

THE

84479
British Medical Journal

THE JOURNAL OF THE BRITISH MEDICAL ASSOCIATION

INCLUDING

AN EPITOME OF CURRENT MEDICAL LITERATURE.

EDITED FOR THE ASSOCIATION BY

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ASSISTED BY

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VOLUME I FOR 1899.

JANUARY TO JUNE.

London :

PRINTED AND PUBLISHED BY THE BRITISH MEDICAL ASSOCIATION AT THEIR OFFICE 42c, STRAND.

INDEX TO VOLUME I FOR 1899.

- A.**
Aarons, S. J., The Golden Rules of Gynæcology, *rev.*, 739
Abdomen, "vanishing tumour" of the, 905; vascular tumours of wall of, 1397
Abdominal Incision through Vaginal Laparotomy, the Limitation of, *A. Dührssen*, *rev.*, 1100
 section, after-effects of, 264; three cases of, 274; rupture of uterus treated by, recovery, 965
Aberdeen, correspondence from, 440, 631, 877, 1556; the Royal Infirmary, 440; the Convalescent Hospital, *ib.*; the Royal Asylum, *ib.*; the prevention of tuberculosis at, 482, 1420, 1556; the lectureship in tropical medicine, 631; severe epidemic of measles, *ib.*; hospital abuse, *ib.*; honorary degrees, *ib.*; the Gifford lectureship, *ib.*; proposed house-to-house collection for medical charities, 877; the teaching of tropical medicine at, 1113; the Volunteer Medical Staff Corps, 1556; desecration of graves, *ib.*
Abortifacients, the traffic in, 110, 506
Abrahams, B. L., rheumatic tonsillitis, 274
Abram, J. H., lymphosarcoma, 852
Abrolis mineral water, 1102
Abscess, pulmonary, Mr. R. J. Godlee on, 133; of temporo-sphenoidal lobe, aphasia following, 212; cerebellar, recovery, 408; of the Liver, *New Exploratory Operation for*, *A. Petredis*, *rev.*, 416; under the chin, asphyxia from pressure of whilst under the influence of nitrous oxide, 850; of liver, the relative excretion of the nitrogenous waste products in a case of, 1028; chronic (circumscribed) in tibia, 1031; of liver, 1032; gaseous in the abdominal wall, 1042; of the lung, successfully treated by drainage, 1212; primary of the kidney, 1223; tropical of the liver the relation of the amœba dysenteriae to, 1286
Abscesses, gaseous metastatic, tuberculous cavities in the lungs giving rise to, 406
Absorption, intestinal, 1049
Académie de Médecine, the prizes of, 39
Academy, Royal, the exhibition at, 1117
 section of Anatomy and Physiology, effects of sodium chloride on the secretion of urine, 793; the sensory distribution of the seventh cranial nerve in man, *ib.*; the acromion, *ib.*; anesthetics and urinary secretion, *ib.*
 section of Medicine in Ireland, Section of Medicine, Erb's juvenile form of muscular atrophy, 409; the clinical features of beri-beri, *ib.*; tuberculosis in Ireland, 666; the death-rate from tuberculosis, 667; the bacteriological aspect of tuberculosis, *ib.*; distribution of tuberculosis in Ireland, *ib.*; ulcer of the œsophagus, 909; probable tuberculous meningitis, *ib.*; non-febrile pneumonia, 910; morphinomania, *ib.*; Addison's disease, 1096; pyloric obstruction, *ib.*; chronic pharyngitis, *ib.*
 section of Obstetrics in Ireland, Section of Obstetrics, the Rotunda Hospital obstetrical report, 733, 91; exhibits, 910, 1160; two years' work at the Samaritan Hospital for Women, Belfast, 1160; uterine cancer and its treatment, 1161
 section of Pathology, some recent x ray work, 21; rupture of ascending aorta, *ib.*; spontaneous rupture of first stage of aorta, *ib.*; aneurysm of ascending arch of aorta extending into lung, 22; aneurysm of descending arch of the aorta perforation of œsophagus, *ib.*; specimens, 344, 1223, 1397; agglutinability of different races of the typhoid bacillus, 344; peritoneal tumour, 245; chronic (circumscribed) abscess in tibia (Brodie's), 1031; enteric fever fatal through embolic hæmiplegia, 1032; carcinoma of liver, *ib.*; peculiar clot from a case of epistaxis, *ib.*; pneumococcal septicæmia with ulcerative endocarditis, consecutive to croupous pneumonia, 1222; Hodgkin's disease, *ib.*; epithelioma of lips in a youth, *ib.*; breast containing new growth, removed from youth 18 years old with microscopic sections, *ib.*; sarcoma of the suprarenals and secondarily of the lung, *ib.*; fractures of clavicle, 1396; infective endocarditis, *ib.*; dislocations of the metatarsus on the tarsus, *ib.*; central sarcoma of bone, 1397; vascular tumours of abdominal wall, *ib.*
Academy, Royal, of Medicine in Ireland, Section of State Medicine, room disinfection with special reference to the use of formic aldehyde, 1280; cancer in Ireland, *ib.*
 section of Medicine in Ireland, Section of Surgery, coxa vara, 87; the operative treatment of hernia, *ib.*; dislocations and fractures of the astragalus, 536; chronic intestinal obstruction, *ib.*; arthrectomy for tuberculous knee, 733; diseases of the foot, *ib.*; perforating gastric ulcer, 734; Hey's internal derangement of the knee-joint, 1095; advancement of the recti muscles of the eyeball, *ib.*
 Royal Military, Woolwich. See Woolwich.
 Russian Royal Military, the centenary of, 42, 103
Accidents, petroleum lamp, 1257
Accommodation or lodging proper, 1565
Accumulators, Small, How Made and Used, P. Marshall, *rev.*, 1286
Acetone, the excretion of, 300
Achondroplasia, 1092
Acids, volatile, an inquiry into the quantity of in the stomach, 1271
Acoline, 1340
Acromegaly, hypertrophy of the pituitary body without, 851
Acromion, the, 793
Act, the Apothecaries, conviction under, 508
 the Coroners and cottage hospitals, 60
 the Dentists, question as to evasion of, 951
 Employers Liability, claim for medical attendance under, 1075, 1199
 the Inebriates, 1898, leading article on, 358; information as to, 515, 575; and the London County Council, 560, 1545; in operation, 928, 972; in London, 1237
 Poor-law Officers Superannuation, the working of, 1174
 the Vaccination, the working of, 36, 293, 307, 370, 435, 485, 546, 678, 823, 874, 981, 1056, 1107, 1191, 1352, 1434; discussion on at the Liverpool Medical Institution, 88, 278; the conscience clause of, 122, 370, 508; Mrs. Garrett Anderson on, 176; a counsel of despair, 167; form C of, 874; the administration of the, 1425; debate in the House of Commons on the new order as to, 1431
 the Vagrancy, convictions under, 295
 Workmen's Compensation, appointment of medical referees under, 253; house-surgeons and, 412; hospitals and certificates under, 685, 762, 827; and professional etiquette, 1383
Acts, the Medical, magistrates and, 35; and the medical profession, 54; the interpretation of, 121; conviction under, 186; a new Bill to amend the, 291, 489, 685; the amendment of, 870, 930, 941, 985, 999, 1059, 1129, 1250, 1295
Addison's Disease. See Disease
Addy, B., erythrol tetranitrate in angina pectoris, 1088; recurrent sneezing and nasal catarrh, 1319
Adeno-carcinoma of the breast, 1558
Adenoma of endometrium, 792
Adenomata, multiple of the skin, 1533
Adhesions and their consequences, 152
Adrenals, lesions of, in the insane, 851
Adult, diphtherial membranous tracheitis, with temporary obstruction of the right bronchus, in an, 342
Advertisement, objectionable methods of, 1236
Advertisements, to local newspapers, 191; illustrated, 1012; medical men and, 1062
Advertising, medical, in India, 637; medical, 710, 951; and medical bulletins, 1319; and canvassing, 1486
Africa, plague on the west coast of, 1304
 British Central. See British
Agglutinability of different races of the typhoid bacillus, 344
Agreements, partnership, 1447
Aguinaldo as a medical student, 551
Ahlfeld, F., Lehrbuch der Geburtshilfe, *rev.*, 540
Aigullette, the King and the, 107
Air, hot, local application of a current of, 160; the artificial purification of, 295; and nitrous oxide, effects produced on the human subject by the administration of definite mixtures of, 404
Airol, 1340
Aitken, C. J. H., dilatation of stomach, 403; zona below the knee, 712
 R. Y., multiple adenomata of the skin, 1533
"Aktinography," "skiagraphy," or "radiography," 297
Albert's method, result of gastrotomy by, 907
Albumen, the derivation of sugar from, 618
Albuminuria and Bright's Disease, N. Tirard, *rev.*, 1226
Albumosuria, myelopathic, the morbid anatomy and pathology of, 662, 684; as a sign of primary multiple sarcomata of the bones, 748; of adolescents, 1042
Alcohol, the French army and, 641; and longevity, 712; consumption of in different countries, 1058; and insurance mortality, 1214
Aldehoff, the influence of the nervous system on the gastric functions, 1041
Aldershot, sanitation at, 170, 376, 455; the adjutancy of the Royal Army Medical Corps depot and training school at, 1560
Aldersmith, H., poisoning by the application of belladonna plasters, 1274
Alexander, W., revolver wound of brain, 88; pylorotomy for stenosis of pylorus, 602
 Lieutenant-Colonel W., syphilis in the army, 191, 387; army convalescent homes, 760
Alkaptonuria, a contribution to the study of, 1155
Allan, F. J., diphtheria, especially in relation to infection and the use of antitoxin as a prophylactic, 413; on the Local Government Bill, 545
 G., Flashlights on Nature, *rev.*, 26
 J. W., lectureships on "trade diseases," 1441
Allbutt, T. C., gets honorary degree of M.D. Univ. Dub., 449; gets honorary F.R.C.P.I., *ib.*; A System of Medicine, *rev.*, 912
Allen, A. H., Commercial Organic Analysis, *rev.*, 1167
 H. E., preliminary examinations, 63
Alleyne, E. F. M., personation, 1376
Alliance, Friendly Societies' Medical, annual conference of, 85
Allingham, H. W., aneurysm of the subclavian artery treated by ligature of the first portion, followed after thirty-eight days by removal of the aneurysm, 1334
Alinson, T. R., prosecution of, 1007, 1116
Aloes, the various kinds of, 22
Amblyopia, temporary, obliteration of a branch of the retinal artery following attacks of, 1466
Ambulance, special for cavalry, 448
 ship, an Austrian, 1052
 ships in the British navy, 1308, 1568
 work in hill warfare, 1132; at sea and the Peace Conference, 1247
America, United States of. See United States
Amœba dysenteriae, its relation to tropical abscess of the liver, 1386

