

ECZEMA TREATED BY X RAYS.

By C. THURSTAN HOLLAND, M.R.C.S.,
Honorary Medical Officer in Charge of the X-Ray Department, Royal
Southern Hospital, Liverpool.

ON December 7th, 1898, P. T., a young woman aged 19, was sent to me, with the following history: About a year ago she was operated on for a swelling on the left hand, over the metacarpal bone, and pus was evacuated. The wound soon healed, but immediately afterwards an eruption broke out around the scar and gradually extended over the back of the hand and up the fingers. For five months she had been attending as an out-patient at the skin department of one of the hospitals, but stated that the affection was getting worse and worse. The hand presented the appearance shown in Fig. 1.

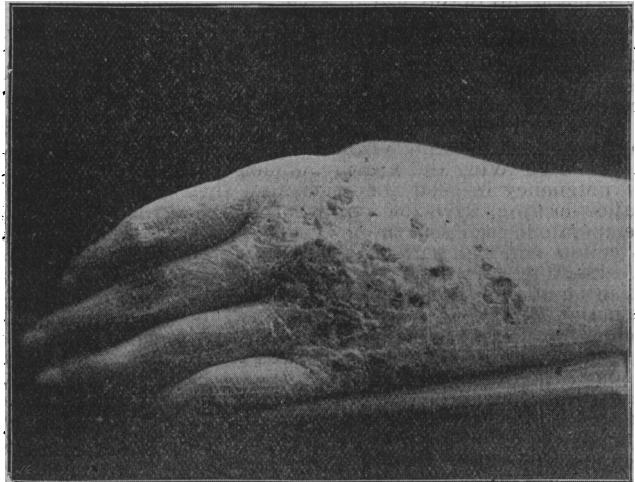


Fig. 1.—Chronic eczema of the hand. Before treatment by x rays (December 7th, 1898).

A chronic eczematous eruption covered the whole dorsum; the skin was thickened, very scaly, and cracked all over; and there were a large number of adherent, blackened scabs, the largest just between the bases of the middle and ring fingers.

All other treatment was stopped, and the hand was exposed seven times—on December 7th, 12th, 16th, 19th, 24th, and 29th, 1898, and January 3rd, 1899—to an active x-ray tube. The apparatus used consisted of a 10-inch coil, worked from a 6-cell accumulator through a resistance, and fitted with a

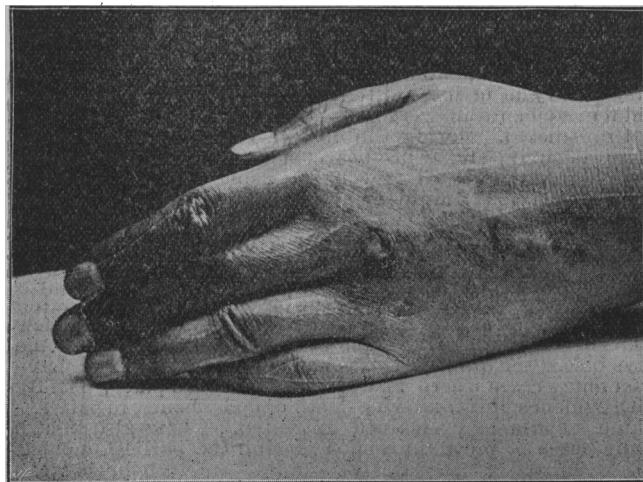


Fig. 2.—After treatment by x rays (February 18th, 1899).

mercury interruptor. A Zehnder tube was used on four occasions and one supplied to me by Mr. Isenthal on the other three. The lower edge of the glass of the tube was distant

from the hand from 4 to 7 inches; each exposure was fifteen minutes in duration. No inflammatory change was noticed at any time; on the date of the last exposure (January 3rd) the scabs were loose and were picked off, and most of the scales had also disappeared; a small ulcer was found under the large scab referred to above. No further treatment was adopted, and on February 18th the condition was as is shown in Fig. 2.

All eczema has quite disappeared and the hand is well. The mark at the base of the middle and ring fingers and the other mark in a line with it on the back of the wrist are due to scarring; the scars are quite free from disease—in short, the case is cured. The explanation is probably that the x rays had a stimulating effect on the tissues of the diseased area, stimulating them and thus enabling them to bring about a cure.

MEMORANDA:

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

OBSTINATE HICCOUGH.

MR. R. W. S. CHRISTMAS's interesting "memorandum" on the above subject appears to invite comment or confirmation as to the value of nitroglycerine in such cases. Some eight years ago I treated a lady between 30 and 40 years of age for a violent hiccough, which, sometimes once or twice repeated and occurring at varying intervals, made it almost impossible for her to mix in society. The digestion was treated by diet, regimen, and various internal remedies without result. Nerve sedatives were no more efficacious. At length I prescribed tabloids of $\frac{1}{10}$ grain of nitroglycerine to be taken two or three times a day, and in addition every time the condition threatened to recur. The effect was immediate and the malady was subdued in about a fortnight. Two years later there had been no recurrence.

Upper Brook Street, W.

W. BEZLY THORNE.

I SHOULD like to add my experience of an aggravated case of this troublesome affection to the two reported in the BRITISH MEDICAL JOURNAL of March 11th and 18th, and to record the action of a remedy which proved absolutely instantaneous in its action. In the summer of 1894 a gentleman, aged about 30, came to my house in the middle of the night accompanied by a friend, and I could distinctly hear down my speaking tube a loud noise like the barking of a dog, the noise subsequently proving to be emanating from my patient, who was in a most exhausted and distressed condition from the violence of the seizure. He was quite unable to speak, and his companion informed me that he had had several previous severe attacks, and had been prescribed various drugs, including prolonged chloroform anaesthesia and hypodermic injections of morphine. I gave him a drachm of oil of turpentine in a little mucilage, and it acted like a charm; all symptoms disappeared immediately, and he was not troubled again during the few days he was under my notice. The man was a summer visitor, and I have not heard of him again, but he assured me he would never be without oil of turpentine in the house. The simplicity and effectiveness of the remedy appear to me to make the case worth recording.

Dovercourt.

HAROLD GURNEY.

A CASE of obstinate and violent hiccough in a young man came under my treatment a few years ago. There was no discoverable cause for the hiccough, which lasted for several days. It was treated by morphine and chloroform, but as very slight improvement occurred, a blister was applied on each side of the cervical spine over the origins of the third, fourth, and fifth cervical nerves, in the hope of influencing the phrenic nerves. This stopped the hiccough in a few hours.

Lincoln. E. MANSEL SYMPSON, M.D., M.R.C.S., B.C.

DISLOCATION OF THE RADIO-CARPAL JOINT. On looking over the latest volume of the New Sydenham Society's publications—Professor Helferich on *Fractures and*

Dislocations—the other day, I found it there stated that only some thirty cases of undoubted dislocation of the radio-carpal articulation have been recorded. That the accident was a rare one I knew, but I did not know before that so few undoubted cases had been put on record, and I hasten accordingly to record the thirty-first. It happened here, in December, 1898, to a strongly-built young man of about 25 years of age. I saw him a few minutes after the accident and found a complete dorsal dislocation of the right radio-carpal joint without any fracture. Reduction was most easily accomplished by extension and slight pressure on the protruding carpus. In a fortnight he had practically full use of the joint.

His story of the cause of the accident was that while separating two men who were fighting in a publichouse, one of them pushed him over and he fell heavily on his right hand which was fully flexed at the wrist.

Forfar. J. D. L. MACALISTER, M.B., C.M.

EXCISION OF BREAST SCIRRUS: "RECURRANCE" NEARLY TWELVE YEARS AFTERWARDS.

MRS. M., aged 42, had the right breast excised for a scirrrous growth, of "hazel-nut" size, in January, 1887. It had been noticed five weeks. The patient was a small, spare, lachrymose woman, of rather alcoholic tendencies. The axillary glands were tender on pressure, but not enlarged. They were all carefully removed.

There was no after-treatment, and the patient was not seen again till November, 1898, when she returned with an ill-defined, hard nodule fixed to the fourth rib, below the scar, and causing the usual lancinating pain. This was excised in January last, and proved a typical carcinomatous deposit. The cicatrix and axilla were healthy. There was no sternal prominence or other indication of "insidious marrow infection."

