

within my experience or reading, I detail it hoping that it may be of use in the event of such an alarming complication being again met with. In this case the whole, or at any rate the greater, part of the lymph from a large surface of the body was discharged through the sinus. As day after day passed without improvement I became extremely anxious regarding this huge drain on the strength of my patient, also as to the effect on the tissues from whence it came, and, consequently, as to the termination of the case. During the first week after the operation the dressings were applied with but moderate tension, as the wound was not firm enough to stand much pressure. The next week they were, in my absence, very loosely applied, and a great increase in the quantity of the discharge resulted. The effect of the subsequent tight bandaging was almost immediate and very marked. A deduction from this case appears to be that where the whole of the lymphatic glands have to be excised, it would be better to tie all the vessels going to them before removal.

## MEMORANDA:

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

#### HYPERPYREXIA FOLLOWING THE USE OF ATROPINE.

THIS is an example of idiosyncrasy in a baby, 1 month old, suffering from opacity of the cornea, and into whose left eye I had been dropping twice daily for a week a sulphate of atropine 4 grains to the ounce solution. On May 24th I used the atropine at 9 P.M. At 11 P.M. the nurse noticed the child to be very restless, dry in the mouth, and feverish. On being sent for at 1 A.M. next morning I found the temperature to be 107.2° F. I reduced this temperature to normal by means of the cold bath. At 9 A.M. on May 25th the temperature was 101°, and in the evening it was normal. On May 26th, at 12.30 P.M., the temperature was quite normal, and I again used the atropine drops. At 1.30 P.M. the temperature was 104.5°, but was reduced by means of an antipyretic. The temperature was normal on May 27th, and has continued so ever since, the use of the atropine drops being discontinued. The child is a very healthy one, and, beyond the corneal opacity due to injury during labour, has nothing whatever the matter with it.

W. F. DEARDEN, L.R.C.P.Lond., M.R.C.S.Eng.,  
Crumpsall, Manchester. D.San.Sci.Vict.

#### ACUTE BRONCHOCELE FOLLOWING INFLUENZA.

THE account in the BRITISH MEDICAL JOURNAL of May 4th of a case of acute thyroiditis occurring as a complication of influenza reminds me of a very similar case which I had under my care in December, 1894. Mrs. C., married, aged 42, had been suffering from influenza from December 2nd to the 13th. On December 21st she had pains all over her, and a temperature of 103°, and complained of pain in the region of the thyroid, which was not enlarged then but very tender. Six hours after having first seen her I was again sent for, and found her in great pain, and with considerable enlargement of the thyroid, and intense pricking pain in the gland and up the sides of the neck. I applied hot fomentations, which relieved the pain, and gave a mixture containing iodide of potassium every four hours, and 3 grains of sulphate of quinine in a tea cup full of milk every two hours. The next morning the gland was further enlarged, and the skin very tense and shiny over it. The temperature was 102°. There was great difficulty in swallowing, and the breathing was laboured. I painted the surface of the gland and the sides of the neck with belladonna and glycerine, and put a good thick covering of cotton wool over it. On the evening of December 23rd, about fifty-two hours after she first felt any pain in the neck, the pain suddenly left her, and she slept for the first time since its onset. The gland rapidly decreased in size for four days, but did not regain its original proportions, and is still somewhat enlarged. The patient had another attack of influenza in March last, and although she was very ill for nearly three weeks there was no pain in or enlargement of the thyroid at all.

Beyond the fact of its being a comparatively rare complication of influenza, it was interesting to note the very rapid subsidence of the inflammation, sudden cessation of pain, and the fact that in another attack this spring there was no return of thyroiditis.

JOHN KIFFIN, M.R.C.S.Eng., L.R.C.P.Lond.  
Forton, Gosport.

#### DRAINAGE IN SUPPURATIVE CONDITIONS OF THE ABDOMINAL CAVITY.

THE remarks of Mr. Arthur E. Barker in the BRITISH MEDICAL JOURNAL of May 25th are borne out very strikingly by a case that I have recently had under my charge.

A man, aged 50, was admitted to the Auckland Workhouse in the afternoon of February 15th. I saw him in the evening, and found him suffering great pain, a good deal collapsed, and with the abdomen much distended. I ordered alcohol to be given frequently during the night, and next morning opened the abdomen to the right of the middle line. Over two quarts of stinking pus escaped. After well washing the cavity I found the appendix much enlarged, and bound by firm bands both to the intestine and the abdominal wall. As the cæcum had a most unhealthy appearance, I decided not to remove the appendix, but placed a drainage tube in the lowest part of the incision, suturing the rest of wound in the usual manner. The tube was removed at the end of forty-eight hours. For the next ten days there was a slight discharge of healthy pus from the opening. On the eleventh day there was a free discharge of faecal matter, which continued in decreasing amount for a week. From that time the wound gradually closed without any bad symptom. The man was well and walking about on March 20th, four weeks and three days after the operation, and went out of the workhouse to resume his occupation at the end of ten weeks.

In this case drainage was of course a necessity owing to the condition of the appendix and cæcum, but the point that I wish to emphasise is that the short time for which the drainage tube remained was amply sufficient to leave a safety valve for the discharge of both the appendix and faecal matter until the fistulous opening in the cæcum was healed, the whole process being unaccompanied by any constitutional disturbance whatever.

Bishop Auckland.

MARK WARDLE, L.R.C.P.

#### INFLUENZA AS A SPECIFIC NERVOUS FEVER.

It has been pointed out that influenza in many instances appears to fall with severity on the nervous system. After a fairly large experience of the complaint I should be prepared to argue that it is a specific nervous fever. My reasons for calling influenza a specific nervous fever would be:

1. Like cerebro-spinal fever, it is infectious and accompanied by most of the symptoms and liable to many of the sequelæ of that complaint.
2. The catarrhal symptoms are in most cases trivial.
3. The backache is spinal, and is not affected by posture or ordinary movement in the same way as lumbago. The pain in the limbs ranges from severe neuralgia to mere nerve fatigue or exhaustion.
4. The headache, delirium, tinnitus, etc., are due to implication of the cranial nerves.
5. The vomiting and diarrhoea are probably reflex.
6. The complications are mainly nervous—(a) temporary blindness from optic neuritis; (b) suspension of the sense of smell, taste, and hearing; (c) menorrhagia in females, vaso-motor disturbance.

With the most fatal complication—pneumonia—there may be more connection traceable when we know more about pneumonia itself. At present, to bear out my argument, I would only say that pneumonia is a recognised complication of any exhausting disease.

I think we may take it that considering the enormous number attacked the increased mortality from pneumonia is no more than *pro rata*.

The sequelæ are mostly nervous: Insomnia, neuralgias (supraorbital especially), temporary inco-ordination, paresis (from peripheral neuritis) down to simple pricking or numbness in the fingers and toes, loss of memory, impotence,

various forms of mental aberration and insanity, and in females menorrhagia and angioneurosis.

Finally, my contention as to its being a disease of the nervous system seems to be borne out by the treatment most successful up to now. The drugs one hears most about are antipyrin and its allies, bromides, quinine in various forms, and the like, nerve sedatives and nerve tonics. Every fresh epidemic further convinces me that the whole train of symptoms may be traced to the toxic effect of the influenza poison or microbe on the whole nervous system, central and peripheral.

Armley, Leeds.

HENRY WAITE.

#### CEREBRAL MENINGITIS FOLLOWING INFLUENZA.

On April 14th I was called to see a girl, aged 15 years, who had been ill for some days. I was informed that almost all the family had been suffering from influenza, which was prevalent in the neighbourhood. The history of the onset corresponded with the symptoms of the invasion of influenza. The patient had an irritable expression and was restless; the temperature was 103°; there was moaning constantly, the tongue was furred, the lips dry; there was anorexia, thirst, and constipation, and there had been vomiting before my arrival; the pulse was 80, full, and regular; the lungs were apparently healthy but respiration was somewhat irregular. The skin was hot and moist; she complained of pains all over, but worst in the head. The pupils, equal and somewhat dilated, acted well; there was no strabismus; she recognised all who attended upon her. Castor oil had been administered before I arrived. As the headache appeared to distress her most I administered antipyrin grs. v. a saline mixture, and lemon drinks. My diagnosis was influenza with gastric irritability occurring in a girl of nervous temperament. The next day she was reported to be better, the bowels had acted, vomiting had not been so frequent, and she was taking nourishment well.