- Amputation of finger of platelayer, liability of payment for, 1441; of the lower jaw, 1044
Amputations, certificates as to necessity of in Poor-law districts, 1380
Anæmia, splenic, in infants, 967
Anæsthesia, nitrous oxide, prolongation of, 668; epileptiform fit during, 1097; the unconsciousness of, 1485
Anæsthetic, the choice of an, 20, 277, 712; the choice of, a disclaimer, 376; in surgical and dental operations, nitrous oxide gas and oxygen as an, 1031
Anæsthetics and urinary secretion, 793; unregistered dentists and the administration of, 997; through a tracheotomy tube, 1534
Analysis, Commercial Organic, A. H. Allen, *rev.*, 1167; of Food and Drugs, T. H. Pearman and G. C. Moor, *rev.*, 1469
Anasarca, acute transient general, 732
Anatomy, topographical, 667
Anderson, Mrs. E. G., the new Midwives Bill, 52; on vaccination, 176
— J., Yellow Fever in the West Indies, *rev.*, 540; elephantiasis of the vulva, 596
— J., the Seamen's Hospital Society and its visiting staff, 54
— R. J., Heredity, or what Living Things owe to their Ancestors and what they do not, *rev.*, 856
— T. McC., Contributions to Clinical Medicine, *rev.*, 1283
Andrewes, F. W., a case of apparently aseptic supuration of the knee joint following injury, 1091
Andriezen, W. L., a new classification of mental diseases, 1178
Aneurysm, of ascending arch of aorta extending into lung, 22; of descending arch of, perforating œsophagus, *ib.*; aortic, as a cause of hypertrophy of the left ventricle, 84; aortic, involvement of sensory nerve roots, sudden paraplegia, laminectomy, death, *ib.*; aortic, rupture of into œsophagus, 209; thoracic, 216; of uterine artery, ligature of internal iliac for, 228; abdominal, in a young woman, 272; a large thoracic, 408; traumatic of the sciatic artery, 661; traumatic axillary, 669; of abdominal aorta, successfully treated by introduction of silver wire into the sac, 701; varicose of femoral artery, 704; of aorta communicating with superior vena cava, *ib.*; aortic, 54 cases of, 975; case of, 1009; of the subclavian artery, treated by ligature of the first portion, followed in 38 days by removal of the aneurysm, 1334
Aneurysms, treatment of by extirpation, 532
Angina, Ludovici, case of, recovery, 83; pectoris, erythol tetranitrate in, 1088
Angus, H. B., malignant pustule, 215
Animal, the spinal, 1276
Animals, domestic, ovario-hysterectomy in 1299; domestic, tuberculosis in, 1346; living, return as to experiments on, 1492, 1545
Ankle-joint, erosion of, 664
Annett, H. E., appointed demonstrator of tropical pathology at Liverpool, 452
Annual, The Local Government for 1899, S. Edgcombe-Rogers, *rev.*, 481; The Medical and Practitioners' Index, *rev.*, 1035
Anopheles claviger, the life cycle of the parasites of tertian fever in, 1373
Antenatal therapeutics, 889, 1062
Anthrax in a woolsorter, 188; the new order as to, 298; prevention of in woolsorters, 494
Anthropometry of the British army officer, 622
Antiseptics, use of in food, 969, 1071
Antitetanus. *See* Serum
Antitoxin. *See* Serum
Antivaccination, safeguards against, 101; and provident societies, 228; in the United States, 928; at Sidmouth, 1117
Antivaccinators, doctors and, 1173
Antivivisection, their love for each other, 493; the quarrels of, 687
Antrum, vacuolated carcinoma of the, 851; empyema of, 1281
Anus, imperforate operation, recovery, 904
Aorta, ascending, rupture of, 21; spontaneous rupture of first stage of, *ib.*; aneurysm of ascending arch of extending into lung, 22; aneurysm of descending arch of perforating œsophagus, *ib.*; abdominal aneurysm of successfully treated by the introduction of silver wire into the sac, 701; aneurysm of communicating with superior vena cava, 704; disease of the, with musical "bruit" remedied by baths and exercise, 1094; medico-legal aspects of rupture of, 1300
Apeninues, summer colony for children in, 1170
Aphasia, following absence of temporo-sphenoidal lobe, 212
Aphonia, functional, 459
Apothecaries' Act. *See* Act
Hall, Ireland, pass lists, 567
Society, of London, pass lists, 129, 251, 509, 768, 948, 1069, 1315; the right of licentiates of to describe themselves as "physicians," 225, 233, 301, 311, 374, 441, 504, 559, 702, 1002; action by, 508; the licentiateship of and Poor-law appointments, 767; the assistant's certificate of, 879
Appendages, Pedunculated, of the Broad Ligament, E. Rossa, *rev.*, 1100
Appendicitis, with diffuse peritonitis, 211; thirty-two cases of, 670; some complicated forms of, 1028
Appendix vermiformis, typhlitis and colitis, wrongly diagnosed inflammation of, 732; case of lympho-sarcoma of, 733; adherent, forming a band, acute intestinal obstruction caused by, 1334
Appointment, vacant Poor-law, 767
Appointments, court, 116; Poor-law and the L.S.A., 767
Aquino, T. H., elephantiasis and the vulva, 516
"Archives of Neurology and Psycho-Pathology," notes on, 296
Arkle, C., some points in the treatment of tuberculosis, 419; death of, 496; obituary notice of, 567
Arm, osteoma of, 475
Arms, delivery of when displaced upwards in breech cases, 1395
Armstrong, W., effects of nitrogen gas on the excretion of uric acid, 1028; nasal treatment of asthma, 1331
Army, British, syphilis in the, 55, 121, 132, 191, 387; the office of the director-general of the medical staff of, 103; promotions and appointments in the medical reserve of, 126, 185, 250, 379, 508, 637, 706, 767, 946, 1005, 1070, 1257, 1313, 1377; changes of station, 127, 447, 706, 946, 1257, 1512; promotions and appointments in the medical service of, 184, 508, 636, 883, 1070, 1132; precedence, 508; medical officers for two army corps, 547; the estimates for the medical establishment of, 568; convalescent homes for, 701, 760, 946; report of the medical department for 1897, 704; sickness and punishment in the, 746; promotions tests in the medical service of, 768; anthropometry of the officers of, 922; supplies for in the field, 946; passages for wives, 1005; promotion, 1071; the undermanning of, 1132; vaccination in the, 1316; the position and pay of the director-general of the medical service of, 1377
— French, health of the, 637; and alcohol, 641; losses by sickness and death in the, 1042
— German, losses by sickness and death in the, 1042; tuberculosis in the, 1346
— Indian, promotions and appointments in the medical service of, 59, 185, 250, 320, 379, 508, 569, 637, 706, 767, 883, 1070, 1132, 1313, 1377, 1441, 1512, 1560; exchange compensation in, 270; successful candidates for medical service of, 378, 448; extra medical charges in, 379; convalescents in, *ib.*; staff of the governor-general of, *ib.*; textbooks for examination for medical service of, 386; the status of the medical service of, 569; medical officers of and plague duty, 637; delayed promotion, 1005; reform in the medical service of, 1132; seniority in, 1132, 1313; increase in the medical service of, 1313; many masters, 1377; annual dinner of medical service of, 1511; personal assistant to the surgeon-general, Bombay, 1512; frontier honours, 1560
— Italian, vaccination and small-pox in, 1017; vaccination in, 1309
— Russian, the medical service of the, 127; exophthalmic goitre in, 339
— United States, permanent hospitals for, 28; report of the Surgeon-General of the, 127; female nurses in, 512; the medical department of in the late war, 705; report of General Miles on, 767; the medical department of, 1071; vaccination in, 1300
"Army List," official cross swords in the, 1441
Arrow poison (oubain), 1428
Arsenic workers in Cornwall, respiratory disorders among, 926
Artery, internal iliac, ligature of for aneurysm of uterine artery, 228; sciatic, traumatic aneurysm of 661; femoral, varicose aneurysm of 704; large superficial inguinal, wounds of in which the blood was flowing from the trunk to the thigh, 965; central of retina, embolism of, 1029; subclavian, aneurysm of treated by ligature of the first portion followed in 38 days by removal of the aneurysm, 1334; retinal, obliteration of a branch of, following frequent attacks of amblyopia, 1466; central, recovery of sight after partial occlusion of, *ib.*
Arthrectomy for tuberculous knee, 733
Arthritis, gonorrhœal, treatment of, 516; rheumatoid, with enlarged glands and spleen in a child, 534; rheumatoid, *ib.*; heat in the treatment of, 1140
Arthropathy, pulmonary fibrosis associated with, 534
Arthrotomy for the relief of pain and for removal of synovial fringes, loose bodies, and fibro-cartilages, 1205, 1219
Ascitic fluid, 387, 515
Ashby, A., town dust destructor, 575; duties of medical officers of health in relation to small-pox in view of the alterations in the law of vaccination, 735
— H., Health in the Nursery, *rev.*, 348
Asphyxia from pressure of an abscess under the chin whilst under the influence of nitrous oxide, 850
Assam and the Duars, the prevalence of black-water fever in, 788
Assistant, salary of during illness, 768
Assistants, unqualified and the General Medical Council, 186; unqualified, personation by, 1308; locomotion for, 1383
Association, the After-Care, annual meeting of, 363
— American Medical, annual meeting of, 1541
— American Public Health, subjects for consideration at annual meeting of, 1137
— Army Health, the Army and Navy Gazette on, 1560
— Army Purity, the Army and Navy Gazette on, 1560
— of Asylum Workers, annual meeting of, 883
— Bolton and District, of Colliery Surgeons, annual dinner of, 32
— British for the Advancement of Science, the meeting of in Bradford in 1900, 747; arrangements for the Dover meeting of, 1359
— British Dental, annual meeting of, 1303; annual dinner, 1304
— British Laryngological, Rhinological, and Otolological, meeting of, 412, 1152
ASSOCIATION, BRITISH MEDICAL, programme of annual meeting, 49, 438, 824, 1123, 1493; annual museum, 50, 438, 825, 1125, 1499; and the Colonial Office, 166; and the prevention of tuberculosis, 362; and canvassing, 771; list of authors and others who have presented books to the library of, 858, 1290; grants for scientific research, 982, 1057, 1122, 1170, 1290, 1370, 1434; research, scholarship, 982, 1057, 1122, 1170, 1290, 1370, 1434; Ernest Hart scholarship, 982, 1057, 1122, 1170, 1290, 1370, 1434; financial statement for the year 1898, 994; and direct representation on the General Medical Council, 1366, 1423, 1439, 1509; leading article on the annual meeting of, 1453;
— Council, proceedings of, 239, 694, 993; and the Midwives Bill, 373; and medical aid associations, 617; and secret commissions, 924
— Parliamentary Bills Committee, meeting of, 241, 349, 800, 996; the case of Dockrell v. Dougal, 241; the prevention of tuberculosis, *ib.*; the Midwives Bill, 241, 349; vaccination, 241; adulteration of food and drugs, *ib.*; superannuation and tenure of office of medical officers of health, 241, 353, 997; Scottish Poor-law medical officers, 241, 996; military titles of retired medical officers, 242; coroners and magistrates, *ib.*; registration of plumbers, *ib.*; central fund for the superannuation of Poor-law medical officers, 242, 353; report of subcommittee of on tuberculosis, 242; the need for further vaccination legislation, 353; post-mortem examinations for coroners, 372; the Medical Acts Amendment Bill, 800; incipient insanity, 996; the regulation of massage establishments, *ib.*; hospital ships for invalids, *ib.*; adulteration of food and drugs, 997; London Government Bill, *ib.*; Companies (Medical Profession) Bill, *ib.*
Aberdeen, Banff, and Kincardine Branch, new members, 501, 1246; communications, 501, 937, 1246; the prevention of tuberculosis, 997; the cold bath treatment of typhoid fever, 1372; the Widal test, *ib.*; summer meeting, *ib.*
Bath and Bristol Branch, confirmation of minutes, 309; new members, 309, 557, 1437; the etiology and prevention of tuberculosis, 309; Vaccination Act 1868, 557; unregistered and advertising dentists, *ib.*; papers, *ib.*; uterine neuroses, 876; Mediterranean fever, *ib.*; wiring of the patella, *ib.*; hemorrhagic pancreatitis, *ib.*; communication, 1126, 1437

