

thoroughly explored by puncturing in three places with an aspirator, but again with negative results.

On March 9th the temperature was: 10 A.M., 103° F.; 2 P.M., 99° F.; 9 P.M., 102° F. She had several perspirations, the tongue, furred at the back, was raw and cracked. She was slightly delirious during the night, and appeared hopelessly ill. On March 10th the lung condition remained the same. There was marked ægophony below the sixth rib posteriorly, with absolute dullness on percussion. We came to the conclusion that any further operative interference would be useless, and that we could only keep up her strength and wait. Dr. Hurd-Wood advised a mixture containing: R Potassium iodide gr. j; ammonium carbonate gr. ʒ; liquid extract of cinchona m x every two hours. On March 11th the temperature had fallen to 99° F., and remained so all day. Pulse 104, respirations 25. The dullness seemed somewhat less marked, so that down to the sixth rib breath sounds and vocal resonance could be slightly heard; below this there was absence of breath sounds, with ægophony as before. Her temperature never rose again, except for two-tenths or three-tenths of a degree after this date, the respirations and pulse beats falling to normal. She was then sent home. Now (March 26th) the little patient is very well and running about. The dullness is nearly gone, but has left an obscurity in the breath and vocal sounds. There is a diminution of fremitus on the affected side, and a good deal of rough friction. In the hospital her diet consisted of large quantities of champagne and milk, with bovril and fruit.

NOTE BY DR. HURD-WOOD.

The chief points of interest in the above case are: The absolute dullness of the right lung below the fifth rib, with complete absence of vocal fremitus and resonance; the absence of fluid following any of the four aspirations; the almost typical pyæmic temperature and perspirations without any empyema; the severity of the general condition almost rendering a fatal prognosis necessary. The relief given by the punctures in themselves seems an additional proof of the value of the treatment advocated by Mr. Treves in a recent paper, in which he points out the value of exploratory incisions. The relief following also so rapidly on the administration of the potassium iodide was very interesting. There was no retraction of the right side. The measurement was actually one inch more than the other unaffected one. At the present time, as above stated, the little girl is almost completely restored to health.

MEMORANDA:

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

THE TREATMENT OF ADDISON'S DISEASE WITH SUPRARENAL GLAND SUBSTANCE.

In April, 1897, a gentleman, aged 49, consulted me with the following symptoms:

For three months he had constantly fainted, often in bed, and for seventeen days running he had fainted in bed in the early morning between the hours of 2 and 4 A.M.; he also fainted in the daytime. He complained of pains in his legs, and also of their feeling heavy, and of his inability to walk. He was very depressed, crying at times, and declaring he would drown himself. He complained also of pains in the back and of nausea; his pulse was very feeble, about 60, and the pulse waves ran in pairs, the so-called pulsus bigeminus (Traube). I observed pigmentation and leucoderma on the back of the hands and forearms, and also in a marked degree on the scrotum. I ordered him to rest, and prescribed tabloids of suprarenal gland substance, gr. v (B. W. and Co.), beginning with two a day and telling him to increase the number as long as he found no ill-effect from them.

His report of May 26th, 1897, was that he had been worse, and that if he walked about he went faint, and he also still fainted in bed. His report of June 21st, 1897, was that he felt better; his pulse was 72 and normal in rhythm. He had taken 20 of the suprarenal gland tabloids daily. The patient continued taking the tabloids about 20 or 35 a day, and he

found at times that they caused pain in the back, which was relieved by diminishing the number taken. He also complained of their making his tongue sore, but he was getting gradually better and stronger. On January 4th, 1898, he drew my attention to a growth of hair across his back, opposite the first lumbar vertebra. At this date he had not fainted for six months, and he had continued to improve in health. At the present date (May, 1898) he is perfectly well; the pigmentation and bleaching of the skin are almost gone, the pulse is normal, and he can do a heavy day's work, and tells me that he very often pulls the garden roller about for an hour or two at a time for exercise. The urine has been perfectly normal throughout.

Birmingham.

C. W. SUCKLING, M.D.

A CASE OF ACUTE YELLOW ATROPHY.

[Communicated by the DIRECTOR-GENERAL, of the Medical Department, Royal Navy.]

Mrs. B., aged 32, but looking at least ten years older, first complained on January 21st, 1898, of feeling unwell. The family history was good, and she herself had enjoyed good health until seven years ago, when, after the birth of her first child, she suffered more or less complete proclivencia, for which she has worn a stem pessary. There are two children. She was apparently suffering from an attack of ordinary catarrhal jaundice, characterised by yellowness of skin and conjunctivæ, light coloured stools, bile in urine, constipation, and anorexia, with normal temperature. The usual remedies were adopted. During the next week the jaundice deepened, and there was much difficulty in getting a satisfactory action of the bowels.

She had been doing well for a week, and the colour was disappearing to some extent, when on February 11th she had a relapse. Obstinate vomiting came on, and the skin again became deeply jaundiced. Urine not very high coloured. The temperature was normal or subnormal. Liver dullness was normal. The edge could be felt below the costal margin. The pulse was 70 to 80, and of good strength. The bowels obstinately confined.

Surgeon Mornement, who had been attending the patient from the commencement of her illness, was not satisfied with her condition, and a consultation was held. Brandy, ice, and milk were ordered, with bismuth and calomel at intervals. The following notes were made by Surgeon Mornement during the next few days:

February 15th. Patient's condition worse. Vomiting returned and she was unable to retain any food; pulse 100, temperature normal; jaundice increased. Diet: milk only. Treatment: ice to suck; iced champagne 3 every ten minutes. By 6 P.M. the vomiting had ceased and patient's general condition improved.

February 16th. Passed a restless night, and at times lapsed into a state of muttering delirium. No vomiting; temperature normal, pulse 120; liver dullness present but less defined; 6 P.M. Condition unaltered; constant muttering delirium; has not slept during the day. Sulphonal gr. xx given.

February 17th. Slept two hours after the sulphonal, but is decidedly worse this morning. Pulse 140, temperature normal; tongue very dry and furred, sordes on lips and teeth; no distension of abdomen; liver dullness almost absent; edge cannot be felt. Crystals of leucin and tyrosin found in urine, which also contains a little albumen. Patient is now almost unable to take anything.

February 18th. Condition worse; quite unconscious; passes urine in bed; muttering delirium continues; liver dullness not distinguishable. Leucin and tyrosin again found in the urine.

The patient gradually got worse, and sank and died at 7 A.M. on February 21st. The temperature rose to 101° eight hours before death; it had not previously been above 99°. When the relapse occurred malignant disease was suspected; but there was no tenderness nor sign of a tumour, and the vomited matter contained nothing suggestive. When delirium supervened and the hepatic dullness diminished acute yellow atrophy was suggested.

A partial necropsy was allowed, with the following results: Liver: weight 32 oz., capsule firmly adherent, consistence firm and tough on section, bright yellow colour; no structure can be made out. Kidneys: much enlarged, each weighing 7 oz., capsule not adherent, structure normal. Spleen: 8½ oz., structure normal.

J. C. B. MACLEAN,
Fleet-Surgeon R.N.

By a recent Imperial ukase female medical practitioners in Russia are granted the right to hold appointments in the public service.

and took first class honours in Medicine and Forensic Medicine when he took the degree of M.B. in 1890. He became M.D. in 1891. After acting as House Surgeon to the Blackburn and East Lancashire Infirmary he settled in Southampton about six years ago, and proved himself to be a successful practitioner. In 1891 he took the diploma of D.P.H. Cambridge, and afterwards held the appointment of Sanitary Surveyor to the Board of Trade and Medical Superintendent of Quarantine under the Privy Council for Southampton. Owing to failing health he found it necessary to go to Mentone last November. He returned improved in health, and was anxious to resume his practice under the necessary limitations imposed by Dr. Mitchell Bruce, whom he had previously consulted. Though as far as possible he confined himself to advising with his partner, Dr. Atkey, in cases presenting special features, his persistent attention to his patients and visits paid in inclement weather proved too much for his waning strength. He went for rest and change to Wigginton, Tring, his old home, where he died on May 12th. His physician, Dr. Mitchell Bruce, has said that he fell a victim to duty, and all who had been brought into contact with him will miss a skilled medical adviser and true friend, not least the poor of the city in which he practised.

WE regret to have to record the death, on May 7th, of Dr. ANGUS MACKINTOSH, of Chesterfield. He was a native of Blair Athol, Perthshire, and graduated M.D. at the Glasgow University in 1861. The early years of his professional career were spent in private practice in Cornwall. Some twenty-six years ago he was appointed Medical Officer of Health to the Chesterfield Rural Sanitary Authority, which post he continued to hold up to the time of his death. On the passing of the Public Health Act, 1875, Dr. Mackintosh was appointed Medical Officer of Health to several local Boards. Some of these he gave up some years ago, but he continued to be associated with the Whittington, Clay Lane, and Dronfield Urban Districts.