On April 18th I was informed that she had been delirious the night before, complaining of intense pain in the head, vomiting occasionally, and constantly tossing her head and limbs about. I found her dull and apathetic, moaning occasionally. When I attempted to examine her she screamed, ground her teeth, and jactitations commenced which continued without interruption during my visit. The temperature was 102.4° and the bowels constipated; there was difficulty in eliciting answers, and she only occasionally recognised her attendants. The abdomen was more retracted than on my previous visit; the pulse was 95, the respiration regular, the pupils were equal, somewhat dilated, and responded well to light. I had little doubt that the complication was meningitis. I prescribed calomel grs. iv. and a mixture containing bromide of potassium applied cold to the head.

When I saw the patient again she had relapsed into a comatose condition. There was paresis of the muscles of the left leg and internal strabismus; the pupils were equal but only responded sluggishly to light; the abdomen was much retracted. I saw the patient again the day before the fatal termination, which took place on May 4th. The pupils were dilated and insensible to light, and there was an ulcer on the cornea; the abdomen had become distended with gas.

AUGUSTUS W. TABUTEAU, L.R.C.S. & P.I.  
Dunfanaghy, co. Donegal.

**SECOND INTERNATIONAL CONGRESS OF OBSTETRICS AND GYNÆCOLOGY.**—The second session of the International Congress of Obstetrics and Gynæcology will take place at Geneva during the first fortnight of September, 1896. Several papers have announced by mistake that it will take place in 1895. The following subjects are announced for discussion:—In Obstetrics: (a) The Relative Frequency and the most Frequently Observed Forms of Contraction of the Pelvis in Different Countries; (b) The Treatment of Eclampsia. In Gynæcology: (a) The Operative Treatment of Uterine Retro-deviations; (b) Pelvic Suppuration and its Treatment; (c) Methods of Suture of the Abdominal Walls—best means of avoiding abscess, prolapse, hernia, etc. An exhibition of obstetrical and gynæcological appliances and instruments will be held at the same time.

## REPORTS

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

#### COVENTRY AND WARWICKSHIRE HOSPITAL.

##### A CASE OF FLOATING KIDNEY.

(Under the care of F. FAULDER WHITE, F.R.C.S., Surgeon to the Hospital.)

[From notes by Mr. BANKES PRICE, House-Surgeon.]

MRS. C. P., aged 48, was admitted on November 29th, 1894, complaining of weakness and indefinite abdominal pains. She was a worn, emaciated woman, whose skin was somewhat yellow.

She had had good health down to the occurrence of a bad miscarriage eight years before admission, since which she had gradually been getting weaker. For two years she had been confined to her room, and latterly to her bed. She had had pains all over her, which were worst over the stomach; the legs swelled towards night; sickness was frequent at intervals of a few days; the bowels were confined; headache was troublesome, and there were occasional attacks of jaundice.

On admission the pulse was 90, the temperature 98.4°, and the respirations 20. Examination of the heart and lungs revealed nothing abnormal; there was some oedema of the legs; the urine, of specific gravity 1022, was apparently healthy; the abdominal walls were very flaccid but somewhat fallen in. Light palpation gave no pain, but deep pressure in the epigastrium was not well borne; the area of stomach resonance was rather large; the liver dullness was of normal extent. A freely movable rounded mass could be felt in the right hypochondriac and lumbar regions, which slipped away from under the fingers. This was not observed till several days after admission. After a fortnight the patient was no better; she still had occasional attacks of jaundice and sickness, and complained of pains in the right hypochondrium shooting to the back; she could not sit up without feeling sick.

On December 27th the patient seemed weaker and more apathetic; she sometimes lost control over the sphincters.

On January 3rd the cheeks and eyelids were swollen, and a little red. There was no pyrexia; the pulse was feeble. There had been incontinence of fæces and urine during the past few days. There was no loss of power in the legs. She complained of pain going right round the body below the ribs.

During the remainder of January she was in a very feeble state, but gradually recovered power over the bladder and rectum. Pain continued in the right hypochondrium, and the movable swelling remained the same. During the greater part of February there was little change to note, but the pain continued and the tendency to sickness on any movement of the patient. On February 23rd, the patient having been three months in hospital, it was decided to examine the movable organ.

**Operation.**—An incision, 3 inches long, was made in the right semilunar line over the tumour. The gall bladder was carefully examined, and pronounced normal. The movable organ was found to be the right kidney. The anterior wound having been closed, the patient was turned over on her side, and the right kidney was exposed by the usual lumbar incision. It was then stitched to the neighbouring parietes by several buried sutures, and one stout ligature was passed through the skin on either side of the wound, securing the kidney by a temporary stitch. A small drainage tube was placed in the angle of the wound, and the parts brought together as usual. Antiseptic precautions were taken throughout. The patient made an uninterrupted recovery. The wounds healed at once, and there was from the first great relief from the old pain.

**REMARKS.**—Since the operation there has been no return of sickness and no pain to speak of. The patient began to pick up at once, and is now apparently a different woman.

best men in the profession cannot be expected to accept such an ambiguous position. Medical officers claim full army rank and title, and will not rest content with anything less.

## MEDICO-LEGAL AND MEDICO-ETHICAL.

### AN ENTERPRISING DENTIST.

A REGISTERED dentist practising in North London (Mr. J. S. Armitage, 1, Colva Street, Dartmouth Park) was on May 23rd mulcted in two penalties of £5 each at the Bloomsbury County Court at the instance of the Pharmaceutical Society for the sale of poisons, information having been given to the Pharmaceutical Society by the London and Counties Medical Protection Society. The dentist in question, besides keeping an open chemist's shop, has also been practising as a doctor in the neighbourhood. It is hoped that the exacting of the above penalties will induce him to limit himself to his dental practice.

### ANOTHER GRATEFUL PARENT.

THE practice of inserting in a local paper an expression of thanks by a parent for the medical services rendered to a child appears to be growing. It is no doubt extremely disagreeable to the medical men whose skill and kindness are thus vaunted, and we cannot help suggesting to the proprietors of country papers to consider whether they are justified in inserting such advertisements without the direct permission of the medical men whose names are given such curious publicity. It should be understood both by the patients and by newspaper proprietors that such puffs are quite contrary to the usage of the medical profession, and cause much pain to the medical men whose names are thus advertised. A correspondent has sent us a particularly glaring example, cut, as he informs us, from a recent issue (May 31st) of *The Mezbrough and Swinton Times*, and we have within the last few months seen several other similar specimens from other parts of the country.

### UNPROFESSIONAL COMPETITION BETWEEN MEDICAL PRACTITIONERS.

A CORRESPONDENT writes: A., B., C., and D. are neighbouring practitioners in the same town. A. has been for five years a "works" doctor, and has held this appointment to the apparent satisfaction of the men, there having never been any complaint against him. He is then informed by the governing body of the works that it has been decided to make his appointment an annual one, and notice is accordingly given him of the termination of his present engagement at an early date. Deputations of the men also call upon B., C., and D., asking them whether, if elected, they will take A.'s appointment. A. expostulates with B., C., and D. as to their opposing him in the impending election, on the ground that it is unprofessional to do so. D. admits A.'s arguments, and withdraws his name, and declines to have anything to do with the election, but B. and C. decline to admit A.'s contention, claiming a right to compete with him for this appointment, as there is a legitimate vacancy. At the election A. was re-elected by a large majority. It is asked:

1. Whether B. and C. were acting justly towards A., and in accordance with the ethical rules of the profession.

2. Whether, in view of the fact that A. had not been dismissed for neglect of duty, but solely to carry out the intention of having an annual election, B. and C. were acting in a kindly spirit towards A., who is a friend of both.

3. It would appear that before the men determined on an annual election of their surgeon, they had held a meeting with the object of extorting from him further advantages for themselves. In answer to this, many of the resident medical men of the town, including A. and B., signed an agreement by which they bound themselves to have nothing to do with any club which any of their number might have lost through refusing to accede to such demands.

\*.\* On the above statements it may be remarked that:

1. Strictly speaking, and apart from the signed agreement, B. and C.'s conduct would be justifiable, for it would appear that there was here an appointment thrown open to the profession at large, but in our opinion D.'s conduct was much to be preferred.