ASSOCIATION, BRITISH MEDICAL, Birmingham and Midland Counties Branch, infantile uterus, 212; double pyosalpinx, *ib.*; nephrectomy for malignant kidney, *ib.*; tubal pregnancy, 213; radiograph of pelvis showing position of hair-pin in vagina, *ib.*; myeloid sarcoma of uterus, *ib.*; papers, 213, 476, 794; method of increasing the movement of an artificial eye, 474; spastic paresis, *ib.*; duodenal growth, *ib.*; sutured intestine, *ib.*; ulcerative colitis, *ib.*; liver from a case of gall stones, *ib.*; disease of elbow-joint, *ib.*; multinodular myoma of uterus, 475; uterine fibroid with ovarian cyst, *ib.*; nephrectomy for chronic calculous nephritis, *ib.*; ulerythema sycosiforme *ib.*; splenectomy for rupture, *ib.*; perforated gastric ulcer, operation, recovery, *ib.*; osteoma of arm, *ib.*; nœvus of soft palate, *ib.*; specimens, 476; tonsil guillotine, *ib.*; typhilitis and colitis wrongly diagnosed as inflammation of the vermiform appendix, 732; acute transient general anasarca, *ib.*; gangrene of the lung, *ib.*; pyosalpinx of 17 years' standing, *ib.*; gumma of sclerotic, *ib.*; cyst of broad ligament, 733; early lympho-sarcoma of vermiform appendix, *ib.*; coloboma and malformation of auricle, 793; large gall stone, 794; compound fracture of skull, *ib.*; wrench for clubfoot, *ib.*; traumatic clubfoot, *ib.*; local conditions and malignant disease, *ib.*; embolism of the central artery of the retina, 1029; peripheral neuritis, 1030; injury and shortening of the femur, *ib.*; electrical stimulation of the exposed cortex cerebri, *ib.*; renal calculus, *ib.*; hydatid of liver, *ib.*; urinary organs from a case of impacted calculus, 1031; election of officers, 1280; hydatid of lung, *ib.*; trichorhexis nodosa, *ib.*; papilloma of larynx, *ib.*; irregular ataxia, 1281; trephining for head injury with convulsions, *ib.*; lumbar nephrectomy for pyonephritis and perinephritic inflammation, *ib.*; lumbar nephrectomy for secondary hæmorrhage following the removal of renal calculus, *ib.*; empyema of antrum, *ib.*; sarcoma of vagina, *ib.*; panhysterectomy, *ib.*; tumour of scapula, 1282

Border Counties Branch, confirmation of minutes, 308; new members, *ib.*; coroners' inquiries and medical evidence, *ib.*; communications, 309; dinner, *ib.*

Border Counties Branch, Counties of Roxburgh, Berwick, Selkirk, and Peebles District, confirmation of minutes, 557, 1057; next meeting, 558; discussion, *ib.*; the late Dr. Murray, *ib.*; communications, 558, 1058; unregistered dentists, 1057; Royal Medical Benevolent College, *ib.*; new members, *ib.*; direct representation on General Medical Council, 1058; dinner, *ib.*

British Guiana Branch, alteration in by-law, 666; medical ordinance of Trinidad, *ib.*; statement of accounts, *ib.*; president's address, *ib.*; specimens, *ib.*

Cambridgeshire and Huntingdonshire Branch, election of officers, 1554

Dorset and West Hants Branch, annual meeting, 1246; vote of thanks to retiring resident, *ib.*; Branch council, *ib.*; representative on Association Council and Parliamentary Bills Committee, *ib.*; new members, 1247; summer meeting, *ib.*; communications, *ib.*; Midwives Bill, *ib.*; discussion, *ib.*; dinner, *ib.*

Dublin Branch, annual meeting, 371; report of council, *ib.*; election of officers, *ib.*; vote of thanks to outgoing president, *ib.*; president's address, *ib.*; votes of thanks, *ib.*; tuberculosis in Ireland, *ib.*; dinner, 372

Dundee and District Branch, conjoint meeting of with Edinburgh and Perthshire Branches, 758

East York and North Lincoln Branch, new members, 309, 1437, 1438; cases, 309, 1437; specimens, 309, 1437, 1438; papers, 309, 1438; instruments, 309; confirmation of minutes, 1437, 1438; discussion, 1438; annual meeting, *ib.*; lunch, *ib.*; exhibition, *ib.*; business meeting, *ib.*; election of officers, *ib.*; donations, *ib.*; illegal certification of unqualified practitioners, *ib.*; votes of thanks, *ib.*; president's address, *ib.*; tea, *ib.*

Edinburgh (Fife and Lothians) Branch, conjoint meeting of with Perthshire and Dundee and District Branches, 758; demonstration, *ib.*; pathological preparations, casts, etc., 759; instruments, etc., *ib.*; clinical congress, *ib.*; electrical apparatus, *ib.*; sanatoria for consump-

tives, 760; surgical demonstrations, *ib.*; dinner, *ib.*

ASSOCIATION, BRITISH MEDICAL, Gibraltar Branch, confirmation of minutes, 1306; election of officers, *ib.*; vote of thanks, *ib.*; new members, 1307; ordinary meeting, *ib.*; exhibition of cases, *ib.*; contributions, *ib.*

Glasgow and West of Scotland Branch, secretary's report, 824; Midwives Bill, *ib.*; clinical demonstration, *ib.*; election of officers, *ib.*; dinner, *ib.*

Hong Kong and China Branch, representative of Branch on Association Council, 437; new members, 437, 697; communications, 437, 697; balance sheet, 437; election of officers, *ib.*; retiring president's address, *ib.*; injury to the knee-joint, 697; vote of thanks, 697, 1307; confirmation of minutes, 1307; scurvy in the navy and merchant service, *ib.*; the biology of the so-called Manila fever, *ib.*

Jamaica Branch, report of proceedings for 1897, 696; officers, etc., *ib.*

Lancashire and Cheshire Branch, payment of Branch representatives, 627; the Vaccination Act, *ib.*; Midwives Bill, 628; medical and surgical communications, *ib.*; medical appliances, *ib.*; dinner, *ib.*

Metropolitan Counties Branch, North London District, confirmation of minutes, 180, 695, 1247; diseases and deformity of spine, 180; cases, *ib.*; votes of thanks, 180, 696, 1247; surgical treatment of gastric ulcer, 696; visit to wards, *ib.*; election of officers, 1247; night terrors, *ib.*

Metropolitan Counties Branch, South-Eastern District, confirmation of minutes, 308, 628, 1371; demonstration of cases, 308, 628; votes of thanks, 308, 628, 1372; carcinoma of stomach, 628; election of officers, 1371; demonstrations, *ib.*

Metropolitan Counties Branch, West London District, confirmation of minutes, 876; communications, *ib.*; votes of thanks, 876, 1372; tea, 876; election of officers, 1372; report to Council of Branch, *ib.*

Midland Branch, Lincolnshire Division, communications, 696

North of England Branch, confirmation of minutes, 1436; unattached members, *ib.*; resolution, *ib.*; cases, *ib.*; specimens, 1437; dinner, *ib.*

North of Ireland Branch, confirmation of minutes, 372, 1306; new members, 372, 1306; National Association for the Prevention of Consumption, 372; communications, 372, 1306; the late Dr. O'Hara, 1306

Perthshire Branch, confirmation of minutes, 372, 628; new members, 372, 628; the prevention of tuberculosis, 372, 628; tuberculous disease of glands and joints, 372; conjoint meeting with Edinburgh Branch, 628, 758

Shropshire and Mid-Wales Branch, confirmation of minutes, 1372; Branch representative on Council, *ib.*; new members, *ib.*; the late Dr. Jukes de Styrap, *ib.*; resignation of honorary secretary, *ib.*; election of honorary secretaries, *ib.*; the late Dr. J. Gill, *ib.*; accommodation for medical witnesses, *ib.*; vaccination and the "conscience clause," *ib.*; Dr. Charnley and the BRITISH MEDICAL JOURNAL, 1372, 1554; the etiology of cancer, 1372; vote of thanks, 1373; communications, *ib.*; tea, *ib.*

