

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

TWO CASES OF EXTREME HÆMATEMESIS TREATED BY PERCHLORIDE OF IRON.

THE notes of the two following cases may be of some interest, instancing as they do the advantage of the perchloride of iron treatment in extreme hæmatemesis.

The first was a woman of about 43, who for some months had been suffering from pain of a more or less acute character after food. She had not, however, been under treatment for it, and was at work when the hæmatemesis occurred. When I saw her she was apparently dead. The floor and her clothes were soaked with blood, and there was half a small washing basin full of blood beside her.

On examination, faint pulsations of the heart could just be detected. There was no pulse at the wrist-joint, the lips were colourless, and the pupils widely dilated. Under the usual treatment this state of things improved slightly, and in two hours a mixture of pounded ice, glycerine, and a solution of perchloride of iron was administered in teaspoonful doses every hour, causing some gripping pain but not of a severe character. In about twelve hours the quantity of ice and glycerine was increased, the iron remaining about the same, that is, 10 to 15 minims. In two days she was taking an ounce of the above mixture every four hours, ice water being substituted for the ice. Nothing else whatever was allowed by the mouth, and she was kept absolutely still on her back. For 15 days she was fed by the rectum, after which she began with beef essence and milk. She made a perfect recovery, and is now, eight months after the attack, able to undertake the hardest work, and to eat any food whatever without the slightest inconvenience.

The second case was that of a delicate woman aged about 33. She had been under treatment for about a month for gastric ulcer and hæmatemesis, and had vomited blood three times during that period—the two first occasions about a pint, the last occasion, just before I saw her, a very much greater amount, but I did not see the vomit. She was very collapsed, pulse very faint and rapid, breathing shallow, the lips quite white. She could recognise those about her but was unable to make any sound. I adopted the same treatment as in the previous case, and she made a slow but steady recovery. The gripping pain was complained of for a longer period, and appeared to occupy a larger extent of surface. Her husband informs me she is now, five months after the attack, perfectly well, and without the slightest pain after food.

ST. GEORGE REID, M.R.C.S. Eng.,
Consulting Surgeon for Diseases of the Throat and Ear,
Croydon Infirmary.

DIAGNOSIS OF EMPYEMA OF THE ANTRUM.

AN interesting case of suspected empyema of the antrum, which had been under treatment for three months without benefit, was brought to me for examination with the electric lamp which I have constructed, and which I described, in the BRITISH MEDICAL JOURNAL of February 8th, 1890.

All the ordinary signs of chronic empyema, including purulent discharge from the nostril, neuralgia, and consequent exhaustion, existed. The state of the teeth gave no clue to this condition of things, although two diseased bicuspids had been recently extracted on account of it.

When the 5 candle lamp was used I was surprised to find that its rays were equally distributed through each orbit; it was therefore evident that there was nothing wrong in the antrum. The difficulty was now to account for the symptoms. The second molar had been occasionally tender on pressure; I therefore determined to extract it. In doing so, however, the third molar and all the alveolar process, with the surrounding tissues, came away in one mass, so that there was difficulty in finally removing them. A day or two afterwards the symptoms had all disappeared, and in a week the patient was well.

The diagnostic value of the lamp and the unusual sequence

of a common alveolar abscess are my excuse for troubling you with this communication.

Wimpole Street, W.

N. STEVENSON.

MAGNESIUM SULPHATE IN TROPICAL DYSENTERY. [Communicated by the DIRECTOR-GENERAL OF THE MEDICAL DEPARTMENT OF THE NAVY.]

THE value of magnesium sulphate in dysentery does not appear to be generally known, judging from the scanty references to it in textbooks, but I can endorse Dr. Wyatt-Smith's experience of it from my own. In two cases under my care on board Her Majesty's gunboat *Peacock*, then lying in the Yangtze River, China, five years ago, one was treated with ipecacuanha, and eventually died in the Shanghai Hospital with extensive gangrenous ulceration of the bowel; the other was given drachm doses of a saturated solution of Epsom salts, in combination with 10 minims of dilute sulphuric acid, every hour, as described in the *Lancet* of October 4th, 1890, and recovered without a single complication.

So striking and immediate was the effect of magnesium sulphate on the symptoms, that in any future case of dysentery I should give it first trial, before resorting to ipecacuanha with its uncertain action. Considering the number of cases which occur in the ships of the Royal Navy serving on the coasts of China and the East Indies, I certainly think that this method of treating the disease should be more widely known.

V. GUNSON THORPE,
Her Majesty's Dockyard, Sheerness. Surgeon, R.N.

I WAS very interested in the memorandum communicated by Dr. Wyatt-Smith in the BRITISH MEDICAL JOURNAL of January 29th on the treatment of tropical dysentery by magnesium sulphate, as I can fully corroborate all his statements. For several years in Nicaragua, C.A., I treated dysentery with ipecacuanha, and notwithstanding its vaunted efficacy I cannot say that I know of one single case which derived much benefit from it. The "textbooks" say that a patient suffering from dysentery can retain large doses of ipecacuanha in a remarkable manner, but in my experience this is far from being correct, although anti-emetics were in all cases given previous to its administration. It was not until I read in a medical paper (the name of which as well as that of the author I have unfortunately forgotten) the treatment of dysentery by magnesium sulphate and dilute sulphuric acid that I had any success. I then gave half-ounce doses of a saturated solution of magnesium sulphate and fifteen minims of dilute sulphuric acid every two hours, with milk diet, and in the words of Dr. Wyatt-Smith it "acted like magic." In most cases pain and all traces of blood disappeared from the stools in twenty-four hours, and there was of course a complete absence of the distressing nausea which is always present in the treatment by ipecacuanha.

I feel certain, if the magnesium sulphate treatment were carried out, that in the majority of cases tropical dysentery would be shorn of half its terrors.—I am, etc.,

THOMAS R. WIGLESWORTH, L.R.C.P. Lond., M.R.C.S. Eng.
Cinderford, Glos.

A CASE OF EMBOLISM.

Miss E., aged 20, was, on January 1st, 1890, seized with acute rheumatism. One knee, one ankle, one wrist were affected. The pulse was 90, the temperature 101° F., and there was a presystolic *bruit*, soft and prolonged at the apex. Two years before she was the subject of the profoundest anæmia, absent catamenia, oedematous legs, up high in the abdomen, and I believe she had plugging of the iliac veins. Then she made the best recovery under iron and arsenic, and no one ever had eighteen months' better health.

In three days the rheumatic symptoms waned entirely, the temperature and pulse were down, and the patient felt well. On the fourth day all was well, and she sat up in bed for her sister to do her hair. Suddenly she shouted out that she was going, struggled, fainted, and fell back in a state of collapse. I was with her as soon as I could be. The *bruit* was much less audible. Her face and conjunctivæ were black as if she had been fighting. She was conscious then, and complained of being sick and giddy, and

deaf. Presently she vomited some blood. The bowels had acted; the evacuation contained blood. She had great pain over the right hip. I found an enormous extravasation of blood, 8 inches by 6 inches, which subsequently sloughed so deeply and widely as to leave a large cavity, which subsequently healed. The right foot was half gangrenous, the outer side being involved. She lost a great part of the foot—two toes and part of another. A few days elapsed and she became jaundiced. This lasted a fortnight. Hæmorrhage from the kidneys ensued, and the albumen did not disappear for some time. There was dyspnoea, and there were scattered *râles* over the chest. The cardiac *bruit* remained in the quietest way it assumed on the day when all the trouble came six months before. She made a magnificent recovery. Patience and perseverance brought about a cure. The patient was well sustained on food and alcohol. Plain simple dressing and strict cleanliness were used, and from time to time iron and arsenic, etc., were given with great success.

THOMAS COLE, M.D.Lond., F.R.C.P.Lond.
Late Senior Physician to Royal United Hospital, Bath.

Bath.

REPORTS

ON

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

WORTHING INFIRMARY.

CASE OF MYELOID SARCOMA OF THE FEMUR TREATED BY SCRAPING.

(By FRANK HINDS, M.D., B.S., Honorary Medical Officer.)
W. O., a male, aged 34, a wheelwright, was admitted to the hospital in June, 1895. He complained of aching pains about the right knee, which he had noticed for fifteen months. Latterly he noticed the knee was bigger than that on the opposite side. He was not prevented from getting about and doing his work.

He was a healthy-looking man, with nothing noteworthy about his personal or family history. The lower end of the femur was felt to be enlarged, particularly in the direction of the inner tuberosity, and there was slight tenderness on pressure over this part. There was no impairment of movement in the knee-joint, and no enlarged glands could be felt in the groin.

Operation.—A diagnosis of probable central necrosis at the lower end of the femur was made, and an operation for the removal of the sequestrum was commenced. As soon as the incision was carried down to the bone, its thin expanded condition and the bluish colour of the subjacent structure showed the nature of the disease. A piece of bone about the size of a crown piece was removed with scissors, and the growth, which was dark red and firm, scraped out with a sharp spoon. The bleeding was very profuse, and was checked by an elastic tourniquet. The removal of the growth left a cavity in the lower end of the femur involving both condyles, extending upwards into the shaft, and measuring 4 inches in depth from the opening in the internal tuberosity to its outer side. The surface of it was scrubbed with chloride of zinc solution (gr. xx ad 3j), and was packed with cyanide gauze.