2. It must certainly be answered that B. and C. were not acting in a kindly spirit towards A., even if they might claim to have been acting according to their strict technical rights.

3. When the agreement is considered we are of opinion that B. was altogether wrong, for although the annual election was not instituted avowedly with the object of gaining greater advantages for the men at the expense of the surgeon there can be little doubt that this was its real object; as therefore the agreement was expressly signed to meet such a contingency B.'s action in opposing A. was practically a violation of its terms, and we fail to see how B. could possibly defend his conduct, being one of its signatories.

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF CAMBRIDGE.

#### FIRST M.B. EXAMINATION.

*Chemistry and Physics.*—Almond, Emm.; Attlee, Joh.; R. L. Bell, B.A., Pet.; Bemrose, Joh.; Boulton, Trin.; Bréhaut, H. Selw.; Carey, Govv. and Cai.; Carroll, Trin.; E. R. Clarke, Joh.; Coare, King's; Cooper, Trin.; Crimp, Govv. and Cai.; Crompton, Govv. and Cai.; Dunne, Queens'; Ede, King's; S. H. Gibson, Jes.; Gordon-Smith, Trin.; Greig, B.A., Jes.; Hadfield, Trin.; Hill, Emm.; Holmes,

Govv. and Cai.; C. R. Howard, Pemb.; H. T. James, Trin.; Larnier, M.A., Pemb.; Leech, Christ's; Levy, Joh.; Maclaren, Trin.; Mallin, Christ's; Manser, Pet.; J. C. Matthews, Joh.; Mellor, King's; Miller, Trin.; Mummery, Govv. and Cai.; J. C. Newman, B.A., Trin.; Newton, Pemb.; Perkins, H. Aye.; Roberts, Christ's; H. J. Robinson, Joh.; E. A. Ross, Trin.; Sanger, Joh.; C. A. St. J. Scott, Trin.; Scott, Christ's; Spanton, Trin.; Spens, Trin.; Stirling-Hamilton, Jes.; Thornton, Trin.; Upward, Christ's; R. H. Urwick, Trin.; W. D. Ward, Joh.; Warren, Joh.; Weir, Trin.; Whitmore, Govv. and Cai.; Wilgress, H. Selw.; H. M. Wilkinson, Joh.; J. A. Wilkinson, Govv. and Cai.; R. F. Williams, Govv. and Chl.; W. H. O. Woods, H. Selw.; Wright, Christ's.

*Elementary Biology.*—Ainsworth, B.A., Pemb.; Atkinson, Govv. and Cai.; Attlee, Joh.; Badcock, B.A., Cath.; Barnett, Joh.; Bate, King's; Beckett, H. Selw.; Bentley, Emm.; Bigge, Trin.; Boulton, Trin.; Bousfield, Pemb.; Bréhaut, H. Selw.; Brydone, Jes.; Buckle, Govv. and Cai.; Buttar, Pemb.; Carey, Govv. and Cai.; Causton, Emm.; Cave-Moyles, Govv. and Cai.; Child, Pemb.; E. M. Clark, Trin.; H. Clarke, Trin.; E. R. Clarke, Joh.; Coare, King's; Colyer, M.A., Cath.; Crimp, Govv. and Cai.; Crompton, Govv. and Cai.; Dunlop, Sid. Suss.; Eastwood, Joh.; Edwards, Down.; Elliston, H. Aye.; Emerson, Govv. and Cai.; Falkner, Pet.; Fehrsen, Govv. and Cai.; Geoghegan, Govv. and Cai.; S. H. Gibson, Jes.; Gilbert-Smith, Trin.; Gordon-Smith, Trin.; Graham-Smith, Pemb.; Greene, Corp. Chr.; Greig, B.A., Jes.; D. G. Hall, Emm.; Hawker, Govv. and Cai.; Heffer, Sid. Suss.; Hill, Emm.; Hindle, Corp. Chr.; C. R. Howard, Pemb.; H. L. S. Hulbert, B.A., Trin.; N. H. Illingworth, Cla.; Ingram, Trin.; Kelsey, Pemb.; Knobel, Trin.; Larnier, M.A., Pemb.; Leech, Christ's; Levy, Joh.; Linnell, H. Selw.; Maclaren, Trin.; Mallin, Christ's; H. N. Matthews, Joh.; J. C. Matthews, Joh.; Mellor, King's; Murray, Joh.; Neatby, M.A., Joh.; J. C. Newman, B.A., Trin.; Pitkin, H. Aye.; L. Reynolds, Trin.; Richmond, Cla.; Roper, B.A., Non Coll.; Scott, Christ's; Shipman, Trin.; Shipway, Christ's; T. D. Smith, Jes.; Spanton, Trin.; Spurrier, Govv. and Cai.; Tillard, Pemb.; Trigg, Christ's; R. H. Urwick, Trin.; Wacher, Joh.; Warren, Emm.; Weatherhead, Joh.; Weir, Trin.; Whitmore, Govv. and Cai.; H. M. Wilkinson, Joh.; J. A. Wilkinson, Govv. and Cai.; Willan, Emm.; R. F. Williams, Govv. and Cai.; W. H. O. Woods, H. Selw.; Wright, Christ's.

### SECOND M.B. EXAMINATION.

*Pharmaceutical Chemistry.*—Arkle, B.A., Trin.; W. P. S. Branson, Trin.; Burfield, Emm.; Carver, B.A., Cla.; Cheadle, Govv. and Cai.; J. S. Clark, Govv. and Cai.; Cole, B.A., Corp. Chr.; Coleman, Trin.; Curl, Down.; Dale, Trin.; Flook, Trin.; Fuge, B.A., H. Selw.; Gaitskell, B.A., Cla.; Gillespie, Joh.; Glenn, Pemb.; Glover, Joh.; Harman, Non Coll.; Howitt, Joh.; G. H. Hunt, B.A., Cla.; J. Johnston, Trin.; Kellie, Govv. and Cai.; Kulick, Trin.; J. L. Lock, Govv. and Cai.; Martineau, Emm.; G. Micklethwait, Trin.; Fater-son, Govv. and Cai.; Pearson, Emm.; Plachecki, Christ's; Roderick, B.A., Emm.; Sellon, Govv. and Cai.; Style, Emm.; Susmann, Govv. and Cai.; T. P. Thomas, Govv. and Cai.; Topham, Christ's; Trevor, B.A., Cla.; R. F. C. Ward, Joh.; Watts-Sylvester, B.A., Govv. and Cai.; West, Christ's; T. Wood, Govv. and Cai.

*Human Anatomy and Physiology.*—Allan, B.A., Govv. and Cai.; Ambrose, B.A., Cla.; Barnes, Christ's; Bassano, B.A., Trin.; S. S. F. Blackman, B.A., Joh.; W. D. Chapman, B.A., Corp. Chr.; Corner, B.A., Sid. Suss.; Denyer, B.A., Queens'; A. H. Donaldson, B.A., Govv. and Cai.; Dore, B.A., Joh.; Fawcett, M.A., Pet.; Forbes, B.A., Christ's; Gilmore, B.A., Christ's; Grosvenor, B.A., Trin.; Hart-Smith, Govv. and Cai.; Kemp, Cla.; Lindsay, B.A., Sid. Suss.; MacCallan, B.A., Christ's; H. D. O'Sullivan, Emm.; S. P. Pollard, B.A., Govv. and Cai.; Prest, Joh.; P. B. Reckitt, B.A., King's; Reissmann, Joh.; Rigby, Govv. and Cai.; Scowcroft, B.A., Govv. and Cai.; Shewell, B.A., Trin.; Shrubsall, Cla.; F. W. Sumner, Joh.; Talbot, B.A., King's; Tallent, Joh.; W. K. Wills, B.A., Joh.; W. R. Wilson, B.A., Corp. Chr.; Winkfield, B.A., King's.

DEGREES.—At the Congregation on June 13th the following medical and surgical degrees were conferred: *M.D.*: F. J. Allen, M.A., M.B., Professor of Physiology at the Mason College, Birmingham. *M.B. and B.C.*: H. J. Davis, B.A., Trinity; A. W. G. Bagshawe, B.A., Caius; W. J. McCaigie, B.A., Caius; L. C. P. Phillips, B.A., Caius; F. B. Norris, B.A., Christ's; B. W. M. Aston-Key, B.A., Emmanuel; J. H. Pead, B.A., Downing.

### ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE following gentlemen, having passed the necessary examinations, and having conformed to the by-laws and regulations, have been admitted Fellows of the College:

Rowell, G., M.D. Durh.	Harris, W. J., M.B. Cantab., L.R.C.P. Lond.
Green, C. R. M., L.R.C.P. Lond.	Sloane, J. S., M.B. Lond., L.R.C.P. Lond.
Bennett, W. E., L.R.C.P. Lond.	Walton, H. J., L.R.C.P. Lond.
Stevens, T. G., M.D. Lond., L.R.C.P. Lond.	Cooper, P. R., M.B., Ch.B. Vict., L.R.C.P. Lond.
Levick, H. D., M.B. Lond., L.R.C.P. Lond.	Cuff, A. W., M.B., B.C. Cantab., L.R.C.P. Lond.
Ingall, F. E., L.R.C.P. Lond.	Shillito, A., M.B., B.C. Cantab., L.R.C.P. Lond.
MacLeod, C. E. A., L.R.C.P. Lond.	Gordon, J., M.B., M.S. Melb., L.R.C.P. Lond.
Warner, T., L.R.C.P. Lond.	Lister, W. T., M.B., B.C. Cantab., L.R.C.P. Lond.
Spencer, C. G., Surg.-Lieut. A.M.S., M.B. Lond., L.R.C.P. Lond.	Lockett, G. V., M.B. Edin., L.R.C.P. Lond.
Furnivall, P., L.R.C.P. Lond.	Wightman, C. F., L.R.C.P. Lond.
Marson, F. H., M.B. Durh., L.R.C.P. Lond.	
Webb, J. R., M.B., B.S. Melb.	
	Michell, R. W., M.B., B.C. Cantab.

Three other gentlemen passed the examination, and will be admitted Fellows at future meetings of the Council on attaining the legal age of 25 years. Sixteen were referred for six months, and four for one year.

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

Atkinson, F. G., Charing Cross and the Dental Hospital of London  
 Bateman, J. B., Charing Cross and the Dental Hospital of London  
 Bates, G. L., Charing Cross and the Dental Hospital of London  
 Bellaby, F. M. F. W., Owens College, Dental Department, and Victoria Dental Hospital, Manchester  
 Bennett, J. H., Charing Cross Hospital and the Dental Hospital of London  
 Bettridge, A. E., Charing Cross Hospital and the Dental Hospital of London  
 Booth, G. H., Owens College Dental Department and Victoria Dental Hospital, Manchester  
 Bowtell, S. R., Charing Cross and the Dental Hospital of London  
 Bowden, G. H., Guy's Hospital  
 Burton, P., Middlesex Hospital and the Dental Hospital of London  
 Cahill, A., Guy's Hospital  
 Cannell, E. K., Charing Cross and the Dental Hospital of London  
 Cardwell, E. E., Charing Cross and the Dental Hospital of London  
 Collett, A. J., Guy's Hospital  
 Cook, H., Guy's Hospital  
 Dalton, J. W., Charing Cross and the Dental Hospital of London  
 Day, E. F., Charing Cross and the Dental Hospital of London  
 Gosschalk, M., Charing Cross and the Dental Hospital of London  
 Jenkin, T. G., Middlesex and the National Dental Hospital  
 Johnston, W., Charing Cross and the Dental Hospital of London  
 Keall, C. A. H., Guy's Hospital  
 Little, F., University College and Dental Department, Royal Infirmary, Bristol  
 Lean, N. H., Middlesex and the Dental Hospital of London  
 Mackley, H. E., Middlesex and the Dental Hospital of London

Masters, E. C. P., Middlesex and the National Dental Hospital  
 Mathews, J. H., Charing Cross and the Dental Hospital of London  
 Morgan, E., Guy's Hospital  
 Mountford, E. H., Charing Cross and the Dental Hospital of London  
 Muhlenkamp, F. H. A., Guy's Hospital  
 Nowell, W. S., Middlesex and the Dental Hospital of London  
 Pearse, C. G., Charing Cross and the Dental Hospital of London  
 Pedler, W. F., M.R.C.S.Eng., St. Bartholomew's and the National Dental Hospital  
 Price, G. H., Charing Cross and the Dental Hospital of London  
 Quinby, A. H., Liverpool Dental Hospital and Liverpool Royal Infirmary School of Medicine Dental Department  
 Shields, J. L., Liverpool Dental Hospital and Liverpool Royal Infirmary School of Medicine Dental Department  
 Stevens, D. S., Guy's Hospital  
 Strand, A. C., M.R.C.S.Eng., Middlesex and the Dental Hospital of London  
 Sugden, T. E., Middlesex and the National Dental Hospital  
 Taylor, H. P., Guy's Hospital  
 Theakstone, J., Owens College, Dental Department and Victoria Hospital, Manchester  
 Tice, H. W., Middlesex and the National Dental Hospital  
 Tindal, J., Charing Cross and the Dental Hospital of London  
 Trick, W. H., Guy's Hospital  
 Wallace, J. S., B.Sc., M.D., C.M. Edin., Glasgow Dental Hospital, the Dental Hospital of London, and the National Dental Hospital  
 Wallis, H., Guy's Hospital  
 Williams, C. H. H., Charing Cross and the Dental Hospital of London

Fifteen gentlemen were referred back to their professional studies. All candidates referred at this examination will be required to produce, before admission to re-examination, a certificate of three months' additional study at a General Hospital and a Special Dental Hospital, the precise attendances required at each hospital being left to the discretion of the respective hospital authorities.

## PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

### HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 6,561 births and 3,130 deaths were registered during the week ending Saturday, June 15th. The annual rate of mortality in these towns, which had declined from 17.7 to 15.5 per 1,000 in the five preceding weeks, further fell last week to 15.4. The rates in the several towns ranged from 10.5 in Burnley, 10.7 in Portsmouth, and 10.9 in Croydon to 21.3 in Manchester, 23.6 in Bolton, and 23.8 in Liverpool. In the thirty-two provincial towns the mean death rate was 16.1 per 1,000, and exceeded by 1.7 the rate recorded in London, which was only 14.4 per 1,000. The zymotic death-rate in the thirty-three towns averaged 2.0 per 1,000; in London the rate was equal to 2.1 per 1,000, while it averaged 1.9 in the thirty-two provincial towns, and was highest in Manchester, West Ham and Plymouth. Measles caused a death rate of 1.5 in Manchester, 2.3 in Plymouth, and 2.9 in West Ham; whooping-cough of 1.0 in Birkenhead and in Huddersfield; and "fever" of 1.0 in Norwich. The mortality from scarlet fever showed no marked excess in any of the large towns. The 73 deaths from diphtheria in the thirty-three towns included 45 in London, 6 in Liverpool, 4 in Birmingham, 3 in West Ham, 3 in Manchester, and 3 in Hull. Three fatal cases of small-pox were registered in Derby, 1 in London, and 1 in Oldham, but not one in any other of the thirty-three towns. There were 19 small-pox patients under treatment in the Metropolitan Asylums Hospitals and in the Highgate Small-pox Hospital on Saturday last, June 15th, against 29, 22 and 23 at the end of the three preceding weeks; 2 new cases were admitted during the week, against 7, 1, and 5 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 1,503, 1,524, and 1,589 at the end of the three preceding weeks, had further risen to 1,637 on Saturday last, June 15th; 189 new cases were admitted during the week, against 214, 187, and 179 in the three preceding weeks.

### HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, June 15th, 994 births and 492 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 21.4 and 19.7 per 1,000

in the two preceding weeks, further declined to 17.1 last week, but exceeded by 1.7 per 1,000 the mean rate during the same period in the thirty-three large English towns. Among these Scotch towns the death-rates ranged from 14.2 in Leith to 30.9 in Perth. The zymotic death-rate in these towns averaged 2.0 per 1,000, the highest rates being recorded in Greenock and Paisley. The 231 deaths registered in Glasgow included 11 from diarrhoea, 6 from whooping-cough, 5 from measles, and 2 from scarlet fever. Two fatal cases of diphtheria were recorded in Edinburgh.