I venture to record this case because at first sight it seems to controvert my fairly well-known views. These patients ordinarily betray marrow deposit at the time of operation; or, if not, the physical signs appear soon afterwards. Unless held in control by opium, that condition gives rise to "recurrent nodules" in two or three years as an average rule. *Per contra*, a lady from whose chest wall I removed two large "recurrent" masses in May, 1891, and who has taken a small nightly dose of nepenthe ever since, has betrayed no reappearing deposit to the present time, although palpable signs of marrow infection were then present.

Here there were never any physical signs of marrow deposit, and no opium treatment. The reappearance seems referable to a minute residual nidus of carcinoma cells, enclosed in scar tissue, which markedly inhibits their growth. A tiny nodule can be felt on palpation, but for several years caused no inconvenience to the patient. Of this event I have seen several instances. At all events, the case may be commended to the notice of any who still uphold the familiar dictum of Volkmann.

Gloucester Place, W.

HERBERT SNOW.

OPERATIVE TREATMENT OF DISTENDED SMALL INTESTINE IN ACUTE OBSTRUCTION AND IN ACUTE PERITONITIS.

AUTHORITIES are now fairly agreed that thorough evacuation of the bowel above the obstruction is the key to the treatment of these cases. During the last seven years I have had opportunities of watching the results in upwards of a hundred cases of this nature. As might be expected, the worst results have occurred where, by a long operation, the damaged bowel has been excised, and the ends united by simple suture or a button or bobbin. Somewhat better are those in which the bowel has been emptied by multiple enterotomies, the incisions being closed at once. The best are those in which a temporary enterostomy has been performed, and the artificial anus closed later when the patient is unpoisoned. To perform a prolonged operation on a poisoned patient is generally futile, and if in addition to this a Murphy's button is inserted, its lumen is so small that the patient is left with what is, to all intents and purposes, a partial obstruction, not to mention the tendency of the button to cause kinking by its weight.

Enterotomy will, in time, empty the bowel, but does not provide for the escape of fluids secreted afterwards, and which

very quickly redistend the bowel, in the same way that a distended urinary bladder is quickly refilled after evacuation. Temporary enterostomy meets this objection. In fact if the surgeon called in to operate on a case of acute obstruction were to leave his Murphy's button or somebody's bobbin at home, and take instead a simple glass tube with which to drain the distended intestine, it would be better for both himself and the patient. In recent years Treves, by employing this method for all acute cases, has reduced his mortality one half.

Plymouth. C. HAMILTON WHITEFORD, M.R.C.S., L.R.C.P.

HÆMORRHAGE FROM THE BOWELS IN A CASE OF GRANULAR KIDNEY.

In the third of the Lettsomian Lectures on some clinical aspects of granular kidney, in the BRITISH MEDICAL JOURNAL of March 11th, 1899, Dr. Samuel West calls attention to the fact that haemorrhage may occur from almost any part of the body, and instances one case of haematemesis and one case of haemorrhage from the bowel. The following case appears to be an instance of the last-named variety.

On January 18th I was called about 10.30 P.M. to see an old lady, aged 72. Her friends gave a somewhat confused history of her illness to this effect: A few hours previously, whilst at the house of a relative, she had some sort of attack described as a "fit." She appeared to lose consciousness for a few minutes, then recovered to some extent. The statement was made spontaneously by one of her friends that she "appeared to trail one leg" on attempting to walk. She was conveyed home and put to bed. When I saw her she was in bed, breathing rather quickly and muttering incoherently, apparently in a condition of low delirium. There was a slight elevation of temperature, and a slight amount of cardiac dilation. The pulse was rapid, hard, and tense. I could find no signs of paralysis. The only treatment I then ordered beyond the necessary directions for nursing was a mild aperient.

Next morning she was still in a state of low delirium, but the pulse was quieter and the temperature just above normal. The patient had had a copious evacuation of the bowels, partly involuntary as far as I could ascertain. I requested a specimen of the urine to be preserved for me, but was unable to obtain one for some time—not until after the acute stage of her attack had passed off. The urine then was slightly acid, specific gravity 1008, with a slight trace of albumen.

In the evening she was quite sensible, but I was informed that about 4 P.M. an attack of diarrhoea had set in. I did not think it necessary to try to check this at once. Next morning (January 20th) I heard that the diarrhoea had continued all night, and on inspecting the stools discovered that they consisted almost entirely of pure blood. On further inquiry I found that the so-called "diarrhoea" of the day before was the passage of blood with a small quantity of faeces.

I examined *per rectum* to see if there was any local condition which would account for the haemorrhage, but could find nothing, nor could I obtain any history which would point to any definite cause. As the haemorrhage continued at intervals throughout the day, I tried to check it by giving a mixture of bismuth and chalk, but it had no effect. For the next two days it still continued, and I tried bismuth, catechu, ergot, and acetate of lead in full doses, but failed to arrest the haemorrhage.

On the morning of January 22nd the patient was becoming so exhausted that I determined, in opposition to the usual practice in cases of granular kidney—for such was my diagnosis—to give small doses of opium. Accordingly I gave her 5 minim doses of tinct. opii, with bismuth and mucilage, and this speedily took effect. The medicine was given every two hours for three or four doses, then the interval was gradually lengthened, and in two or three days the haemorrhage had practically ceased. The patient began to recover rapidly. She is now apparently in her usual health.

It may be said that this case cannot be accepted as a true example of granular kidney on account of the difficulty of confirming the diagnosis by other means, and also excluding absolutely all other causes of haemorrhage, but after careful investigation it appeared to me to be the only explanation of the case.

ALLAN I. PETYT, M.A., M.B., B.C. Cantab, L.S.A. Lond. Longton, Lancs.

into Devonshire, and was an ardent photographer when wet process plates had to be used. He was a consistent Christian, kind and gentle, sympathetic and loving, and was himself beloved and revered by many friends. He leaves five sons, all of whom are in the colonies, and three daughters.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries and the colonies who have recently died are Dr. Ramon Felix Capdevila y Ferrer, some time Professor of Clinical Medicine in the University of Madrid, Member of the Royal Academy of Medicine, Grand Cross of the Royal and Distinguished Order of Isabel the Catholic, etc.; Dr. Anastasios Zinnis, Professor of Children's Diseases in the Medical Faculty of the University of Athens; Dr. Henry Hover Wright, formerly Lecturer on the Practice of Medicine in the Toronto School of Medicine, and one of the most active promoters of the Ontario Medical Council, of which he was president for a time, aged 82; Dr. John R. Schneller, Director of Health and Charities of Columbus, Ohio, and President of the Columbus Crematorial Association, aged 61; Dr. Karl Rückert, of Coburg, son of the distinguished German poet, aged 78; Dr. Eugen Leitz, of Wiesbaden, a well-known German clinician, some time Professor in the University of Giessen, aged 83; Dr. Alfred Graefe, of Weimar, the eminent ophthalmologist, formerly Professor in the University of Halle, aged 67; Dr. Josef Engel, some time Professor of Pathological Anatomy in the Josef's Academie, Vienna, and a former assistant of Rokitansky, aged 83; Dr. Jules Girard, Professor in the Medical School of Marseilles; Dr. Theodor Neustetter, Professor of Children's Diseases in the University of Prague, aged 70; Dr. Kahlbaum, Medical Superintendent of the Görlitz Asylum, a well-known specialist in mental diseases; and Dr. Schorstein, described as the Nestor of the hydrotherapeutists of Odessa, aged 81.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

EXAMINATION IN SANITARY SCIENCE FOR THE DIPLOMA IN PUBLIC HEALTH.—The following candidates have satisfied the Examiners in both parts of the examination:

T. W. N. Barlow, H. H. Borland, S. Copley, A. E. Druiett, W. F. Grant, J. C. W. Halliday, E. F. Harwood, G. F. McCleary, J. M. Martin, E. W. G. Masterman, P. Murison, A. A. Mussen, J. T. C. Nash, E. L. Parry-Edwards, B. L. Paton, A. M. N. Pringle, H. J. Spon, C. M. Vernon, Ethel Mary Nucella Williams.

UNIVERSITY OF GLASGOW.

GRADUATION CEREMONY.

THE usual Graduation Ceremony at the close of the winter session took place in the Bute Hall on April 15th. There was a crowded attendance, and the ceremony passed off in a most satisfactory manner. The Earl of Stair, Chancellor of the University, presided, and was supported by the Principal and a large representation of the University staff, and several members of the Corporation. After the "capping," Principal Story delivered a short address.