The patient convalesced without noteworthy incident, but at the end of six weeks, the appearance of the granulations at the wound not being satisfactory, the cavity was again scraped out and scrubbed with zinc chloride solution; no definite masses of growth were recognised at this operation.

Convalescence was uninterrupted; the leg was put up in a Thomas's knee splint and kept in it for nine months, and afterwards a leather splint was worn for a further period of nine months.

Present Condition of Patient.—His general health is perfect; there are no signs of growth to be detected anywhere. The knee has only a very slight degree of flexion; there is no pain in it; the patient gets about well on it, using it practically as a stiff leg. There is a sinus about 1 inch deep on the inner side, which discharges enough pus just to soil a dressing in

twenty-four hours. Under the microscope the growth was seen to be a myeloid sarcoma with very numerous giant cells.



REMARKS.—The case appears worth reporting as showing the locally malignant character of a myeloid sarcoma, there being no sign of any recurrence after four years from the date when the earliest symptoms were noted, and 2½ years after operation. The advantage of removing the growth by scraping instead of by amputation of the limb is obvious, and the earlier it is resorted to the better the prospect will be of saving the bone in a condition in which repair may take place to such an extent as to result in a useful limb. The very thin condition of the bone was the reason for keeping the knee free from bearing weight for so long a period; possibly a bolder treatment in the way of earlier movement of the knee-joint would have resulted in a better limb. The skiagraph, kindly taken for me by Mr. Ernest Payne in November, 1897, shows the extent to which the bone had expanded; there has been no alteration in shape since the time of the operation.

A PROPOSAL for the establishment of a radiographic service in each of the hospitals under the control of the Assistance Publique is now under consideration by the Paris Municipal Council. The service is to be under the direction of the medical staff of the hospitals.

THE French Minister of Public Instruction recently announced to the Academy of Inscriptions that he had received a letter from Dr. Jules Rouvier, Professor in the French Medical Faculty of Beyrout, announcing that he had discovered several Phœnician burial vaults of the second century before the Christian era. The vaults were found in a region to the south of Beyrout, which for years has been buried in sand.

THEOPHILUS PARVIN, M.D.,
Philadelphia.

WE regret to announce the death of Dr. Theophilus Parvin, the well known American obstetrician and gynaecologist, which took place at Philadelphia on January 9th. He had been gravely ill for some weeks with cardiac asthma. Dr. Parvin, who was descended from Cæsar Rodney, one of the signatories of the Declaration of Independence, was born at Buenos Ayres, where his father was a missionary, on January 9th, 1829. Early in childhood he came to Philadelphia, where he received his preliminary education. After graduating in arts in the University of Indiana in 1847 he entered the Medical Department of the University of Pennsylvania, where in due course he took his doctor's degree. He practised for a time at Indianapolis, and was afterwards Professor successively in the Ohio State Medical College, the University of Louisville and the Indianapolis Medical College. He was appointed to the Chair of Obstetrics and Gynaecology in the Jefferson Medical College in 1883. This position he continued to hold until his death.

Dr. Parvin contributed largely to the literature of his speciality. He was the author of an excellent treatise entitled *The Science and Art of Obstetrics*, and he was the editor of a translation of Winckel's work on diseases of women. He was a highly accomplished man, with a good grounding of scholarship, and his knowledge was vivified by a keen sense of humour. He was an honorary member of several obstetrical societies in Edinburgh, Berlin, and elsewhere.

J. CLELLAND CLARKE, M.B., M.R.C.S.

WE regret to announce the death of Dr. Clarke, of Long Causeway, Farnworth, in his 49th year. About a month ago, during the course of his professional work, Dr. Clarke contracted typhoid fever. Notwithstanding the assiduous attention of his brother, Dr. Carson Clarke, the younger brother succumbed on February 16th. The interment on February 19th at Farnworth Cemetery, Bolton, was attended by deputations representing many public bodies. Dr. Clelland Clarke was a Justice of the Peace and a County Councillor, and was highly respected in the neighbourhood in which he practised.

Dr. Clarke studied at Edinburgh University, where he graduated as M.B., C.M. in 1871, and in the same year he became M.R.C.S.

SURGEON-GENERAL ALEXANDER MACLEAN, M.D., died suddenly last week, at the age of 66, at his residence in Thurso. He entered the Army Medical Department in 1854, and had a distinguished record of service. He took part in the Crimean campaign, and was present at the battle of Balaclava. He also served through the mutiny in India, and took part in the siege and fall of Lucknow. During this period of service he was attached to the Black Watch. After his retirement he took an active interest in local affairs, and was a member of the Thurso School Board and a county councillor.

WE regret to announce the death of Mr. WILLIAM GROOM, J.P., of Wisbech, which took place on February 14th. Mr. Groom was the son of Mr. Joseph Groom, a former Chairman of the Wisbech Board of Guardians, and one of the original members of the Corporation. After receiving his preliminary education at Wisbech, he studied medicine at King's College, London, becoming a Member of the Royal College of Surgeons and a Licentiate of the Society of Apothecaries in 1856. Mr. Groom then settled at Wisbech, where he held the position of Medical Officer for nearly all the districts in the Union at different periods, and for the Wisbech district for thirty-seven years. He was also Medical Officer to several of the local friendly societies, and was held in high esteem by rich and poor. He was President of the Cambs and Hunts Branch of the British Medical Association. He was Justice of the Peace for the Isle of Ely and Borough of Wisbech. He was a member of the Wisbech Corporation for nearly forty years, having been elected in 1859. In 1871 he was elected Alderman of the Borough, and in due course served the office of Mayor. He was also a County Councillor for the Central Division of Wisbech, and President of the

Wisbech Liberal Association for several years, and took an active part in elections and in other incidents of political life. Mr. Groom was a man of great energy and decided activity, and in all the many spheres of action upon which he entered he worked strenuously and won the good opinion of his fellow citizens. During the last two or three years he had been in failing health, but he did not take to his bed till two or three days before the end. He leaves a daughter and two sons, both of whom are members of the profession in practice at Wisbech.

WE regret to announce the death of Mr. EZEKIEL ROUSE, of Bideford, who passed away on February 9th after a long illness. He was the only son of the Rev. E. Rouse, of Moorwenstow, Cornwall, where the early years of his life were spent in study for holy orders. After a somewhat chequered career in the Colonies he returned to his native land and settled down to work hard at Edinburgh with a view of qualifying for the medical profession. He qualified as M.R.C.S.Eng. and L.R.C.P. and L.M.Edin. in 1871. Mr. Rouse practised for many years in Bideford, and was Honorary Surgeon to the Bideford Infirmary and Dispensary. Among the public appointments which he held were those of Medical Officer of Health and Analyst to the Bideford Rural District, Medical Officer of Health to the Northam District Council and to the Barnstaple Port Sanitary Authority. His funeral, which took place on February 12th, was a military one, attended by the North Devon Volunteers, in which corps he had for years taken an active interest, holding the post of Surgeon-Captain. He had received the volunteer long service medal.

WE regret to announce the death of Professor RUDOLF LEUCKART, the distinguished entomologist and parasitologist of the University of Leipzig. He was born at Helmstedt in 1823, studied medicine and zoology in the University of Göttingen, where he was a favourite pupil of Rudolf Wagner. In 1847 he became Privat-Dozent at Göttingen, and in 1855 he was appointed Ordinary Professor of Zoology in the University of Giessen. In 1870 he accepted a call to the corresponding chair at Leipzig, which he occupied till his death. His great work, *Die Parasiten des Menschen*, which appeared in 1863, is still the classic treatise on the subject, and he contributed largely besides to the literature of the special department of medical science which he had chosen for his own. As a teacher he held a unique position, for he was justly regarded, not only in Germany but throughout the scientific world, as the greatest authority on the subject which he professed. He was an excellent comparative anatomist, and contributed articles on the subject to Wagner's *Handwörterbuch der Physiologie* and to Graefe and Saemisch's *Handbuch der Ophthalmologie*, besides collaborating with Bergmann in a treatise on Comparative Anatomy and Physiology.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are: Professor Waldemar von Schroeder, Director of the Pharmacological Institute of Heidelberg; Dr. Karl Nikolas, Professor of Hygiene in Lausanne; Dr. Otto von Essen, of St. Petersburg, a Russian dermatologist of considerable repute, aged 35; Dr. Mænet, Member of the Académie de Médecine, Physician to the Paris Hospitals, and author of several works on the nervous system and hypnotism, aged 77; Dr. Ludwig Ruge, aged 81, the oldest practitioner in Berlin; Professor Leopold Auerbach, of Breslau, well known as a writer on neuropathology, aged 69; Dr. de Pietra-Santa, of Paris, formerly private Physician to the Emperor Napoleon III, editor of the *Journal d'Hygiène*, and an ardent advocate of sanitary progress, aged 77; Dr. Paul Hasse, formerly Medical Director of the Brunswick Lunatic Asylum at Königslutter, aged 68; Dr. L. H. Ripping, for many years Superintendent of the Lunatic Asylum at Duren; Dr. William A. Love, one of the oldest and best known physicians in Georgia, formerly Professor of Physiology in the Atlanta Medical College, of which he was also President, aged 74; and Dr. Joseph F. Edwards, of Atlanta City, formerly Editor of the *Annales of Hygiene*, aged 45.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

DOWNING PROFESSORSHIP.—Sir W. H. Broadbent, Bart., has been appointed an Elector to the Downing Chair of Medicine.