Southern Branch, Isle of Wight District, confirmation of minutes, 308; the diagnosis of typhoid fever, *ib.*; operations for bronchocele, *ib.*; cases, *ib.*; annual meeting, 308, 1371; dinner, 308; election of officers, 1371; president's address, *ib.*; papers, *ib.*; proposed discussion on vaccination, *ib.*; next meeting, *ib.*

Southern Branch, Winchester District, confirmation of minutes, 1437; election of officers, *ib.*; accounts, *ib.*; communications, *ib.*

South-Eastern Branch, East Kent District, conjoint meeting of with West and North Kent Districts, 877; representative of districts on Council, *ib.*; the General Medical Council and direct representation, *ib.*; dinner, 877, 1436; annual meeting of, 1436; confirmation of minutes, *ib.*; accounts, *ib.*; election of honorary secretary,

ib.; meeting in September, *ib.*; meeting in March, 1900, *ib.*; chairman for September meeting, *ib.*; visit to cathedral, *ib.*

ASSOCIATION, BRITISH MEDICAL, South-Eastern Branch, North Kent District, conjoint meeting of with East and West Kent Districts, 877, 1192; confirmation of minutes, 1192, 1306; new members, 1192; communications, 1192, 1247, 1306; annual dinner, 1192; next meeting, 1247, 1306; tea, 1247, 1306; nominations to Branch council, 1306

South-Eastern Branch, West Kent District, conjoint meeting of with East and North Kent Districts, 877

South-Eastern Branch, East Sussex District, communications, 876; cardiac failure, 1305; cases and specimens, 1306

South-Eastern Branch, West Sussex District, confirmation of minutes, 876; next meeting, *ib.*; surgical affections of abdominal viscera, *ib.*; transposition of viscera, 877; specimen, *ib.*

South of Ireland Branch, confirmation of minutes, 1058; unattached members, *ib.*; president-elect, *ib.*; hospital abuse, *ib.*; Irish Medical Association, *ib.*; vaccination and revaccination, *ib.*

South Wales and Monmouthshire Branch, multiple uterine fibroid, 628; extrauterine gestation, *ib.*; neurotomy for neuralgia, *ib.*; cholecystotomy, *ib.*; cases and specimens, 629; luncheon, 1191; confirmation of minutes, *ib.*; new members, *ib.*; resolution as to dinner, *ib.*; Eastern Valley Medical Association, *ib.*; notice of motion, 1192; antitoxin in diphtheria, *ib.*; medical aid associations, *ib.*; communications, *ib.*; votes of thanks, *ib.*

South-Western Branch, luncheon, 244; confirmation of minutes, 245, 998; new members, 245; case, *ib.*; papers, *ib.*; the prevention of tuberculosis, *ib.*; specimens, *ib.*; tea, *ib.*; Midwives Bill, 998; direct representation on General Medical Council, *ib.*; unregistered dentists and the administration of anaesthetics, *ib.*; communications, *ib.*

Staffordshire Branch, confirmation of minutes, 558, 1553; new members, 558, 1553; death of Dr. J. Y. Totherick, 558; papers, *ib.*; specimens, 558, 1554; operation for knock-knee, 1554; excision of urethra for impermeable stricture, *ib.*; nephro-lethotomy, *ib.*; the use of electric mains for medical purposes, *ib.*

Sydney and New South Wales Branch, confirmation of minutes, 180, 501; new members, 180; communications, 180, 501

West Somerset Branch, special meeting of, 1058

Yorkshire Branch, new members, 308; communications, *ib.*; exhibits, *ib.*; dinner, *ib.*; vote of thanks, *ib.*

Association, Brussels Medical Graduates, the robemakers of, 1447

Colonial Nursing, appeal for funds for, 1180

for the Compulsory Registration of Midwives, annual meeting of, 1513

Cork Dispensary Doctors, and the Irish Medical Association, 1073

Dewsbury and District Chemists' and the assistant's certificate of the Society of Apothecaries, 879

Eastern Valley Medical and contract practice, 608, 1055, 1191

Essex Nursing, annual meeting of, 1051

Forfarshire Medical, meeting of, 478, 736, 971, 1224

French for the Advancement of Science the coming Congress of, 1548

French Anatomical, meeting of, 348

French Medical Press, meeting of, 511

Health and Sickness, experience as to, 64

Hospital Reform and the proposed consulting scheme for Birmingham, 1249; report of council of, 1344

the Hospitals, annual meeting of, 806

Irish Medical, the coming annual meeting of, 879; proposed meeting of in Cork, 1073, 1445, 1513; annual meeting of, 1550