Amongst the honorary degrees conferred was that of Doctor of Laws (LL.D.) on Dr. James Finlayson. In presenting Dr. Finlayson Professor Moir said:

"Dr. James Finlayson, a Graduate in Medicine of this University, Physician and Lecturer on Clinical Medicine in the Western Infirmary, Physician to the Royal Hospital for Sick Children, and Fellow and Honorary Librarian of the Faculty of Physicians and Surgeons of Glasgow. Educated at the High School of Glasgow and the arts classes here, Dr. Finlayson received from this University in 1867 the degree of Bachelor of Medicine with honours, and in 1869 he graduated as Doctor of Medicine. Dr. Finlayson is not only a man of the highest standing amongst his brethren, but he has through strikingly original and trustworthy contributions to medical literature attained a wide reputation as an erudite and skilful physician who is not merely accurate in detail, but has a strong and clear insight into principle. In his *Clinical Manual* he has conferred a most estimable boon on hospital students, and by numerous original investigations recorded in the medical journals he has shed much light on the diagnosis, pathology, and treatment of internal disease. And while thus enlarging the modern bounds of the science, he has found time for important and valuable contributions to the history of medicine. His careful researches in Greek and Roman and the more ancient Egyptian medicine, his account of the life and works of Maister Peter Lowe, the founder of the Faculty of Physicians and Surgeons of Glasgow, and his account of the life and works of Dr. Robert Watt, author of the *Bibliotheca Britannica*, are well known, and full of interest to all students of medical history. But what has seemed to my colleagues specially to deserve the distinction which we desire you to confer upon him is not merely the success of Dr. Finlayson as a practitioner, or even as a teacher of medicine, but the fact that throughout his career he has followed these occupations in an eminently academic spirit, and by his unwearied interest in and care of the great medical library of the Faculty of Physicians and Surgeons has made it one of the most com-

prehensive and valuable collections in this country. For these reasons has appeared to the Senate that Dr. Finlayson is eminently worthy of the honour which I now ask you to confer upon him."

The following degrees were conferred:

Doctor of Medicine (M.D.).—*C. S. Marshall, M.B., C.M.—Thesis: *Anti-streptococcus Serum, its Application in the Treatment of Scarlatina Anginosa*; *E. J. Primrose, M.A., M.B., C.M.—Thesis: *Notes on the Method and on the Diagnostic Value of the Serum Reaction (Widal's Test) in Enteric Fever and in 22 other cases*; D. Macdougall, M.B., C.M.—Thesis: *The Treatment of Typhoid Fever by Carbolic Acid*; J. S. Rosser, M.B., C.M.—Thesis: *The Literature of the Creosote Treatment of Pulmonary Tuberculosis, with an account of 3 cases in which Large Doses were exhibited*; W. J. M. Slowman, M.B., C.M.—Thesis: *Version for Contraction of the Pelvic Brim, with an account of 12 cases personally conducted*; W. S. Young, M.B., C.M.—Thesis: *Cocaine as a Local Anaesthetic, with special reference to its use in Tooth Extraction*.

* With commendation.

The degree of Doctor of Science was conferred on R. Kennedy, M.A., B.Sc., M.D.

PRIZES.—Dr. Robert S. Thomson and Dr. John W. Findlay were both presented with Bellahouston Gold Medals for excellence of their theses for the degree of M.D. previously conferred.

INDUCTION OF PROFESSOR OF PATHOLOGY.—On April 19th, Dr. Robert Muir was inducted to the office of Professor of Pathology, and, having signed the declaration *de fideli administratione* took his seat as a member of the Senate.

UNIVERSITY OF DURHAM.

SECOND EXAMINATION FOR THE DEGREE OF BACHELOR IN MEDICINE.—The following candidates have satisfied the Examiners:

Anatomy, Physiology, Materia Medica.—V. B. Nesfield,* St. Mary's College, W. G. Robson,* College of Medicine, Newcastle-upon-Tyne; A. B. Bradford, St. Thomas's Hospital; Mary Evelyn De Rustett, College of Medicine, Newcastle-upon-Tyne; Alice Maud Dodd, London School of Medicine for Women; Mary Jane D'Vaz, London School of Medicine for Women; Letitia Nora Ede, College of Medicine, Newcastle-upon-Tyne; H. W. Furnivall, University College, London; J. A. Giles, College of Medicine, Newcastle-upon-Tyne; Chella Mary Hankin, London School of Medicine for Women; Katherine Mary Helen Hawkins, London School of Medicine for Women; W. C. Hayward, M.R.C.S., L.R.C.P., Charing Cross Hospital; Guy Hannah Kirby, Mason College, Birmingham; H. R. Kendal, College of Medicine, Newcastle-upon-Tyne; K. Manson, College of Medicine, Newcastle-upon-Tyne; L. M. Markham, College of Medicine, Newcastle-upon-Tyne; L. C. Newton, College of Medicine, Newcastle-upon-Tyne; E. E. Norman, College of Medicine, Newcastle-upon-Tyne; H. H. Ruffmann, College of Medicine, Newcastle-upon-Tyne; D. R. Roberts, College of Medicine, Newcastle-upon-Tyne; C. A. Ryman, St. George's Hospital; H. Widdas, College of Medicine, Newcastle-upon-Tyne; F. G. Wilson, College of Medicine, Newcastle-upon-Tyne; T. Wilson, College of Medicine, Newcastle-upon-Tyne.

* Second-class honours.

ROYAL UNIVERSITY OF IRELAND.

SECOND EXAMINATION IN MEDICINE.—The Examiners recommend that the following candidates be adjudged to have passed the examination:

Upper Pass.—R. J. Bethune, Queen's College, Belfast; T. A. Carson, Queen's College, Belfast; W. Phillips, B.A., Queen's College, Belfast; E. T. Tuckey, Queen's College, Cork; T. Walsh, Queen's College, Galway; J. S. F. Weir, Queen's College, Belfast.

The above may all present themselves for the further Examination for Honours.

Pass.—Marion B. Andrews, Queen's College, Belfast; R. Best, Queen's College, Galway; Catherine L. Boyd, Queen's College, Belfast; W. H. N. Bright, Queen's College, Belfast; J. G. Campbell, Queen's College, Belfast; J. H. Campbell, Queen's College, Belfast; J. Corker, Queen's College, Belfast; A. T. Frost, Queen's College, Cork; D. Gleeson, Queen's College, Cork; Elizabeth S. Graham, Queen's College, Belfast; R. W. Harper, Queen's College, Belfast; P. Heffernan, Catholic University School of Medicine; M. J. Laffan, B.A., Catholic University School of Medicine; L. J. Lunham, Queen's College, Cork; M. J. Macaulay, Queen's College, Cork; J. McClatchey, Queen's College, Belfast; S. B. W. Moore, Queen's College, Belfast; A. J. Quirk, Catholic University School of Medicine; Jane E. Reynolds, Queen's College, Cork; F. W. Stewart, Queen's College, Belfast; W. A. Stoops, B.A., Queen's College, Belfast.

UNIVERSITY OF DUBLIN.

At the First Summer Commencements, held in the Theatre of Trinity College on Thursday, April 20th, the Degree of Doctor in Medicine was conferred on Mr. J. P. MacLulich.

CONJOINT BOARD IN IRELAND.

FIRST PROFESSIONAL EXAMINATION.—Candidates have passed this Examination as undernoted:

In all Subjects.—E. Ellenbogen,* J. S. Ashe,* J. Grace, P. J. Irwin, T. Keogh, T. J. Cloyd, J. P. Ziervogel.

Completed the Examination.—W. Cremin, E. C. Jennings, P. M. Sheridan, J. Stuart, F. C. Yorke.

In Anatomy.—W. H. Bournes, D. E. Crosbie, P. Holmes, J. P. Maher, R. Martin, P. McDermott, F. G. A. O'Brien, E. J. Phillips, J. M. J. Rhatigan.

In Biology.—W. H. Bournes, D. E. Crosbie, P. Holmes, W. R. K. Magill, P. McDermott, F. G. A. O'Brien, E. J. Phillips.

In Pharmacy.—W. H. Bournes, D. E. Crosbie, J. F. Farrell, W. R. K. Magill, J. P. Maher, R. Martin, P. McDermott, F. G. A. O'Brien, J. V. O'Hagan, J. M. J. Rhatigan.

* In honours.

SECOND PROFESSIONAL EXAMINATION.—Candidates have passed this Examination as undernoted:

In all Subjects.—Miss M. J. Shire,* H. L. Becker.*

Completed the Examination.—A. L. Barry, N. J. Connolly, P. L. Crosbie, R. R. Faussett, P. A. Frazer, P. J. Hanafin, J. J. Harty, R. W. Hillis, J. J. Huston, F. J. Lennon, M. E. Lynch, J. R. Magee, C. J. O'Connor, C. R. M. Pattison, W. M'M. Phelan, J. C. Ryan, G. A. Sexton, S. A. Tucker, R. O. White, T. J. Wright.