SCIENCE FELLOWSHIP.—Mr. John Graham Kerr, B.A., First Class in Parts I and II of the Natural Sciences Tripos, has been elected to a Junior Fellowship at Christ's College.

EXAMINATIONS FOR DEGREES.—Parts I and II of the Third Examination for the degree of M.B. and B.C. will commence on Tuesday, April 26th. The examination for the degree of M.C. will commence on Friday, April 29th. Notice must be given through the Prælectors of the respective colleges on or before Thursday, March 31st.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

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

Addison, J. B.	Harness, H. N.	Osborne, A.
Akers, W. D.	Harston, G. M.	Owen, L. E.
Allfrey, F. H.	Hatfield, R.	Parsons, A. C.
Ashe, Frank	Hayford, E. J.	Parsons, W. B.
Austin, N. H.	Haylock, S. J.	Pelle, H. D.
Bar'ow, H. C.	Hewer, E. S. E.	Phillips, H. J.
Bendle, J. H.	Hollings, G. B.	Phipps, G. C.
Beringer, F. J. A.	Horton, W. A.	Pierce, R. W. C.
Blakiston, F. C.	Humby, W. J.	Powers, R. H.
Bramsdon, W. A.	Johnson, R. D.	Prichard, A. H.
Chater, H. J.	Jones, G. W. G.	Prior, G. P. U.
Chennell, E. P.	Joy, N. H.	Ransford, S. T. G.
Collens, E. H.	Kendal, N. J.	Rivers, W. C.
Collum, R. W.	Kilvert, J. E.	Robinson, A. C.
Collyer, B. J.	King, J. W.	Rose, F. H.
Curme, D. E.	Knight, C. V.	Rose, S. F.
Darbyshire, D. E.	Langley, J. I.	Ross, A. M.
Davies, T. J.	Lee, F. W.	Ross, E. H.
Davies, W. J. E.	Lloyd, E. E.	Shedden, A. W.
Dee, M. V.	Lloyd, L. N.	Skevington, J. O.
de Gannes, J. L. F.	Lloyd, R. H.	Steele, G. H.
Denyer, S. E.	Lobb, F. F.	Stock, W. S. V.
Dowding, E. F. C.	Lovegrove, F. T. A.	Sweetlove, J. W.
Dupigny, E. F. C.	McKinlay, J. R.	Thwaites, G. B.
Eastment, A. G.	MacLellan, W.	Tolputt, A. G.
Ellery, E. E.	Millar, A. F.	Trevor, A. H.
Elliott, A. E.	Milne, J. W.	Way, A. O.
Fairbank, C. B.	Moore, P. W.	Weber, E. A.
Fairweather, W. E.	Morgan, W. E.	Wellby, S.
Flood, F. G.	Morris, I. L.	Wernet, A. J.
Fuller, W. A.	Mort, J. H.	Whitehead, C. B.
Geach, R. N.	Mottram, G. N.	Whiteside, H. C.
Ghany, M. A.	Naesmyth, D. L. K.	Whitfield, L.
Glover, J. A.	Nanjapa, C. A.	Wijeyesakere, W.
Greg, A. H.	Nicholson, C. R.	Willis, J. D.
Halliday, S. D. T.	Nolan, M. J.	Wood, J.
Hamilton, J. J. C.		

CONJOINT BOARD IN ENGLAND.

The following gentlemen having passed the necessary Examinations have been admitted Diplomates in Public Health:

S. L. Box, L.R.C.P. Lond., M.R.C.S. Eng., M.B. Lond., St. Bartholomew's and King's College Hospitals; W. Butler, M.B. & C.M. Glasg., Glasgow University and University College Hospital; G. Carter, M.R.C.S. Eng., M.R.C.P. Edin., Yorkshire College and General Infirmary, Leeds; N. B. Darabseth, M.R.C.S. Eng., M.B. & C.M. Aberd., Aberdeen University and University College Hospital; D. F. Dymott, M.R.C.S. Eng., M.B. Lond., Surgeon-Major I.M.S., University College Hospital; G. H. Hunter, M.R.C.S. Eng., L.S.A. Lond., University College Hospital; J. L. W. Kitching, L.R.C.P. Lond., M.R.C.S. Eng., L.S.A. Lond., St. Thomas's Hospital; M. J. Morgan, L.R.C.P. Lond., M.R.C.S. Eng., L.S.A. Lond., Guy's Hospital; P. W. Nicol, M.B., C.M. Edin., Edinburgh University, Charing Cross, and King's College Hospitals; F. W. F. Ross, M.D., C.M. Edin., Edinburgh University, Royal College of Surgeons, Edinburgh, and University College Hospital; D. R. Rowlands, M.B., C.M. Edin., Edinburgh University and St. Bartholomew's Hospital; W. Wallace, M.D., C.M. Glasg., Glasgow University and Mason College, Birmingham; J. Wilkinson, M.B., C.M. Edin., Edinburgh University.

Three gentlemen were referred for six months.

ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

The following candidates having passed the examination for the licence in medicine of the Royal College of Physicians of Ireland have been admitted as Licentiates.

J. Douglas Macdonogh, L.R.C.S.I.; W. Arthur Winter, M.D.

CONJOINT BOARD IN IRELAND.

DIPLOMA IN STATE MEDICINE (PUBLIC HEALTH).—The following have passed this examination:

Honours Division.—Surgeon-Major S. Westcott, A.M.S. *Pass Division.*—M. G. McElligott, L.R.C.P. & S.I., L.A.H.D.

SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, February, 1898.—The following candidates passed in

Surgery.—E. L. Anderson, Liverpool; H. Clough, Leeds; G. C. Hobbs (Section I), St. Bartholomew's Hospital; B. Hogan, London Hospital; M. Jenkins, Guy's Hospital; J. A. Perdrau (Sections I and II), University College Hospital; A. M. Weir, Royal Free Hospital.

Medicine.—R. L. Argles, St. Mary's Hospital; J. B. Cautley (Section II), St. Bartholomew's Hospital; F. H. Fawcett, Middlesex Hospital; H. F. Forty, Middlesex Hospital; A. R. Henchley, Middlesex Hospital; R. Holt, Royal College of Surgeons, Ireland; J. A. Perdrau (Sections I and II), University College Hospital; D. C. M. Shaw, Manchester; H. Spinks, Manchester; F. A. St. John, St. Mary's Hospital; L. Tong, Manchester; H. J. Watts, Manchester.

Forensic Medicine.—R. L. Argles, St. Mary's Hospital; J. C. R. Curtis, University College Hospital; H. J. De Saram, Middlesex Hospital; F. H. Fawcett, Middlesex Hospital; E. Fryer, Guy's Hospital; A. R. Henchley, Middlesex Hospital; R. Holt, Royal College of Surgeons, Ireland; J. A. Perdrau, University College Hospital; H. Spinks, Manchester; F. A. St. John, St. Mary's Hospital; L. Tong, Manchester.

Midwifery.—H. A. Ahrens, King's College Hospital; R. L. Argles, St. Mary's Hospital; J. S. Barnes, St. Thomas's Hospital; D. Davies, London Hospital; H. J. De Saram, Middlesex Hospital; F. H. Fawcett, Middlesex Hospital; H. F. Forty, Middlesex Hospital; J. A. Perdrau, University College Hospital; G. M. F. Pereira, Calcutta and Royal Free Hospital; D. C. M. Shaw, Manchester; L. Tong, Manchester; W. A. H. B. Smith, King's College Hospital.

The diploma of the Society was granted to the following candidates: Messrs. E. L. Anderson, J. B. Cautley, J. C. R. Curtis, F. H. Fawcett, H. F. Forty, R. Holt, J. A. Perdrau, L. Tong, and Miss A. M. Weir.

NAVAL AND MILITARY MEDICAL SERVICES.

ARMY MEDICAL STAFF EXCHANGE.

The charge for inserting notices respecting Exchanges in the Army Medical Department is 3s. 6d., which should be forwarded in stamps or post office order with the notice, not later than Wednesday morning, in order to ensure insertion in the current issue.

A SURGEON-CAPTAIN who has been stationed for two years at Malta is willing to exchange further east.—Address "Nomad," Holt and Co.

THE ARMY MEDICAL REPORT FOR 1896.

This important Blue Book has made its annual appearance on the opening of Parliament, and displays in its compilation the care invariably shown in these reports.

The total strength of the British army (Europeans) for 1896 was 203,000, of which nearly 100,000 were stationed at home and the rest abroad. At home the ratio of admissions per 1,000 of strength was 645 against 755, and the constantly sick 38.52 against 43.54 average in the decade 1886-95, thus showing material improvement under both heads. Of specific diseases enteric fever, which always attracts attention, showed decided decline in 1896, but Dublin as usual retained its bad pre-eminence in this preventable disease.

Among the troops abroad there was also in the aggregate some improvement, both in the ratio of admissions and of constantly sick, compared with the averages of a decade, but of course the improvement was not shown universally.