- Association, Irish Medical Schools and Graduates, annual meeting of, 741; annual dinner, *ib.*
- of, 1053
- Kensington Nursing, annual report of, 1119
- Lagney, general assembly of, 877
- Manchester, Warehousemen and Clerks, the wage limit, etc., of, 377
- Metropolitan Medical Provident, meeting in support of work of, 1433
- Metropolitan Nursing, annual meeting of, 1119
- National for the Prevention of Consumption and other Forms of Tuberculosis, the presidency of, 430; general meeting of, 1187; Mr. J. Kyle on, 1200
- National Vaccination Officers', meeting of, 486
- Poor-law Medical Officers', deputation to Dr. Farquharson, 571
- a Provident Dispensary and Nursing, 1238
- of Public Vaccinators and the vaccination order, 42
- of Registered Medical Women, meeting of, 155, 413, 672, 971, 1163, 1468
- St. John Ambulance, the Stockport centre of, 992, 1073, 1316
- Sanitary Inspectors', presidential address, 129
- Scottish Poor-law Medical Officers', annual meeting of, 490
- State Children's Aid, annual report of, 988; memorial of as to the children at Sutton, and Derby Day, 1257
- Up-Country Nursing, the work of, 495
- Vaccination Officers', on the conscience clause of Vaccination Bill, etc., 177, (See also Association, National Vaccination Officers')
- Valentin Haüy, annual report of, 629
- Associations, medical aid, consultants for, 122; medical, and the Royal College of Physicians in Ireland in, 191; medical aid and unqualified assistants, 387; information as to, *ib.*; medical aid and the Council of the British Medical Association, 67, 633; medical aid, correspondence as to, 702, 761, 880, 1002, 1062, 1447; medical aid and friendly societies, 1055; and the General Medical Council, 1120, 1557; lay, medical practice by, 1175, 1195; medical aid, the South Wales and Monmouthshire Branch and, 1192
- British Medical and Medical-Psychological, meeting of joint committee of, 501; deputation to Lord Chancellor, 625
- Asthma, bronchial, climate for, 255; the nature of, 719; nasal treatment of, 1331
- Astragalus, dislocations and fractures of the, 536
- Asylum, Aberdeen Lunatic, fire at, 383
- Barnwood House, annual report as to, 1380
- City of London, report of, 1559
- Claybury, the pathological laboratory at, 420
- Cork District Lunatic, report of, 1136
- Darenth, diphtheria at, 452
- Donegal District, vote of appreciation of services of officers of, 1254
- Dorset County, annual report of, 571
- Down District, vote of appreciation to medical officers of, 1009
- Earlswood, for Idiots, annual report of, 511
- Fife and Kinross, annual report of, 511
- Richmond, Dublin, proposed provision for phthisical patients in, 430; votes of thanks to officers of, 1254
- Royal, Aberdeen, report of, 440
- Royal, Dundee, report of, 639
- Royal, Edinburgh, annual report of, 555
- Worcester County, annual report of, 571
- Asylums, phthisis in, 430; Scottish, the laboratory of, 615
- Ataxia, irregular, 1281
- Athens, hospital for sick children at, 883
- Atrepsy of Parrot, 1084
- Atkinson, F. E., the incubation period of typhoid fever, 806
- F. P., Cheyne-Stokes respiration, 1152
- T. R., a case of belladonna poisoning, 469; cycle saddles, 575; an open safety-pin removed from a child's oesophagus, 661
- Atlas, der Hautkrankheiten, F. Mracek, *rev.*, 217; of Illustrations of Pathology, *rev.*, 605; der Syphilis und syphilisähnlichen Hautkrankheiten, M. Chotzen, *rev.*, 857; der ausseren Erkrankungen des Auges, O. Haab, *rev.*, 1101; de Microbiologie, E. Macé, *rev.*, 1285; Anatomical of Obstetric Diagnosis and Treatment, O. Schaeffer, *rev.*, 1399; an anatomical, 1567
- Atrophy, muscular, Erb's juvenile form of, 409; muscular, recommencing long after infantile paralysis, 533
- Attendance, gratuitous on medical men and their families, 515
- Atthill, W. L., preliminary education in Ireland, 633
- Auld, A. G., additional observations on the function of the suprarenal gland, 1327
- Auricle, coloboma and malformation of, 793
- Austin, J. A., Manual of First Aid, *rev.*, 1339
- Australia, women dentists in, 1009; for patients with a consumptive history, 1076
- Austria, the medical profession in, 512; an ambulance ship for, 1052
- Auto-intoxication and its relation to the treatment of disease, 535
- Automobile, the, in skiagraphy, 888
- Axis traction with ordinary forceps, 124
- B.
- Babbie, Major W., made C.M.G., 1422
- Bacilli, of tubercle, in butter, 171; of plague, confiscation of, 502; and beards, 1427
- Bacillus, the typhoid, cystitis of three years' standing due to, 78; tuberculosis, action of essential oils, etc., on, 202; the Timothy grass, 296; the typhoid, agglutinability of different races of, 344; of tubercle, cultivation of, 386; of diphtheria, 411; of plague, action of disinfectants on, 433; coli communis and the bacillus typhosus, a test for the differentiation of, 452, 576; the modern doctrine of, 1003; of diphtheria, a modification of Neisser's diagnostic sign for, 1213; of tubercle, discussion on at the Berlin Congress, 1346
- Back of Beyond, a vision of the, 1486
- Bacteria, Pathogenic, J. McFarland, *rev.*, 1227
- Bacteriology, municipal, 105; Clinical, Elements of for Practitioners and Students, E. Levy and F. Klempner, *rev.*, 158; and public health in Edinburgh, 924; the modern doctrine of, 943; relations of with epidemiology, 1094
- Bader, Mr., death of, 567
- Baginsky, A., the atrophic marasmus of nurslings (so-called hospitalism or atrepsy of Parrot), 1084; Handbuch der Schulhygiene, *rev.*, 1399
- Bain, W., the relative excretion of the nitrogenous waste products in a case of liver abscess, 1028; the solvent action of certain British and foreign mineral waters on the bismuth of sodium, 1392
- Baird, J., erythrol tetranitrate, a caution, 132
- Baldness, a new cure for, 167; the operative treatment of, 492
- Balfour, Mr. A. J., the Irish University scheme of, 289
- M. I., symphysiotomy for contracted pelvis followed by nearly normal labour two years later, 403
- Ball, Dr. E., successful action by, 1195
- Ballance, C. A., aortic aneurysm, involvement of sensory nerve roots, sudden paraplegia, laminectomy, death, 84
- Ballantyne, J. W., the pessary in gynaecological practice, 476; on antenatal therapeutics, 889
- Balneology, and Climatology, reviews of books on, 416; an object lesson in, 1549
- Bangs, L. B., An American Textbook of Genito-Urinary Diseases, Syphilis and Diseases of the Skin, *rev.*, 91
- Banks, A., operation for bronchocele, 308
- W. M., faucial tumours, 278; operative treatment of diseases of the jaw, 852; honorary degree of LL.D. conferred on by University of Edinburgh, 932, 988; gets knighthood, 1452
- Bantock, G. G., the germ theory of diseases, 730, 846; the modern doctrine of bacteriology, 1003
- Barbour, A. H. F., The Anatomy of Labour as Studied in Frozen Sections, and its Bearing on Clinical Work, *rev.*, 499
- Barendt, F. H., leucoderma colli, 852; prurigo ferox, 968
- Barker, A. E., sequel to a case of papilliferous carcinoma of the thyroid gland, 150; pancreatic cyst treated by incision and drainage, 663; revolver shot of the brain through the hard palate, operation, recovery, 1093; some cases illustrating the surgery of the stomach, 1205
- Surgeon-Lieutenant-Colonel J., fatal malady prevalent among dogs, 1012
- P. D., stone in the bladder which had formed round an ordinary pin as a nucleus, 1275
- Barley malt, with cream, 1286
- Barling, H. G., perforated gastric ulcer, operation, recovery, 475; typhilitis and colitis wrongly diagnosed as inflammation of the vermiform appendix, 732; early lympho-sarcoma of vermiform appendix, 733; lumbar nephrectomy for pyonephritis and perinephritic inflammation, 1281; lumbar nephrectomy for secondary hæmorrhage following the removal of renal calculus, *ib.*
- Barlow, T., myopathy in a boy aged 5 years, necropsy, 406; appointed University of London Commissioner, 688
- Barnard, H. L., certain points in the pathology of the pericardium, 792
- Barnwood House. See Asylum.
- Barr, J., on meningitis, 537
- Barratt, J. O. W., the influence of pathological states upon the elimination of water and carbon dioxide by the skin, 79
- Barrs, A. G., the serum treatment of diphtheria, 213
- Barwell, R., congenital deformities of limbs, 19; lateral curvature of the spine, its prevention and treatment, 137, 264, 1207
- Basch, v., new instrument for making thoracic measurements, 1041
- Basement rooms, the flooding of, 171
- Bateman, A. G., personation by unqualified assistants, 1308
- Bath, the British and the British blood, 1295
- Bathgate, enteric fever at, 1379
- Baths, hot air, 64, 144; electric light and heat, 638; and exercise in aortic disease, 1094; cold in typhoid fever, 1372
- Batt, Surgeon E. D., death of, 946
- Batten, F. E., progressive muscular atrophy after measles, 151; myopathy in a boy aged 5 years, necropsy, 406; the pathology of diphtheritic paralysis, 1092
- R. D., filamentary keratitis, 1158
- Dr. R. W., and the Gloucester General Infirmary, 1559
- Battersby, J., traumatic separation of the costal epiphysis, 150
- Major J. C., the Roentgenrays in military surgery, 112
- Battie, Dr. W., particulars as to, 387
- Battle, W. H., removal of a large malignant frontal tumour with underlying bone, 664; cephalohydrocele, 906; results of gastrostomy by Albert's method, 907; excision of malignant growths of large intestine, *ib.*
- Bavaria, the code of medical ethics in, 1050
- Baylor, E. A. C., valvular drainage tubes in empyema, 148
- Beadles, C. F., lesions of the adrenals in the insane, 851
- Beards and bacilli, 1427
- Beards, E. J., placenta dimidiata with bifurcation of the cord, 850
- Beatson, G. T., the use of the nailbrush in aseptic practice, 316; the etiology of cancer, with a note of some experiments, 399; oophorectomy for mammary cancer, 442
- Beattie, T., functional opisthotonos, 216
- Beaumont, E., an astigmatic test chart, 28
- W. M., a colour-blind, myopic railway servant, 1274
- Bebb, Pike v., 321
- Bedminster, instruction at the cottage hospital at, 1377
- Beer, pure, for New York, 640
- Beever, C. E., a case of obliteration of a branch of the retinal artery following frequent attacks of temporary amblyopia, 1466
- Sir H., rheumatoid arthritis, 534
- Belcher, H. E., obstinate hiccup, 1332
- Belfast, the epidemic of typhoid fever at, 193; the prevention of tuberculosis at, 367, 916; correspondence from, 373, 440; the new Royal Victoria Hospital, 373; health of, 374; the Irish University question and Ulster, *ib.*; the value of the objection to a northern university, *ib.*; proposed affiliation of Queen's College with Trinity College, Dublin, 374; the board of guardians of and consulting fees, 1223
- Belgium, inebriety in, 188; the prevention of tuberculosis in, 223
- Bell, J., Notes on Surgery for Nurses, *rev.*, 858
- W. L., hernia of the ovary, 1395
- Belladonna in the treatment of broncho-pneumonia in children, 207, 314; poisoning by, 469; for eczema in children, 576
- plaster, the sale of, 388; poisoning by the application of, 849, 952, 1274
- Bengal, hospitals and dispensaries in, 484
- Bennett, E. H., dislocations of the metatarsus on the tarsus, 1396
- W. H., On Varix and Thrombosis, *rev.*, 1286
- Benson, G. V., appointed coroner for Lewes Division of Sussex, 750
- Mr. J., death of, 882
- J. R., a case of hæmaturia from movable kidney cured by nephrorrhaphy, 17