### TYPHOID FEVER AT WOOLWICH.

At the recent meeting of the Woolwich Local Board an outbreak of typhoid fever was reported. The medical officer of health informs us that up to June 6th there had been nineteen cases in the Woolwich district. In ten of these cases the milk was supplied from the same dairy, and the others from various sources. In four cases the milk supply was from Princes Road, Plumstead, Dairy, where the epidemic first broke out; this dairy has been closed by the Plumstead authorities.

### HONITON BOARD AND THE APPOINTMENT OF NURSE.

We read with some surprise in *Pulman's Weekly News* that this Board at the last meeting, when they had before them the applications for the vacant post of nurse to the infirmary, took the retrograde step of appointing a woman who had had no previous experience in nursing. According to the report she had, until the present time, been in service as a house and parlour maid. It may be remembered that the nurse who, until recently, held the post was superannuated, and those who wished well to the pleasant union in the old Devonshire town were watching with interest the choice of her successor. There had been no trained nursing in the infirmary, and a suitable opportunity has now occurred to remedy that defect. This action on the part of the Board is very disappointing, and we trust that the Local Government Board will not sanction the appointment.

### THE BATH INFIRMARY.

We are gratified to hear through a correspondent that this infirmary has now a trained superintendent nurse and some trained nurses, and that the infirmary is on the ascending scale of improvement. Our readers will remember how earnestly we strove in the cause of the helpless poor in this infirmary, and will share in our pleasure in the knowledge that our efforts on their behalf have borne some fruit.

### THE NOTIFICATION OF INFECTIOUS DISEASES.

DR. GEORGE THOMSON was summoned recently at the instance of the Oldham sanitary authority for having neglected to report three cases of enteric fever. After hearing a considerable amount of evidence the case was dismissed, the Chairman saying that the magistrates were unanimously of opinion that Dr. Thomson had not wilfully and without reasonable cause offended against the section of the Act in question. The interest lies in the fact that Dr. Thomson admitted in writing that he had diagnosed the disease on May 14th but had postponed reporting until he had verified his diagnosis. He had not, in fact, yet reported the cases on May 21st, when he met the medical officer of health and explained that there had been a difficulty in diagnosis, that influenza was prevalent, and that one case which had begun in the same way as the others had become convalescent in a few days. The whole case hinged upon whether the admission that he had diagnosed the case on May 14th, although he waited later to verify his diagnosis, could be taken to mean that on May 14th he was in the wording of the Act "aware" that the patient was suffering from an infectious disease, it being maintained on the one hand that a diagnosis meant knowledge, on the other that it meant suspicion.

### POPULATION OF AND SALARY FOR A MEDICAL DISTRICT.

W. W. writes to ask the following questions:

1. What is the limit of population allowed under one district medical officer?
  2. By whom and on what system is the salary for a district fixed?
  3. What would be a proper salary for a rather wide district, containing from 7,000 to 8,000 population?
- \*. 1. For England the population of a medical district is not to exceed 15,000.  
 2. The salary for a district is generally fixed by the guardians and sanctioned by the Local Government Board, but on what basis we cannot say.  
 3. We cannot think that less than £200 per annum can be a proper salary for such a district, but we doubt whether any Board of Guardians would offer as much as this.

### VACCINATION GRANTS.

PUBLIC VACCINATOR writes, asking the reason why grants for successful vaccination are not forthcoming. He has secured the grant on two previous occasions, and was given to understand that his work was considered satisfactory; at least no fault was found with it. It is now over six months since the inspection took place. He looks to the grant to recuperate him slightly for the cases he loses yearly through complying with Local Government Board instructions.

\*. Assuming that the public vaccinator was recommended for award, it is not easy to say with whom the delay rests. The Local Government Board no longer issue these awards; they only certify to the county councils concerned as to the amounts which should go to the several public vaccinators, and it rests with the county council to issue the grant. Inquiry either of the Local Government Board or of the clerk to the county council would doubtless elicit the fact as to whether the needed certificate has been issued by the central authority.

## MEDICAL NEWS.

DR. THORNE THORNE, C.B., F.R.S., has been elected a foreign member of the Société Française d'Hygiène.

THE Worshipful the Master of the Salters' Company will distribute the medals and prizes to the students of Guy's Hospital on Wednesday, July 3rd, at 3 P.M.

DR. PRINGLE has resigned the appointment of Assistant Physician to the Middlesex Hospital, but will retain that of Physician in charge of the Skin Department.

PRESENTATION.—Dr. W. Wollaston Groome, on the occasion of his leaving Stowmarket, where he has practised for many years, was recently presented with an address signed by a large number of residents in the neighbourhood, accompanied by a two-handled silver loving cup and cover, as a token of affection and esteem. Mrs. Groome at the same time received a gift of plate.

THE triennial festival dinner in aid of the funds of the Royal Maternal Charity, of which the Queen is patron and the Duke of Argyll president, took place on June 12th at the Albion, Aldersgate Street. Dr. Robert Barnes presided. The Queen sent a contribution of £50. During the evening the Secretary reported that donations and subscriptions had been received amounting to about £800.

WOOD GREEN COTTAGE HOSPITAL.—A cottage hospital, which has been erected at Wood Green at the expense of Mr. Passmore Edwards, was opened on June 15th by Mrs. Passmore Edwards in the presence of a large assembly. The new hospital, which has been built from the designs of Mr. Charles Bell, at a cost of £2,000, provides accommodation for eight patients, with rooms for the matron and staff.

MALE NURSES CO-OPERATION.—We are informed that the Male Nurses Temperance Co operation, of 8, Great Marylebone Street, Portland Place, W., is making satisfactory progress. It started with 6 men in March, 1894; it has now over 30 male nurses, and the demands upon it are more numerous than can be met. The main object of the association is to improve the class and condition of male nurses, and it has at the same time conferred great benefits upon the public and on the medical profession. The nurses are total abstainers, a guarantee which it was considered necessary to enforce owing to the unfortunate circumstances connected with male nursing in the past.

THE ANTITOXIN TREATMENT OF DIPHTHERIA IN AMERICA.—Statistics of diphtheria in Connecticut show that in 87 per cent. of the cases in which antitoxin has been used the patients have recovered. Since January 1st there have occurred 288 cases of diphtheria in the city of Newark. Of these 90 were treated with antitoxin and 198 were not so treated. Of the 90 cases, 23 died; of the 198, 60; the percentage in the former case being 24.4 against 31.4 in the latter. The American Pediatric Society, at a recent meeting held at Hot Springs, passed a resolution to the effect that the evidence thus far produced regarding the effects of diphtheria antitoxin justifies its further and more extensive trial.

SIR GEORGE BUCHANAN, M.D., of 27, Woburn Square, Medical Officer to the Local Government Board, who died on May 5th last, aged 64 years, left personality to the gross amount of £7,739. He bequeathed 100 guineas to his friend, Mr. Power, of Greenhithe, Assistant Medical Officer to the Local Government Board, and one of the executors of his will, desiring that such physician as Mr. Power should designate should be invited to make an examination of the testator's body. Sir George bequeathed £600 to be applied during six years for the maintenance and education of his son, Robert James, who is entered for the Navy, and he bequeathed to his wife, Dame Alice Mary Asmar Buchanan, £250, his household effects, and the income during her widowhood of his residuary estate, which, subject to her interest therein, is to be in trust in equal shares for all his children.

SANITARY IMPROVEMENTS AT RHYL.—The Rhyl Urban District Council celebrated on June 3rd the completion of the new sewerage scheme which they have had carried out under

the supervision of Mr. Baldwin Latham. The large storage reservoir, which is unique in construction, can contain 382,000 gallons, nearly treble the maximum amount ever likely to be collected, and discharges twice a day within about an hour of the first ebb tide, by an 18-inch iron pipe carried three-quarters of a mile into the sea, and bent towards its outer end, so as to suit the tidal current. The engine house contains six gas engines, two smaller engines being used for ordinary pumping, two larger being used in dealing with storm water, and the remaining two small engines being employed in working a screening apparatus. All the engines are in duplicate, and each is complete in itself and entirely independent of the others. An automatic gearing apparatus controls the action of the pumps, so that while the engine works uninterruptedly, the pumping goes on only when there is material to be removed from the discharging end of the sewers. The town sewers have all been reconstructed of new materials laid down on concrete foundations.