The following stations showed improvement: Gibraltar, Egypt (with Cyprus), Bermuda, Mauritius, and last, but first in importance, India. The following kept at the average: South Africa (with St. Helena), and the Straits Settlements. The following exceeded the decennial average: Canada, Malta, West Indies, Ceylon, and China.

It is satisfactory to note the steady and progressive decline of sickness among our troops in Egypt, which was maintained in 1896, notwithstanding the Dongola expedition; but the death-rate was higher due to trying service "up the Nile." The unusually high ratio of admissions in Ceylon is accounted for by the arrival in the command of a regiment from India, which, it is stated, was "saturated with malarial poisoning."

In the West Indies and China malarial fevers and venereal diseases were the chief causes of excess in the ratios.

In India, most important of all, although the ratio of admission showed diminution, there was increase in the number constantly sick, arising from a higher average sick time for each soldier, and increase in the duration of each case.

Of specific diseases, cholera caused 70 admissions and 63 deaths, an advance on 1895, but under the average of the decade. Enteric fever also showed an increase over the average of the decade. It occurred in every district, and, with 18 exceptions, in every station in India. The highest ratio of admissions was in Allahabad district, but the greatest number of cases was at Quetta. It was found most difficult to account for the severity of the disease in that station; unless from polluted food and drink obtained by the soldiers in the native bazaars. Indeed, it becomes more and more evident that this disease must be combated in India by

last, February 19th. The annual rate of mortality in these towns, which had increased from 18.7 to 20.7 per 1,000 in the three preceding weeks, declined to 20.4 last week. The rates in the several towns ranged from 14.5 in Blackburn, 14.9 in Sunderland, 15.2 in Burnley, and 15.5 in Oldham to 23.4 in Liverpool, 24.5 in Bristol, 25.0 in Swansea, and 29.0 in Wolverhampton. In the thirty-two provincial towns the mean death-rate was 19.6 per 1,000, and was 1.0 below the rate recorded in London, which was 21.5 per 1,000. The zymotic death-rate in the thirty-three towns averaged 2.2 per 1,000; in London the rate was equal to 1.6 per 1,000, while it averaged 2.0 in the thirty-two provincial towns, among which the highest zymotic death-rates were 3.5 in Leicester, 3.6 in Salford, 5.1 in Swansea, and 5.8 in Bristol. Measles showed a death-rate of 2.1 in Brighton, 2.5 in Gateshead, 3.2 in Leicester, 4.4 in Bristol, and 4.6 in Swansea; whooping-cough of 1.0 in Birmingham and in Salford, and 1.1 in Portsmouth; and "fever" of 1.0 in Derby. The mortality from scarlet fever showed no marked excess in any of the large towns. The 71 deaths from diphtheria in the thirty-three towns included 33 in London, 7 in Cardiff, 6 in Liverpool, 4 in Wolverhampton, 3 in West Ham, 3 in Bristol, and 3 in Salford. No fatal case of small-pox was recorded last week, either in London or in any of the thirty-two large provincial towns; and no small-pox patients were under treatment in any of the Metropolitan Asylum Hospitals. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had declined from 3,818 to 2,871 at the end of the twelve preceding weeks, had further fallen to 2,781 on Saturday last, February 19th; 233 new cases were admitted during the week, against 241, 209, and 232 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday, February 19th, 873 births and 614 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had increased from 17.4 to 21.0 per 1,000 in the three preceding weeks, declined to 20.4 last week, and corresponded with the mean rate during the same period in the thirty-three large English towns. Among these Scotch towns the death-rates ranged from 14.3 in Perth and 17.4 in Aberdeen to 24.3 in Paisley, and 26.4 in Greenock. The zymotic death-rate in these towns averaged 3.0 per 1,000, the highest rates being recorded in Dundee and Paisley. The 102 deaths registered in Glasgow included 13 from measles, 5 from scarlet fever, 2 from diphtheria, 13 from whooping-cough, and 5 from "fever." Two fatal cases of scarlet fever and 2 of diphtheria were recorded in Edinburgh; 3 of scarlet fever in Dundee, and 5 of whooping-cough in Paisley.

DIPHTHERIA IN LONDON.

THERE was an increase in the prevalence of diphtheria last week in London, although the fatal cases registered showed a decline. The deaths referred to this disease, which had been 36, 42, and 45 in the three preceding weeks, fell to 33 during the week ending Saturday last, February 19th. Of these 33 deaths, 6 were of persons belonging to Islington, 5 to Poplar, 3 to St. Pancras, 3 to Newington, and 3 to Wandsworth sanitary areas. The notifications of diphtheria in London, which had declined from 287 to 245 in the three preceding weeks, rose again to 266 during the week ending Saturday last. Compared with the preceding week there was a marked decline in the prevalence of diphtheria in South London, but an increase in each of the other groups of sanitary areas. In most of the sanitary areas of West London there was an increase in the number of new cases of the disease, especially in Kensington, where 12 cases were reported, against 6 and 0 in the two preceding weeks. On the other hand, the 7 new cases notified in Fulham were considerably below those recorded in any recent week. Among the sanitary areas of North London the increase in the prevalence of diphtheria was most marked in Islington, where 27 new cases were notified, against 19 in each of the two preceding weeks; and in Hackney the new cases numbered 29, against 25 and 24 in the two preceding weeks. The increase in Central London was due to an outbreak in Strand sanitary area, 6 cases being notified. Among the sanitary areas of East London the increase in the prevalence of diphtheria was most marked in Whitechapel and Poplar; in the former sanitary area the new cases notified rose to 10, against 1 and 3 in the two preceding weeks; and in Poplar 18 new cases were reported, against numbers steadily declining from 13 to 7 in the four preceding weeks. As before stated, there was a considerable decline last week in the prevalence of the disease in South London, the sanitary areas showing the greatest fall being Lambeth, Wandsworth, and Plumstead. In Lambeth the 9 new cases were only half those notified in the preceding week; and in Wandsworth the 15 new cases showed a decline of 9 from the number in the preceding week. On the other hand, the 16 new cases notified in Camberwell showed a further increase upon recent weekly numbers. The admissions of diphtheria patients into the Metropolitan Asylum Hospitals during last week were 146, against 161, 153, and 135 in the three preceding weeks; and 1,054 patients remained under treatment in these hospitals on Saturday last, February 19th.

THE RURAL DEATH-RATE OF ENGLAND AND WALES.

§6. S.—The "rural" death-rate from all causes in England and Wales during 1897 was equal to 15.8 per 1,000 persons living; the zymotic death-rate for the same population is not published by the Registrar General, but only that for England and Wales less the 100 chief towns.

	1897. England and Wales.	England and Wales less the 100 chief towns.
All causes	17.4	16.4
Principal zymotic diseases	2.15	1.62
Small-pox	0.00	0.00
Measles	0.40	0.29
Scarlet fever	0.14	0.12
Diphtheria	0.24	0.19
Whooping-cough	0.35	0.31
Fever	0.16	0.14
Diarrhoea	0.86	0.57

MEDICAL NEWS.

DR. STCLAIR THOMSON has been appointed Surgeon to the Royal Ear Hospital in the room of Mr. Cresswell Baber, who has resigned.

THE Clothworkers' Company have sent a subscription of £200 to the London Hospital Maintenance Fund. They will subscribe £200 annually for the next five years.

A DANCE in aid of the funds of the Westminster Hospital was held at the Institute of Painters in Water Colours, Piccadilly, on Thursday, February 17th.

STUDENTS IN ITALIAN UNIVERSITIES.—According to a recently issued official report the total number of students in the 17 Government Universities and the 4 free Universities of Italy in the academic year 1896-97 was 22,982, not including 253 who entered only for special courses. Of the matriculated students 6,634 belong to the Faculty of Medicine.

INSTRUCTION IN COLONIAL HYGIENE.—The University of Brussels has just founded a Chair of Colonial Hygiene, and has appointed thereto Dr. George Treille, formerly Professor in the French School of Naval Hygiene, and Inspector-General and Director of the French Colonial Health Service.

AT the annual general meeting of University College, Sir J. Blundell Maple, Mr. Justice Wills, and Mr. R. J. Godlee were elected members of the Council. Among those elected Fellows of the College were Dr. H. M. Richards, Dr. W. M. Stevens, and Dr. B. A. Whitelegge.

THE Earl of Dartmouth, who presided at the eighty-first annual meeting of the Royal Ear Hospital, Soho, stated that the Committee had acquired a suitable site in Dean Street, Shaftesbury Avenue, and that plans were in course of preparation for a building which would be specially adapted for the treatment of diseases of the ear, and would be fitted with the most approved appliances.

A FUND to endow a cot in the Children's Hospital, Great Ormond Street, as a memorial to the author of *Alice in Wonderland*, has been opened by the Editor of the *St. James's Gazette*. A strong Committee has been formed, and Mr. J. T. Black, of Messrs. A. and C. Black, Soho Square, will act as Treasurer. It is hoped to raise the sum of £1,000, and the cot will be known as the "Lewis Carroll," the name under which Mr. Dodgson wrote his admirable books.