- Bequests, 61, 333, 384, 512, 572, 915, 920, 1005, 1073, 1101, 1180, 1344, 1425, 1459, 1546, 1564
- Bergmann, E. v., *Die chirurgische Behandlung von Hirnkrankheiten*, rev., 798
- Beri-berl, the clinical features of, 409; periodic prevalence, 1297; four cases of on board ship, 1332
- Berlin, correspondence from, 50, 117, 246, 372, 630, 697, 938, 1126, 1508; the establishment of sanatoria for consumptive patients in Germany, 50; revision of the German "Pharmacopœia," *ib.*; Professor Esmarch on the Dum-dum bullet, 51; general news, 51, 117; death of Professor Gurli, 117; lung sanatoria in Germany, *ib.*; a new medical journal, *ib.*; proposed health legislation, 246; medical examinations, *ib.*; medical courts of honour, 372, 1126, 1508; a hygienic institute at Posen, 373; the German Samaritan Society, *ib.*; the repression of quackery, *ib.*; the vaccination law, *ib.*; the German Laryngological Society, 630; the forthcoming Tuberculosis Congress, *ib.*; a municipal sanatorium for, *ib.*; sickness, insurance, and phthisis, *ib.*; new homes for inebriates, *ib.*; the Congress of Balneology, 697; sick nursing, *ib.*; nursing exhibition in, 937; a National Health Society, 938; Professor Virchow on the standard of education in Germany, *ib.*; mixed clinical classes, *ib.*; the position of district physicians, 1126; the language of medical certificates, *ib.*; Pasteurism in, 1507; proposed school for tropical diseases at Hamburg, 1508; overwork in schools, *ib.*
- Berlin's operation for entropia, 669
- Bertilin, classification of causes of death, 1051
- Bibliothek (medizinische) für praktische Aerzte, Schürmayer, rev., 158
- Bickerton, T. H., Berlin's operation for entropia, 669
- Bicycle, the, and diseases of women, 38; tyres for, 1260
- Bicycling without the use of the handles, 1048
- Bidwell, L. A., surgical treatment of gastric ulcer, 695
- S., multiple images in the normal eye, 362
- Bigger, E. C., operation for perforated typhoid ulcer, 89
- Bile inoculation and rinderpest, 556
- Bill, the Census for 1901, 558
- Constructive Murder Amendment, principal clauses of, 560; possible delay of, 750
- the Education, introduction of in House of Lords, 682
- to Extend the Infectious Disease (Notification) Act 1889, text of, 860; leading article on, 862
- London Government, opinions of metropolitan medical officers of health as to, 544; leading article on, 547, 611; and the London County Council, 863
- new Lunacy, remarks on, 864; summary of provisions of, 918; leading article on, 921; the pension clauses of, 1051, 1140, 1243
- Medical Acts Amendment (proposed), 291, 489, 576, 620
- Metropolitan Water Companies, introduction of, 489
- Midwives, a new, 41; a new, text of, 46; correspondence as to, 52, 121, 174, 442, 455, 503, 559; omissions from, 114; an alternative scheme, 115; Dr. Watt on, 115, 175; and the council of the Association, 313; of the Parliamentary Bills Committee, text of, 350; the Midwives Institute and the, 442, 690; leading article on, 679; contrasted with the Bill of the British Medical Association, 690; advertisement in "Daily Mail" as to, 1076; the supporters of, 1200; the Wood Green and District Medical Society and the East Suburban Medical Society on, 1537
- the Oysters, a plea for urgency for, 1545
- Pharmacy Act Amendment, text of, 874; correspondence as to, 1067; and counter prescribing, 1192, 1249, 1310
- Poor-law Officers' Superannuation Amendment, object and backers of, 510
- to Prohibit Medical Practice by Companies, leading article on, 861; text of, 874
- Public Health Acts Amendment, summary of provisions of, 498
- a Revaccination, proposals as to, 353, 495
- Secondary Education, sketch of provisions of, 864
- Billroth, T., The Care of the Sick at Home and in the Hospital, rev., 797
- Bills, London water, 766
- Birds, infection of by mosquitos, 432
- Birkenhead, the water supply of, 951
- Birks, Mr. E., death of, 1059
- Birmingham, proposed university for, 810; proposed consulting institute for, 1186, 1233, 1249, 1430, 1439; Mr. Carnegie's gifts for the new university for, 1248; correspondence from, 1374, 1555; proposed crematorium for, 1555
- Birthday honours, 1421, 1512
- Bishop, E. S., operation for uterine fibroids, 215; uterine calculi, 734; an appeal, 1060, 1200, 1448
- Biurite of sodium. *See* Sodium
- Blackburn, the prevention of tuberculosis at, 173
- Blackwater fever. *See* Fever hæmoglobinuric
- Bladder, urinary, profuse spontaneous hæmorrhage into, 336; male, multiple calculi removed from narrow-necked sacculi connected with, 789; urinary, encysted calculi in, 1141, 1157; stone in the which had formed round an ordinary pin as a nucleus, 1275
- Blake, E., On the Study of the Hand, etc., rev., 857
- T. W., is petroleum emulsion of any nutritive value? 880
- Blaxall, F. R., relations of bacteriology with epidemiology, 1004
- Blenkarne, W. L.H., the General Medical Council and the L.S.A., 1002; the Pharmacy Bill and counter prescribing, 1310; should doctors be allowed to dispense? 1557
- Blood (The), how to Examine and Diagnose its Diseases, A. C. Coles, rev., 674; absorption of oxygen by the, 1120; the British and the British bath, 1295; of the originals of British Guiana, probable parental form of the sharp-tailed filaria found in, 1459
- Blue Book, the Royal, 637, 706, 768
- Board, Local Government (England), report of the medical officer of for 1897-98 (administrative business, enteric fever at Maidstone, cholera and plague, oysters and enteric fever, enteric fever at King's Lynn, Bury water service, county council representation), 109; (bacillus enteritidis sporogenes, the chemical and bacteriological examination of soil, bacteriological evidence of pollution of potable waters, the growth of the typhoid bacillus in soil, microbes associated with scarlatina, glycerinated calf lymph, the microbes associated with variola), 161
- Local Government (Ireland) and dispensary districts, 362; deputation to on Irish Poor-law service, 748; duties of medical inspectors of, 887
- Boats, unsinkable, 1200
- Bocquillon-Limousin, H., *Formulaire des Médicaments Rouvieux*, rev., 972
- Bodies, foreign. *See* Foreign
- suprarenal. *See* Suprarenal
- Boghean, cardiac skiagraphs, 1041
- Bolam, sphygmometer and new form of sphygmograph, 216
- Bollinger, tuberculosis in domestic animals, 1346
- Bombay, the plague in, 369, 435, 500, 627, 692, 700, 751; hospitals and dispensaries in, 484; plague precautions at, 700; sanitary precautions at, 1130; the "jigger" in, 1380; the sanitation of, *ib.*
- Bond, F. T., Jennerian literature, 57
- Bone, transplantation of, 216; central sarcoma of, 1397
- Bonnier, P., L. Oreille, rev., 1166
- Boobyer, P., ten years experience of typhoid fever in a Midland town, 536
- Book, kissing the, 299
- Bootmaking, army, 767
- Boric acid, symptoms of poisoning by, 17; toxic effects of, 209
- Borderland cases, the lunacy laws and, 314, 504, 634, 700, 711
- Bouchacourt, L., *De l'Exploration des Organes Internes à l'Aide de la Lumière Eclairante et non-Eclairante*, rev., 159
- Bournemouth, the prevention of tuberculosis at, 222, 980
- Bourneville, *Recherches Cliniques et Therapeutiques sur l'Epilepsie, l'Hystérie et l'Idiotie pendant l'Année 1897, au Bicêtre*, rev., 92
- Bousfield, E. C., the General Medical Council and the Society of Apothecaries, 374
- Bowels, hæmorrhage from in a case of granular kidney, 1025
- Bowhill, T., *Manual of Bacteriological Technique and Special Bacteriology*, rev., 480
- Bowly, A., surgical affections of abdominal viscera, 876
- Bowron, Surgeon-Major, death of, 616
- Boy, epileptic, home for, 255, 323; aged 5 years, myopathy in, necropsy, 406; aged 2½ years, strangulated inguinal hernia in a, operation, operation, recovery, 788; deaf and dumb, home for, 831; aged 3 years, cystic disease of the breast in a, 851, 1026; mentally deficient, home for, 1447
- Boyd, Dr. M. A., obituary notice of, 635
- S., oophorectomy in the treatment of cancer of the breast, 257; alveolar sarcoma of the rectum, 341; solution of continuity of both femora, 1092; excision of the posterior half of the tongue and epiglottis, 1093
- Bradbury, J. B., on some points connected with sleep, sleeplessness, and hypnotics, 1528
- Bradford, increase of hospital patients at, 38
- proposed appointment of visiting medical officers to workhouse infirmary at, 253; appointments to the workhouse infirmary at, 1505
- Bradshaw, T. R., on vaccination and small-pox, 501; the morbid anatomy and pathology of myelopathic albumosuria, 662
- Braidwood, P. M., ambulance ships in the Royal Navy, 1568
- Brain, revolver wound of, 88; a new theory of the activity of and sleep, 93; some uncertainties in the diagnosis of tumours of the, 333; a nail in the, 503; The Surgical Treatment of Diseases of, E. v. Bergmann, rev., 798; dysarthria and delay in learning to speak following disturbance of in infancy, 1027; revolver shot of the, through the hard palate, operation, recovery, 1093; the connections of the frontal lobe of, 1297
- Braine-Hartnell, C., climate and the cure of consumption, 1194
- Braithwaite, J. O., The Pharmaceutical Formulary, rev., 972
- Bramwell, B., two cases of gangrene of the lung, 70
- Bransford, Assistant-Surgeon, J. W., heroism of, 835
- Brasher, C. W. J., syphilitic diseases, their prevention, study, and treatment, 1375
- Bray, Mrs., The Cry of the Children, etc., rev., 798
- Breast, oophorectomy in cancer of the, 257, 442; excision of, in a patient almost pulseless, 272; decrease of uterine myoma after excision of, 531; unilateral hypertrophy from pressure, 533; operative treatment of malignant disease of, 603; tubercle of the, 634; male, fibroadenoma of, 725, 828, 1153; cystic disease of the, in a boy aged 3 years, 851, 1026; recurrent cancer of, cured by oophorectomy and thyroid extract, 906; excision of scirrhus of, "recurrence" nearly 12 years afterwards, 1025; spontaneous case of recurrent carcinoma of the, 1094; containing new growth removed from youth 18 years old, 1222; dissemination of cancer of the, 1452; the surgical treatment of, 1487; adeno-carcinoma of the, 1558
- Breoch cases, delivery of the arms when displaced upwards in, 1395
- Brehme, monument to, 1349
- Brentwood, the insanitary state of the industrial school at, 364
- Brereton, J. G., the diagnosis of typhoid fever, 408
- Brieger, treatment of pulmonary tuberculosis with tuberculin, etc., 1348
- Brierley, J. B., the Council of the Association and the Midwives Bill, 313
- Briggs, H., uterine fibroid, 88; vaginal section, 602; bone crochet book (4½ inches long) accidentally lodged within the peritoneal cavity, 1393
- Bright, Dr. J. M., obituary notice of, 250
- Brighton, increase of salary to medical officer of health of, 639; hospital reform at, 1177; poisoning by oysters at, 1545
- Bright's disease. *See* Disease
- Bristol, correspondence from, 51, 246, 502, 699, 827, 940, 999, 1308, 1438, 1509, 1555; disposal of sewage of, 51; the advantage of not ventilating sewers, *ib.*; the salary of the medical officer of health, 246; the guardians of and the payment of medical officers of "scattered homes" at, 305; the Jubilee Memorial Convalescent Home, 502; the superintendency of the fever hospital, *ib.*; a dissatisfied patient, *ib.*; the endowment of chairs in University College, 609; Hospital Sunday fund, 700; the convalescent home, *ib.*; the General Hospital, *ib.*; the Royal Hospital for Sick Children, 700, 1555; county medical officers of health, 827; the Eye Hospital, *ib.*; the Royal Infirmary and hospital abuse, 940; munificent bequests, *ib.*; the University College Colston Society, 999; proposed university at, *ib.*; date of dinner of new society, *ib.*; the Lean library bequest, 1308; the Royal Victoria Home, 1438; St. John Ambulance challenge cup, 1439; new municipal fever hospital, 1509; nurses' home of the Royal Infirmary, *ib.*; prevention of consumption, 1555; report on tuberculosis by the medical officer of health, *ib.*
- British Central Africa, hæmoglobinuric fever in, 160
- Guiana, the Government medical service in, 632; report of surgeon-general of, 823; pro-