## MEDICAL VACANCIES.

The following vacancies are announced:

BIRMINGHAM GENERAL DISPENSARY.—Resident Surgeon; doubly qualified. Salary, £150 per annum, with an allowance of £30 per annum for cab hire, furnished rooms, fire, lights, and attendance. Applications to Alex. Forrest, Secretary, by July 15th.

BRADFORD INFIRMARY AND DISPENSARY.—Honorary Physician and Honorary Assistant Medical Officer. Applications to the Secretary for the former appointment by July 22nd, and for the latter, June 24th.

CARDIFF UNION.—Medical Officer for the Grangetown District. Salary, £50 per annum; no extra fees, except lunacy, but medicines and medical appliances provided by the Guardians. Appointment for one year. Applications to Arthur J. Harris, Clerk, Queen's Chambers, Cardiff, by July 5th.

CITY OF LONDON UNION INFIRMARY, Bow Road, E.—Resident Medical Officer; doubly qualified. Applications, on forms provided, to F. W. Crane, Clerk, Guardians' Offices, 61, Bartholomew Close, by July 2nd.

CORK DISTRICT LUNATIC ASYLUM.—Two Assistant Medical Officers, unmarried, and not more than 30 years of age, doubly qualified. Salaries, £100 per annum, with furnished apartments, rations, washing, fuel, light, and attendance. Applications to the Resident Medical Superintendent by June 29th.

COUNTY LUNATIC ASYLUM, Lancaster.—Assistant Medical Officer. Commencing salary, £100 per annum, with board, etc. Applications to the Medical Superintendent.

CROYDON HOSPITAL.—Medical Officer for the No. 4 District; must reside within the District. Salary, £120 per annum, with the usual extra medical fees prescribed by the order of the Local Government Board. Applications, on forms provided for the purpose, to Harry List, Clerk to the Guardians, Union Offices, Mayday Road, Thornton Heath, Surrey, by June 27th.

DENTAL HOSPITAL OF LONDON, Leicester Square, W.C.—Two Assistant Dental Surgeons. Applications to J. Francis Pink, Secretary, by July 8th.

DISTRICT INFIRMARY, Ashton-under-Lyne.—House-Surgeon, doubly qualified. Salary, £90 per annum, with board and lodging. Applications marked "Application for the Office of House-Surgeon" to William Bottomley, Honorary Secretary, 120, Stamford Street, Ashton-under-Lyne, by June 25th.

GREAT NORTHERN CENTRAL HOSPITAL.—Senior House-Surgeon. Appointment for six months. Salary at the rate of £80 per annum, with board, lodging, and laundry in the hospital. Applications on forms to be obtained from the Secretary to Lewis H. Glenton Kerr, Secretary, by June 24th.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton.—Resident Medical Officer. Salary, £200 per annum, with board and residence. Must be doubly qualified, single, and not more than 25 years of age. Applications to the Secretary by July 3rd.

LONDON HOSPITAL, Whitechapel, E.—Medical Electrician. Applications to the House Governor by June 29th.

LONDON HOSPITAL MEDICAL COLLEGE, Mile End.—Senior Demonstrator of Anatomy. Salary payable by a percentage of fees. Applications to Munro Scott, Warden, by July 8th.

LONDON TEMPERANCE HOSPITAL, Hampstead Road, N.W.—Assistant Resident Medical Officer. Appointment for six months. Must be doubly qualified. Board, washing, and residence in the hospital provided, and an honorarium of 5 guineas at the expiration of the term. Applications to A. W. Bodger, Secretary.

NEW HOSPITAL FOR WOMEN, 144, Euston Road, N.W.—Two fully qualified Female Clinical Assistants for the Out-patient Department. Applications to the Secretary by June 26th.

NORTH STAFFORDSHIRE INFIRMARY AND EYE INFIRMARY, Hartshill, Stoke-on-Trent.—Assistant House-Surgeon for six months. Applications to the Secretary by July 1st.

ROYAL CORNWALL INFIRMARY, Truro.—House-Surgeon; unmarried; doubly qualified. Salary for the first year, £120, increasing by £10 a year to £150, with furnished apartments, fire, light, and attendance. Applications to the Secretary before July 1st.

**ROYAL HOSPITAL FOR WOMEN AND CHILDREN**, Waterloo Bridge Road, S.E.—Clinical Assistant and Anaesthetist for six months, doubly qualified. Salary at the rate of £30 per annum. Applications to E. Garrard Kestin, Secretary, by June 24th.

**ROYAL VICTORIA HOSPITAL**, Bournemouth.—House-Surgeon and Secretary. Salary, £100 per annum, with board. Appointment for two years. Applications to the Chairman of the Committee by July 17th.

**ST. MARYLEBONE GENERAL DISPENSARY**, 77, Welbeck Street, Cavendish Square. Honorary Dental Surgeon. Applications to the Secretary by July 1st.

**SHEFFIELD GENERAL DISPENSARY**.—House-Surgeon and Senior Assistant House-Surgeon, doubly qualified. Salary for the former, £120 per annum, with a prospective advance of £10 per year for the second and third years; and for the latter £30 per annum, with board, lodging, and washing. Applications to the "Medical Staff of the Sheffield General Infirmary, to the care of the Secretary," by July 13th. The election will take place on July 26th.

**UNIVERSITY OF ABERDEEN**.—Eleven Examiners. Appointment for one year. The Examiners in Medicine and Surgery will receive grants of £50, and the other nine Examiners £40. Applications to Robert Walker, Secretary to the University Court, by July 3rd.

**VICTORIA HOSPITAL FOR CHILDREN**, Queen's Road, Chelsea, S.W.—House-Physician to the In-patients. Honorarium, £50 per annum, with board and lodging in the hospital. Applications to the Secretary by June 29th.

**WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL**, Wolverhampton.—Resident Assistant. Appointment for six months. Board, lodging, and washing provided. Applications inscribed "Application for Resident Assistant" to the Secretary of the Medical Committee by June 24th.

**WREXHAM INFIRMARY AND DISPENSARY**.—House-Surgeon. Salary, £80 per annum, with furnished rooms, board, gas, coal, and attendance. Applications, on forms to be obtained of the Secretary, to Mr. George Whitehouse, 27, Regent Street, Wrexham, by June 29th.

### MEDICAL APPOINTMENTS.

**BRADFORD**, John Rose, M.D., D.Sc.Lond., M.R.C.S., appointed Examiner in Elementary Anatomy for the First Examination of the Royal College of Surgeons of England.

**BUCKMASTER**, George Alfred, M.A., M.D.Oxon., M.R.C.S.Eng., appointed Examiner in Elementary Biology for the First Examination of the Royal College of Surgeons of England.

**CALWELL**, W. M.A., M.D., Registrar of the Royal Hospital, Belfast, appointed Physician to the Consumptive Department, Throne Hospital, Belfast, *vice* Strafford Smith, M.D., resigned.

**COOPER**, Alfred J. S., appointed Medical Officer to the Workhouse of the Aston Union.

**CRAWFORD**, Douglas, M.B., F.R.C.S., appointed Honorary Assistant Surgeon to Stanley Hospital, Liverpool, *vice* S. Kellet-Smith, F.R.C.S., resigned.

**DAVOREN**, John, L.R.C.P., L.R.C.S.I., appointed Medical Officer of the Holborn Union Schools.

**DEAN**, Henry Percy, M.D.Lond., F.R.C.S.Eng., appointed Examiner in Elementary Biology for the First Examination of the Royal College of Surgeons of England.

**DUNCAN**, William, M.D.Bruce, F.R.C.S.Eng., M.R.C.P.Lond., appointed Examiner in Midwifery for the Final Examination of the Royal College of Surgeons of England.

**FAGGE**, Robert Hilton, M.R.C.S., L.R.C.P., appointed House-Physician to Leicester Infirmary.

**FOSTER**, Michael B., M.R.C.S.Eng., L.R.C.P.Lond., appointed House-Surgeon to the Leicester Infirmary, *vice* G. Winfield-Roll, M.B. Cantab., resigned.

**GILPIN**, R. H., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer of Health to the Peabworth Rural District Council.