LIVERPOOL ROYAL SOUTHERN HOSPITAL.—At the annual meeting of this hospital the President, Mr. William Adamson, referred to the endowment, in connection with the celebration of the Queen's Diamond Jubilee, of a cot at the Children's Convalescent Home, West Kirby, for the benefit of patients in the hospital. He added that children would be admitted into the home, even though they might be suffering from wounds requiring treatment. All surgeons and hospital managers will coincide with Mr. Adamson in saying that this will be a great help to the convalescence of the small patients. He referred also to the extensive use of the Roentgen rays in the hospital. The apparatus had been employed in the diagnosis of fifty-seven cases. He mentioned further the adoption of the method of immediately straightening angular curvature of the spine, which had been used with success in seventy cases.

ST. JOHN AMBULANCE LECTURES.—We are asked to state that the following resolution was unanimously adopted at a meeting of the Committee of the Local Centre at Weston-super-Mare: "The Committee of the Weston-super-Mare Local Centre of the St. John Ambulance Association having considered the regulations of the home hygiene course, the scope of the syllabus for lecturer's certificate and for the elementary certificates, feel that these cannot be efficiently carried out by anyone who has not passed through the complete curriculum of a medical education, and that, moreover, it will be lowering of the status of the St. John Ambulance Association that non-medical persons be now for the first time admitted to the lecturing staff, which has hitherto proved itself thoroughly adequate, both as to numbers, efficiency, and expert knowledge. The Committee would strongly urge the Central Executive to reconsider the new and somewhat revolutionary rule regarding lecturers, so inconsistent with the underlined note in pamphlet T1C. 1895,

'No lecturers whatever can be recognised who are not duly qualified medical practitioners.'

THE EPIDEMIC OF INFLUENZA.—The present epidemic of influenza appears to have affected Cornwall more severely than any other part of the country. The Sanitary Committee of that county, in their report for January, state that scarcely a single district in the county is free, and that, although no statistics can be given, it is certain that a very large percentage of the population has been affected. The illness both among teachers and children has been so general that elementary schools have had to be closed. Although only 26 deaths have been returned as due to influenza, the deaths registered are considerably in excess of the average for the month, and the number of old people who have died has been remarkable. The fact that there was last week a slight decline in the mortality from influenza in London is a hopeful sign. The fatal cases of this disease, which had been 88, 102, and 98 in the three preceding weeks, fell to 87 during the week ending Saturday last, February 19th. Of these 87 deaths, 24 were of persons under 40 years of age, and 21 of persons aged between 40 and 60 years; while 42, or nearly 50 per cent., were of persons aged upwards of 60 years. This decline in the mortality was, however, to be observed in West and North London. The number of fatal cases in Central London showed a slight increase, and those in East and South London a marked increase, upon those recorded in the preceding week. In West London there was a general decline in the prevalence of influenza, although in Paddington the fatal cases were more numerous than in any week during the present epidemic. In North London the deaths from this cause were fewer than in any recent week, the decline being most marked in Marylebone and Hackney. Among the sanitary areas of East London the prevalence of influenza appears to be now confined to Limehouse, Mile End Old Town, and Poplar. More than half the total deaths referred to influenza in the metropolis last week were recorded in South London; the disease showed excessive prevalence in Lambeth, Wandsworth, Camberwell, Greenwich, and Plumstead.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.—The annual dinner of the Society took place at the Hôtel Métropole on February 17th. The President, Dr. W. H. Dickinson, occupied the chair, and was supported by Sir W. Mac Cormac, President of the Royal College of Surgeons, Dr. Alex Hill, Vice-Chancellor of the University of Cambridge, and about a hundred Fellows of the Society and their guests. After the toast of "The Queen" had been duly honoured, Dr. Clifford Allbutt proposed "The Society" and referred to its fine library. With the help of such societies the brotherhood and great traditions of medicine were raised and local professional pettinesses overcome. In acknowledging the toast the President alluded to the enormous advance of medicine and surgery since the foundation of the Society ninety-three years ago. The indebtedness of the Society was yearly growing less; and he mentioned that Dr. Robert Barnes had just presented £200 to the Society. He touched upon the proposed amalgamation of London medical societies in an Academy of Medicine, but expressed the opinion that at present the objections seemed insuperable. Mr. Jonathan Hutchinson proposed "The Royal Colleges of Physicians and Surgeons," and Sir W. Mac Cormac, in response, remarked that his College had not the great traditions of its sister in Pall Mall, but that it had endeavoured, in conjunction with that sister, to produce a class of practitioners not equalled in any other country of the world. Sir R. Douglas Powell, referring to the remarks which had fallen from Dr. Dickinson, said that it would perhaps have been well if their Society had been originally framed on such large lines as to take in all the other societies, but the rivalry between them had never been tinged with animosity or bitterness. At his suggestion a telegram of kindly greeting was sent to the members of the West London Medico-Chirurgical Society, who were then dining together elsewhere. A cordial reply was soon afterwards received and read. Mr. Langton, President of the Clinical Society, said that all the sisters (societies) were attractive, good, and vigorous, and each filled its special niche in the temple of medicine. Mr. Timothy Holmes, in proposing "The Guests," alluded to the

inauguration during his presidency of this annual dinner, which he now hoped might be carried on to endless generations. Their special guests were Dr. Alex Hill, Professor Allbutt, and Mr. MacAlister, to the last of whom the Society probably owed more than to any other person. Dr. Alex Hill, responding, said that when Dr. C. J. Hare, who was present that night, entered Cambridge in 1838, there were 6 medical students in that University; some years later the number had increased to 30; this year there were over 700. This enormous growth was chiefly due to the energy of Sir G. Paget and Sir G. M. Humphry. The fact that he, a member of the medical profession, was now Vice-Chancellor, showed that the medical school of the University had obtained recognition, and that medicine had asserted its claim to a position in the University. Sir Alfred Garrod proposed the health of the President, which was very cordially received. Dr. Dickinson, in reply, mentioned that he had sent in his first paper to the Society fifty years ago, and his last communication a year and a-half since. He considered his position in the Society the greatest honour he had ever had put upon him.

MEDICAL VACANCIES.

The following vacancies are announced:

- BELGRAVE HOSPITAL FOR CHILDREN**, 77 and 79, Gloucester Street S.W.—Surgeon to Out-patient; must be F.R.C.S. Eng. Also House-Surgeon. Appointment for six months. Board, lodging, and washing found.—Applications to the Honorary Secretary, before March 6th.
- BIRMINGHAM AND MIDLAND HOSPITAL FOR SKIN AND URINARY DISEASES**, John Bright Street, Birmingham.—Clinical Assistant: appointment for three months.—Applications to J. E. Hartley, Honorary Secretary, by March 4th.
- CHELSEA, BROMPTON, AND BELGRAVE DISPENSARY**, 41, Sloane Square, S.W.—Honorary Visiting Surgeon to the Western District.—Applications to Austin E. Cooper, B.A., M.D., Secretary, by March 1st.
- CHELSEA HOSPITAL FOR WOMEN**, Fulham Road, S.W.—Dental Surgeon. Applications to H. H. Jennings, Secretary, by March 31st.
- CHESTERFIELD AND NORTH DERBYSHIRE HOSPITAL AND DISPENSARY**, Chesterfield.—Resident Junior House-Surgeon and Dispenser. Salary, £50 per annum, with board, apartments, and laundry.—Applications to the Secretary by March 3rd.
- CORK DISTRICT LUNATIC ASYLUM**.—Assistant Medical Officer; unmarried; not more than 30 years of age. Salary, £100 a year, with furnished apartments, washing, fuel, light, attendance, and £50 in lieu of rations.—Applications to the Resident Medical Superintendent by March 5th.
- DARENTH (ADULT) ASYLUM**, near Dartford, Kent.—Assistant Medical Officer, unmarried; doubly qualified; and must not exceed 35 years. Salary £160, rising at the discretion of the Committee to £200, with board, lodging, attendance, and washing.—Applications, on forms to be obtained at the Chief Offices of the Board, Norfolk House, Norfolk Street, Strand, W.C., where they must be received by March 1st.
- EAST LONDON HOSPITAL FOR CHILDREN AND DISPENSARY FOR WOMEN**, Glamis Road, Shadwell, E.—House-Surgeon. Appointment for six months. Board and residence provided, with honorarium of £15 15s. at the expiration of term.—Also Casualty Officer. Appointment for six months, and is renewable. Salary at the rate of £100 per annum. Applications to Thomas Hayes, Secretary, by March 12th.
- FINSBURY DISPENSARY**, Brewer Street, Goswell Road, E.C.—Physician. Honorarium, £40.—Applications to the Secretary by March 8th.
- GLOUCESTER: GENERAL INFIRMARY AND THE GLOUCESTERSHIRE EYE INSTITUTION**.—Surgeon. Applications to be sent under cover, to the Secretary by March 10th. Also House-Surgeon and Assistant House-Surgeon; doubly qualified. Salary, for the former, £100 per annum. Board, residence, and washing supplied in each case.—Applications to the Secretary by March 12th.
- GUILDFORD: ROYAL SURREY COUNTY HOSPITAL**.—Resident House-Surgeon, salary, £80; Assistant House-Surgeon salary £30. Board, residence, and laundry found in each case.—Applications to the Hon. Secretary, at the Hospital, by March 8th.
- HALIFAX ROYAL INFIRMARY**.—Honorary Ophthalmic Surgeon.—Applications to John S. Hurst, J. L. Cox, Honorary Secretaries, by March 17th.
- HULL ROYAL INFIRMARY**.—Senior House-Surgeon; unmarried. Salary, 100 guineas per annum, with board and furnished apartments. Appointment for one year, but eligible for re-election.—Applications to the Chairman of the House Committee by March 1st.
- LEICESTER INFIRMARY**.—Surgical Dresser and also a Clinical Clerk. Appointment for six months. Board and apartments in the Infirmary provided.—Applications to the Secretary by March 14th.
- LIVERPOOL ROYAL INFIRMARY**.—Honorary Gynaecological Surgeon.—Applications to the Chairman of the Committee of the Royal Infirmary, Liverpool, by March 10th.
- LONDON TEMPERANCE HOSPITAL**, Hampstead Road, N.W.—Assistant Resident Medical Officer; doubly qualified. Appointment for six months. No salary, but residence in the hospital, board, and washing

