at 2.30 P.M. Visitors will be admitted to the exhibition, which will remain open until the end of the week, on presentation of their cards.

FRENCH CONGRESS OF INTERNAL MEDICINE.—The second French Congress of Internal Medicine will be held this year at Bordeaux under the presidency of Professor Bouchard. The date of meeting is August 8th. The subjects proposed for discussion are: (1) Infectious Myelitis; (2) Relations of the Liver and Intestine in Pathology; (3) Analgesic Antipyretics.

LIFE INSURANCE OF CHILDREN IN AMERICA.—A Bill has been reported to the Massachusetts Legislature providing that no life insurance company shall issue a policy upon the life of any child under 10 years of age living in the State. The penalty is 100 dollars for each offence, the law to come into force on September 1st, 1895.

PATHOLOGICAL SOCIETY OF LONDON.—The following is the list of officers and Council proposed for election by the Council at the annual general meeting of the Society on May 21st. An asterisk (*) signifies that the gentleman to whose name it is appended was not on the Council, or did not hold the same office during the preceding year: *President*: *Henry Trentham Butlin, D.C.L., F.R.C.S. *Vice-Presidents*: Thomas Barlow, M.D.; William Selby Church, M.D.; *Norman Moore, M.D.; *Seymour Sharkey, M.D.; Alban H. G. Doran; *Frederick S. Eve; Cuthbert H. Golding-Bird; *Frederick Treves. *Treasurer*: Sidney Coupland, M.D. *Honorary Secretaries*: G. Newton Pitt, M.D.; *J. H. Targett, M.S. *Council*: Wilmot Parker Herringham, M.B.; A. A. Kanthack, M.B.; *Hector Mackenzie, M.D.; Sidney Martin, M.D.; William Pasteur, M.D.; H. D. Rolleston, M.D.; Charles Scott Sherrington, M.B.; *F. Charlesworth Turner, M.D.; *A. F. Voelcker, M.D.; Dawson Williams, M.D.; Gilbert Barling, M.B.; James Berry, M.B.; Stanley Boyd; *Anthony Bowly; E. Hurry Fenwick; C. B. Lockwood; Stephen Paget; *Bilton Pollard, M.B.; Samuel G. Shattock; Charles Stonham.

MEDICAL VACANCIES.

The following vacancies are announced:

- ADDENBROOKE'S HOSPITAL, Cambridge.—Resident House-Physician. Salary, £85 per annum, with board, lodging, and washing in the hospital. Applications to the Secretary by May 30th.
- ASYLUM FOR IDIOTS, Earlswood, Redhill, Surrey.—Assistant Medical Officer. Salary, £150 per annum, with board and residence. Applications marked "Assistant Medical Officer," to the Secretary, 38, King William Street, London Bridge, E.C., by May 23rd.
- BARNSTABLE UNION.—District Medical Officer. Salary, £70 per annum and midwifery fees. Applications to William Henry Toller, by May 30th.
- BIRKENHEAD UNION.—Medical Officer of Workhouse and Schools. Salary, £30 per annum for the Workhouse and £10 for the Schools, with extra medical fees, and will also be appointed Public Vaccinator. Also Assistant Medical Officer. Salary, £80 per annum for the Workhouse and £20 for the Schools, with rations, attendance, washing, and residence in the workhouse. Candidates must be registered. Applications and testimonials endorsed "Medical Officer," or "Assistant Medical Officer" (as the case may be), to John Carter, Clerk to the Guardians, Clerk's Offices, 45, Hamilton Square, Birkenhead, by May 31st.
- BLACKBURN AND EAST LANCASHIRE INFIRMARY.—Junior House-Surgeon, will be required to enter into an agreement not to commence private practice within the Borough of Blackburn for a period of three years. Salary, £50 per annum with board, washing, lodging, etc. Applications and testimonials to N. A. Smith, Secretary by May 23rd.
- CARDIFF INFIRMARY.—Senior Resident Medical Officer; doubly qualified. Salary, £100 per annum, with board, washing, and furnished