**HALLIBURTON**, W. D., B.Sc.Lond., M.R.C.S., appointed Examiner in Anatomy for the Second Examination of the Royal College of Surgeons in England.

**HANFIELD-JONES**, Montagu, M.D.Lond., M.R.C.P., M.R.C.S.Eng., appointed Examiner in Midwifery for the Final Examination of the Royal College of Surgeons of England.

**HARRIS**, Wilfred J. B.A., M.B., B.C.Cantab., appointed Junior House-Physician to the National Hospital for the Paralysed and Epileptic, Queen Square, *vice* Dr. Warrington, resigned.

**HASLAM**, William Frederick, F.R.C.S.Eng., appointed Examiner in Anatomy for the First Professional Examination for the Fellowship of the Royal College of Surgeons of England.

**HERMAN**, George Ernest, M.B., F.R.C.P.Lond., F.R.C.S.Eng., appointed Examiner in Midwifery for the Final Examination of the Royal College of Surgeons of England.

**HIND**, Albert, L.R.C.S.Eng., L.S.A., reappointed Medical Officer of Health to the Southampton Town Council.

**HUTCHINSON**, Jonathan, jun., F.R.C.S.Eng., appointed Examiner in Elementary Anatomy for the First Examination of the Royal College of Surgeons of England.

**JACOBSON**, Walter H. A., M.B., M.Ch.Oxon., F.R.C.S.Eng., appointed Examiner in Anatomy for the First Professional Examination for the Fellowship of the Royal College of Surgeons of England.

**JESSOP**, Walter H. H., M.A., M.B.Cantab., F.R.C.S.Eng., appointed Examiner in Elementary Anatomy for the First Examination of the Royal College of Surgeons of England.

**LOCKWOOD**, C. B., F.R.C.S., appointed Examiner in Anatomy for the First Professional Examination for the Fellowship of the Royal College of Surgeons of England.

**LOWNE**, Benjamin S., F.R.C.S.Eng., appointed Examiner in Physiology for the First Professional Examination for the Fellowship of the Royal College of Surgeons of England.

**LUCAS**, R. Clement, M.B., B.S.Lond., F.R.C.S., appointed Examiner in Anatomy for the Second Examination of the Royal College of Surgeons of England.

**MCDONNELL**, Thomas F., L.R.C.P., L.R.C.S.I., appointed Medical Officer for the Fifth District and of the Workhouse of the Hailsham Union.

**MAKINS**, George H., F.R.C.S.Eng., appointed Examiner in Anatomy for the Second Examination of the Royal College of Surgeons of England.

**MAXWELL**, J. C., M.A., M.B., C.M.Edin., appointed Senior House-Surgeon to the Halifax Infirmary.

**POWER**, D'Arcy, M.A., M.B.Oxon., F.R.C.S.Eng., appointed Examiner in Anatomy for the Second Examination of the Royal College of Surgeons of England.

**ROBERTS**, F. T., M.D.Lond., F.R.C.P., appointed to the Chair of Principles and Practice of Medicine at the University College, London.

**ROUGHTON**, Edmund W., F.R.C.S.Eng., appointed Examiner in Elementary Anatomy for the First Examination of the Royal College of Surgeons of England.

**ROUTH**, A. J. M'C., M.D., B.S.Lond., M.R.C.S.Eng., appointed Examiner in Midwifery for the Final Examination of the Royal College of Surgeons of England.

**SCHÄFER**, E. A., M.R.C.S.Eng., F.R.S., appointed Examiner in Physiology for the First Professional Examination for the Fellowship of the Royal College of Surgeons of England.

**SEATON**, Edward, M.D., F.R.C.P.Lond., M.R.C.S., appointed Examiner in Part II for the Diploma in Public Health of the Royal College of Surgeons of England.

**SENIOR**, Arthur, M.B., C.M.Glasg., appointed Medical Officer of Health to the Kingston and The Dittons Urban District Council.

**SPENCER**, Walter G., M.B., F.R.C.S.Eng., appointed Examiner in Anatomy for the Second Examination of the Royal College of Surgeons of England.

**STARLING**, Ernest H., M.D., B.S.Lond., M.R.C.S.Eng., appointed Examiner in Physiology for the First Professional Examination for the Fellowship of the Royal College of Surgeons of England.

**STIELING**, William, M.D., C.M.Edin., F.R.S., appointed Examiner in Physiology for the First Professional Examination for the Fellowship of the Royal College of Surgeons of England.

**STODDART**, W. H. B., M.B., B.S.Lond., appointed Senior House-Physician to the National Hospital for the Paralysed and Epileptic, Queen Square, *vice* Dr. Whiting, appointed Registrar.

**STORR**, F. A., B.A.Oxon., L.S.A., appointed Junior House-Surgeon to the Halifax Infirmary.

**SUTTON**, J. Bland, F.R.C.S., appointed Examiner in Anatomy for the First Professional Examination for the Fellowship of the Royal College of Surgeons of England.

**TODD**, H. B., M.R.C.S., L.R.C.P.Lond., reappointed Medical Officer of Health to the Charlton King's District Council.

**TURNER**, George, M.B., D.P.H.Cantab., M.R.C.S.Eng., appointed Examiner in Part I for the Diploma in Public Health of the College of Surgeons of England.

**WALSHAM**, George H., F.R.C.S.Eng., appointed Examiner in Anatomy for the Second Examination of the Royal College of Surgeons of England.

**WATERHOUSE**, Herbert F., M.D.Edin., F.R.C.S.Eng., appointed Examiner in Elementary Anatomy for the First Examination of the Royal College of Surgeons of England.

**WEEKS**, Dr. C. C., appointed Medical Officer for the Pinchbeck District of the Spalding Union, *vice* Dr. Swann.

**YOUNG**, Alfred Harry, M.B.Edin., F.R.C.S.Eng., appointed Examiner in Anatomy for the Second Examination of the Royal College of Surgeons of England.

### DIARY FOR NEXT WEEK.

#### MONDAY.

**LONDON POST-GRADUATE COURSE**, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. A. Stanford Morton: Ocular Injuries. London Throat Hospital, Great Portland Street, 8 P.M.—Mr. George Stoker: Impaired Movements of the Vocal Cords.

#### TUESDAY.

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

**ROYAL COLLEGE OF PHYSICIANS OF LONDON**, 5 P.M.—Dr. Marcet: The Croonian Lectures. A Contribution to the History of the Respiration of Man. Lecture III.

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

#### WEDNESDAY.

**LONDON POST-GRADUATE COURSE**, Hospital for Diseases of the Skin, Blackfriars, 1 P.M.—Dr. Payne: Affections of the Skin produced by Animal Parasites. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. W. Lang: Iritis.

**ST. GEORGE'S HOSPITAL MEDICAL SCHOOL**, 5 P.M.—Dr. W. H. Dickinson: On some Points Touching Disease of the Heart. Baillie Lecture II.

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

**DERMATOLOGICAL SOCIETY OF GREAT BRITAIN AND IRELAND, 5 P.M.—Dr. Shephard T. Taylor:** Notes of cases of Abnormal Growth of Fingernail. Cases will be shown by Mr. Bidwell, Dr. Stowers, and others.

**THURSDAY.**

**LONDON POST-GRADUATE COURSE, Hospital for the Paralyzed and Epileptic, Queen Square, 2 P.M.—Mr. Charles A. Ballance:** Diagnosis of Brain Abscess following Ear Disease. Hospital for Sick Children, Great Ormond Street, 3.30 P.M.—Mr. Edmund Owen: Cases from the Surgical Wards. Central London Sick Asylum, Cleveland Street, 5.30 P.M. Mr. John Hopkins: Cases in the Wards.

**ROYAL COLLEGE OF PHYSICIANS OF LONDON, 5 P.M.—Dr. Marcet:** The Croonian Lectures. A Contribution to the History of the Respiration of Man. Lecture IV.

**FRIDAY.**

**LONDON POST-GRADUATE COURSE, Bacteriological Laboratory, King's College, 3 to 5 P.M.—Professor Crookshank:** Lecture: Tetanus, Rabies, and Cholera. Practical work: Examination of Comma Bacilli, Chemical and other Tests.