- provided, and honorarium on satisfactory completion of term.—Applications to A. W. Bodger, Secretary, by March 16th.
- METROPOLITAN HOSPITAL**, Kingsland Road, N.E.—House Physician, House-Surgeon, Assistant House-Physician, and Assistant House-Surgeon. Appointments tenable for six months. The House-Physician and House-Surgeon will each receive salary at the rate of £40 per annum, and the other officers at the rate of £20 per annum.—Applications to Charles H. Byers by March 14th.
- MANCHESTER HOSPITAL FOR CONSUMPTION AND DISEASES OF THE THROAT AND CHEST**, Bowdon, Cheshire.—Resident Medical Officer. Appointment for twelve months. Salary, £60 per annum, with board, apartments, and washing.—Applications to C. W. Hunt, Secretary, by March 1st.
- OMAGH DISTRICT ASYLUM**.—Assistant Medical Officer: unmarried; doubly qualified, and not more than 30 years of age. Salary, £100 per annum, with allowances of furnished apartments (including fuel, light, and attendance), washing, milk, and vegetables, and £50 in cash in lieu of all other rations. Candidates must attend at the Asylum at 10.30 A.M., on March 4th.
- ROTHERHAM HOSPITAL AND DISPENSARY**.—Assistant House-Surgeon. Salary, £30 per annum, with board and washing.—Applications to the Secretary.
- ROYAL SOUTH LONDON DISPENSARY**, St. George's Cross, S.E.—Honorary Surgeon.—Applications to the Committee of Management by February 26th.
- ST. GEORGE'S HOSPITAL**, S.W.—Surgeon and Assistant Surgeon: must be F.R.C.S. Eng. Assistant Obstetric Physician: must be F. or M.R.C.P. Lond.—Applications to the Secretary by March 5th.
- ST. MARY'S CHILDREN'S HOSPITAL**, Plaistow, E.—Junior House Surgeon: appointment for six months. Salary at the rate of £40 per annum, with board, lodging, and laundry.—Applications to the Secretary, by February 28th.
- SALFORD ROYAL HOSPITAL**.—House-Surgeon. Salary, £100 per annum, with board and residence. The present Junior House-Surgeon is a candidate, and, in the event of his being appointed, there will be a vacancy in the post of Junior House-Surgeon. Salary, £50 per annum, with board and residence. Must be doubly qualified.—Applications to the Secretary by February 28th.
- SHEFFIELD UNION WORKHOUSE INFIRMARY**.—Junior Assistant Medical Officer at the Workhouse Infirmary, Fir Vale, Sheffield; unmarried; doubly qualified. Appointment for six months. Honorarium, £12, will be granted.—Applications to Albert E. Booker, Clerk to the Guardians, Union Offices, West Bar, Sheffield, by March 5th.
- SUFFOLK COUNTY ASYLUM**.—Second Assistant Medical Officer. Salary £100 a year, with board, lodging, washing, and attendance. Must be unmarried; doubly qualified; and under 30 years of age. Appointment for three years, and thereafter as may be agreed.—Applications to the Medical Superintendent, County Asylum, Melton, Suffolk, by March 1st.
- WEST LONDON HOSPITAL**, Hammersmith Road, W.—House-Physician and House-Surgeon. Appointments tenable for six months.—Applications to R. J. Gilbert, Secretary-Superintendent by March 23rd.
- WESTON-SUPER-MARE HOSPITAL**.—House-Surgeon; unmarried; doubly qualified. Salary £60 per annum, with board and residence in the hospital.—Applications to the Honorary Secretary, by March 2nd.
- WISBECH UNION**.—Medical Officer and Public Vaccinator for the First, Second (a), and Eighth Districts of the Union. Salary for First District, £70 per annum, Second (a) District, £10, and Eighth District, £15 per annum, with extra fees.—Applications to G. Carrick, Clerk, Union Offices, Wisbech, by March 2nd.
- WORCESTER COUNTY AND CITY LUNATIC ASYLUM**.—Third Assistant Medical Officer, unmarried. Salary, £100 per annum, rising to £120 in a year, with board, lodging, and washing.—Applications to the Medical Superintendent, The Asylum, Powick, near Worcester, by March 16th.

MEDICAL APPOINTMENTS.

- BAYS**, James T., M.D. Lond., M.R.C.S., appointed Medical Officer of Health to the City of Grahamstown, Cape Colony.
- BLAKISTON**, A. A., M.R.C.S. Eng., appointed Medical Officer for the Fourth District of the Shepton Mallet Union.
- BOOTH**, John, M.B., B.Ch., B.A.O.R.U.I., appointed House-Surgeon to the South Charitable Infirmary and County Hospital, Cork, *vice* R. P. Crosbie, M.B., B.Ch., resigned.
- BRAINE-HARTNELL**, George M. P., M.R.C.S., L.R.C.P. Lond., appointed Medical Officer and Superintendent of the Worcester County and City Lunatic Asylum.
- BUBB**, William, M.R.C.S., L.R.C.P. Lond., appointed Senior Assistant Medical Officer and Deputy Superintendent of the Worcester County and City Lunatic Asylum.
- BURD**, George V., L.R.C.P. Edin., M.R.C.S. Eng., reappointed Medical Officer for the Bratton, Clovelly, and Northlew Districts of the Okehampton Union.
- BUSH**, J. P., M.R.C.S., L.S.A., appointed Lecturer on Operative Surgery at University College, Bristol.
- BYERS**, Professor J. W., M.A., M.D., M.A.O. (*Hon. Causa*), R.U.I., reappointed Examiner in Obstetric Medicine to the Royal University of Ireland.
- COOPER**, C. M., M.B., Ch.B. Edin., appointed Resident Medical Officer at the Royal Sick Children's Hospital, Edinburgh.
- FLUX**, George Belhan, M.D. Brux., M.R.C.S., L.R.C.P., L.S.A., appointed Anaesthetist to the Great Northern Central Hospital.
- GOODALL**, J. K., L.R.C.P., L.R.C.S. Edin., reappointed Medical Officer for the Heath District of the Chesterfield Union.

- GREGORY**, W. H., M.D. Edin., appointed Medical Officer No. 4 District of the Beverley Union, *vice* H. Walker, M.D. Edin., resigned.
- GRIEVE**, James, M.B., C.M. Edin., appointed Junior Assistant House-Surgeon to the Hull Royal Infirmary.
- HAMILTON**, R. K., M.R.C.S. Eng., L.R.C.P. Lond., appointed Medical Officer for the Hasland District of the Chesterfield Union.
- HARDENBERG**, E. F. H., M.B. Lond., M.R.C.S., L.R.C.P., appointed Certifying Factory Surgeon for the Watford District.
- KELLEHER**, T. A., M.B., B.Ch., B.A.O.R.U.I., appointed Assistant House-Surgeon to the South Charitable Infirmary and County Hospital, Cork, *vice* John Booth, M.B., B.Ch.
- LEE**, Barnard J., L.S.A., reappointed Medical Officer for the North Wingfield District of the Chesterfield Union.
- MOXON**, William, M.D. Durh., reappointed Medical Officer of Health to the Matlock Urban District Council.
- NICHOLL**, Dr. W. J., appointed Medical Officer for the Fourth District of the Chipping Norton Union.
- OAKSHOTT**, James Albert, M.D., appointed Resident Medical Superintendent of the Waterford Lunatic Asylum, *vice* Ringrose Atkins, M.D.
- PULFORD**, Herbert, M.A., M.B., B.C. Cantab., appointed Second Assistant Medical Officer in the Worcester County and the City Lunatic Asylum.
- REYNOLDS**, J. H., M.B. and C.M. Edin., appointed Junior House-Surgeon to the Miller Hospital, Greenwich.
- ROWBOTTOM**, Arthur Joseph, M.R.C.S. Eng., reappointed Medical Officer for the Newton-on-Trent District of the Gainsborough Union.
- SHARPLEY**, John E., M.R.C.S., L.R.C.P. Lond., reappointed Medical Officer for the Blyborough District of the Gainsborough Union.
- SHIACH**, S. A., M.D. Edin., appointed Medical Officer for the Llanishen District of the Cardiff Union.
- SMITH**, T. H., L.R.C.P., L.R.C.S. Edin., D.P.H. Camb., reappointed Medical Officer of Health to the Reddish Urban District Council.
- SMYTH**, J. C., M.R.C.S. Eng., L.R.C.P. Lond., reappointed Medical Officer of Health for the Wells Rural District.
- STEPHENSON**, William, M.R.C.S. Eng., L.S.A., appointed Medical Officer of Health to the Beverley Rural District Council, *vice* H. Walker, M.D. Edin., resigned.
- THOMSON**, St. Clair, M.D. Lond., F.R.C.S. Eng., appointed Surgeon to the Royal Ear Hospital, *vice* E. Cresswell Baber, resigned.
- TURNER**, Philip W., M.R.C.S. Eng., L.R.C.P. Lond., appointed Medical Officer for the Penkridge District of the Cannock Union.
- WYLLYS**, Henry J. M., L.R.C.S., L.R.C.P. Edin., appointed House-Surgeon to the Norfolk and Norwich Hospital.