- apartments. Applications to George T. Coleman, Secretary, by May 27th.
- COUNTY AND CITY ASYLUM, Hereford.—*Locum Tenens* for three or four months. Salary, £22s. per week, with board, etc. Applications and testimonials to the Medical Superintendent.
- COUNTY ASYLUM, Lancaster.—Holiday Assistant for five months; fully qualified. Salary, 2 guineas per week, with all found. Applications to Dr. Cassidy, the Medical Superintendent.
- DENTAL HOSPITAL OF LONDON, Leicester Square.—Two Dental Surgeons. Candidates must be Licentiates of Dental Surgery of one of the licensing bodies recognised by the General Medical Council. Applications and testimonials to J. Francis Pink, Secretary, by June 10th.
- GENERAL HOSPITAL, Birmingham.—Assistant House-Surgeon, must possess a surgical qualification and be registered. Appointment for six months. No salary, but residence, board, and washing provided. Applications with certificate of registration and copies of testimonials to H. J. Collins, House Governor, by June 1st.
- GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road, N.—Pathologist and Registrar. Appointment for one year. Honorarium at the rate of fifty guineas per annum. Applications to the Secretary by May 27th.
- GUARDIANS OF KENSINGTON.—Second Assistant Resident Medical Officer for the Workhouse and Infirmary. Age between 21 and 30 years; doubly qualified. Salary, £30 per annum, with apartments, board, and washing. Applications on forms to be obtained at the office of the Clerk to the Guardians, Marloes Road, Kensington, where they must be delivered by 10 A.M. on May 25th.
- HALIFAX INFIRMARY AND DISPENSARY.—House Surgeon, must be unmarried, doubly qualified and registered. Salary, £80 per annum, advancing £10 per year up to £100, with residence, board, and washing. Applications and testimonials to Oates Webster, Secretary, by May 22nd.
- HOLBORN DISTRICT.—Medical Officer of Health. Salary, £350 per annum. Applications on printed forms to be obtained from Matthew H. Hale, Clerk to the Board, Holborn Town Hall, accompanied by not more than three testimonials, to be returned to him before May 30th.
- KENSINGTON WORKHOUSE INFIRMARY.—Second Assistant Resident Medical Officer, must be between 21 and 30 years of age, must possess both a medical and surgical qualification. Salary, £30 per annum, with apartments, board, and washing. Applications and testimonials to J. H. Rutherglen, Clerk to the Guardians, by May 25th.
- LIVERPOOL STANLEY HOSPITAL.—Junior House-Surgeon. Must possess a registered medical and surgical qualified qualification. One who has filled a similar office preferred. Salary, £70 per annum, with board, etc. Applications and testimonials by May 30th.
- NEW HOSPITAL FOR WOMEN, 144, Euston Road, N.W.—Two Qualified Medical Women as House-Surgeons. Applications to the Secretary by May 29th.
- NORTH EASTERN HOSPITAL FOR CHILDREN, Hackney Road, Shoreditch, N.E.—House-Physician. Appointment for six months, and at the expiration of this term the House-Physician will be required, if eligible, to serve as House-Surgeon for a further period of six months. Must possess a medical and surgical qualification. Salary as House-Physician at the rate of £80 per annum, and as House-Surgeon at the rate of £80 per annum. Applications and testimonials to T. Glendon-Kerr, Secretary, City Office, 27, Clement's Lane, Lombard Street, E.C., by June 11th.
- PARISH OF BIRMINGHAM.—Resident Medical Officer for the Workhouse. Doubly qualified and registered. Salary, £150 for the first year, rising £10 yearly to £200 per annum, rations, apartments, washing, and attendance. Applications to be made on printed form, to be obtained from Walter Bowen, Clerk to the Guardians, Parish Offices, Edmund Street, to be returned to him by May 25th.
- ROTHERHAM HOSPITAL AND DISPENSARY.—Resident House-Surgeon; doubly qualified. Salary, £100 per annum, with rooms, washing, and commons. Appointment for three years. Applications to the Secretary by the end of May.
- ROYAL COLLEGE OF SURGEONS OF ENGLAND.—Hunterian Professors, the Erasmus Wilson Lecturer, and the Arris and Gale Lecturer for the ensuing year. Applications, with particulars of subjects upon which it is proposed to lecture, to E. Trimmer, Secretary, by June 6th.
- ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.—Two Resident Medical Officers. Doubly qualified. Appointment for six months, but the holder will be eligible for re-election. No salary, but board, residence, and washing. Applications and testimonials to Conrad W. Thies, Secretary, by June 1st.
- ROYAL HOSPITAL FOR CHILDREN AND WOMEN, Waterloo Bridge Road, E.C.—Clinical Assistant and Anaesthetist required for six months. Doubly qualified. Salary, at the rate of £30 per annum. Applications and testimonials to R. Gerrard Kestin, Secretary, by May 29th.
- ROYAL WESTMINSTER OPHTHALMIC HOSPITAL, King William Street, West Strand. Clinical Assistants. Appointments for six months, must be duly qualified; and preference will be given to those who have had previous experience of ophthalmic practice. Applications and testimonials to T. Beattie-Campbell, Secretary, by June 1st.
- ST. MARY'S HOSPITAL MEDICAL SCHOOL.—Lecturer on Mental Diseases. Applications to G. P. Field, Dean, by May 27th.
- ST. THOMAS'S HOSPITAL MEDICAL SCHOOL.—Lecturer on Physiology. Applications to the Dean by May 25th.
- SOCIETY OF APOTHECARIES.—Examiners in Medicine (including Forensic Medicine, Pathology, and Midwifery). Applications to J. R. Upton, Clerk to the Society, Apothecaries' Hall, Blackfriars, by May 27th.