Dr. E. A. PRAEGER, who recently died at Los Angeles, Cal., U.S.A., at the age of 43, was born in England. He was a Licentiate of the Faculty of Physicians and Surgeons of Glasgow, and of the Society of Apothecaries of London. He practised his profession for a short time in Africa and in England. Some fifteen years ago he had an attack of blood-poisoning which disabled him for nearly a year. After his recovery he went out to British Columbia, and built up a large practice, besides holding the appointment of Surgeon to the Vancouver Mining Company, who employ over 1,000 men. Owing to the illness of his little daughter, he sacrificed this fine position, and went to Los Angeles. He held various important offices in the County Medical Society, and was elected a member of the faculty of the Medical College. Never before (says the *Southern California Practitioner*) in the history of Southern California has the profession met with so great a loss as it has sustained in the death of Dr. E. A. Praeger. Although a resident here only four years, the profession had learned his merit, and had this year unanimously chosen him President of the County Society. He was a man of high ideals, a close observer of medical ethics, a staunch upholder of the high standing of his profession. As a surgeon he was courageous, successful, and honest. He never refused to operate from a fear of hurting his own record, he never operated for the sake of doing something. Dr. Praeger leaves a widow and three children. The qualities which endeared him to his associates made him a beloved husband and father.

WE regret to announce the death of Mr. THOMAS HENDERSON, son of Dr. T. Brown Henderson, of Glasgow, a student of medicine of great promise, who has, at the early age of 22, fallen a victim to blood poisoning, contracted in the discharge of his hospital duties. Having assisted at an operation for osteomyelitis in the Royal Infirmary seven weeks ago, he became affected with symptoms of blood poisoning, which seemed to have passed off. On May 15th, however, after returning from church, fresh symptoms manifested themselves in the form of purpura hæmorrhagica, and in spite of all that medical skill could do, the disease proved fatal in 73 hours.

Mr. Henderson was of a singularly amiable disposition, and ardently devoted to his medical studies, and much sympathy is felt for his father in the sad circumstances. It is noteworthy that several members of the profession in Glasgow have recently suffered from blood poisoning, similarly contracted. One of these was, we understand, an eminent surgeon, who was infected from the case as Mr. Henderson; only in Mr. Henderson's case has a fatal result ensued, although in the case of the surgeon referred to the illness assumed for a time a serious character.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Surgeon-General Ignaz Neudörfer, late of the Austrian army, formerly *Privatdocent* of surgery in the University of Vienna, and author of numerous contributions to military surgery, aged 73; Dr. Gustav, Reichsritter von Wiedersperg, member of the Imperial Council and of the Chamber of Deputies of Austria, and a prominent sanitarian, aged 59; Dr. T. Halbertsma, Professor of Obstetrics and Gynaecology in the University of Utrecht; and Dr. José López Alonso, Professor of Clinical Medicine in the University of Salamanca.

NAVAL AND MILITARY MEDICAL SERVICES.

HONOURS FOR THE TIRAH EXPEDITION.

In the *London Gazette* of May 20th the following medical officers are rewarded and a short record of their services during the war is also noted. Full particulars have already appeared in the *BRITISH MEDICAL JOURNAL*.

K.C.B.—Surgeon-Colonel George Thomson, C.B., was mentioned in despatches by General Sir William Lockhart as P.M.O. of the troops in the field, and Sir William Lockhart's "indebtedness" to him and to the other officers of the department for "the high state of efficiency" in which the department was maintained is acknowledged.

C.B.—Surgeon-Colonel Edmond Townsend, A.M.S., was P.M.O. of the 1st Division, to whom Sir William Lockhart says his "acknowledgments were due"; as also to Surgeon-Colonel George McBride Davis, D.S.O., M.S., who served on the staff of the 2nd Division; and also to Brigade-Surgeon, Lieutenant-Colonel William Egerton Saunders, I.M.S., who was on the Staff of the line of communications.

Distinguished Service Orders are bestowed on Brigade-Surgeon-Lieutenant-Colonel Charles Henry Swayne, A.M.S., who was employed in the 1st Division. Surgeon-Major Johnston Shearer, I.M.S., 2nd Division; Surgeon-Captain Thomas H. J. C. Godwin, A.M.S.; Surgeon-Captain John Fisher, I.M.S.; Surgeon-Captain William Selby, I.M.S., regimentally employed, and Surgeon-Lieutenant James H. Hugo, I.M.S.; this officer was mentioned in Major-General Sir Bindon Blood's despatches as having "served with distinction throughout the defence of Chakdara." It was stated that Surgeon-Captain T. H. J. C. Godwin, A.M.S., was to be recommended for the V.C. "for conspicuous gallantry at Shabkadr on August 9th, 1897"; also that Surgeon-Captain Selby, I.M.S. (1st Battalion 2nd Ghorkas), would "probably receive" the same decoration for displaying "great gallantry" in saving a Ghoorka sepoy's life when "the enemy were almost upon him." Surgeon-Captain J. Fisher, I.M.S., is mentioned in despatches by Major-General Sir Bindon Blood for "great gallantry" during the Mamud operations in making "a most determined (though unsuccessful) attempt to take medical aid to the wounded of Captain Ryder's detachment through a hot fire."

Promotion to Surgeon-Lieutenant-Colonel—Surgeon-Major Hayward R. Whitehead, A.M.S., served in the 2nd Division.

Promotion to Surgeon-Majors—Surgeon-Captain Chas. H. Burtchael, A.M.S., served in the 4th Brigade. Surgeon-Captain John J. Gerrard, A.M.S., served in the 2nd Division.

INDIAN MEDICAL SERVICE.

Promotion to Brigade-Surgeon-Lieutenant-Colonel.—Surgeon-Lieutenant-Colonel Henry Hamilton, served on the line of communications.

Promotion to Surgeon-Lieutenant-Colonel.—Surgeon-Major Thomas Grainger, served regimentally in the 4th Brigade.

To all the above-named officers, Sir William Lockhart's "acknowledgments are due."

ARMY MEDICAL STAFF.

SURGEON-GENERAL WILLIAM SIM MURRAY, M.B., died at Colchester on March 27th. He entered the service as Assistant-Surgeon, January 10th, 1851; became Surgeon, January 26th, 1858; Surgeon-Major, January 10th, 1871; Deputy-Surgeon-General, June 26th, 1877; and Surgeon-General, September 8th, 1883. He went on retired pay, October 28th, 1889.

Surgeon-Major THOMAS MURTAGH died at Hove, Brighton, on March 23th. His commissions bore date:—Assistant-Surgeon, December 14th, 1858; Surgeon, March 1st, 1873; and Surgeon-Major, March 11th, 1874. He was placed on retired pay, December 29th, 1888.

Surgeon-Captain JAMES WALKER, M.D., died at Jacobabad, Bombay Presidency, on March 23rd, aged 28. He was appointed Surgeon-Lieutenant, July 28th, 1894; and Surgeon-Captain, July 28th, 1897.

Brigade-Surgeon-Lieutenant-Colonel F. W. TREVOR has taken charge of the current duties of Principal Medical Officer, Sind District, from March 4th, as an additional duty.

Surgeon-Captain ROBERT A. BOSTOCK, Scots Guards, retires from the service with a gratuity, May 25th. He was appointed Surgeon-Captain,

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF LONDON.

M.B. PASS EXAMINATION.—The following candidates have satisfied the examiners:

First Division.—P. E. Adams, St. Bartholomew's Hospital; A. J. Cleveland, Guy's Hospital; W. J. Harding, St. Bartholomew's Hospital; A. A. Montague, St. Thomas's Hospital.
Second Division.—F. H. Atkinson, Charing Cross Hospital; J. F. Dobson, Yorkshire College and Leeds General Infirmary; W. N. East, Guy's Hospital; R. C. Field, School of Medicine and Leeds General Infirmary; R. T. FitzHugh, Guy's Hospital; Lucy Elizabeth Harris, Royal Free Hospital; R. Hatfield, St. Bartholomew's Hospital; W. J. Hirst, Yorkshire College and Leeds General Infirmary; R. Hughes, St. Thomas's Hospital; F. H. Jacob, King's College; J. D. Jenkins, London Hospital; R. Kay, Guy's Hospital; W. D. Knocker, St. Thomas's Hospital; Marian Sandford Linton, B.A., London School of Medicine and Royal Free Hospital; Ethilda B. M. Meakin, Royal Free Hospital; F. A. H. Michôd, St. Mary's Hospital; E. C. Morland, B.Sc., St. Bartholomew's Hospital; J. B. Page, St. Mary's Hospital; A. E. Payne, St. Mary's Hospital; C. Rivière, St. Bartholomew's Hospital; E. L. M. Rusby, King's College; J. M. Schaub, King's College; R. O. Sibley, St. Mary's Hospital; D. L. Smith, Guy's Hospital.

ROYAL UNIVERSITY OF IRELAND.

SECOND EXAMINATION IN MEDICINE.—The following candidates have satisfied the Examiners:

Honours, Second Class.—*D. M'Mordie, B.A., Queen's College, Belfast; *J. O'Leary, Queen's College, Cork.
Upper Pass.—P. J. Carroll, B.A., Queen's College, Cork; A. G. Heron, B.A., Queen's College, Belfast; A. M. Thomson, Queen's College, Belfast.
Pass Division.—M. D. Ahern, Queen's College, Cork, and Catholic University School of Medicine; J. P. Brady, Catholic University School of Medicine; M. Crowley, Catholic University School of Medicine; J. P. Harold, Charing Cross Medical School; J. Hartigan, Catholic University School of Medicine; P. J. Kane, Catholic University School of Medicine; R. Kennedy, Queen's College, Belfast; J. M'Crea, B.A., Queen's College, Belfast; Everina S. I. Massy, Royal College of Surgeons, Royal College of Science, and Catholic University School of Medicine; J. A. Mills, B.A., Queen's College, Galway; H. Ross, Queen's College, Cork; H. E. Smith, Queen's College, Belfast; W. J. Thompson, Queen's College, Belfast; W. Watson, Queen's College, Belfast.