**SATURDAY.**

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

**BIRTHS, MARRIAGES, AND DEATHS.****BIRTHS.**

**BAIN.**—On June 5th, at Thornfield, Heaton, Mersey (the residence of her mother), the wife of W. Bain, F.R.C.S.Edin., of Heaton Chapel, Manchester, of a son.

**CAIRD.**—On June 5th, at 21, Rutland Street, Edinburgh, the wife of F. M. Caird, M.B., F.R.C.S.Edin., of a son.

**REDFERN.**—On June 13th, at Croindene, Wellesley Road, Croydon, the wife of John J. Redfern, M.A., M.D., M.Ch., M.A.O., of a son.

**MARRIAGES.**

**BOGLE—MOORE.**—On June 12th, at Hampstead Parish Church, by the Rev. T. W. M. Lund, Chaplain to the School for the Blind, Liverpool, and the Rev. J. A. Lindam, Vicar of Dillon Priors, Shropshire. James Linton Bogle, M.D., of New Ferry Park, Cheshire, to Agnes Elizabeth Collingham, elder daughter of Henry Moore, Esq., R.A., R.W.S., of Collingham, Maresfield Gardens, Hampstead, N.W.

**ECCLES—ANSTIE.**—On June 12th, at the Baptist Chapel, Devizes, by the Rev. J. F. T. Hallows, M.A., of Birmingham, William McAdam Eccles, M.S.Lond., F.R.C.S.Eng., of Harley Street, W., son of W. Soltan Eccles, Esq., of Upper Nowood, to Anna Coralie, second daughter of Edward B. Anstie, Esq., of Devizes.

**HILL—PEARCE.**—On June 12th, at the Parish Church, Beer Ferris, South Devon, Rowland Hill, M.R.C.S.Eng., to Adeline Bertha, daughter of M. W. Pearce, of Dalymount, Beer Alston, Devon.

**HILLARY—CROWTHER.**—On June 12th, at the Parish Church, Castleford, by the Rev. Gardner Smith, Rector of Castleford, assisted by the Rev. J. J. Christie, M.A., Rural Dean and Vicar of Pontefract. Arthur Hillary, M.R.C.S.Eng., L.R.C.P.Lond., son of John Hillary, J.P. of Pontefract, to Mary, youngest daughter of the late Joseph Crowther, of Weetworth, Glass Houghton. No cards. At home July 23rd, 24th and 25th.

**MCCORMACK—PERRIN.**—On June 19th, at St. George's, Kidderminster, Henry James McCormack, L.R.C.P.I., L.R.C.S.I. & L.M., son of Henry Hugh McCormack, of Bownugger, Katywar, India, to Lucy Gertrude, fourth daughter of the late Edward Perrin, of Gleneil Villa, Kidderminster.

**MARSH—HARDIE.**—On June 12th, at Darenham Church, by the Rev. R. Marsh, father of the bridegroom, assisted by the Rev. R. M. P. Butler, M.A., Alfred Herbert Marsh, Surgeon-Captain 3rd Volunteer Battalion Cheshire Regiment, Northwich, to Annie, second daughter of William Hardie, Esq., The Elms, Leftwich, Northwich. No cards.

**MARTIN—BLACKBURN.**—On June 6th, at Wesley Chapel, Birkenhead, by the Rev. Thomas Hind, M.A., Arthur James Martin, M.D.Lond., of Bloxwich, eldest son of Alfred Martin, Esq., Birmingham, to Beatrice, third daughter of Edwin Blackburn, Esq., C.E., of Birkenhead.

**MURDOCH—SIMPSON.**—On June 18th, at St. James's, Tunbridge Wells, by the Rev. A. T. Scott, Vicar, assisted by the Rev. R. E. V. Hanson, Alan Murdoch, M.R.C.S., L.R.C.P., eldest son of H. H. Murdoch, of Calverley Lodge, Tunbridge Wells, and late of Calcutta, to Eva Maria, daughter of the late Thomas Fox Simpson, of Clyde House, Tunbridge Wells.

**POLLARD—GRAHAM.**—On Wednesday, June 12th, at The Oratory, South Kensington, by the Rev. Sebastian Bowden, Reginald Pollard, M.B., M.R.C.S., of Southlands, Torquay, to Batrix Lucy Stewart Graham, second daughter of Major-General G. F. J. Graham, of 4, Buckingham Palace Mansions, London.

**WHITE—FITZ GERALD.**—On June 18th, at Framingham Pigot, by the Rev. E. Kinder, assisted by the Rev. R. H. Prowse, Rector of the parish, Richard Wentworth White, M.R.C.S., etc., 23, St. Giles's Street, and Chester House, Norwich, eldest son of the late Richard White, of that city, to Ethel, daughter of Major Fitz Gerald, of Framingham Hall.

**DEATHS.**

**HADDEN.**—On the 6th instant, at St. Thomas's Hospital, London, John Hadden, M.D., of White Hall, Hampton Court, aged 53, for 25 years practising at Horncastle, Lincolnshire, and lately at Wilton Lodge, Norbiton, Kingston-on-Thames.

**JAMES.**—On June 17th, at Barton under Needwood, James Prytherch James, of Easleigh, of heart disease after influenza, aged 41.

**LETTERS, NOTES, AND ANSWERS TO  
CORRESPONDENTS.**

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

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

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

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

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

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

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

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

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

**QUERIES.**

**M.D. MEMBER** wishes to know the composition of a proprietary medicine—Gibson's Mixture—used in gout and rheumatism.

**G. F. G.** would be glad to hear of any institution where a little girl, aged 5, who is suffering from cretinism and is unable to talk or walk, could be taken in, either for slight payment or by a letter of recommendation?

**M.D.** wishes to know what is the best book on Sicily, and which is the best winter station on the island. He has heard favourable mention of Palermo, Aci Reale, Catania, Taormina.

\* \* **M.D.** will find the information he requires in Ball's *Mediterranean Winter Resorts*. Palermo is the most popular winter resort in Sicily.

**ALBUMINURIA.**

**SPES** asks for a sufficiently delicate test for albumen in urine not discoverable by heat or nitric acid?

\* \* The tests for albumen are innumerable. We may mention picric acid, potassio-mercuric iodide, and ferrocyanide of potassium. Reference may be made to Finlayson's *Clinical Manual*, Ralfe on *Diseases of the Kidneys*, or *Clinical Diagnosis*, by von Jaksch, translated by Cagney. In life insurance examinations it is customary, we believe, to rely on the tests by nitric acid and by boiling.

**VENTILATION.**

**DR. T. D. COOK** (Torquay) asks to be referred to books giving the various methods of ventilating public buildings and dwelling houses?

\* \* Our correspondent might consult: Billings: *Ventilation and Heating*. New York: *Engineering Record Office*. 1893.—A. Buchan: *Ventilation and the Art of Ventilating Buildings*. London: Crosby, Lockwood, and Co. 1891.—Sir D. Galton: *Healthy Hospitals, etc., and Healthy Dwellings*. 1893. *Construction of Healthy Dwellings*. 1880. Oxford: Clarendon Press.—R. H. Read: *Original Investigations on the Art of Ventilating School Buildings*. Washington: 1891. Chicago: *Journal of the American Medical Association*.—Stevenson and Murphy: *Hygiene*. London: J. and A. Churchill. Vol. 1. 1892.

**ANSWERS.**

**UNCAS**, if he feels it to be essential to his happiness to be tattooed, should consult his medical adviser as to the use of cocaine.

**VARIOLA.**—We fear that no action will lie against the bonesetter. The slander is only implied, not direct.

**DR. CLIBBORN'S** letter has been forwarded to the Secretary of the Museum Committee.

**CARCINOMA.**—Our correspondent might apply to Professor Dr. E. Emmerich, University of Munich; or to M. le Professeur Charles Richet, 15, Rue de l'Université, Paris.

**F. D.**—Bona, Algiers, would not be a pleasant place for Europeans to reside in all the year round, but as an important seaport it, of course, has many French residents. "F. D." should consult Harris's *Practical Guide to Algiers*, price 3s. 6d.

**ACETONE.**—Full particulars concerning the Fellowship and *Journal* of the Chemical Society can be obtained from the Secretary of that Society, Burlington House, Piccadilly, London, W. The most recent views concerning acetonuria, with references, will be found in v. Jaksch's *Clinical Diagnosis*, translated by Cagney.