DIARY FOR NEXT WEEK.

MONDAY.

- MEDICAL SOCIETY OF LONDON**, 11, Chandos Street, Cavendish Square, W., 8.30 P.M.—Mr. Frederick Treves: Abdominal Section as a Medical Measure.
- LONDON POST-GRADUATE COURSE**, London Throat Hospital, 204, Great Portland Street, W., 8 P.M.—Dr. George Stoker: Chronic Glandular Disease of the Nose and Naso-Pharynx.
- ROYAL COLLEGE OF SURGEONS OF ENGLAND**, 5 P.M.—Professor F. G. Parsons: On the Muscles of Mammals, with special reference to Human Myology. Lecture I.

TUESDAY.

- LONDON POST-GRADUATE COURSE**, Bethlem Royal Hospital for Lunatics, 2 P.M.—Dr. Craig: Stupor, Katatonia, Dementia, and Senile Insanity.—Hospital for Diseases of the Skin, Blackfriars, 4.30 P.M. Dr. Phineas Abraham: Atrophic Conditions.
- CITY ORTHOPÆDIC HOSPITAL**, 5 P.M.—Mr. Noble Smith: The Use of Apparatus in Orthopædic Surgery.
- WEST END HOSPITAL FOR DISEASES OF THE NERVOUS SYSTEM**, 73, Welbeck Street, W., 4.30 P.M.—Dr. T. D. Savill: On Cases of Facial Paralysis and Monoplegia.
- NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC**, Queen Square, W.C., 3.30 P.M.—Mr. Victor Horsley, F.R.S., Surgery of the Nervous System.
- ROENTGEN SOCIETY**, 11, Chandos Street, Cavendish Square, W., 8 P.M.—Papers will be read on the Photographic Activity and Penetration of Roentgen Rays at different vacua, by Mr. J. H. Gardiner. Other papers by Mr. Wilson Noble and Mr. Hall Edwards (Birmingham). Mr. Isenthal will show some new apparatus.
- PATHOLOGICAL SOCIETY OF LONDON**, 20, Hanover Square, W., 8.30 P.M.—Messrs. T. W. W. Stephens and W. Meyers: On Test Tube Reactions between Cobra Poison and its Antitoxin. Mr. George Heaton: (i) Circumscribed Traumatic Aneurysm of the Innominate Artery; (ii) Congenital Sarcoma of the Liver. Mr. C. P. White: A Case of Ulceration of the Small Intestine. Mr. Thos. Carwardine: A Pendulous Hydatid Cyst of the Liver resembling an enlarged gall bladder. Mr. C. B. Lockwood: A Retroperitoneal Cyst supposed to have originated in the remains of the Wolffian body. Dr. William Hunter: A Complete Case of Acromegaly, with casts and formalin preparations. Dr. Raymond Crawford: A Heart with a Tumour of the Pulmonary Valves. Dr. Parkes Weber: Speckled Kidneys, due to an irregular fatty degeneration, possibly caused by plugging of the small

blood vessels shortly before death. Mr. S. G. Shattock. Mycetoma Papillomatosa. Mr. Cecil F. Beadles (and specimens): (1) Primary Carcinoma of Kidney; (2) Malignant Stricture of the Sigmoid Flexure.

WEDNESDAY.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton. 4 P.M.—Dr. Arkle: Mitral Disease.

EVFLINA HOSPITAL, Southwark Bridge Road, S.E. 4.30 P.M.—Mr. F. S. Eve: Mastoid Abscess: Its Complications and Treatment. Post-Graduate Lecture.

LONDON POST-GRADUATE COURSE, Hygiene and Public Health at Parkes Museum, 74A, Margaret Street, W. 4.30 P.M.—Professor Wynter Blyth: House Drainage, etc.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Professor F. G. Parsons: On the Muscles of Mammals, with special reference to Human Myology. Lecture II.

BRITISH BALNEOLOGICAL AND CLIMATOLOGICAL SOCIETY, 20, Hanover Square, W. 8.30 P.M.—The adjourned discussion on the Treatment of Cardiac and Circulatory Affections by Baths, Exercises, and Climate, will be reopened by Dr. Sansom. The following are expected to take part in the discussion: Dr. Clifford Allbutt, Dr. Ward Humphreys (Cheltenham), Dr. Shirley Jones (Droitwich), Dr. Black Jones (Llangamarch), Dr. Symes Thompson, Dr. Heron, Dr. Andrew Myrtle (Harrogate), Dr. Fortescue Fox (Strathpeffer Spa), Dr. Watson (Tunbridge Wells), Dr. Gifford Bennet (Buxton), and others. Dr. Wm. Bain (Harrogate) will read a short note on the Action of Some of the Natural Mineral Waters on the Flow of Bile—an Experimental Research.

OBSTETRICAL SOCIETY OF LONDON, 20, Hanover Square, W. 8 P.M.—Specimens will be shown by Drs. Helliier, C. Hubert Roberts, John Phillips, and others. Papers:—Dr. Addinsell: Inter-menstrual Pain (Mittelschmerz). Dr. H. R. Spencer: Two Cases of Fibromyoma of the Uterus removed by operation from women under 25 years of age.

THURSDAY.

HARVEIAN SOCIETY OF LONDON, Stafford Rooms, Tichborne Street, Edgware Road, W. 8.30 P.M.—Clinical Evening.

CHARING CROSS HOSPITAL, Post-Graduate Class, 4 P.M.—Dr. Mott, F.R.S.: Demonstration of Medical Cases.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C. 4 P.M.—Dr. Barlow: Clinical Lecture, or Demonstration of Recent Specimens.

LONDON POST-GRADUATE COURSE, Cleveland Street Sick Asylum, 5.30 P.M.—Mr. A. Pearce Gould: Clinical Lecture.

FRIDAY.

LONDON POST-GRADUATE COURSE, Bacteriological Laboratory, King's College, W.C. 3 to 5 P.M.—Professor Crookshank: Anthrax and Malignant Edema, etc.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Professor F. G. Parsons: On the Muscles of Mammals, with special reference to Human Myology. Lecture III.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E. 4 P.M.—Mr. R. W. Parker: On Hip Disease.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY, West London Hospital, Hammersmith, W. 8 P.M.—Clinical Meeting. Cases will be shown by Dr. Potter. Dr. Seymour Taylor, and others.

WEST KENT MEDICO-CHIRURGICAL SOCIETY, Royal Kent Dispensary, Greenwich, S.E. 8.15 P.M.—The following clinical cases and specimens will be shown: Dr. Toogood: Cases from Lewisham Infirmary. Dr. Scholefield: (1) Notes of a case of Typhoid Fever; (2) Diagrams of a case of Symmetrical Scotoma with Hemi achromatopsia. Dr. Taylor: A specimen of Aneurysm of the Heart and Ruptured Auricle. Dr. Dockrell: Some Dermatological Cases. Mr. Ernest Clarke: (1) A series of mounted specimens of Eyes, illustrating the Disastrous Effects of Iridocyclitis; (2) Some Living Cases. Mr. Joscelyne: Notes of a Case of Embolism of the Lung.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office order or stamps with the notice not later than Wednesday morning in order to insure insertion in the current issue.

MARRIAGES.

GORNALL—DAWSON.—On February 17th, at St. Margaret's Church, Binsey, Oxford, by the Rev. C. E. Adams, M.A., Vicar of Earley, Reading, John Guest Gornall, M.A., M.B. Cantab., of Latchford, Warrington, eldest son of John H. Gornall, J.P., Medical Officer of Health for the Borough of Warrington, to Constance Maria Dawson, third daughter of the late Frederick Hill Dawson of Cumnor, Oxfordshire.—At home from March 8th.

HUSBAND—LEAN.—On February 22nd, at St. Stephen's Church, Bath, by the Venerable Archdeacon of Bath, Walter Edmund Husband of Ebor Lodge, Higher Broughton, Manchester, to Mary Isabel Lean of Grove Lea, Bath, youngest surviving daughter of the late George Stuckey Lean, Esq., of Bath.