THIRD EXAMINATION IN MEDICINE.—The following candidates have satisfied the Examiners:

Honours, First Class.—†M. Curran, B.A., Catholic University School of Medicine.
Honours, Second Class.—*W. McCarthy, Queen's College, Cork.
Upper Pass.—I. M. Byers, Queen's College, Belfast; W. Starkey, Catholic University School of Medicine.
Pass Division.—J. M. Ahern, Catholic University School of Medicine; W. J. Bannister, Queen's College, Cork; J. H. Barbour, Queen's College, Belfast; J. J. Crowley, B.A., Queen's College, Cork; J. M. Dunne, Catholic University School of Medicine; D. J. Farnan, Catholic University School of Medicine; W. C. Gavin, Catholic University School of Medicine; J. R. Gillespie, M.A., Queen's College, Belfast; J. Good, Queen's College, Cork; B. J. Hackett, Catholic University School of Medicine; Alexandrina C. Huston, Queen's College, Belfast; A. F. Kennedy, Queen's College, Belfast; T. Kennedy, Queen's College, Belfast; R. McCarrison, Queen's College, Belfast; T. J. McDonogh, B.A., Catholic University School of Medicine; E. W. S. Martin, Queen's College, Belfast; J. J. O'Mahony, B.A., Queen's College, Cork; M. L. Rowan, B.A., Queen's College, Belfast; A. W. C. Spence, Queen's College, Belfast; J. Torpey, Queen's College, Cork; J. Waddell, Queen's College, Belfast.

EXAMINATION FOR DEGREES OF M.B., B.CH., B.A.O.—The following candidates have satisfied the Examiners:

Honours, Second Class.—*E. G. Charles, B.A., Queen's College, Cork, and University College, London; *R. T. Booth, Queen's College, Cork.
Upper Pass.—D. Brown, Queen's College, Belfast; G. M. Keating, B.A., Catholic University School of Medicine; T. M'Kelvey, Queen's College, Galway, Edinburgh School of Medicine, and Catholic University School of Medicine; Frances O. C. Sinclair, B.A., Catholic University School of Medicine and Medical College for Women, Edinburgh.
Pass Division.—Dora E. Allman, Queen's College, Cork; W. L. Armstrong, Queen's College, Belfast; T. Downard, B.A., Queen's College, Galway; R. S. A. Drought, B.A., Queen's College, Cork; T. K. Greenfield, Queen's College, Belfast; G. A. Hogg, Queen's College, Belfast; J. Keogh, Catholic University School of Medicine; W. H. W. Mewhirter, Queen's College, Belfast; J. Sloan, Queen's College, Galway; W. J. Sweeney, Catholic University School of Medicine; W. J. Wilson, Queen's College, Belfast.

EXAMINATION FOR M.D. DEGREE.—The following candidates have satisfied the Examiners:

J. H. McBurney, M.B., Queen's College, Belfast, and Catholic University School of Medicine; A. P. Mooney, M.B., Catholic University School of Medicine; Hester D. Russell, M.B., Royal Free Hospital, London, W.C.

† First Class Exhibition.

* Second Class Exhibition.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

MEDICAL PRACTICE IN ITALY.

The following letter was addressed to the Marquis of Salisbury, K.G., Secretary of State for Foreign Affairs, on April 14th, 1898, by the President and Vice-Presidents:

MY LORD,—We beg to inform you that the Council of this College have

received a memorial from several Members of the College resident in Italy in reference to a proposal for the abrogation of Article 23 of the Italian Sanitary Law, whereby foreign medical men are permitted to practise their profession amongst non-Italian residents and visitors, and for the enactment of a fresh clause whereby not only foreign medical men, who may desire to practise in the future, but also those who are actually practising there, will be required to pass through all the stages of the usual student's curriculum of study and obtain the necessary diploma for practice in one of the Italian Universities before they can exercise their profession even amongst their own countrymen.

The reason assigned for this proposed alteration of the law is that Italian medical men cannot practise their profession in other countries of Europe, including the United Kingdom, without undergoing examinations and obtaining a qualification in those countries.

With regard to this contention we would point out that there is no provision in the Medical Acts of the United Kingdom forbidding the practice of their profession by foreign medical men who have obtained a qualification to practise in their own country, provided they do not wilfully and falsely assume any title implying that they are registered under the Medical Act, or are recognised by law as medical practitioners.

We would further point out that the proposal that foreign medical men wishing to practise in Italy should be required to undergo the course of study and all examinations required by the regulations of the Italian Universities is most unjust to Members of this College and Licentiates of the Royal College of Physicians of London, inasmuch as the two Colleges afford special facilities to foreigners wishing to obtain a registrable qualification in the United Kingdom by a clause in the Regulations of their Examining Board, whereby it is provided that medical graduates of foreign Universities recognised for the purpose (among these being included nine Italian Universities) may be excused the First Examination in Chemistry and Physics, Practical Pharmacy, and Elementary Biology, and the Second Examination in Anatomy and Physiology, and may be admitted to the Third or Final Examination in Medicine, Surgery, and Midwifery without being required to undergo any course of study in this country.

We moreover believe it to be of great importance to British subjects visiting Italy for the sake of health that they should be able to avail themselves of the services of British rather than Italian medical men, and that many invalids will in future be deterred from visiting Italy if unable to obtain in that country the advice of those accustomed to their habits of life and acquainted with the methods of medical treatment best suited thereto.

As, therefore, the proposed alteration in the law not only affects the interests of British medical men in Italy, but concerns very nearly the welfare of the many subjects of Her Majesty who reside in and visit that country, we have ventured to bring these matters under your notice, in the hope that your Lordship will take such steps as may be possible in respect to the question at issue.

We have the honour to be, my Lord, your obedient servants,

WILLIAM MACCORMAC, President.

ALFRED WILLETT, Vice-Presidents.

HENRY G. HOWSE, Vice-Presidents.

The following reply was received to this letter:

[Copy.]

Foreign Office, April 20th, 1898.
 SIR,—With reference to your letter of the 14th instant, I am directed by the Marquess of Salisbury to enclose herewith copy of a despatch which has been received from Her Majesty's Ambassador at Rome, reporting that the Italian Government do not contemplate making any change in existing laws with respect to the status of foreign doctors in Italy.

Copies of Sir Clare Ford's despatch have already been communicated to various other public bodies interested in this question.—I am, Sir,

Your most obedient, humble servant,

F. H. VILLIERS.

The Secretary to the Royal College of Surgeons of England,
 Lincoln's Inn Fields, W.C.

[Copy.]

Rome, March 22nd, 1898.

MY LORD,—I have the honour to acknowledge the receipt of your Lordship's despatches Nos. 13 and 14 of this series of the 17th instant, on the subject of the fear entertained by British doctors practising in Italy that there is an intention of altering the laws which allow them the right to practise medicine in this country in a manner unfavourable to them.

In my despatch No. 7 of this series of the 3rd ultimo, I reported to your Lordship that Signor Arcoleo, Under Secretary of State for the Interior, had on the previous day made a statement in the Chamber of Deputies on the subject of the agitation which was being raised in favour of prohibiting foreign doctors from practising in Italy.

On the receipt of your Lordship's above-mentioned despatches, I wrote to Signor Malvano, Director-General at the Italian Foreign Office, calling his attention to the words used by Signor Arcoleo in the Chamber of Deputies, and inquiring whether they represented the views of the Italian Government.

I have just received in reply a note from that gentleman enclosing the official text of Signor Arcoleo's statement above mentioned, of which I beg to enclose a translation. Signor Malvano adds: "Il en résulte qu'il n'y a aucune intention de modifier à la charge des médecins étrangers les lois en vigueur."

I hope that these words will prove satisfactory to Her Majesty's Government, and will tend to reassure the British medical doctors who practise in Italy; therefore, unless I receive instructions from your Lordship to the contrary I propose for the present to make no further representations to the Italian Government in this matter.

I have, etc.,

(Signed) FRANCIS CLARE FORD.

The Marquis of Salisbury, K.G., etc.

[Copy, translation.]

Session of the 2nd February, 1898.

Signor Arcoleo, Under Secretary of State for the Home Department. The honourable member, Signor Santini, is partly right; he wished to

see how our legislation stands with regard to that in foreign countries and has found that whereas elsewhere in States which are the most civilised and tolerant, there are restrictions to practising the medical profession, in Italy an undue toleration is allowed, and the honourable member who asked the question, therefore, wishes, unless I am mistaken, for a modification of our sanitary law in the sense of a prohibition to foreigners from exercising their profession in our country.

The question of the honourable member, Santini, is the reflection of a movement sufficiently widely spread in Italy. In many parts protests have been made (by doctors) possibly as a just guarantee of their own professional dignity, perhaps also in order to avoid competition, and the demand has been put forward that foreign doctors should be absolutely prohibited from carrying on their profession. The Administration thought it desirable, in the first place, to ascertain whether there are a great number of doctors in these conditions in Italy; and whereas in a memorandum, and also in a sort of petition presented to the Minister of the Sanitary Council, the number was brought up to 1,500, it is known from information from all parts of the kingdom that the number of these doctors scarcely amounted to 108.

Such being the state of affairs, the danger from foreign doctors exercising their profession would certainly not be great.

I can assure the honourable member that at the present time, as an administrative measure, doctors accompanying foreign families (to health resorts) during the proper seasons would be warned (*si diffideranno*) to limit the exercise of their profession to the families who bring them with them, and not to practise freely among the public.