In Anatomy.—F. J. Cahill, B. D. Gibson, D. Gillies, A. H. B. Hartford, J. Hennessy, J. B. Logan, Miss Logan, J. Nash, R. C. Nicholl, R. N. G. Oniton, C. F. P. Plunkett, M. C. Sage, G. B. Wilkinson.

In Physiology.—Miss Driver, A. H. B. Hartford, E. W. Knight, J. B. Logan, J. P. O'Donnell.

In *Materia Medica*.—C. H. Browne, F. W. Bruncker, F. H. Cooke, H. T. Cookman, Miss Driver, W. N. Eustace, J. F. Fitzmaurice, J. Hennessy, C. F. P. Plunkett, M. C. Sage, J. H. White, G. B. Wilkinson.

In *Pathology*.—W. H. Anderson, F. J. Cahill, H. T. Cookman, D. Gillies, A. H. B. Hartford, J. B. Logan, R. P. McDonnell, C. F. P. Plunkett, R. C. Nicholl, G. B. Wilkinson.

* In honours.

SOCIETY OF APOTHECARIES OF LONDON.

PASS List, April, 1899.—The following candidates passed in:

Surgery.—C. J. Barnes, King's College Hospital; W. F. C. Bennett (Section I), Sheffield; H. E. Dalby, Charing Cross Hospital; A. G. C. Davies (Section II), Guy's Hospital; T. S. Elliot (Section I), London Hospital; H. L. Hands, Madras and Charing Cross Hospital; H. C. Holden, Guy's Hospital; J. J. Huey, Glasgow; W. S. Inman (Sections I and II), Sheffield; J. W. Robertson, Kingston, Ontario; W. Sisam (Section I), Birmingham; S. Sugden, Manchester and St. Mary's Hospital; L. L. G. Thorpe, University College Hospital; W. H. Willcox, St. Mary's Hospital.

Medicine.—J. M. Anderson, Aberdeen and Middlesex Hospital; F. W. Chesnaye (Section II), St. George's Hospital; J. T. Davies (Sections I and II), Michigan; H. S. A. Davies (Section II), Michigan; W. J. Evans, London Hospital; H. Greenwood, London Hospital; W. Hickey (Section I), Manchester; W. St. G. G. Hill, St. Mary's Hospital; G. C. Hobbs (Section I), St. Bartholomew's Hospital; W. S. Inman (Sections I and II), Sheffield; L. Leibster, Vienna and London Hospital; W. P. R. Newth, St. Thomas's Hospital; H. J. Pickering (Section I), St. Bartholomew's Hospital; A. H. Safford, King's College Hospital; W. Sisam (Section I), Birmingham; L. K. Tickner, Durham; J. M. Twentyman, Cambridge and King's College Hospital.

Forensic Medicine.—J. M. Anderson, Aberdeen and Middlesex Hospital; C. F. W. Dunn, Cambridge and Middlesex Hospital; W. J. Evans, London Hospital; T. R. Griffiths, University College Hospital; W. Hickey, Manchester; W. St. G. G. Hill, St. Mary's Hospital; G. C. Hobbs, St. Bartholomew's Hospital; W. S. Inman, Sheffield; E. P. Maret, St. Thomas's Hospital; G. S. Moore, London Hospital; H. J. Pickering, St. Bartholomew's Hospital; J. W. Robertson, Kingston, Ontario; A. H. Safford, King's College Hospital; W. Sisam, Birmingham; J. Thompson, Belfast; J. M. Twentyman, Cambridge and King's College Hospital; E. D. Wortley, St. Bartholomew's Hospital.

Midwifery.—G. Aldridge, London Hospital; C. J. Coleman, Cambridge and Birmingham; A. B. Dunn, Cambridge and Leeds; E. L. Gowland, St. Mary's Hospital; H. M. Hardy, Guy's Hospital; J. E. Howroyd, Leeds; W. S. Inman, Sheffield; O. E. Lemin, London Hospital; B. S. O. Maunsell, St. Bartholomew's Hospital; W. E. Maw, Leeds; T. C. Mitchell, Leeds; G. S. Moore, London Hospital; S. Page, Birmingham; A. C. S. Waters, St. Bartholomew's Hospital.

The Diploma of the Society was granted to the following candidates: C. J. Barnes, C. J. Coleman, H. E. Dalby, A. G. C. Davies, H. L. Hands, J. J. Huey, W. S. Inman, L. Leibster, E. P. Maret, A. H. Safford, and S. Sugden.

MEDICO-LEGAL.

ACTION AGAINST A SURGEON.

THE *Manchester Guardian* in its issue of April 20th reports the case of *Kite v. Gunn*, which is one of some interest to the profession. The plaintiff was defendant's coachman and sustained a compound fracture of his right arm through a fall from a trap. He was first treated at the Stockport Infirmary, where his arm was put in splints and bandaged up. Three days after the accident Dr. Gunn examined the injured part, and considering that all was going on well, continued the same treatment. Later on he put the arm in plaster of paris. Repair did not take place properly and considerable deformity resulted. Subsequently, the patient being dissatisfied, brought an action against the doctor, alleging that his injury had not been properly treated, the bone not having been "set." Medical evidence was given for the plaintiff to the effect that the bone had been "set" properly at the infirmary, but owing to the treatment of the defendant the fragments had been separated. For the defence medical evidence was given that the fracture had originally been a very serious one; the house-surgeon who originally attended the case at the infirmary stating that he then formed the opinion that the result would be an exceedingly bad one. Mr. William Thorburn and Mr. Walter Whitehead both gave it as their opinion that the defendant had been guilty of no neglect, and that the plaintiff's present condition was very likely to have come about even with the best treatment. The jury without hearing counsel found a verdict for the defendant. The defence was conducted for Dr. Gunn by the Medical Defence Union, of which he was a member.

A DOCTOR'S LIBEL ACTION.

BEFORE Lord Chief Baron Pálles and a special jury, an action for libel and slander was decided in Dublin last week, the plaintiff being Dr. Edward Thompson, of Omagh, and the defendant, Mr. Falls, a solicitor. The action arose out of the contest at the late election for the parlia-

mentary representation of North Fermanagh. It appeared that in the case of two men charged with murder, Dr. Thompson and others were examined, and stated their belief that death was due to natural causes. In the course of a speech, the defendant stated that the plaintiff had turned himself from a professional witness into an advocate, and had been reproved by the Lord Chief Justice for his gross partiality. The defence was that the words were not spoken of the plaintiff in relation to his profession, and that the defendant had not caused their publication in the newspapers. After two days' trial, the jury found for the plaintiff, assessing the damages at £25 for each of two speeches.

MEDICAL WITNESSES' FEES AT CORONERS' INQUESTS.

AN inquest was recently held by Mr. Alfred Hodgkinson, the Coroner for East Middlesex, on the body of Margaret Main, who, it appeared from the evidence, had been subject to fits caused by heart disease, and who on April 11th was taken to the hospital in consequence of having been buried. She had apparently fallen in a fit near the fire and her clothing had ignited. Dr. Tomlin stated that he was called, and found deceased lying as described by the previous witness. She was fearfully burned, and he gave directions for her to be removed to the hospital, where he continued to attend her, but there was not the least hope of her recovery from the first. The jury returned a verdict of accidental death. The coroner stated that, the deceased having died in the hospital, he was unable to pay Dr. Tomlin the usual fee for giving evidence. He had shown the doctor instructions issued by Sir Richard Nicholson, who pointed out that if payment were made in such cases the Government auditor would not allow it. Several jurors expressed their sense of the unfairness of the medical witness's fee being withheld, especially after the gratuitous aid which had been given to the deceased.

We have frequently had occasion to comment on the unfairness of the provisions of the Coroners' Act under which, where an inquest is held on the body of a person who has died in a..... public hospital.....or other medical institution, the medical officer, whose duty it may have been to attend the deceased person as a medical officer of such institution, is not entitled to the prescribed fee for giving evidence at an inquest or for making a *post-mortem* examination.

It does not, however, seem to be clear in this case that Dr. Tomlin comes within the exception provided for in the Act. It is the "medical officer whose duty it may have been to attend the deceased person as medical officer of the institution" who is not to be entitled to the fee or remuneration. If Dr. Tomlin were called to the deceased in a private capacity, he surely is entitled to the fee for giving evidence.