TAUNTON AND SOMERSET HOSPITAL. — Assistant House-Surgeon. Appointment for six months without salary, but with board, washing, and lodging in the institution. Applications, endorsed "Assistant House-Surgeon," to the House-Surgeon by May 18th.

UNIVERSITY COLLEGE, London — Professorship of Materia Medica and Therapeutics. Applications by May 29th.

WESTERN GENERAL DISPENSARY, Marylebone Road. — Junior House-Surgeon, must be duly registered and unmarried. Salary, £50 per annum, with rooms and board. Applications and testimonials to the Honorary Secretary by May 24th.

WESTMINSTER GENERAL DISPENSARY, 9, Gerrard Street, Soho, W. — Honorary Surgeon. Applications and testimonials to J. J. Johnson, Secretary, by May 20th.

MEDICAL APPOINTMENTS.

BAKER, Arthur W. W., M.D. Dubl., F.R.C.S.I., appointed Examiner in Dental Surgery and Pathology at the Royal College of Surgeons in Ireland.

BARNES, Fancourt, M.D., appointed Consulting Physician to the British Lying-in Hospital.

BARTON, John M.D., F.R.C.S.I., appointed Examiner in Anatomy at the Royal College of Surgeons in Ireland.

BATE, Abraham William, M.D. St. And., F.R.C.S.I., appointed Examiner in Midwifery and Gynaecology at the Royal College of Surgeons in Ireland.

BURGESS, John J., L.R.C.P., F.R.C.S.I., appointed Examiner in Pathology at the Royal College of Surgeons in Ireland.

CHANCE, Arthur, L.R.C.P., F.R.C.S.I., appointed Examiner in Surgery at the Royal College of Surgeons in Ireland.

COLLIS, A. J., M.A., M.B., B.C. Cantab., M.R.C.S., L.R.C.P., appointed Resident Medical Officer at the Weston-super-Mare Hospital and Dispensary.

CONWAY, Dr., appointed Deputy Medical Officer to the Workhouse of the Uxbridge Union.

COPPINGER, Charles, M.D., F.R.C.S.I., appointed Examiner in Physiology and Histology at the Royal College of Surgeons in Ireland.

ENSOR, H. C., M.R.C.S. Eng., L.S.A., appointed Honorary Ophthalmic Surgeon to the Newport and Monmouthshire Infirmary.

FISH, Fred W., M.B., Ch.B., appointed Resident Medical Officer to the Southport Convalescent Hospital and Sea Bathing Infirmary.

GARLAND, Edward Charles, L.R.C.P. Edin., M.R.C.S. Eng., reappointed Medical Officer of Health to the Yeovil Town Council.

HARDING, L. N., B.A., M.B., B.C. Camb., M.R.C.S., L.R.C.P. Lond., appointed House-Surgeon to the Brighton, Hove, and Sussex Throat and Ear Hospital.