As a legitimate measure, the question is being studied of obtaining at least among civilised States a system of reciprocity in the sense that our doctors may obtain the same facilities abroad as foreign doctors in Italy

FIRST PROFESSIONAL EXAMINATION FOR THE DIPLOMA OF FELLOW.

The following gentlemen have passed this examination:

T. H. Edwards, St. Thomas's Hospital; W. F. Feddon, St. George's Hospital; W. F. V. Bonney, M.R.C.S. Eng., L.R.C.P. Lond., M.B., B.S. Lond., Middlesex Hospital; H. S. Newland, M.R.C.S. Eng., L.R.C.P. Lond., M.B., Ch.B. Adel., Adelaide University and London Hospital; A. M. Crabtree, M.R.C.S. Eng., L.R.C.P. Lond.; A. E. J. Lister and A. R. Tweedie, St. Bartholomew's Hospital; N. Navarra, Middlesex Hospital; H. Balean, London Hospital; J. A. Bonnin, M.R.C.S. Eng., L.R.C.P. Lond., M.B., Ch.B. Adel., Adelaide University and London Hospital; F. M. Ogilvie, M.R.C.S. Eng., L.R.C.P. Lond., M.B., B.C. Cantab., Cambridge University and St. George's Hospital; T. Pettcy, M.R.C.S. Eng., L.R.C.P. Lond., M.D., C.M. Edin., Edinburgh University and Charing Cross Hospital; J. L. Adam, M.B., C.M. Aberd., Aberdeen University, Middlesex Hospital and King's College, London; L. Reynolds, B.A. Cantab., Cambridge University and St. Mary's Hospital; J. C. Newman, St. Bartholomew's Hospital; R. C. Turnbull, London Hospital; R. Warren, B.A. Oxon., Oxford University and London Hospital; D. G. Greenfield, Guy's Hospital; H. McD. Parrott, F. G. Cross and P. W. L. Camps, Guy's Hospital; W. H. Lowman, King's College, London; A. B. Soltan and B. C. Broomhall, London Hospital; and T. C. English, St. George's Hospital.

Fifty-one gentlemen were referred for six months.

ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

The following gentlemen have been admitted to Licences in Medicine and Midwifery:

F. A. Benson, A. Daly, R. L. Davies, E. Kennedy, G. R. McDonald, T. A. J. White, T. F. White, M. R. Whittia.

The following registered practitioners have been admitted Licentiates in Midwifery:

G. H. Brand, L.S.A. Lond., 1890; A. W. Shea, L.S.A. Lond., 1897.

Mr. H. B. Goulding, F.R.C.S.I., has passed the examination for the diploma in State Medicine granted conjointly by the Royal Colleges of Physicians and Surgeons, Ireland.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

FELLOWSHIP EXAMINATION.—The following candidates, having passed the necessary examinations, have been admitted Fellows of the College:

A. J. M'A. Blaney, B.Ch., etc., Royal University; Miss R. Cohen, M.B., Calcutta University; W. J. Corbett, L.R.C.S.I.; J. Dundon, B.Ch., Royal University; H. S. Jackson, L.R.C.S.I.; and W. Taylor, L.R.C.S.I.

SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, May, 1898.—The following candidates passed in:

Surgery.—F. Atthill (Section II), Charing Cross Hospital; D. Davies, London Hospital; M. Paine (Section I), Royal Free Hospital; H. Spinks, Manchester.

Medicine.—E. Fryer, Guy's Hospital; W. J. Henson, Guy's Hospital; F. A. Leete (Section II), Royal Free Hospital; M. Paine (Section I), Royal Free Hospital; C. C. Pratt, St. George's Hospital and Bristol.

Forensic Medicine.—M. Paine, Royal Free Hospital; C. C. Pratt, St. George's Hospital and Bristol; H. J. Watts, Manchester.

Midwifery.—J. Ash, St. Thomas's Hospital; L. D. B. Cogan, Guy's Hospital; E. Fryer, Guy's Hospital; W. J. Henson, Guy's Hospital; F. A. Leete, Royal Free Hospital; S. J. Meredith, Birmingham and London Hospital; G. H. Proctor, London Hospital; H. Spinks, Manchester.

The diploma of the Society was granted to the following candidates: Messrs. J. Ash, W. J. Henson, and H. Spinks.

The foundation stone of the new chapel of the City of London Asylum at Stone, near Dartford, will be laid on Saturday, June 18th, by the Lord Mayor, who will be accompanied by the Sheriffs of London.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 6,193 births and 3,533 deaths were registered during the week ending Saturday last, May 21st. The annual rate of mortality in these towns, which had declined from 18.4 to 16.6 per 1,000 in the three preceding weeks, further fell to 16.4 last week. The rates in the several towns ranged from 8.8 in Cardiff, 9.2 in Croydon, 9.8 in West Ham, and 10.7 in Brighton, to 22.6 in Liverpool, 23.6 in Newcastle-upon-Tyne, 23.7 in Wolverhampton, and 24.3 in Sunderland. In the thirty-two provincial towns the mean death-rate was 16.9 per 1,000, and was 1.2 above the rate recorded in London, which was 15.7 per 1,000. The zymotic death-rate in the thirty-three towns averaged 1.8 per 1,000; in London the rate was equal to 2.2 per 1,000, while it averaged 1.3 in the thirty-two provincial towns, among which the highest zymotic death-rates were 2.4 in Wolverhampton, 2.5 in Liverpool, 2.7 in Salford, and 3.0 in Bolton. Measles caused a death-rate of 1.0 in Derby; and whooping-cough of 1.1 in Plymouth and 1.2 in Salford and in Sheffield. The mortality last week from scarlet fever and from enteric fever showed no marked excess in any of the large towns. The 50 deaths from diphtheria in the thirty-three towns included 31 in London, 3 in Birmingham, and 3 in Leeds. No fatal case of small-pox was registered during the week under notice, 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 2,421 to 2,246 at the end of the six preceding weeks, had further fallen to 2,241 on Saturday last, May 21st; 223 new cases were admitted during the week, against 205, 209, and 229 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, May 21st, 1,009 births and 599 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had declined from 24.2 to 19.8 per 1,000 in the six preceding weeks, was 19.9 last week, and was 3.5 per 1,000 above the mean rate during the same period in the thirty-three large English towns. Among these Scotch towns the death-rates ranged from 10.2 in Perth and 10.9 in Leith to 21.8 in Glasgow and 22.0 in Paisley. The zymotic death-rate in these towns averaged 3.4 per 1,000, the highest rates being recorded in Glasgow and Paisley. The 303 deaths registered in Glasgow included 15 from measles, 3 from scarlet fever, 3 from diphtheria, 22 from whooping-cough, and 2 from "fever." Four fatal cases of scarlet fever and 2 of measles were recorded in Edinburgh; 5 deaths from measles occurred in Paisley and 4 in Dundee.

DIPHTHERIA IN LONDON.

THE mortality from diphtheria in London showed a marked increase last week. The fatal cases of this disease, which had been 39, 27, and 20 in the three preceding weeks, rose again to 31 during the week ending Saturday last, May 21st. Of these 31 deaths, 4 were of persons belonging to Lewisham, 3 to Islington, 3 to St. Luke, 3 to Poplar, and 5 to Battersea sanitary areas. The notifications of diphtheria in London, which had been 178, 202, and 196 in the three preceding weeks, rose again to 212 during the week ending Saturday last, May 21st, and exceeded the number recorded in any week during the last two months. Compared with the preceding week, there was a marked decline in the prevalence of the disease in North London, and a slight decline in East London, while in West London and South London there was a considerable increase. The increase in the prevalence of diphtheria in West London was largely due to an outbreak in Chelsea, where no fewer than 17 new cases were notified, against 6 and 8 in the two preceding weeks. There was a general decline in the prevalence of the disease in the sanitary areas of North London, which was most marked in Islington, where only 5 new cases were notified, against 15 and 12 in the two preceding weeks. Among the sanitary areas of East London there was but little change in the prevalence of diphtheria during the week under notice, except in Poplar, where the cases notified, which had increased from 6 to 13 in the three preceding weeks, declined to 7 last week. Among the sanitary areas of South London the increase in the prevalence of diphtheria was most marked in Wandsworth, Camberwell, Lewisham, and Greenwich; in the last named sanitary area the new cases, which had been 3 and 10 in the two preceding weeks, further rose to 14 last week. In Lambeth, however, there was a further decline in the prevalence of the disease, 6 new cases being notified, against 15 and 9 in the two preceding weeks. The admission of diphtheria patients into the Metropolitan Asylum Hospitals during last week were 130, against 131 in each of the two preceding weeks, and 948 cases remained under treatment in these hospitals on Saturday last, May 21st.

THE POLLUTION OF THE BRENT

THE Bill introduced by the Middlesex County Council with the object of improving the condition of the Brent met with considerable opposition when it was brought before the Select Committee of the House of Commons on May 23rd. The Hanwell Urban District Council contended that the scheme was a sham one, while the Tottenham Urban District Council objected to being called upon to contribute to the cost. However, the Committee, while declining formally to pass the preamble of the Bill, indicated that practically a great portion of it was, in their opinion, proved, and that as far as they were concerned a Bill could be passed.

MEDICAL NEWS.

It is stated that the Bengal Government have applied to Bombay for the services of twenty-five special plague medical officers and as many nurses.

THE Goldsmiths Company have made a grant of £600 to the Building Fund of the North-Eastern Hospital for Children, Shoreditch.