MACMILLAN—FAED.—On February 22nd, at St. Cuthbert's Parish Church, by the Very Rev. James Macgregor, D.D., one of Her Majesty's Chaplains for Scotland, David Macmillan, M.A., M.D., Prestwich, Lancashire, youngest son of the late William Macmillan, Esq., of Chapel, Kircudbrightshire, to Mary, youngest daughter of Mr. James Faed, Edinburgh.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

CANCER, Brompton Free. Attendances.—Daily, 2. Operations.—Tu, F, S, 2.	
CENTRAL LONDON OPHTHALMIC. Attendances.—Daily, 1. Operations.—Daily, 5. Operations.—Tu, F, S, 2. Operations.—Tu, F, S, 2.	
CENTRAL LONDON THROAT, NOSE, AND EAR. Attendances.—M, W, Tu, S, 2. Tu, 3. Operations.—Tu, F, S, 2. Operations.—Tu, F, S, 2.	
CHARING CROSS. Attendances.—Medical and Surgical, daily, 1.30. Obstetric, Tu, F, S, 2. Skin, M, Tu, 1.30. Dental, M, W, Tu, 9.30. Operations.—Tu, F, S, 2.	
CHURCH HOSPITAL FOR WOMEN. Attendances.—Daily, 1.30. Operations.—M, Tu, F, Tu, 1.30. Operations.—M, Tu, F, Tu, 1.30. Operations.—M, Tu, F, Tu, 1.30.	
CITY OPHTHALMIC. Attendances.—M, Tu, F, Tu, 2. Operations.—M, Tu, F, Tu, 2.	
EAST LONDON HOSPITAL FOR CHILDREN. Operations.—M, W, Tu, F, S, 2.	
GREAT NORTHERN CENTRAL. Attendances.—Medical and Surgical, M, Tu, W, F, S, 2.30. Obstetric, W, 2.30. Eye, M, Tu, 2.30. Throat and Ear, Tu, F, S, 2.30. Skin, W, 2.30. Dental, W, 2.30. Operations.—M, W, Tu, F, S, 2.	
GRAY'S. Attendances.—Medical, daily, 2. Surgical, daily, 1.30. Obstetric, M, Tu, F, S, 2. Eye, M, Tu, F, S, 2. Ear, Tu, F, S, 2. Skin, Tu, F, S, 2. Dental, Tu, F, S, 2. Operations.—Tu, F, S, 2. Operations.—Tu, F, S, 2.	
HOSPITAL FOR WOMEN, Soho. Attendances.—Daily, 10. Operations.—M, Tu, F, Tu, 2.	
KING'S COLLEGE. Attendances.—Medical and Surgical, daily, 2. Obstetric, daily, 2.30. Eye, M, W, Tu, F, S, 2. Ear, Tu, F, S, 2. Skin, Tu, F, S, 2. Dental, Tu, F, S, 2. Operations.—M, Tu, F, S, 2. Operations.—M, Tu, F, S, 2.	
LONDON. Attendances.—Medical, daily, 1.30. 2. o.p., 1.30. Surgical, daily, 1.30. 2. o.p., 1.30. Eye, M, Tu, F, S, 2. Ear, Tu, F, S, 2. Skin, Tu, F, S, 2. Dental, Tu, F, S, 2. Operations.—M, Tu, F, S, 2. Operations.—M, Tu, F, S, 2.	
LONDON TEMPERANCE. Attendances.—Medical, M, Tu, W, Tu, F, S, 2.30. Surgical, M, Tu, F, S, 2.30. Operations.—M, Tu, F, S, 2.30.	
METROPOLITAN. Attendances.—Medical and Surgical, daily, 2. S, 9. Obstetric, W, 2. Eye, W, 2. Throat and Ear, Tu, F, S, 9. Operations.—Tu, W, F, S, 9.	
MIDDLESEX. Attendances.—Medical and Surgical, daily, 1.30. Obstetric, Tu, Th, F, S, 2.30. Eye, Tu, F, S, 2.30. Ear and Throat, Tu, F, S, 2.30. Skin, Tu, F, S, 2.30. Dental, W, 2.30. W, 9. Operations.—Daily, 1.30.	
NATIONAL ORTHOPAEDIC. Attendances.—M, Tu, F, S, 2. Operations.—W, 10.	
NEW HOSPITAL FOR WOMEN. Attendances.—Daily, 2. Ophthalmic, W, S, 9.30. Operations.—Tu, F, S, 2.	
NORTH-WEST LONDON. Attendances.—Medical, daily, ex. S, 2. S, 10. Surgical, daily, ex. W, 2. W, 10. Obstetric, W, 2. Eye, W, 9. Skin, F, S, 2. Dental, F, S, 9. Operations.—Tu, F, S, 2.	
ROYAL EYE, Southwark. Attendances.—Daily, 2. Operations.—Daily.	
ROYAL FREE. Attendances.—Medical and Surgical, daily, 2. Diseases of Women, Tu, S, 2. Eye, M, F, S, 2. Skin, Tu, F, S, 2. Ear, Tu, F, S, 2. Operations.—W, S, 2. Ophthalmic, M, F, S, 2. Diseases of Women, S, 9.	
ROYAL LONDON OPHTHALMIC. Attendances.—Daily, 9. Operations.—Daily, 10.	
ROYAL ORTHOPAEDIC. Attendances.—Daily, 2. Operations.—M, 2.	
ROYAL WESTMINSTER OPHTHALMIC. Attendances.—Daily, 1. Operations.—Daily, 2.	
ST. BARTHOLOMEW'S. Attendances.—Medical and Surgical, daily, 1.30. Obstetric, M, W, F, S, 2.30. Eye, M, Tu, W, Tu, S, 2.30. Ear, Tu, F, S, 2.30. Skin, Tu, F, S, 2.30. Larynx, Tu, F, S, 2.30. Orthopaedic, M, 2.30. Dental, Tu, F, S, 2.30. Electrical, M, Tu, Th, F, S, 1.30. Operations.—Daily, 1.30. Ophthalmic, Tu, F, S, 2.30. Abdominal Section for Ovariotomy, F, 2.	
ST. GEORGE'S. Attendances.—Medical and Surgical, daily, 1.30. 1.30. 1.30. Obstetric, 1.30. Tu, F, S, 1.30. Eye, W, S, 1.30. Ear, Tu, F, S, 1.30. Skin, W, 2.30. Throat, F, 2.30. Orthopaedic, F, 1.30. Dental, M, Tu, F, S, 1.30. Operations.—Daily, 1.30. Ophthalmic, M, 1.30. Dental, Tu, 1.30.	
ST. MARK'S. Attendances.—Fistula and Diseases of the Rectum, males S, 2; females, W, 9.30. Operations.—M, 9; Tu, 2.30.	
ST. MARY'S. Attendances.—Medical and Surgical, daily, 1.45. o.p., 12.45. Obstetric, Tu, F, S, 2.30. Eye, Tu, F, S, 2.30. Ear, Tu, F, S, 2.30. Throat, Tu, F, S, 2.30. Skin, M, Tu, F, S, 2.30. Dental, Tu, F, S, 2.30. Operations.—M, 2.30. Tu, W, F, S, 2.30. S, 10. (Ophthalmic), F, 10.	
ST. PETER'S. Attendances.—M, 2 and 5; Tu, 2; W, 5; Th, 2. (Women and Children), 2; S, 4. Operations.—W, F, 2.	
ST. THOMAS'S. Attendances.—Medical and Surgical, M, Tu, Th, F, S, 2. o.p., daily, 1.30. Obstetric, Tu, F, S, 2. o.p., W, S, 1.30. Eye, Tu, F, S, 2. o.p., daily, ex. S, 1.30. Ear, M, 1.30. Skin, F, 1.30. Throat, Tu, F, S, 1.30. Children, S, 1.30. Electrotherapeutics, M, Tu, F, S, 1.30. Mental Diseases, o.p., Tu, 10. Dental, Tu, F, S, 1.30. Operations.—M, W, Th, S, 2. Tu, F, S, 3.30. (Ophthalmic), Th, 2. (Gynaecological), Th, 2.	
SAMARITAN FREE FOR WOMEN AND CHILDREN. Attendances.—Daily, 1.30. Operations.—Gynaecological, M, 2; W, 2.30.	
THROAT, Golden Square. Attendances.—Daily, 1.30. Tu, F, 6.30. Operations.—Daily, ex. M, 10.	
UNIVERSITY COLLEGE. Attendances.—Medical and Surgical, daily, 1.30. Obstetrics, M, F, S, 2.30. Eye, M, W, Tu, F, S, 2.30. Ear, M, Tu, F, S, 2.30. Skin, Tu, F, S, 2.30. Throat, M, Tu, F, S, 2.30. Dental, Tu, F, S, 2.30. Operations.—Tu, W, Th, 2.	
WEST LONDON. Attendances.—Medical and Surgical, daily, 2.30. Dental, Tu, F, S, 2.30. Eye, Tu, Th, 2.30. Ear, Tu, Th, 2.30. Skin, W, S, 2.30. Throat and Nose, Tu, 2.30. Operations.—Daily, about 2.30; F, 10.	
WESTMINSTER. Attendances.—Medical and Surgical, daily, 1.30. Obstetric, M, Tu, F, S, 1.30. Eye, Tu, F, S, 1.30. Ear, Tu, F, S, 1.30. Skin, W, S, 1.30. Dental, W, S, 9.15. Operations.—M, Tu, W, S, 2.	

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 429 Strand, W.C. Communications respecting non-Editorial matters 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.

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is *Articulate, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulate, London*.