MIDWIFERY FEES.

JUNIOR was engaged to attend labour at a fee of three guineas. His services not being required, he was not called. Should he charge whole or part of fee—if part, what proportion?

* * What our correspondent would get if his claim were disputed would depend upon the particular view taken by the county court judge, the evidence he would want as to the terms of the engagement, and his view of the terms. Our correspondent, if he asked for half, would be more likely to get it than if he asked for the whole.

MEDICAL CERTIFICATES.

A CORRESPONDENT writes on behalf of himself and colleagues, surgeons of a medical charity, that the managing committee of the institution have issued instructions that in future the diagnosis must be appended to certificates handed to patients requiring written testimony of their inability to work. The nature of the illness must always be specified; whether, in the opinion of the surgeon or in that of the patient, it is desirable to do so or not. Our correspondent adds that the possibility of legal complications having been mooted, the surgeons are informed that the Committee are prepared to take all responsibility. The surgeons are anxious to ascertain (1) whether the law would recognise such assumed responsibility; and (2) what they ought to do under the circumstances.

* * If, in the exercise of their discretion, the governing body of the institution in question desire that the nature of the complaint should be stated on the certificate, we are advised that they are at liberty to make such a regulation as mentioned by our correspondent. We understand—and we lay particular stress on this—that the certificate would be handed to the patient, and would only be transmitted to his club or his employer or other person by the patient himself or with his express sanction, and this being so we do not think that any responsibility could attach either to the charity or to the surgeon signing the certificate in accordance with the regulations of the charity. Of course care would have to be taken in acquainting the patient with the nature of the disease before the certificate was transmitted, and it would be desirable in every case to have his written authority for its transmission. For instance, a form might be kept and signed by the patient to this effect: I am informed that I am suffering from —, and I request that a medical certificate to that effect may be forwarded to —. There is no method of absolutely safeguarding either the governing body of the charity or the surgeons who give the certificates from an action; and although if the above formalities are observed it is very unlikely that any such action would be successful, the surgeons may reasonably ask the governing body for a written indemnity. We have been made acquainted with the fact that in one large hospital where prior to the action of *Kitson v. Playfair* it was the practice to insert the nature of the disease in medical certificates, this practice has since the decision in that case been discontinued.

MEDICAL NEWS.

LORD LISTER has consented to become the first President of the St. Mary's Children's Hospital at Plaistow.

THE Middlesex Hospital has received the sum of £1,050 from the executors of the late Hon. Maria Louisa Carlton to endow a bed in the new cancer wing.

At the last meeting of the Cardiff Urban Sanitary Authority the salary of the medical officer of health, Dr. E. Walford, was increased from £700 to £750 per annum.

THE annual dinner of old students of King's College, London, will be held at the Holborn Restaurant on Monday, June 26th. The chair will be taken by Dr. W. S. Playfair, Emeritus Professor of Obstetric Medicine.

SUCCESSFUL VACCINATION.—Mr. C. Penruddocke, public vaccinator for the Stapleford District of the Wilton Union, has been awarded the Government grant for efficient vaccination, and Mr. Aird Jolly, public vaccinator for the Acton District, has received the grant for the second time.

A COURSE of six demonstrations in practical Roentgen ray work will be given at Charing Cross Hospital by Mr. Mackenzie Davidson on Wednesday mornings from 10 till 12, commencing on May 10th. The course will be limited to 24, and the fee will be 2 guineas. Further particulars can be obtained from the Dean.

SOCIETY FOR THE STUDY OF INEBRIETY.—At the annual meeting held on April 13th, the President (Dr. Norman Kerr) in the chair, a reception was given to Drs. T. D. Crothers and Shepard, U.S.A. The President cited cases in which the different provisions of the new Inebriates Act had been put in operation. Dr. Crothers called attention to the great advance in the recognition of the disease aspect of intemperance, and Dr. Shepard referred to the value of the Turkish bath in the treatment of inebriety. Dr. Stephen Lett read a paper on the Cocaine Habit.

INTERMEDIATE EDUCATION.—The Duke of Devonshire, speaking at Presteign recently, praised the public interest in education displayed by Wales. Both Wales and Scotland shame England in these matters, but it is to be hoped that even here the move has begun. There seems to be a growing interest in technical education for commercial purposes, whether in languages and bookkeeping for clerks, or in natural science for those engaged in manufacture. Education has two aims—to make good citizens, and to help men to earn a living. We have attended to the first but not to the second, and it is time that we recognised the defect and corrected it.

THE PROPOSED COLONY FOR EPILEPTICS.—The scheme for establishing a colony for the epileptics and imbeciles belonging to the Manchester and Chorlton Unions, has received a check owing to the opposition of the Liverpool Corporation to the use of the site acquired by the Joint Committee for the purpose, on the ground of the risk of contamination of the Rivington watershed, which it adjoins. While all will sympathise with the Liverpool Corporation in their efforts to keep the water supply free from suspicion, it is hoped that the carrying out of the well-conceived and philanthropic project of the Manchester and Chorlton Committee may not be unduly deferred.

THE HUNDRED YEAR CLUB.—Reference was made in a recent number of the BRITISH MEDICAL JOURNAL to this club, which was not along ago founded in New York. We are relieved to learn that it is not, as its name seemed to us at first to imply, a club for centenarians. The only duties of members are to pay the annual fee and to pledge themselves to endeavour to live more than 100 years. A beginning, says an American contemporary, has been made by a dinner at the Waldorf-Astoria. We have no doubt that the dinner was worthy of the famous restaurant where it took place. We are less certain, however, whether indulgence in such *lautæ dapes*, can be reconciled with the pledge required of members of the club. They should remember the fate of the noble poet whose premature *exit* from the stage of life was (as recorded by Sir Mount-Stuart Grant Duff) due to too many *entrées*.

CORK DISPENSARY DOCTORS' ASSOCIATION.—At a recent meeting of this Association, Dr. Ryan expressed gratification at the proposal to hold a meeting of the Irish Medical Association in Cork, although he thought it would be a mistake to discontinue the annual meeting in Dublin. He referred to the subject of car hire in connection with the discharge of their duties. Private practice was a fluctuating element, while official work was a fixed factor. The fees under the Registration Act were for entirely distinct duties. The medical officer was not always registrar, but when he was he received an allowance for travelling. If it was right to grant this concession in a merely subordinate position, it was doubly right for the much more important work of medical officer.

THE LENVAL PRIZE.—The Lenval prize, founded by Baron Léon de Lenval, of Nice, will be awarded at the International Otological Congress to be held in London from August 8th to 11th, 1899. The value of the prize is the interest of a sum of 3,000 francs which has accumulated between one International Otological Congress and the next. By the terms of its foundation it is to be awarded to the author of the most marked progress bearing on the practical treatment of affections of hearing during that time, or to the inventor of any new apparatus, which is readily portable, and improves considerably the hearing power of deaf persons. The members of the jury as at present constituted are Professor Politzer (Vienna), Dr. Benni (Warsaw), Dr. Gellé (Paris), Professor Pritchard (London), Professor St. John Roosa (New York), Professor Kirchner (Würzburg), and Professor Grazzi (Florence). All persons desirous of competing for the prize are requested to communicate without delay with Mr. Cresswell Baber, Honorary Secretary-General, 46, Brunswick Square, Brighton, England, stating the facts on which their claim is based.

THE ST. JOHN AMBULANCE ASSOCIATION IN STOCKPORT.—We have received a *précis* of correspondence which has passed between Dr. Christian of Stockport and the authorities of the St. John Ambulance Association. The perusal of this correspondence, which deals with incidents going back to 1896, confirms the opinion which we ventured to express last week, that the circumstances connected with the administration of the local centre ought without delay to be investigated by the central office. We learn from the *Cheshire County News* that at a meeting recently held at the Church Club it was resolved to form a St. John Ambulance Brigade in Stockport. Dr. Christian, who has taken the initiative in this matter, explained to the meeting that the object of the formation of such a brigade was to afford holders of first-aid certificates from the St. John Ambulance Association opportunities of meeting together for ambulance and nursing practice, and thus to combine individual efforts for the public advantage, and to render first aid to the sick and injured on public occasions, with the sanction of the police and other authorities, and to maintain in readiness for such duty a body of trained men and women qualified so to act. The formation of this brigade seems to prove that considerable interest in ambulance work is felt in Stockport, and that the medical profession is prepared, under suitable circumstances, to take its share in the good work.