On Wednesday evening the St. Andrews University Graduates' Club gave a *conversazione* at the rooms of the Medical Society. It was attended by a large number of guests, who were received by the President, Dr. W. F. Cleveland.

THE name of Surgeon-Colonel K. MacLeod, Professor of Military Medicine, Army Medical School, Netley, was inadvertently omitted last week from the list of officers presented to Her Majesty on the occasion of the Queen's recent visit to Netley Hospital.

THE Birmingham Hospital Saturday collection took place on May 21st. The sum of £12,901 17s. 2d. was paid into the bank from the factories, while the street collection amounted only to £300. It is expected that £18,000 will have been collected when all the contributions have been received.

PRESENTATION.—Dr. Richard Greene has, on the occasion of his resigning the post of Medical Superintendent of the Northampton County Asylum, Berry Wood, been presented with an illuminated address as an acknowledgment of the excellent services he had rendered the county. Dr. Greene had held the post of medical superintendent for twenty years.

DEFECTIVE CHILDREN IN LONDON.—The School Board for London has appointed Dr. Shuttleworth and Mrs. Berry, M.D., to take charge of the work in connection with the examination of defective children and children alleged to be defective. The new officers are to work in conjunction with the medical officer of the Board. The appointments are made for one year, and the salary in each case is £250.

THE Presidents of the Institute of Chemistry, the Society of Public Analysts, and the Society of Chemical Industry gave a *conversazione* at the galleries of the Royal Institute of Painters in Water Colours on May 24th. The guests, who numbered about 1,500, were received by Dr. and Mrs. Stevenson, Professor and Mrs. Frank Clowes, and Dr. and Mrs. Bernard Dyer.

At the annual meeting of the Belfast and District Branch of the Royal Medical Benevolent Fund of Ireland Dr. Purdon, the treasurer, stated that of the 175 members of the profession in Belfast only 57 were subscribers, and out of 120 country only 7 were subscribers. At the April meeting the Committee had had to deal with 7 applications, and had recommended the grant of sums amounting to £80.

UNIVERSITY COLLEGE AND HOSPITAL UNION SOCIETY.—Past as well as present students of University College can now congratulate the officers of the Union Society on the success that has attended their efforts to obtain an athletic ground worthy of the name. The new ground is conveniently situated at Acton and is already in very good condition. It was formally opened on Wednesday, May 25th, by Mrs. McKinnon Wood, in the presence of Lord Monckswell and the Deans of the Faculties.

POOR-LAW GUARDIANS AND THE VACCINATION BILL.—A meeting attended by various Poor-law guardians and members of Parliament was held in London on May 25th, under the presidency of Mr. Affleck, chairman of the Gateshead Board of Guardians. About 100 delegates and eight or nine members of Parliament were present. A resolution was adopted expressing the opinion that Clause 3 of the Vaccination Bill was an infringement of the liberties of the people and of the liberties and powers which should be exercised by Poor-law guardians. Mr. T. Bailey, M.P., said the question was whether the powers of local self-government should be increased, or whether they should be handed over to an irresponsible body such as the Local Government Board. An amendment approving of the Bill, moved by Mr. St. Cedd, found few supporters.

YELLOW FEVER IN JAMAICA.—Considerable difficulty was experienced by the military authorities at Jamaica in obtaining the services of trained female nurses during the recent outbreak of yellow fever. Owing to this, General H. J. Hallows, Commanding the Troops there, has now inaugurated a military nursing fund, with the object of providing two or more of these nurses, who will be permanently attached to the military hospitals of the Colony, the scheme being analogous to that initiated in India by Lady Roberts. Such a scheme is most commendable, for in a station like Jamaica, where the average strength of the troops is only about 500, and the average constantly sick only 30.80 or thereabouts, the services of one or more of the regular army nurses are scarcely to be expected.

THE LONDON HOSPITAL.—On May 18th the Lord Mayor entertained a large number of distinguished guests at a dinner held to promote the interests of the London Hospital. The toast of "Success to the Hospital" was given by the Lord Mayor, and acknowledged by the Duke of Cambridge, President of the hospital, who said that during the past year it had rendered assistance to 11,000 in-patients, and more than 100,000 out-patients. Mr. Sydney Holland, in thanking the Lord Mayor for his assistance, said that the Committee had had to close 100 beds in three years. The London Hospital was the largest in England, and £70,000 a year was required to carry on its work. The Lord Mayor stated that in response to the special appeal donations amounting to £39,000 had been received, and annual subscriptions to the amount of £4 250.

PHOTOGRAPHY AS AN AID TO SANITATION.—Dr. Hope has contributed a very interesting section in his annual report for Liverpool (1897) on Insanitary Property, in which he shows that the city health authorities are moving in the direction of the demolition of houses unfit for habitation as fast as circumstances permit. He gives a series of photographs of groups of dwellings, courts, slums, and the like, to aid the reader to a right appreciation of the actual state of the properties which he describes; he has also given a ground plan of some of the localities which form the subject of his condemnation. This method of appealing to the eye is very useful. The camera as an aid to sanitation may be expected to do much good, and Liverpool is not alone in the adoption of pictorial annual reports, as witness Newcastle-on-Tyne, Southampton, and other examples.

CASSELL'S BLACK AND WHITE EXHIBITION.—For the sixteenth year Messrs. Cassell exhibit a selection of the works in black and white which have been executed to illustrate their various publications. The exhibition is held, as in former years, at the Cutlers' Hall in Warwick Lane, Newgate Street, a spot intimately associated with the history of English medicine, for it is built upon the site of the Old College of Physicians. The collection is well worthy of a visit, for it shows that Messrs. Cassell strive to enlist the highest talent in their service. Mr. H. Railton's drawing of Igham Mote; Mr. Pennell's illustrations of the Charterhouse; Mr. H. A. Harper's wash drawings in the East; and Mr. Brock's numerous examples of good line work are especially noticeable, whilst there are excellent examples of MacWhirter, Gordon Browne, and Couldrey's work.

THE INVASION OF CUBA: PREVENTION OF YELLOW FEVER.—Dr. John Guiteras, Professor of Pathology in the University of Pennsylvania, who has had an exceptionally large experience of yellow fever, has been instructed by the Surgeon-General of the United States Army to proceed to Tampa, Florida, to act as medical adviser to the commander of the army which it is expected will invade Cuba. With reference to the dangers which may beset troops in Cuba, and the precautions which should be adopted, the following statement, says the *Philadelphia Medical Journal*, is attributed to Dr. Guiteras: "It is possible to prevent the infection of military garrisons, though whether it can be done in a campaign remains to be seen. Yellow fever is circumscribed within certain areas, and if it is possible to keep troops away from those areas there will be little danger of infection. Contrary to the prevailing idea, altitude does not govern the disease. There are no extremely high altitudes in Cuba, and yet there are places where there is no

yellow fever. In some places on the coast the disease is not to be found. As a general rule, the more important the town, the greater its commercial activity, the more infected it is. Yet a congregation of people in the interior could not originate yellow fever. The cities where the disease prevails are infected because they are permanently inhabited by a crowd. Still the disease may be carried to a garrison from an infected town. To guard against this the troops must be placed by themselves, in uninfected places, and they must not communicate with infected places. Then, too, no depôt of supplies should be placed in an infected port. This is, of course, a desideratum that it may be difficult to obtain for strategic reasons. Ideal conditions are not always possible in a military campaign. Whether or not yellow fever can be kept from the troops depends entirely upon whether these plans can be carried out."

THE BRITISH DENTAL ASSOCIATION.—The annual general meeting of the British Dental Association commences this day, Saturday, at Bath, and will be continued on Monday and Tuesday next. An informal reception by the President of the Western Counties Branch of the British Dental Association is announced to be held on Friday evening. At the first general meeting on the following day the President, Mr. W. A. Hunt, L.R.C.P.Lond., M.R.C.S., will deliver his address. On Monday the President of the Microscopical Section, Mr. F. J. Bennett, M.R.C.S., will deliver his address, and on the evening of the same day the annual dinner will be held in the Assembly rooms. The Microscopical Section will meet again on Tuesday morning, and on Tuesday afternoon the concluding general meeting will be held. The Local Arrangements Committee have provided various evening entertainments as well as excursions after the meeting.

PORTUGUESE CONGRESS OF MEDICINE.—The first meeting of the Portuguese National Congress of Medicine was held in Lisbon, under the presidency of Dr. Manoel Bento de Sousa, from May 11th to 16th. The King and Queen of Portugal were present at the opening ceremony. Addresses were delivered by Professors Count de Ficalho, Augusto Rocha, and others. Among the communications presented were the following: Alcoholism in Portugal, by Dr. Alfredo Figueiredo; The Necessity of the Reform of Pharmaceutical Instruction in Portugal, by Dr. Sousa Telles; Leprosy in Portugal, by Dr. Zeferino Falcao; and Colonial Military Hygiene, with Special Reference to the Prophylactic Action of Sulphate of Quinine, by Dr. J. Baptista Dias. Other communications were presented on Arthrectomy in White Swelling, Abdominal Hysterectomy in the Treatment of Uterine Fibroma, Radical Cure of Hernia, Surgical Treatment of Psychoses. The principal subjects discussed were Syphilis and Paludism.