- bable parental form of the sharp-tailed filaria found in the blood of the aboriginals of, 1459
- British North Borneo, the climate of, 643; the medical service of, 1260
- Pharmacopœia. *See* Pharmacopœia
- Broadbent, G. H., Railway Medical Officers' Union, 76
- W., pulsus bisferiens, 75
- Sir W., the conduct of the heart in the face of difficulties, 85
- Brodie, Dr. T. G., nominated director of Conjoint Board laboratories, 750
- Bromide of sodium. *See* Sodium
- Bromley, donation to the cottage hospital at, 61
- Bromohydrate of arecoline as a myotic, 82
- Bronchi, foreign bodies in the, 143; both, syphilitic stenosis of, 965
- Bronchiectasis, case of, 794
- Bronchitis, pneumonia and, 278; the causes and forms of, 645; excited by sulphurous acid, 1260
- Bronchocele, operation for, 308
- Broncho-pneumonia in children, belladonna in the treatment of, 207, 314
- Bronchus, left, tooth impacted in, gangrene of the left lung, death, 401; right, cartridge in the, 531
- Bronner, A., foreign body in œsophagus, 1097
- Brook, W. F., fibroma of base of skull removed through the cheek, 787
- Brouardel, Professor, elected dean of Paris medical faculty, 365
- Brown, A. C., on Dr. John Mayow, 1432
- H., Health and Sickness Association, 64
- W., the prevention of tuberculosis, 482
- Captain W. B., home defence and the Royal Army Medical Corps, 1070
- W. H., appendicitis, 670
- Browne, L., The Throat and Nose and their Diseases, *rev.*, 913; tonsillotomy and hæmorrhage, 951
- Sir T., proposed memorial to, 866; Mr. Robert Fitch on, 917; cost of works of, 1139; subscription to memorial to, 1303
- Browning, Major W. B., gets C.I.E., 32
- Bruce, A., diseases of the cerebellum, 212; the localisation and symptoms of disease of the cerebellum considered in relation to its anatomical connections, 1079
- Surgeon-General L. S., death of, 59, 125
- Bruns, Professor v., on English rifle bullets, 753
- Brunton, Dr. J., obituary notice of, 944
- T. L., spermium Poehl, 1129
- Bryan, Dr. F. C., presentation to, 707
- Bryant, J. H., a case of typhoid fever without any lesion of the intestine, which gave the Widal reaction during life, and from which the bacillus typhi abdominalis was obtained by culture from the enlarged mesenteric glands at the necropsy, 776
- T., on Villous Growths and the Common Affections of the Rectum, *rev.*, 971
- Buchanan, R., bronchiectasis, 794
- Mr. Robert, a vision of the Back of Beyond, 1488
- R. J. M., myxœdema treated with colloid, 88, 1460
- Captain W. J., green stools in enteric fever and dysentery, 469
- Bucharest, formation of a gynecological society at, 159; institute of bacteriology and experimental medicine in, 901
- Buenos Ayres, report of British Hospital at, 1464
- Buist, J. B., public or private vaccination? 981
- Bulgaria, the plague in, 1108
- Bulkeley, L. D., Manual of Diseases of the Skin, *rev.*, 481
- Bullet embedded in the heart for thirty-seven years, 38; the Dum-dum, Professor Esmarch on, 51
- Bulletins, medical and advertising, 1319
- Bullets, English rifle, continental criticism of, 752
- Buluwayo, memorial hospital at, 311
- Burdett, Sir H., on hospital abuse and paying wards, 806; The Nursing Profession, how and where to train, *rev.*, 1100
- Burdett's Official Nursing Directory, *rev.*, 1399
- Burial, premature, the prevention of, 576; proper and improper, with an examination of the claims made for cremation, 1261
- Burke, A. St. L., erythematous rash produced by small doses of quinine, 324
- Dr. J. S., death of, 699
- Burmah, hospitals and dispensaries in, 484; a new health record in, 1380
- Burnett, F. M., the prevention of tuberculosis, 124
- Burns, superficial, picric acid in, 1152, 1320
- Burns, Dr. R. J., plucky action of, 1176
- Robert and the Medical Profession, W. Findlay, *rev.*, 738; and the medical profession, 832
- T. G., nitrous oxide and oxygen, 668
- Burton, W. E., the General Medical Council, inspection of documents, 53; treatment of coryza, 1394
- Butler, Dr. H. J., obituary notice of, 764
- T. H., mastoid suppuration with hyperpyrexia and jaundice, operation, recovery, 1152
- Butter, tubercle bacilli in, 171
- Buzzard, E. F., paramœcium coli in cysts of the liver, 968
- T., the differential diagnosis of insular sclerosis from hysteria, 1077
- C
- Cadbury, Mr., munificent bequests by, 920
- Cadge, Mr. W., gives £10,000 to the Norfolk and Norwich Hospital, 107
- Cæsarean section, post mortem, 64; in the Philippines, 107; two successful cases of, 1090
- Cahill, J., unilateral hypertrophy of the breast from pressure, 533
- Caird, Principal, memorial to, 492
- Calaminis, artificial, 1336
- Calcification of adherent pericardium, 908
- Calcium carbide, composition of, 831
- Calculi, tonsillar, 14; ureteral, 734; multiple, removed from narrow-necked sacculi connected with male bladder, 789; biliary in children, 851; tonsillar, 1089; encysted vesical, 1141, 1157
- Calculus, renal, 1030; impacted, urinary organs from a case of, 1031; renal, lumbar nephrectomy for secondary hæmorrhage following the removal of, 1281
- Calcutta, the plague in, 179, 500, 692, 936
- Calderford, M., Willie, a Story of a Children's Hospital, *rev.*, 1101
- Caley, H. A., pulmonary fibrosis associated with tabes dorsalis and arthropathy, 534; considerations as to the etiology and significance of dilated heart, 1276
- Calif., congenital tuberculosis in the, 1001
- lymph, glycerinated, 805, 874
- Callender, T. M., delivery of the arms when displaced upwards in breech cases, 1395
- Calmette's antivenomous serum, the neutralising power of, its value in the treatment of snakebite, 781
- Calvert, J., aortic aneurysm as a cause of hypertrophy of the left ventricle, 84
- Calwell, W., an unnoticed cause of dyspepsia, 1032
- Camberwell, the prevention of tuberculosis in, 543; nursing at the infirmary at, 1289
- Cambridge, the prevention of tuberculosis at, 222
- Cameron, Sir C., made C.B., 31; the soil as a nursery of pathogenic organisms, 1374
- James, coal tar products, 1002
- J. (Belfast), two years' work at the Samaritan Hospital for Women, Belfast, 1160
- J. S., the spread of typhoid fever, 411
- Dr. J. (Liverpool), diamond jubilee of, 749
- Campbell, A. W., the pineal gland, 477
- H., asthenic bulbar paralysis, 534; paralysis of trapezius muscle, 1029
- J., nephorrhaphy for movable kidney, 89; Kraske's operation for cancer of rectum, 90; double pyosalpinx, 1220
- Dr. J. A., pension for, 387
- R., operation for perforated typhoid ulcer, 89
- Canada, the prevention of tuberculosis in, 223; medical practice in 771; the director-generalship of public health in, 991
- Canal, the alimentary, and human decay, 808, 1139
- Canaries and tuberculosis, 63
- Cancer, of rectum, Kraske's operation for, 96; of the breast, oophorectomy in, 257, 442; of the lip, a sore diagnosed as, recovery without operation, 338; the etiology of, with a note of some experiments, 399; vaginal hysterectomy for, 477; of Fallopian tube, 599; micro-organisms in, 748; the local incidence of, 803, 812; the topographical distribution of, 813; of breast, cured by oophorectomy and thyroid extract, 906; Uterine and Vaginal, the Results of the Radical Treatment of by the Cautey, G. Gellhorn, *rev.*, 1100; of the cervix uteri, Rieck-Clarke's operation for, 1116; uterine and its treatment, 1161; uterine, and its recurrence, surgical treatment of, 1269; in Ireland, 1280; the etiology of, 1372; Jews and, 1384; of the breast, the dissemination of, 1452; of the breast the surgical treatment of, 1487
- houses, 880, 943
- Candia, the British troops in, 250
- Canonge, General J. F., as a doctor, 171
- Cant, W. J., gloves in operative work, 316
- Canvassing, and the British Medical Association, 771
- Cape Colony, consumptive patients in, 192, 455; Texas fever in, 1049; the health of the troops mobilised at, 1316; rinderpest in, 1444
- Cappie, Dr. J., obituary notice of, 249
- Capsules, gelatine vaginal, 1470
- Carbolic acid, poisoning by, 684
- Carbon dioxide, influence of pathological states on the elimination of by the skin, 79
- Carcinoma, primary, of the liver, 18; glandular of œsophagus, 23; papilliferous of the thyroid gland, 150; scirrhus of the parotid gland, 152; of stomach, 341; of the tonsil, 724; vacuolated of the antrum, 851; of liver, 1034; recurrent of breast, spontaneous cure of, 1094; primary of eyeball, 1158; of the eye secondary to that of the lung, 16
- Card, A., 1320
- Cardiff, the prevention of tuberculosis at, 676; district nursing in, 1054
- Care, The, of the Sick at Home and in the Hospital, T. Billroth, *rev.*, 797
- Carline, W. A., harelip forceps, 675
- Carlisle, the prevention of tuberculosis at, 60
- Carlsbad, the forests and springs of, 974
- Carnegie, Mr. A., and the Midland University, 1248
- Carotid, common, ligature of the for hæmorrhage from the ear, 44
- Carpus, tuberculous, anterior displacement of, 151
- Carte, Mr. W., obituary notice of, 1067
- Cartridge in the right bronchus, 531
- Carvell, J. M., academical costume, 516
- Carwardine, T., fibroma molluscum of the skin and brachial plexus, 150
- Case, a curious, 320; an exceptional, 951
- an aseptic obstetric, 799
- Casebooks, the destiny of, 865
- "Case paper," a, 606
- Castilla, the late Miss A., 503
- Cataract, extraction of in a lioness, 1489
- "Cataphoresis," or Electrical Medicament Diffusion as applied in Medicine, Surgery, and Dentistry, W. J. Morton, *rev.*, 1338
- Catarrh, acute febrile associated with inflamed glands of head and neck, 83; nasal and recurrent sneezing, 1319, 1447
- Cathcart, C. W., death under chloroform, 468; Descriptive Catalogue of the Anatomical and Pathological Specimens in the Museum of the Royal College of Surgeons of Edinburgh, *rev.*, 539; peritonitis and increased peristalsis, 609; peritonitis as a cause of increased peristalsis in the rectum and other parts of the intestine, 960
- Catheter, death occurring fifteen hours after passing, 530
- Cat's-meat and sausages, 1235
- Cattle, tuberculosis in, 286, 917
- Caucasus, grant for improvement of health resorts in, 1507
- Cavalry, special ambulance for, 448
- "Cavendish," death of, 429
- Cayger, Surgeon-Lieutenant-Colonel T., water gas, 576
- Celandine, 1012, 1139
- Celli, A., investigations on malaria in Italy, 95, 162
- Cells, giant, tumours from the neck containing, 1092
- Census the of, 1901, 1543, 1556
- Bill. *See* Bill
- enumeration, quinquennial, 549
- Cerebellum, the localisation and symptoms of disease of considered in relation to its anatomical connections, 1079; diagnosis of lesions of, 1097
- Cerebral. *See* Brain
- Cerebrospinal fever. *See* Fever
- fluid in the human subject, 488
- Certificates of death, 449; under the Workmen's Compensation Act, hospitals and 685, 762, 827; "psychological," 711; medical and diagnosis, 1069; as to the necessity for amputation in Poor-law districts, 1380
- Certification of lunatics, 129, 571; of deaths by unregistered persons, 637, 1007; of lunatics for detention in workhouses, 1136, 1379; of death, 1291, 1315
- Cervello, "a cure for consumption," 1317
- Chadwick prize. *See* Prize