MEDICAL VACANCIES.

The following vacancies are announced:—

ASTON UNION.—Resident Assistant Medical Officer at the Workhouse, Gravelly Hill near Birmingham. Salary £100 per annum, with furnished apartments, rations, washing, etc. Applications to the Clerk to the Guardians, Union Offices, Vauxhall Road, Birmingham, by May 2nd.

BATH: ROYAL MINERAL WATER HOSPITAL.—Resident Medical Officer; unmarried. Salary £100 per annum, with board and apartments. Applications to the Secretary by May 2nd.

BEDFORD COUNTY HOSPITAL.—House-Surgeon. Salary, £100 per annum, with apartments, board, lodging, and washing. Applications to the Secretary by May 15th.

BEEKS COUNTY ASYLUM, Wallingford.—Junior Assistant Medical Officer, unmarried, not over 30 years of age. Salary to commence at £120 per annum, rising to £140, with furnished apartments, board, attendance, and washing; £6 per annum allowed in lieu of liquors. Applications to the Medical Superintendent at the Asylum.

BETHNAL GREEN BOARD OF GUARDIANS.—Second Assistant Medical Officer for the Workhouse and Infirmary, Waterloo Road, Victoria Park. Appointment for six months, subject to re-election. Salary at the rate of £80 per annum, with rations, furnished apartments, and washing, and £3 per annum in lieu of beer. Application on forms provided to the Clerk to the Board, Guardians' Administrative Offices, Bishop's Road, Victoria Park, N.E., by May 4th.

BIRMINGHAM AND MIDLAND FREE HOSPITAL FOR SICK CHILDREN.—Resident Medical Officer and Resident Surgical Officer. Salaries, £200 per annum, with board, lodging, and attendance. Applications to the Secretary, Children's Hospital, Steelhouse Lane, Birmingham, by May 3rd.

BUTLTON-ON-TRENT INFIRMARY.—House-Surgeon. Salary, £100 per annum, with rooms, coal, and gas. Applications to the Honorary Secretary by May 3rd.

CANARY HOSPITAL, Fulham Road, S.W.—House-Surgeon. Appointment for six months. Salary at the rate of £50 per annum with board and residence. Applications to the Secretary by May 6th.

CENTRAL LONDON OPHTHALMIC HOSPITAL. Gray's Inn Road, W.C.—Junior House Surgeon. Salary at the rate of £50 per annum. Applications to the Secretary by May 1st.

CHARTWELL GENERAL HOSPITAL. Assistant House Surgeon: unmarried. Salary £50 per annum, with board, lodging, and washing. Applications to the President by May 2nd.

CHORLTON UNION. Senior and Junior Resident Medical Officers at the Workhouse Hospitals, Withington, Manchester. Appointments for twelve months. Salaries £130 and £120 per annum respectively, with furnished apartments and attendance in the Workhouse. Applications, endorsed either "Senior Resident Medical Officer" or "Junior Resident Medical Officer," to the Clerk to the Guardians, Chorlton Union Offices, All Saints, Manchester, by May 4th.

EAST LONDON HOSPITAL FOR CHILDREN. Shadwell.—Medical Officer for the Casualty Department. Appointment for six months, but renewable. Salary at the rate of £100 per annum. Luncheon provided. Applications to the Secretary by May 13th.

GLoucester. BARNWOOD HOUSE HOSPITAL FOR THE INSANE.—Junior Assistant Medical Officer. Salary £100 per annum, rising to £120, with board, etc. Applications to the Medical Superintendent.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST. Brompton.—Resident House-Physician. Applications to the Secretary by May 2nd.

LEICESTER INFIRMARY. Assistant House-Surgeon. Appointment for twelve months, subject to re-election. Salary £80 per annum, with board, residence, and washing. Applications to the Secretary, 24, Friar Lane, Leicester, by May 1st.

LEITH HOSPITAL. Resident Surgeon. Appointment for six months. Applications to the Secretary, 33, Bernard Street, Leith.

LONDON HOSPITAL. Whitechapel, E.—Obstetric Registrar. Application to the House-Governor by May 4th.

LONDON HOSPITAL MEDICAL COLLEGE. (1) Assistant to the Bacteriologist and Lecturer on Bacteriology. (2) Obstetric Tutor. Applications to the Warden by April 30th and May 4th respectively.

LONDON TEMPERANCE HOSPITAL. Hampstead Road, N.W.—Assistant Resident Medical Officer. Honorarium at the rate of £50 per annum, with residence, board, and washing. Applications to the Secretary, by May 20th.

LOUGHBOOUGH AND DISTRICT GENERAL HOSPITAL AND DISPENSARY. Resident House-Surgeon. Salary £100 per annum, with furnished rooms, attendance, and board. Applications to the Secretary by May 1st.

MANCHESTER HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST. Honorary Assistant Physician. Applications to the Secretary, Hardman Street, Deansgate, by May 6th.

MANCHESTER ROYAL INFIRMARY AND DISPENSARY. Honorary Ophthalmic Surgeon and an Honorary Assistant Physician. Applications to the Secretary by May 20th.

METROPOLITAN EAR, NOSE, AND THROAT HOSPITAL. Grafton Street, W.—Surgeon. Application to the Secretary by May 13th.

NORTHAMPTON GENERAL INFIRMARY. Assistant to the House Surgeon. Appointment for six months. Board, lodging, and washing provided. Honorarium £25. Application to the Secretary.

NORTH LONDON HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST. Hampstead.—Assistant Resident Medical Officer. Appointment for six months. Honorarium at the rate of £20 per annum. Applications to the Secretary, 41, Fitzroy Square, W., by May 6th.

READING: ROYAL BERKS HOSPITAL. Vacancy on Medical Staff. Applications to the Secretary by May 8th.

ST. MARYLEBONE GUARDIANS. Non-Resident Assistant Medical Officer for Dental purposes at the Schools at Southall. Salary £50 per annum. Applications to the Clerk to the Guardians' Offices, Northumberland Street, Marylebone Road, W., by May 15th.

SAMARITAN HOSPITAL FOR WOMEN AND CHILDREN. Marylebone Road.—Surgeon to Out-patient Department. Applications to the Secretary by May 5th.

SEAMEN'S HOSPITAL SOCIETY. Greenwich, S.E.—Three Physicians to in-patients, one Physician to out-patients, one Surgeon to in-patients, one Surgeon to out-patients, and one Ophthalmic Surgeon; also a Superintendent and Medical Tutor at the London School of Tropical Medicine Royal Victoria and Albert Docks. Salary £250 per annum and a capitation on the students. Applications to the Secretary by May 3rd.

SHREWSBURY: COUNTY ASYLUM. Junior Assistant Medical Officer. Salary to commence at £130 per annum, rising to £150, with board, lodging, and washing. Applications to the Medical Superintendent by May 6th.

SOUTHAMPTON: ROYAL SOUTH HANTS INFIRMARY. Assistant House-Surgeon. Appointment for six months, with honorarium of £10, and board and residence. Applications to the Secretary before May 3rd.

TAFFORDS HILL GENERAL INFIRMARY. Stafford.—Assistant House-Surgeon. Salary £50 per annum, with board, lodgings, and washing. Applications to the House-Surgeon by May 3rd.

WOKPORT INFIRMARY. Junior Assistant House-Surgeon. Salary £2 per mensem, with board, washing, and residence. Applications to the Secretary by May 2nd.

THROAT HOSPITAL. Golden Square, W.—Second Resident Medical Officer. Salary £50 per annum, with board, lodging, and washing. Applications to the Secretary-Superintendent by May 5th.

WAKEFIELD: WEST RIDING ASYLUM. Locum Tenens for one month. Salary £3 3s. per week and apartments and board. Applications to the Medical Director at the Asylum.

WEST LONDON HOSPITAL. Hammersmith Road, W.—Assistant Physician: must be F. or M.R.C.P. Lond. Applications to the Secretary-Superintendent by May 3rd.

WREXHAM INFIRMARY. House-Surgeon. Salary £80 per annum, with board, washing, and furnished apartments. Applications to the Secretary by May 3rd.

MEDICAL APPOINTMENTS.

ADAMS, D. V. M., M.B., Ch.B. Edin. appointed Resident Surgeon to the Glasgow Royal Infirmary.

ANDERSON, J. M. B. appointed District Medical Officer of the Tynemouth Union, vice R. Anderson, M.D., resigned.