WESTMINSTER HOSPITAL MEDICAL SCHOOL.—The annual distribution of prizes and conversation were held in the Westminster Town Hall on May 24th. Dr. Monckton Copeman and Dr. Blaxall exhibited their work on the Bacteriology of Vaccine Lymph and the preparation of Glycerinated Calf Lymph. Dr. Blaxall showed also cultivation of Phosphorescent Bacteria, the cause of marine phosphorescence. Dr. Gossage exhibited specimens showing the termination of some sensory nerves. During the evening the Medical School was open for the inspection of visitors. Prizes and scholarships were awarded as follows: Guthrie Scholarship, £60, G. L. Bunting; Entrance Scholarship, £40, P. J. Marett; Entrance Scholarship, £30, W. C. Nimmo; Treasurer's Prize, 10 guineas, C. C. Whitehead; President's Prize, 20 guineas, W. Payne and E. R. Carling; Bird Medal and Prize, £14, H. C. Barlow and H. H. Cheesman; Class Prize for Medicine, E. C. Lambert.

THE BRITISH MEDICAL TEMPERANCE ASSOCIATION.—The twenty-second annual meeting of this association was held on May 23rd at the Examination Hall on the Victoria Embankment. Dr. G. Sims Woodhead presided. The annual report read by Dr. Ridge, the honorary secretary, showed that 24 new members and 136 student associates had joined during the year, making a total of 466 members, 424 student associates, and 3 lay associates, all being total abstainers from alcohol. The prizes for essays on the action of alcohol on the nervous system, offered to fourth year students were awarded

to Mr. E. A. Boxer of Edinburgh, and Miss L. Beatty of Belfast. A conference was held subsequently with medical officers of metropolitan workhouses, infirmaries, and poor-law districts. Mr. W. C. Amery read a paper on Alcohol in Relation to Sick and Healthy Paupers, and after a discussion the following resolution was adopted: "That this conference declares its opinion that medical officers of infirmaries, workhouses, and Poor-law districts should reduce the prescription of alcoholic liquors to the lowest possible limits, while feeling that it must leave the matter in the hands of those who are responsible for the medical treatment."

SWIMMING BATHS FOR SOLDIERS.—On April 17th, 1897, in a note on the Soldier's Tub in India, we alluded to the insufficient provision in barracks for the personal cleanliness of the soldier. We have now to call attention to some very significant remarks made by the district coroner of Aldershot on the need of a swimming bath in the camp of that large garrison to which the military authorities at the War Office would do well to devote attention. The teaching of swimming is necessary alike for soldiers and for their children, and were a proper swimming bath provided for the camp at Aldershot this useful art might be acquired by many now ignorant of it. The jury, as a rider to their verdict on the death by drowning of a soldier's child in the canal, supported the district coroner's remarks by stating that "provision should be made for soldiers and soldiers' children in the way of a swimming bath;" and we may add that it is astonishing when so many thousands of pounds have been spent in the camp at Aldershot of late over barracks and subsidiary buildings that the absolute necessity of swimming baths for some 14,000 troops has never occurred to the War Office in its Quartermaster-General's department. In the German army the very best facilities for general cleanliness and swimming are given, and thorough drills in swimming exist. In Austria and America also swimming is well attended to.

MEDICAL VACANCIES.

The following vacancies are announced:

ASTON MANOR URBAN DISTRICT COUNCIL.—Medical Officer of Health for the District, and Medical Attendant at Infectious Hospital. Salary, £125 per annum. Applications to Joseph Ansell, Clerk, Council Offices, Albert Road, Aston Manor, Birmingham, by June 13th.

BELFAST DISTRICT ASYLUM.—Assistant Medical Officer; unmarried, and not more than 32 years of age. Salary, £100 per annum, with £50 in lieu of rations; also furnished apartments, fuel, light, washing, and attendance. Applications to the Resident Medical Superintendent by June 11th.

BIRMINGHAM CITY ASYLUM.—Clinical Assistant. Board, lodging, and washing, but no salary. Applications to the Medical Superintendent.

BRISTOL EYE HOSPITAL.—House Surgeon. Salary £60, with board and residence. Applications to the Secretary by June 1st.

CAMBRIDGE: ADDENBROOKE'S HOSPITAL.—Resident Assistant House-Surgeon. Board, lodging, and washing provided, but no salary. Applications by June 14th.

CHESTERFIELD: CHESTERFIELD AND NORTH DERBYSHIRE HOSPITAL.—Junior House Surgeon and Dispenser. Salary £50 per year, with board, apartments, and laundress. Applications to the Secretary by June 2nd.

DONCASTER GENERAL INFIRMARY AND DISPENSARY.—Indoor Dispenser and Assistant to House Surgeon. No salary, but board, lodging, and washing provided. Applications to the Hon. Secretary by May 31st.

DUDLEY: GUEST HOSPITAL.—Resident Assistant House Surgeon. Appointment for six months. Salary at the rate of £40 per annum, with board, lodging, and washing. Applications to the Secretary by June 9th.

EAST LONDON HOSPITAL FOR CHILDREN AND DISPENSARY FOR WOMEN. Glamis Road, Shadwell, E.—House Physician. Board, residence, etc., provided, and honorarium at completion of six months' approved service. Applications to the Secretary by June 11th.

EGYPTIAN GOVERNMENT: SCHOOL OF MEDICINE AND THE KASR-EL-AINI HOSPITAL.—Professor of Surgery at the School and Senior Surgeon to the Hospital, £400 per annum; Professor of Clinical Surgery at the School and Surgeon to the Hospital, £320 per annum; Professor of Clinical Medicine at the School and Physician to the Hospital, £320 per annum; Resident Medical Officer to the Hospital, £250 per annum and quarters; Resident Surgical Officer, salary £250 per annum and quarters. Applications on forms provided to the Director-General, Sanitary Department of the Egyptian Government, care of the Secretary, Examination Hall, Victoria Embankment, by June 13th.

GENERAL LYING-IN HOSPITAL, York Road, Lambeth.—House Physician. Salary at the rate of £50 per annum, with board and residence. Applications to the Secretary by May 31st.

GLASGOW UNIVERSITY.—Examiner in Physics for Degrees in Medicine and Science. Appointment for three years. Annual fee £30. Applications to A. E. Clapperton, Secretary of the Court, by June 1st.

GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road, N.—Physician or Surgeon to the Skin Department. Applications to the Secretary by June 13th.

HEMEL HEMPSTEAD, HERTS: WEST HERTS INFIRMARY.—House-Surgeon and Dispenser; unmarried. Salary, £100 per annum, well-furnished rooms, board, fire, light, attendance, and washing. Applications to the Honorary Secretary by June 9th.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, Bloomsbury.—Two House Surgeons to Out-patients (non-resident). Appointments for six months. Salary £26 5s. Applications to the Secretary by May 31st.

INVERNESS: NORTHERN INFIRMARY.—House Surgeon and Dispenser. Salary £70, with board, etc. Applications to the Hon. Secretary by June 1st.

ISLINGTON: GUARDIANS OF ST. MARY.—Resident Assistant Medical Officer at the Workhouse and Infirmary, and Temporary Medical Officer of the Highgate Hill Temporary Workhouse. Remuneration, £30 per annum, and rations, apartments, and washing. Applications on forms provided to the Clerk, Guardians Offices, St. John's Road, Upper Holloway, N., by June 6th.

LEEDS: YORKSHIRE COLLEGE.—Demonstrator of Physiology. Salary, £50. Applications by June 10th.

READING: ROYAL BERKS HOSPITAL.—House Surgeon. Salary £60 per annum with board, lodging and washing. Assistant Medical Officer. Board, lodging, and washing provided, and honorarium of ten guineas. Appointment for six months. Applications to the Secretary by June 2nd.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—Hunterian Professors, the Erasmus Wilson Lecturer, and the Arris and Gale Lecturer. Applications to the Secretary by May 30th.

ROYAL EAR HOSPITAL, Soho.—House Surgeon, non-resident, for six months. Honorarium, 12 guineas. Applications to the Honorary Secretary by June 7th.

ST. PANCRAS AND NORTHERN DISPENSARY, 126, Euston Road, N.W.—Resident Medical Officer, unmarried. Salary, £105 per annum, with residence and attendance. Applications to H. Peter Bodkin, Secretary, 23, Gordon Street, Gordon Square, W.C., before June 6th.

ST. PETER'S HOSPITAL, Henrietta Street, Covent Garden, W.C.—House Surgeon. Appointment for six months. Salary at the rate of £100 per annum, with board, lodging, and washing. Applications to the Secretary by May 31st.

SHEFFIELD: UNIVERSITY COLLEGE.—Lecturer in Physiology. Applications to the Registrar by June 11th.

TOWER HAMLETS DISPENSARY, White Horse Street, Stepney.—Resident Medical Officer. Salary £120 per annum, with furnished rooms, coals, gas, and attendance. Applications to Dr. Corner, at the Dispensary, by June 1st.

WAKEFIELD: WEST RIDING ASYLUM.—Assistant Medical Officer for ten weeks. Salary, £3 3s. per week, with apartments and board. Applications to the Medical Director.

WOLVERHAMPTON: WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—House Surgeon. Salary £100 a year, with board, lodging, and washing. Applications to the Chairman of the Medical Committee by June 3rd.

MEDICAL APPOINTMENTS.

ANDERSON, Dr., appointed Medical Officer for the Atherington District of the Barnstable Union.

BARLING, A. S., M.R.C.S., L.R.C.P., appointed Surgeon to H.M. Prison in Lancaster Castle.

BARRETT, R. H., L.R.C.P.Lond., M.R.C.S.Eng., appointed Medical Officer for the Gedney Hill District of the Holbeach Union.

BLACK, Mr. C., appointed Medical Officer to the Sheffield Union Workhouse.