HAYDON, F. L. R. C. P. Lond., appointed Secretary to the Court of Examiners of the Society of Apothecaries, *vice* C. E. A. Semple, M.B., M.R.C.P. Lond., deceased.

KENDALL, B. C., M.R.C.S., L.R.C.P., appointed Medical Officer to the Helston Dispensary, *vice* C. F. Seville, M.B. Lond., resigned.

KINGDON, Edward O., L.R.C.P. Lond., M.R.C.S. Eng., reappointed Medical Officer for the No. 3 District of the Holdsworth Union.

KNOTT, John, M.D., F.R.C.S.I., appointed Examiner in Chemistry and Physics at the Royal College of Surgeons in Ireland.

LAPPER, Edwin, F.R.C.P., L.R.C.S.I., appointed Examiner in Chemistry and Physics at the Royal College of Surgeons in Ireland.

LEAF, Cecil Huntingdon, M.A., M.B., B.C. Cantab., M.R.C.S., appointed Assistant Demonstrator of Anatomy at the London Hospital.

MCCLELLAND, W., M.B., Ch.B. Vict., reappointed Non-Resident Medical Officer to the Gynaecological Department of the Liverpool Royal Infirmary.

MACKAY, William Alexander, M.B., C.M. Glas., appointed Assistant Medical Officer to the City of Glasgow Parochial Board.

MAXWELL, Patrick William, M.D. Edin., F.R.C.S.I., appointed Examiner in Ophthalmology at the Royal College of Surgeons in Ireland.

MYLES, Thomas, M.D., F.R.C.S.I., appointed Examiner in Anatomy at the Royal College of Surgeons in Ireland.

OLIVER, George H., M.R.C.S. Eng., L.R.C.P. Lond., L.S.A., appointed Assistant Surgeon to the Bradford Eye and Ear Hospital, *vice* G. H. Dodd, B.A., M.R.C.S., L.S.A., resigned.

PATON, R. J., M.B., C.M. Edin., appointed Honorary Surgeon to the In-patients at the Newport and Monmouthshire Infirmary.

PATTERSON, R. Glasgow, M.B., F.R.C.S.I., appointed Examiner in Pathology at the Royal College of Surgeons in Ireland.

PRATT, J. Dallas, M.D. Dubl., F.R.C.S.I., appointed Examiner in Medical Jurisprudence at the Royal College of Surgeons in Ireland.

ROBB, A. G., M.B. R. U.I., B.Ch., appointed Medical Officer for No 10 Sub-district (Springfield) of the Belfast Dispensary.

ROLL, Dr., appointed Honorary Assistant Physician to the Leicester Infirmary, *vice* Dr. Pratt, resigned.

ROPER, Leonard, M.A., M.B., B.C. Cantab., reappointed Clinical Assistant and Demonstrator in the Throat Department at Guy's Hospital.

SCOTT, J. Alfred, M.D., F.R.C.S.I., appointed Examiner in Physiology, Histology, and Biology, at the Royal College of Surgeons in Ireland.

STACK, R. Theodore, M.D. Dubl., F.R.C.S.I., appointed Examiner in Dental Surgery and Pathology at the Royal College of Surgeons in Ireland.

STANTON, Dr. W. E. appointed Medical Officer for the Deeping St. Nicholas District of the Spalding Union.

STOKES, Sir William, M.D., F.R.C.S.I., appointed Examiner in Surgery at the Royal College of Surgeons in Ireland.

STORY, John Benjamin, M.B. Dubl., F.R.C.S.I., appointed Examiner in Ophthalmology at the Royal College of Surgeons in Ireland.

TAYLOR, Dr. J. C., appointed Medical Officer for the Third District of the Westbury and Whorwellsdon Union.

WESTON, Dr., appointed Medical Officer for the Leighford District of the Stafford Union.

WHITE, George Burbridge, M.B. Dubl., F.R.C.S.I., appointed Examiner in Biology at the Royal College of Surgeons in Ireland.

WILLS, Thomas Munns, F.R.C.S.I., Senior Honorary Surgeon, appointed Consulting Surgeon to the Bootle Borough Hospital Liverpool.

DIARY FOR NEXT WEEK.

MONDAY.

LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M. — Mr. A. Stanford Morton: Affections of Eyelids. London Throat Hospital, Great Portland Street, 8 P.M. — Mr. G. Charles Wilkin: Aural Polyp.

MEDICAL SOCIETY OF LONDON, 8 P.M. — Annual *conversazione*. Oration at 8.30 P.M. by Mr. A. Pearce Gould, on the Recent Evolution of Surgery.

TUESDAY.

LONDON POST GRADUATE COURSE, Bethlem Royal Hospital, 2 P.M. — Dr. Hyslop: stupor; Catalepsy; Katatonias; Dementia.

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

PATHOLOGICAL SOCIETY OF LONDON, 8.30 P.M. — Dr. Vaughan Harley: Absorption and metabolism in a Case of Pancreatic Obstruction, etc. Mr. Edmunds: Observations and Experiments on the Pathology of Graves's Disease. Mr. A. C. Collum (introduced by Dr. Pitt): Imperforate Duodenum. Mr. G. S. Shattock: Diphtheria and Pseudo diphtheria Bacilli, from two sisters simultaneously affected. Mr. H. J. Waring: Actinomycosis of the Cheek. Dr. Herbert Snow: Malignant Reversion of Cystic Fibromata. Mr. Shattock: Cultural Variations of the Streptococcus Pyogenes. Recent Specimens: Mr. Hudson: A Series of Specimens of Ulcerative Colitis from Cases of Swine Fever. Card Specimens: Messrs. Fletcher, Paget, Battle, Mackenzie, etc.

WEDNESDAY.

LONDON POST GRADUATE COURSE, Hospital for Diseases of the Skin, Blackfriars, 1 P.M. — Dr. Payne: Herpes; its varieties. Royal London Ophthalmic Hospital, Moorfields, 8 P.M. — Mr. A. Quarry Silcock: Progressive Myopia, with Illustrative Cases.

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

THURSDAY.

LONDON POST-GRADUATE COURSE, Hospital for the Paralysed and Epileptic, Queen Square, 2 P.M. — Dr. Buzzard: Multiple Neuritis. Hospital for Sick Children, Great Ormond Street, 3.30 P.M. — Mr. Bernard Pitts: Abdominal Surgery in Children. Central London Sick Asylum, Cleveland Street, 5.30 P.M. — Dr. Stephen Mackenzie: Cases in the Wards.

FRIDAY.

LONDON POST-GRADUATE COURSE, Bacteriological Laboratory, King's College, 3 to 5 P.M. — Professor Crookshank: Lecture, Anthrax and Malignant Edema; Practical work, Staining Sections.

CLINICAL SOCIETY OF LONDON, 8.30 P.M. — Annual General Meeting; Report of Council; Election of Officers. Papers: Dr. Lucas Benham: Thickened and Contracted Mesentery Simulating Tumour in a Case of Cirrhosis of the Liver. Dr. Sidney Phillips: A Case of Splenic Abscess; Secondary Suppuration in the Liver; Death from Pyæmia. Dr. S. West: A Case of Recovery from Tuberculous Meningitis. Mr. Battle: Calculus of Kidney associated with Simple Growth of the Renal Pelvis, Nephrectomy, Nephrectomy.

BRITISH ORTHOPÆDIC SOCIETY, Liverpool Medical Institution, 4 and 8 P.M.

SATURDAY.

LONDON POST-GRADUATE COURSE, Bethlem Royal Hospital 11 A.M. — Dr. Craig: Delusional Insanity; Paranoia.

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.

BIRTHS.

CULHANE. — On April 22nd, at 122, Mount Pleasant Road, Hastings, the wife of F. W. S. Culhane, of a daughter.

O'BRIEN. — On May 7th, at Catchgate, the wife of T. M. O'Brien, M.D., of a son.

DEATHS.

DAVIDSON. — On the 10th inst., at 1, Berkeley Square, W., May, wife of W. Marshall Davidson, M.B., daughter of the late Rev. Kyrie Ernie Aubrey Money.

SMITH. — On the 5th inst., at 226, Goldhawk Road, W., after a few days' illness, Frederick Augustus Alfred Smith, M.D., for many years of Portland House, Cheltenham, in his 50th year.