BATEMAN, F. J. Harvey, B.A. Cantab., M.B., C.M. Edin. appointed House Surgeon to the Leith Hospital.

BAUMANN, E. P., M.B., Ch.B. Edin., M.R.C.S. Eng., L.R.C.P. Lond. appointed a Resident Physician in the Glasgow Royal Infirmary.

BENNETT, P., M.B., B.Ch. appointed Medical Officer for the Attercliffe District of the Sheffield Union.

CAMERON, A. F., M.A. St. And., M.B., C.M. Edin. appointed Resident Medical Officer to the Sheffield Union Workhouse.

CHRISTIE, B. A. Craig, M.B., C.M. Edin. appointed Resident Physician in the Glasgow Royal Infirmary.

DEARDEN, V. G. S., L.R.C.P. Edin., L.F.P.S. Glas. appointed Medical Officer of the Carbrook District of the Sheffield Union.

FOSTER, J., M.B. Edin. appointed Clinical Assistant to the Chelsea Hospital for Women.

GRAHAM, J. W. F., L.S.A. appointed Medical Officer for the Piddington District of the Bicester Union, vice W. J. Bond, M.B. Glas.

HOLLINSHAD, F. M. D. appointed Medical Officer of Health to the King's Norton and Northfield Urban District.

LUNSDEN, J., M.D. Univ. Dub. appointed Senior Medical Officer to Guinness's Brewery, Dublin.

McDOWELL, Donald K., L.R.C.P., L.R.C.S. Edin. appointed a Senior Medical Officer in the West African Frontier Force.

MORE, John, L.R.C.P. Lond., M.R.C.S. Eng. appointed Medical Officer for the Holwell District of the Kettering Union, vice James More, M.D. Edin., resigned.

NIX, R. E., B.A. Camb., M.B., B.C. appointed Medical Officer for the St. James's District of the Bury St. Edmunds Incorporation, vice G. F. Henry, L.R.C.P., L.R.C.S. Edin., resigned.

NORMAL, E. P. M. D. appointed Medical Officer for the Brafield District of the Hardinge- stone Union, vice J. G. C. Scott, M.B., C.M., resigned.

PARRY, L. A., M.D., B.S. Lond., F.R.C.S. Eng. appointed [Honorary] Anæsthetist to the North-West London Hospital.

PELLET, W. E., M.B., Ch.B. Edin. appointed a Resident Surgeon to the Glasgow Royal Infirmary.

SIMMONS, G. Allpress, M.D., B.S. Lond., M.R.C.S., L.R.C.P. appointed Attending Medical Officer to the Royal Pimlico Dispensary.

DIARY FOR NEXT WEEK.

MONDAY.

Odontological Society of Great Britain. 40, Leicester Square, W.C., 8 P.M.—Mr. C. B. Keetley: Limitation of the Gape after Operations on the

Check and Jaws. Mr. Mayo Collier: Deformities of the Upper Jaw, Teeth, and Palate due to Nasal Obstruction.

TUESDAY.

Pathological Society of London. 20, Hanover Square, W., 8.30 P.M.—Professor John Macleod: Congenital Talipes on a Calf. Dr. F. W. Andrewes: Phagocytosis of Red Blood Corpuscles in a case of Aseptic Suppuration of the Knee-joint following Injury. Mr. S. G. Shattock: Chromolytic Clumping in Acute Rheumatism and Erysip-

las. Dr. F. E. Batten: Further Evidence on the Pathology of Diphtherial Paroxysms. H. W. Waring: Tumour on the Neck composed of Melanoid Cells. Dr. Still: Tuberculous Ulcer on the Stomach in Children. Card Specimens will be shown by Dr. Batten, Mr. Waring, Dr. Andrewes, Dr. Rolleston, and Dr. Rennie.

WEDNESDAY.

Obstetrical Society of London. 8 P.M.—Specimens will be shown by Mr. Targett, Dr. Purslow, and others. Papers: Mr. Alban Doran: Fibroid of the Broad Ligament weighing 144 lbs.

(20 kilos.) removed by Enucleation; Recovery; with Table and Analysis of 39 Cases. Dr. C. Hubert Roberts: Notes of a Case of a Large Retroperitoneal Fibroid undergoing Suppuration.

THURSDAY.

Harveian Society of London. 8.30 P.M.—Mr. C. B. Lockwood: A Series of Cases of Arthroscopy for the Relief of Pain and for the Removal of Synovial Fringes, Loose Bodies, and Fibrocartilages.

Charlton Cross Hospital. Post-Graduate Course, 8.30 P.M.—Dr. Green: Medical Cases in the Wards.

Opthalmological Society of the United Kingdom. Clinical Evening. Cases in place at 8 P.M. Chair at 8.30 P.M.—Mr. A. H. Thompson: Tumour of Iris. Mr. Treacher Collins: (1) Tumour

of Iris; (2) Unusual Opacity of Cornea. Mr. Arnold Lawson: Vascular Formation in Vitreous. Dr. Lediard: Sloughing of Cornea following Fracture of Base of Skull. Mr. Snell: (1) Primary Intracocular Carcinoma; (2) Traumatic Ptosis. Mr. Mackenzie Davidson: Skiascopy of Gaping Eyeball. Dr. Critchett: (1) Solid Cataract; (2) Eyelids; (2) Iritis; (3) Artificial Eye. Mr. S. A. Rowley: Skiascopy of Foreign Body in Eye. Mr. Rowan: Carcinoma of Lung and Eye. Mr. Batten: Filamentary Keratitis.

FRIDAY.

Laryngological Society of London. 20, Hanover Square, 5 P.M.—Special Discussion on Asthma in Relation to Disease of the Upper Air Passages, to be opened by Dr. Percy Kidd and Dr. J. McLean.

West Kent Medico-Chirurgical Society. Royal Kent Dispensary, Greenwich Road, 8.45 P.M.—Dr. Morgan Dockrell: Presidential Address on General Health as a Factor in Skin Diseases.

West London Medico-Chirurgical Society. West London Hospital, W., 8.30 P.M.—Mr. H. J. Paterson: The Use of Gas in General and Dental Surgery, together with a Demonstration of a New Apparatus for the Prolongation of Nitrous Oxide Anesthesia. Dr. John Parde: Some Modern Methods of Treating Chronic Urethritis in the Male.

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.

BEAN—STARK. April 25th, W. Percy Bean, L.S.A., Cross Gates, Leeds, to Margaret Wood, daughter of the late Peter Wood Stark, M.D., Barrow-in-Furness.

HINDS—MOSS. On April 26th, at St. Botolph's, Heene, Worthing, by the Rev. J. P. Fellowes, Rector of the Parish, assisted by the Rev. J. H. de Turri Croft, Rector of Cotesbach, Leicestershire, Frank, second son of the late George Hinds, of Goudhurst, Kent, to Mary Helen, only daughter of Matthew H. Moss, of Bellary, Worthing.

HOBBS—SHAW. On April 26th, at Jeannet Parish Church, Newcastle-on-Tyne, by the Rev. G. D. Scott, Vicar of St. Peter's, Colchester, cousin of the bride, and the Rev. T. Broose Waters, M.A., Allen Holmested Hobbs, M.B., B.S., to Ethel, second daughter of Benjamin Shaw, Newcastle-on-Tyne.

POTTS—MANN. On April 19th, at St. John's Church, Ladywood, Birmingham, by the Rev. A. E. Moss, M.A., assisted by the Rev. E. J. Nurse, M.A., William Alexander Potts, B.A., M.D., eldest son of the late A. W. Potts, M.A., LL.D., first Headmaster of Fettes College, Edinburgh, to Florence, second daughter of W. S. Mann, M.E.C.S., L.S.A., Edgbaston, Birmingham.

REITH—MACHIN. On the 20th inst., at the Parish Church, Erdington, by the Rev. Williamson Rust Innes, D.C.L., minor canon of Hereford Cathedral, cousin of the bridegroom, assisted by the Rev. F. S. Swindell, M.A., Vicar of the parish, Williamson Rust Reith, M.A., D. Erdington, second son of Alexander Reith, M.D. Aberdeen, to Helen Constance, elder daughter of Edmund Spooner Machin, M.R.C.S., Erdington.

SALISBURY—THOMPSON. On April 5th, at St. Mary's, Burley-in-Wharfedale, by the Rev. G. A. Johnstone, Vicar of Micheldever, Hants, assisted by the Rev. R. P. Steadman, Vicar, Charles Ramsden Salisbury, L.R.C.P., M.R.C.S., of Alveston House, Evering Road, Stoke Newington, N. 1, to Iris Turpin, only child of the late James Thompson, Esq., of Bradford, and of Mrs. Mumford, the Lawn, Burley-in-Wharfedale.