BOISSIER, A. H., M.R.C.S., L.R.C.P.Lond., appointed Honorary Medical Officer to the Horton Infirmary, Banbury.

BOULTON, Arthur, M.R.C.S., L.R.C.P.Lond., D.P.H., appointed Medical Officer of Health to the Woodhall Spa Urban District Council.

CHITALE, V. N., F.R.C.S., L.R.C.P.Edin., L.F.P.S.Glasg., appointed Assistant Medical Officer to the Aston Union Workhouse.

DIBBS, W. S., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer for the Hedgerley District of the Eton Union.

DURRAN, David, M.B., C.M.Glasg., appointed Medical Officer of Health for the Burgh of Thurso.

EDWARDS, H. J., L.R.C.S., L.R.C.P.Edin., D.P.H.Lond., appointed Honorary Medical Officer to the Horton Infirmary, Banbury, Oxon.

EDWARDS, J. Watkin, M.B., C.M.Edin., appointed Medical Officer of Health to the Tees Port Sanitary Authority, *vice* Dr. Malcomson, deceased.

EVANS, Mr. Owen, appointed Medical Officer of the Flintshire Dispensary, Holywell.

FREELAND, E. Harding, M.D., F.R.C.S., appointed Assistant Surgeon to the Hospital of St. Francis, New Kent Road, S.E.

GARFIT, C. C., M.B., Ch.B.Vict., appointed Medical Officer for the Glenfield District of the Blaby Union.

JENKINS, Edgar M., appointed Medical Officer of Health to the Calverley Urban District Council.

LESLIE, William Murray, M.D., M.Ch., F.R.C.S., appointed Assistant Physician to the Hospital of St. Francis, New Kent Road, S.E.

LONG, S. H., M.B.Cantab., L.S.A.Lond., appointed Physician to the Norfolk and Norwich Hospital.

LORY, Arthur G. B., L.S.A., appointed Medical Officer and Public Vaccinator for the Moretonhampstead District of the Newton Union.

MELLAND, Charles H., M.B.Lond., M.R.C.S., L.R.C.P., appointed Resident Medical Officer to the City of London Hospital for Diseases of the Chest, Victoria Park, E.

MILNER, E. A., M.B., C.M.Edin., reappointed Medical Officer of Health to the Lostwithiel Town Council.

PERKINS, J. J., M.A., M.B.Cantab., M.R.C.P.Lond., appointed Assistant Physician to St. Thomas's Hospital.

PRESTWICH, J., M.B., Ch.B.Vict., appointed Assistant House Surgeon to the Nottingham General Hospital.

ST. JOHN, A. S., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer for the Sixth District of the Bromley Union.

SMITH, G. Pender, L.S.A., appointed Medical Officer of Health to the Wivenhoe Urban District Council.

SYKES, Lilian Edith, L.R.C.P., L.R.C.S.Edin., M.D.Bruce, appointed Medical Officer in charge of the Dufferin Hospital, Lucknow.

TAYLOR, Frank Edward, M.A., B.Sc., Ch.B.Vict., M.R.C.S., L.R.C.P.Lond., appointed House Surgeon to the Hospital for Women and Children at Leeds.

TURNER, W. P., M.D.Durh., M.R.C.S.Eng., appointed Medical Officer to the Workhouse and School of the West Ham Union.

TURTON, Wm. H., M.B., C.M.Edin., reappointed Medical Officer of Health to the Heanor Urban District Council.

WEIR, J., M.B.Glasg., appointed Extra Dispensary Surgeon to Victoria Infirmary, Glasgow.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 8s. 6d., which sum should be forwarded in post-office order or stamps with the notice not later than Wednesday morning in order to insure insertion in the current issue.

BIRTHS.

CULHANE.—On the 10th inst., at Glin House, Hastings, the wife of F. W. S. Culhane, of a son.

DIACK.—On May 24th, at Freshwater, Isle of Wight, the wife of Patrick W. Diack, M.A., M.B., of a daughter.

ELAM.—On May 24th, at 96, Manor Road, Stoke Newington, the wife of G. Elam, M.D., of a daughter.

HARWOOD-HARDMAN.—At 17, Kensington Gardens Square, W., on May 18th, the wife of Frederick Harwood-Hardman, M.B., of a daughter.

MARRIAGES.

BURNEY—PINK.—On May 24th, at St. Mark's Church, Battersea Rise, by the Rev. E. G. Gordon, Vicar, Charles Dudley Francis Burney, M.R.C.S., L.R.C.P., to Ethel Beatrice, second daughter of John Francis Pink, of Sisters Avenue, Clapham Common.

COUTTS—GALLETLY.—On the 5th inst., Francis J. Coutts, M.D., B.S.Lond., of Leytonstone, to Jeanie S. Galletly, M.B., B.Ch.Irel., daughter of Rev. Wm. Galletly, Tillicoultry, Scotland.

WILLIAMS—CORNFORD.—On the 21st inst., at St. Nathaniel's, Bristol, by the Vicar, assisted by the Rev. W. S. Bruce, Ernest Graham Hamilton Williams, M.R.C.S. (late D.M.O. Jamaica), eldest son of Major-General Williams, late 108th Regiment and 45th Regimental District, to Mary Frances Cornford, M.B., B.S., only daughter of the Rev. N. Cornford, M.A., of Cotham, Bristol.

DEATHS.

OLIVER.—On the 22nd inst., at Westcott, Surrey, Alice Mary, wife of George Oliver, M.D., F.R.C.P., of Harrogate, aged 52.

TINLEY.—On May 24th, at Hildesheim House, Whitby, Dorothy Mary, wife of T. Tinley, M.D., J.P., aged 50 years.

DIARY FOR NEXT WEEK.

TUESDAY.

London Post-Graduate Course, Blackfriars, 4.30 P.M.—Dr. Abraham: Hospital for Diseases of the Skin, Lupus Erythematosus.

WEDNESDAY.

West London Post-Graduate Course, West London Hospital, Hammersmith Road, W., 5 P.M.—Mr. S. Paget: Surgical Cases.

Hospital for Consumption, Brompton, 4 P.M.—Dr. Maguire: Dynamics of the Chest in Disease.

Obstetrical Society of London, 8 P.M.—Specimens will be shown by Mr.

THURSDAY.

London Post-Graduate Course, Central London Sick Asylum, 5.30 P.M.—Mr. John Hopkins: Clinical Lecture.

Hospital for Sick Children, Great Ormond Street, W.C., 4 P.M.—Dr. Colman: Demonstration of Selected Cases.

Charing Cross Hospital, Post-Graduate Class, 4 P.M.—Dr. Mitchell Bruce: Demonstration of Medical Cases.

National Hospital for the Paralytic, 3.30 P.M.—Lecture by Dr. Beevor.

London Temperance Hospital, 2 P.M.—Dr. Soutar Fenwick: Clinical and Lantern Demonstration to Senior Students—Liver Diseases.

Central London Throat, Nose, and Ear Hospital, Gray's Inn Road, W.C., 5 P.M.—Dr. Dundas Grant: Tinnitus Aurium and Vertigo.

FRIDAY.

West London Medico-Chirurgical Society, 8.30 P.M.—Clinical Meeting. Cases will be shown by Dr. Potter and Messrs. Keetley, Swinford Edwards, and McAdam Eccles.

London Post-Graduate Course, Bacteriology at King's College, 3 to 5 P.M.—Dr. Wilkinson: Actinomycosis and Glanders, etc.