DEATHS.

HOGG. Sunday, April 23rd, suddenly, at 102, Palace Gardens Terrace, Kensington, Jabez Hogg, M.E.O.S., F.E.M.S., late of 1, Bedford Square, W., in his 83rd year.

HUGGER. On April 23rd, at 24, Winchester Road, Oxford, Edward Law Hussey, Esq., F.R.C.S. Eng., aged 83 years.

LEE. April 12th, at The Close, Salisbury, Frederick Dawson Lee, M.B. Lond., F.R.C.S. Eng., aged 60.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

CANCER, Brompton (Free). *Attendances*.—Daily, 2. *Operations*.—Tu. W. F., 2. *CENTRAL LONDON OPHTHALMIC. Attendances*.—Daily, 1. *Operations*.—Daily, 5. *Operations*.—I.p., Tu., 2.30; o.p., F., 2. *CHARING 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*.—Th. F.S., 3. *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. *CITY OPHTHALMIC. Attendances*.—M. Tu. Th. F., 2. *Operations*.—M. W. Th. F., 2. *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. *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. I.; *Skin*, Tu. I.; *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., 1.30. *Operations*.—W. Th. F., 2. *LONDON. Attendances*.—Medical, daily, i.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. S., 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. *LONDON THROAT, GREAT PORTLAND STREET. Attendances*.—Daily, 2; Tu. F., 6. *Operations*.—M. *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. F., 9; W., 1.30; *Eye*, Tu. F., 9; *Ear and Throat*, Tu. F., 9; *Skin*, Tu., 4; Th., 9.30; *Dental*, M. F., 9.30; W., 1.30. *Operations*.—Daily, 1.30. *NATIONAL ORTHOPAEDIC. 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 EAR, FRITH STREET. Attendances*.—M. W. F., 3; Tu. F., 9.30 and 7.30. *Operations*.—Tu., 3. *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., 1, 9; 10.30; (*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., 2; o.p., W. S., 9; *Eye*, M. Tu. W. Th. S., 2; o.p., M. Th., 9; W. S., 2.45; *Ear*, Tu. F., 2; *Skin*, Tu., 9; *Larynx*, Tu. F., 2.30; *Orthopaedic*, M., 2.30; *Dental*, Tu. F., 9. *Electro-ri*cal, M. Tu. Th. F., 1.30. *Operations*.—Daily, 1.30; (*Ophthalmic*), Tu. F., 2; *Abdominal Section for Ovariotomy*, F., 2. *ST. GEORGE'S. Attendances*.—Medical and Surgical, daily; i.p., 1; o.p., 12; *Obstetric*, i.p., Tu. F., 1.45; o.p., M. Tu., 2.30; *Eye*, W. S., 1.30; *Ear*, Tu., 2; *Skin*, W., 2.45; *Throat*, F., 2; *Orthopaedic*, F., 12; *Dental*, M. Tu. F., S., E. *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., Tu., 9; *Eye*, Tu. F., 9; *Ear*, M. Th., 9; *Throat*, Tu. F., 3; *Skin*, M. Th., 9; *Dental*, W. S., 9. *Electro-therapeutics*, M. Th., 2.30; *Children's Medical*, Tu. F., 9. *Operations*.—M. 2.30. *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; *Operations*, 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., 2; *Mental Diseases*, o.p., Th., 10; *Dental*, Tu. F., 10. *Operations*.—M. W. Tu. S., 2; Tu. F., 9.30; (*Ophthalmic*), Tu., 2; (*Gynaecological*), Th., 2. *SAMARITAN FREE FOR WOMEN AND CHILDREN. Attendances*.—Daily, 1.30. *Operations*.—Gynaecological, M., 2; W., 2.30. *SARANTH. 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; *Orthopaedic*, 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 ON WEDNESDAY. TELEGRAMS CAN BE RECEIVED ON THURSDAY MORNING.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 1, Agar Street, Strand, W.C., London; those concerning business matters, advertisements, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, Strand, W.C., London.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone, unless the contrary be stated.

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

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 at 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 at his private house.

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

WALFS wishes to hear of an asylum or home for an idiot boy (aged 10), with occasional epileptic fits. The parents can pay 4s. or 5s. a week.

JUNIUS asks for advice in the treatment of a gentleman, aged 85, in whom attempts at swallowing produce regurgitation or vomiting, so that it is difficult to administer any drug; enemata are not retained, and glycerine suppositories have been tried without good result.

STILLBIRTHS.

L. M. N. asks: 1. Is the birth of a stillborn child under any circumstances registrable? 2. Supposing a married woman miscarries at the end of the fifth month of pregnancy, and is delivered of a dead child which is clearly not viable, what is the recognised mode of disposal of the ovum? Should it all be put in the fire, or should the fetus be buried by arrangement with an undertaker? This assumes that ordinary professional attendance takes place at the time of the miscarriage and subsequently.

* * 1. No, [except by mistake] on the part of the parent and the registrar. 2. The proper mode of disposal of the body of a fetus is to get an undertaker to bury it, the medical man in attendance giving a certificate that it was stillborn. It should certainly not be put in the fire.

DESKUMATION AFTER RUBELLA.

DR. W. B. RUSSELL (Colwyn Bay) relates a case of extensive desquamation after an attack, which he believes to have been rubella, and inquires whether this has been observed in other cases. The patient was a boy, aged 18, who after three days of coryza had a rash on the face, and on the following day a general rash resembling that of measles. There was no sore throat nor enlargement of the tonsils, but there were enlarged glands behind the sterno-mastoid and in the axilla. The rash persisted for five or six days. Recovery was rapid; the hands and feet began to peel after two or three weeks, and were not clear until the end of six weeks. The patient is said to have previously had both scarlatina and measles.

* * Desquamation to some, usually a slight, extent, appears to be the rule after rubella. It is commonly very slight when the rash has been of the measles type, more copious when it has resembled that of scarlet fever.

LOSS OF HAIR.

A. C. I. asks for suggestions for the treatment of the case of a lady, aged 35, whose hair seems to grow fairly well, but as soon as it gets a few inches long it comes out by the roots. Various forms of hair washes containing cantharides have been tried, and also the application of vaseline and lanolin (which latter seemed indicated as the scalp is a little dry), but with no effect. The lady is in good health.

CLAIM FOR MEDICAL ATTENDANCE UNDER EMPLOYERS' LIABILITY ACT. COUNTRY PRACTITIONER writes to ask whether, under the Employers' Liability Act, he can claim anything for attendance and signing certificates on the workmen who had been engaged at a lime kiln, and who subsequently came under his professional care, one then suffering from dislocation of shoulder, the other from severe shock. Both became paupers when ill, and are not now able to pay anything.

* * Our correspondent has not supplied us with sufficient facts to enable any opinion to be given. He does not even say that the men met with the injuries he describes when engaged at their work, though this may perhaps be assumed from his letter. He does not tell us by whom he was requested to attend these two patients. He says that both became paupers, but he does not say whether he attended them as such or as private patients. He does not even say whether he is a Poor-law medical officer or not.

ANSWERS.

J. W. is recommended to consult a regular medical practitioner.

BRONCHOCELE is recommended to consult the physician under whose care the lady is.

ETHICS.—There seems to be no evidence that the surgeon whose name is mentioned is responsible for the appearance of the paragraph upon which our correspondent animadverts.

W. J. T. B.—A four years' course was adopted by the Harvard University and the University of Pennsylvania in 1891, and since then other universities in the United States have made similar regulations. Previous to that date the rule—to which there were few, if any, exceptions—was that the graduating bodies of the United States required only a three years' course from medical students.

DELTA.—Although there is a good deal in the circumstances narrated which must have caused annoyance to our correspondent, and in which he has our sympathy, he has not produced any evidence that the newspaper paragraph of which he complains was inserted by any of the medical practitioners named in it. Perhaps it would be better if he would send us all the correspondence that has passed if he wishes us to form any further opinion upon the matter.

MISTURA.—We are not aware that there is any prospect of such a regulation being adopted. The General Medical Council has never touched the subject, and appears to look upon dispensing under the supervision and subject to the responsibility of the medical practitioner as a resource for displaced unqualified assistants. Particulars as to examinations can be obtained on application to the Pharmaceutical Society, Bloomsbury Square W.C. and the Society of Apothecaries, Blackfriars, E.C.