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.	
CENTRAL LONDON THROAT, NOSE, AND EAR.—Attendances.—M. W. Th. S., 2; Tu. F., 5. Operations.—I.-p., Tu., 2.30; o.-p., F., 2.	
CHANCING CROSS. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M. Th., 1.45; Dental, M., 9; Throat and Ear, F., 9.30. Operations.—Tu. F., S., 3.	
CHELSEA HOSPITAL FOR WOMEN. Attendances.—Daily, 1.30. Operations.—M. Th. F., 2.	
CITY ORTHOPEDIC. Attendances.—M. Tu. Th. F., 2. Operations.—M., 4.	
EAST LONDON HOSPITAL FOR CHILDREN. Operations.—M. W. Th. F., 2.	
GREAT NORTHERN CENTRAL. Attendances.—Medical and Surgical, M. Tu. W. Th. F., 2.30; Obstetric, W., 2.30; Eye, M. Th., 2.30; Throat and Ear, Tu. F., 2.30; Skin W., 2.30; Dental, W., 2. Operations.—M. W. Th. F., 2.	
GUY'S. Attendances.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu., 1; Skin, Tu., 1; Dental, daily, 9; Throat, F., 2. Operations.—Tu. F., 1.30; (Ophthalmic) M., 1.30; Th., 2.	
HOSPITAL FOR WOMEN, SOHO. Attendances.—Daily, 10. Operations.—M. Th., 2.	
KING'S COLLEGE. Attendances.—Medical and Surgical, daily, 2; Obstetric, daily, 2; o.-p., daily, 1.30; Eye, M. W. Th., 1.30; Ear, Th., 2.30; Throat, M., 1.30; F., 2; Dental, M. Th., 10; Skin, W., 11.30. Operations.—W. Th. F., 2.	
LONDON. Attendances.—Medical, daily, 1.-p., 2, o.-p., 1.30; Surgical, daily, 1.30 and 2; Obstetric, M. Tu. Th. F., 2; o.-p., W. S., 1.30; Eye, Tu. S., 9; Ear, W., 9; Skin, Th., 9; Dental, Tu., 9. Operations.—Daily, 2.	
LONDON TEMPERANCE. Attendances.—Medical, M. Tu. W. Th. F., 1.30; Surgical, M. Th., 1.30. Operations.—M. Th., 4.30.	
METROPOLITAN. Attendances.—Medical and Surgical, daily, 2; S., 9; Obstetric, W., 2; Eye, W., 2; Throat and Ear, Th., 2; Dental, Tu. Th. S., 9. Operations.—Tu. W., 2.30; Th., 4.	
MIDDLESEX. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th., 1.30; o.-p., M., 9; W., 1.45; Eye, M. Tu. Th., 2.30; Ear, and Throat, Tu. F., 9; Skin, Tu., 4; Th., 9.30; Dental, M. F., 9.30; W., 9. Operations.—Daily, 1.30.	
NATIONAL ORTHOPEDIC. Attendances.—M. Tu. Th. F., 2. Operations.—W., 10.	
NEW HOSPITAL FOR WOMEN. Attendances.—Daily, 2; Ophthalmic, W. S., 9.30. Operations.—Tu. F., 9.	
NORTH-WEST LONDON. Attendances.—Medical, daily, exc. S., 2, S., 10; Surgical, daily, exc., W., 2, W., 10; Obstetric, W., 2; Eye, W., 9; Skin, F., 2; Dental, F., 9. Operations.—Th., 2.30.	
ROYAL EYE, Southwark. Attendances.—Daily, 2. Operations.—Daily.	
ROYAL FREE. Attendances.—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Skin, Th., 9; Throat, Nose, and Ear, W., 9. Operations.—W. S., 2; (Ophthalmic) M. F., 10.30; (Diseases of Women) S., 9.	
ROYAL LONDON OPHTHALMIC. Attendances.—Daily, 9. Operations.—Daily, 10.	
ROYAL ORTHOPEDIC. 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., 2; o.-p., W. S., 9; Eye, M. Tu. W. Th. S., 2; o.-p., M. Th., 9; W. S., 2.30; Ear, Tu. F., 2; Skin, Tu., 9; Larynx, Tu. F., 2.30; Orthopedic, M., 2.30; Dental, Tu. F., 9. Electrical, M. Tu. Th. F., 1.30. Operations.—Daily, 1.30; (Ophthalmic) Tu. F., 9; Abdominal Section for Ovariectomy, F., 2.	
ST. GEORGE'S. Attendances.—Medical and Surgical, daily, 1.-p., 1; o.-p., 12; Obstetric, 1.-p., Tu. F., 1.45; o.-p., M. Tu. Th., 2.30; Eye, and Throat, Tu. F., 2; Skin, W., 2.45; Throat, F., 2; Orthopedic, F., 12; Dental, M. Tu. Th. S., 12. Operations.—Daily, 1; Ophthalmic, M., 1; Dental, Th., 9.	
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., 1.45; o.-p., M. Th., 10; Eye, Tu. F., 9; Ear, M. Th., 9; Throat, Tu. F., 3; Skin, M. Th., 9; Dental, W., 9; Electro-therapeutics, M. Th., 2.30; Children's Medical, Tu. F., 9. Operations.—M., 2.30; Tu. W. F., 2; Th., 2.30; S., 10; (Ophthalmic), F., 10.	
ST. PETER'S. Attendances.—M., 2 and 5; Tu., 2; W., 5; Th., 2; F. (Women and Children), 2; S., 4. Operations.—W. F., 2.	
ST. THOMAS'S. Attendances.—Medical and Surgical, M. Tu. Th. F., 2; o.-p., daily, 1.30; Obstetric, Tu. F., 2; o.-p., W. S., 1.30; Eye, Tu. F., 2; o.-p., daily, exc. S., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Th., 1.30; Children, S., 1.30; Electro-therapeutics, o.-p., Th., 1.30; Mental Diseases, o.-p., Th., 10; Dental, Tu. F., 10. Operations.—M. W. Th. S., 2; Tu. F., 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, exc. M., 10.	
UNIVERSITY COLLEGE. Attendances.—Medical and Surgical, daily, 1.30; Obstetrics, M. F., 1.30; Eye, M. W., 1.30; Ear, M. Th., 9; Skin, Tu. F., 2; Throat, M. Th., 9; Dental, Tu. F., 9.30. Operations.—Tu. W. Th., 2.	
WEST LONDON. Attendances.—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, Tu. Th., 2; Ear, Tu., 2; S., 10; Orthopedic, W., 2; Diseases of Women, W. S., 2; Electric, M. Th., 2; Skin, M. F., 2; Throat and Nose, Tu., 2; S., 10. Operations.—Daily, about 2.30; F., 10.	
WESTMINSTER. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, Tu. F., 9.30; Ear, Tu., 1.30; Skin, W., 1.30; Dental, W. S., 9.15. Operations.—M. Tu. W., 2.	

LETTERS, NOTES, AND ANSWERS TO
CORRESPONDENTS.

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

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

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 *Atiology, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulate, London*.

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

QUERIES.

RESPIRATORS FOR PHTHISICAL PATIENTS.

DR. E. D. SHIRTLIFF (Malvern) desires to be recommended a good form of sanitary respirator for a phthisical patient to wear when out in damp or cold air.

BICYCLE HEART.

M. writes: A patient, middle-aged has produced palpitation by cycling while in delicate health. There is no organic change in the heart, and all the valves are perfectly competent. After seven months' complete rest and treatment the slightest exertion still raises the action of the heart. 1. How long should it be before the heart thoroughly settled? 2. What is the best treatment?

BICYCLE SADDLES.

J. B. F. asks for advice as to the most suitable bicycle saddle, or seat, for a man just recovering from an operation for fistula and piles. He thinks the trouble arose from riding too forward on a long slack saddle of the ordinary pattern.

. We are indebted to Mr. E. B. Turner for the following reply to this question: Whatever saddle "J. B. F." determines to try, it will be necessary for him to be most careful in its adjustment. No saddle, patent or otherwise, will suit him unless he takes care to place it so that there is no undue pressure anywhere, and that the reach is adapted to the length of his leg. With these precautions, any good saddle will suit him, such as "Brookes, B. 28, size 3;" and of patent saddles, perhaps the 1st grade Pattison Hygienic would be the best, but he must remember that he must be just as careful about the adjustment of that saddle as of any other.

STUDENT'S MICROSCOPES.

MICROSCOPE writes: As my son, a medical student, is about to purchase a microscope, I shall feel extremely obliged for information as to the most suitable one (not too expensive) for his work. He is anxious to procure one that would ultimately be of service for bacteriological research.

. We are advised that a good microscope for the purpose and price mentioned is Swift's "Pathological" Model. It costs about £10 without oil immersion lens, which at an extra cost of £5 may be added later. A Leitz or a Reichert may be obtained at about the same price, but Swift's stands and lenses are now as good as can be obtained at "students'" prices.

ANSWERS.

M.D. DUBLIN.—There can be no objection to putting M.B. or M.D., coupled with the university after the name, on a brass plate, although we believe that such an announcement is unusual.

G.V.H.—Under the new regulations foreigners can obtain from the French universities only an academic degree of Doctor of Medicine which does not confer the right of practising in France.

WHITCHURCH.—There can be no objection to a medical man giving public lectures on non-medical topics, but care should be taken that the lectures are not advertised in such a manner or in such places as would lend colour to the suggestion that the advertisements were made partly for the purpose of attracting practice.

AVENUE.—Books on household medicine are not things lightly to be recommended to all sorts and conditions of people, for much mischief often results from amateur treatment, but as the clergyman in question is "very intelligent," we may suppose he will not trust too much to mere book knowledge. The books which we would suggest are, *A Manual of Family Medicine*, by the late Sir William Moore, or *Gardner's Household Medicine and Sickroom Guide*, a thirteenth edition of which, edited by W. H. C. Staveley, F.R.C.S., has just appeared (Smith, Elder, and Co.). The latter is practically a new work. There is a good deal of sound advice in regard to children in the new edition of *Chavasse's Advice to a Mother*, which again is an old book almost rewritten by Dr. Carpenter.

QUACK INSTITUTES.

A. H. B.—There can be only one opinion concerning the so-called institute; but as the person who is associated with it does not use medical titles, nor, so far as appears, prescribe or dispense drugs, no action would lie against him under either the Medical or Apothecaries Acts.

UNQUALIFIED DENTISTS AND OTHER PRACTITIONERS.

DOUBTFUL; MEDICO.—In the BRITISH MEDICAL JOURNAL of February 12th, 1898, p. 475, in reply to a similar question, we pointed out that a registered medical man who, by administering anaesthetics to the patients of an unqualified dentist or other unqualified practitioner, thereby enables the latter to practise as if he were duly qualified, would probably be held to have rendered himself liable to be convicted of the offence known as "covering." If convicted, his name might be erased from the Register by order of the General Medical Council.

MIDWIFERY ENGAGEMENTS.

PERPLEXED.—It is usual for medical men to help each other by attending each for the other midwifery cases during unavoidable absence. It is rather a general custom afterwards to share the fee, though there is no fixed rule. "Perplexed" has so far acted his part thoroughly and well. He attended the case, and wrote to A. that he was acting for him, and also explained this to the patient. Now he is aggrieved because A. has not acknowledged his letter; and further because at his last visit to the patient nothing was said about a fee. He asks: Shall I demand a fee? and shall I attend them as my own patients should they summon me by-and-bye? "Perplexed" cannot now ask for a fee. So far his conduct