- Chalfont St. Peter, the epileptic homes at, 1250
 Chamberlain, Mr. J., and the teaching of tropical diseases, 1189
 Chaplin, Mr. H., and the Bill as to the London water supply, 489; the figures of as to conscientious objectors, 495; on vaccination, 1047
 Charcot's disease. *See* Disease
 Chavasse, T. H., carcinomatous stomach removed by gastrectomy, 967
 Cheek, fibroma of base of skull removed through the, 787
 Cheetham, T. A., Elementary Chemistry, Practical and Theoretical, *rev.*, 92
 Chelsea, the physic garden at, 231, 808
 Chemical composition in regard to germicidal action, 1217
 Chemistry, Practical, Organic, S. Rideal, *rev.*, 27; Organic an Introduction to the Study of, J. Wade, *rev.*, *ib.*; Practical Organic, An Elementary Course of, F. C. Garrett and A. Harden, *rev.*, *ib.*; Elementary, Practical and Theoretical, T. A. Cheetham, *rev.*, 92; Physical for Beginners, C. M. Van Deventer, *rev.*, *ib.*; Analytical, Short Manual of, J. Mutter, *rev.*, *ib.*; Physiological, A Textbook of, O. Hammarsten, *rev.*, 1168; for Photographers, C. F. Townsend, *rev.*, 1537
 Chemists, prescribing, 1007
 Cheshire, proposed reformatory under the Inebriates Act in, 416; the prevention of tuberculosis in, 417; proposed epileptic colony for, 708; the County Council of and tuberculosis, 817
 Chest, radiographs of, 278
 Chestnut, V. K., Principal Poisonous Plants of the United States, *rev.*, 1101
 Chetwood-Aiken, K. C., bromohydrate of arecoline as a myotic, 82
 Cheverton, B. A., the Queen v. Webb and another, 449
 Cheyne, W. W., a case of hæmaturia from a movable kidney cured by nephrorrhaphy, 17; two cases of coxa vara showing the result of division of the femur below the trochanters, 400, 408; the prevention of tuberculosis, 1038
 Cheyne-Stokes, breathing, ocular phenomena associated with, 411; case of, 1152
 Chicago, the prevention of tuberculosis at, 677; correspondence from, 697, 1128, 1307; the death of Dr. J. B. Hamilton, 697; the drainage canal, 697, 1307; the influenza epidemic, *ib.*; hospital appointments and politics, *ib.*; Christian Science in, 1119; small-pox in Illinois and Indiana, 1128; a new hospital for, *ib.*; prevalence of pneumonia, *ib.*; the late Professor Etheridge, *ib.*; food adulteration, *ib.*; Dr. N. Senn's war correspondence, 1308; small-pox, *ib.*; the amalgamation of medical societies at, 1381
 Chicken-pox. *See* Varicella
 Chilblains, treatment of, 575, 644, 711
 Child, rheumatoid arthritis with enlarged spleen and glands in, a, 534; a large, 643, 888, 1012, 1319; open safety-pin removed from oesophagus of, 661; albuminuric retinitis in, a, 666; a case of general paralysis of the insane in, a, 784; epileptic, home for, 951
 Childbed and diphtheria, 105; the mortality of, 771
 Children, school, the vision of, 77, 443, 506, 634, 763; vulvitis in, 86; feeble minded, the education of, 119; deaf and mentally deficient, books on the education of, 191; treatment of bronchopneumonia in by belladonna, 507; purulent ophthalmia secondary to gonococcus joint disease in, 210, 230, 273; some points in the surgery of paralysis of, 279; metropolitan imbecile, classification of, 551; belladonna for eczema in, 576; large, 643, 888, 1012, 1319; intoxicated, at Newport, 811; biliary calculi in, 851; Affections of the Urinary Apparatus in, J. H. Morgan, *rev.*, 858; oxyuris vermicularis in, 898; tuberculous ulcers of the stomach in, 1092; Russian school, the teeth of, 1112; treatment of inguinal hernia in, 1146; summer colony for in the Apennines, 1176; books on the management, etc., of, 1200; young, laryngeal growths in, 1210
 China, the feet of ladies in, 231; medical women in, 927
 Chloral and bromide compounds, 1447
 ——— habit, cure of by sodium bromide, 896
 Chloride of sodium. *See* Sodium
 Chloroform, delirium tremens treated by inhalation of, 24; death under, 468, 762, 881, 1031; threatened death under, 661, 904, 1396; paralysing the respiratory centre before the heart, 903
 ——— narcosis, the dangers of, 1273
 Choksey, Dr. N. H., decoration of, 270
 Cholangitis, tuberculous, 151
 Cholecystectomy, case of, 602
 Cholecystotomy, two cases of, 628
 Cholera, continuous intravenous injections in, 298
 Choline, the physiological action of, 1082
 Chotzen, M., Atlas der Syphilis und syphillid-ähnlichen Hautkrankheiten, *rev.*, 857
 Chrimes, the case of, 110
 Christian Science in the United States, 40, 103, 230; some of its results, 618; in Chicago, 1119
 Christie, Glaise v., 1377
 Christmas, R. W. S., treatment of obstinate hic-cough, 596
 Chromocyte clumping in acute rheumatism, 1091
 Church, the crisis in and sanitation, 920
 Clurton, T., the serum treatment of diphtheria, 213; oedema of the lungs, 670; diagnosis of lesions of the cerebellum, 1097
 Cigarette, the, before the law, 414
 Ciniz, visit of the Queen to, 491
 Cinnamon in influenza, 660, 763
 Circular, a money lender's, 256
 Circulars to patients, 60
 Clare, Hunter v., an appeal, 827, 880
 Clark, A., acute tetanus treated with antitoxin, death on the fourth day, 17
 Clarke, J. J., diseases and deformity of spine, 180; congenital deformities, 342; coxa vara, 1029; congenital dislocation of hip, *ib.*
 ——— W. B., encysted vesical calculi, with an account of 27 cases, 1141, 1157
 Clavicle, fractured, new splint for, 1093; dislocation of acromial end of, 1152; fractures of, 1396
 Clefts, branchial, persistence of, 148
 Clemmey, W. N., rupture of kidney, secondary operation, recovery, 1162
 Climate of British health resorts, 294; and the cure of consumption, 1128, 1194; and sea voyages in the treatment of tuberculosis, 1321, 1354
 Climates, Hot, Medical Hints for, C. Heaton, *rev.*, 540
 Clinical Observations on 2,000 Obstetric Cases, G. P. Mathew, *rev.*, 25
 Clot, peculiar, from a case of epistaxis, 1032, 1164
 Clothing, second-hand, the detection of tuberculous infection in, 678
 Club, Edinburgh Infirmary Residents, annual dinner of, 1485
 ——— Edinburgh University Angling, officers, etc., of, 848
 ——— Edinburgh University of London, dinner of, 1238
 ——— Guy's Hospital London University, annual meeting of, 384
 ——— a Hundred Year, 807, 1073
 Clubfoot, wrench for, 794; traumatic, *ib.*
 Clubs and bonesetters, 643; doctors' and medical aid societies, 827; medical, 1447
 Coal gas, poisoning by, recovery, 1153
 ——— tar products, 1002
 Coat, the buffy, 340
 Coates, Dr. W. H., called to the Bar, 1540
 Coats, Dr. J., death of, 232; obituary notice of, 317; memorial to, 439, 496; subscriptions to memorial to, 1006
 Cobbett, L., resistance of rats to diphtheria toxin, 902
 Cobra bite, recovery without amputation, 271
 Cocaine, sale of in the United States, 204; in placenta prævia, 271
 ——— habit, cure of by sodium chloride, 896
 Cochlin China, laboratory plague in, 626
 Cockade, the, 771
 Cockburn, Surgeon-General A. R., death of, 1132, 1312
 Cocoa, prepared, 1286
 ——— seeds, the preparation of, 829
 Codd, J. A., the use of electric mains for medical purposes, 1554
 Code, evening schools continuation and ambulance and home nursing, 41, 124
 Celiotomy, abdominal, causes of death after, 1096
 Coghill, Dr. J. G. S., obituary notice of, 1442; the late, 1546
 Coin in the oesophagus removed by the aid of the fluorescent screen, 789
 Cole, Dr. T., obituary notice of, 249
 Coleman, E., tropical oedema on shipboard, 1462
 ——— J. B., Addison's disease, 1096; Hodg-kin's disease, 1222
 Coles, A. C., The Blood: How to Examine and Diagnose the Diseases, *rev.*, 674; a modification of Neisser's diagnostic stain for the diphtheria bacillus, 1213
 Coley's fluid in inoperable tumours, 1156
 Colhoun and others, Kelly v., 320
 Colitis, membranous and colotomy, 456, 515, 1012; ulcerative, 474; Idiopathic Ulcerative (Dysentery), J. F. Gemmel, *rev.*, 479; wrongly diagnosed as inflammation of the vermiform appendix, 732; chronic, right colotomy for, 1217
 Collam, W., Ueber Spermatocystitis gonorrhoea, *rev.*, 858
 College, King's, London, and the teaching of tropical diseases, 181
 ——— Mason, Birmingham, pathology at, 1489
 ——— Medical Graduates and Policlinic, the superintendentship of, 172; subscribers to, 232; general meeting of governors of, 285
 ——— of Medicine, Hong Kong, presentation of diplomas at, 1307
 ——— Muirhead, for Women, proposed establishment of, 940
 ——— Queen's, Belfast, and the Irish University question, 440
 ——— Royal Medical Benevolent, Epsom, successes of pupils at Oxford, etc., 1137; election of foundation scholars at, 1358
 ——— Royal Military, Sandhurst. *See* Sandhurst
 ——— Royal of Physicians in Ireland pass lists, 187, 381, 1253, 1444; and medical aid associations, 101; confers honorary Fellowship on Professor T. C. Allbutt, 449
 ——— Royal, of Physicians of London, lectures at, 172; examination for the membership of, 256; comitia of, 286, 1108, 1251; the licentiates of and the office of Poor-law medical officer, 380; licentiates of and the title of physician, 560; the presidency of, 612, 805; the statutory meeting of, 800; election of president, *ib.*; members, 1108; licentiates, *ib.*; gift by the late Dr. Hare, *ib.*; election of Fellows, *ib.*; report of Committee of Management, *ib.*; the laboratories, *ib.*; the Midwives Bill, *ib.*; report of Finance Committee, *ib.*; admission of Fellows, 1251; Croonian Lecture, *ib.*; International Congress on Venereal Disease, *ib.*; the laboratories, *ib.*; gifts to the College, *ib.*; memorial statue to Sir Thomas Browne, *ib.*; Tuberculosis Congress, 1252; Dr. Arbuthnot, *ib.*
 ——— Royal, of Science and the University of London, 1240
 ——— Royal, of Surgeons of Edinburgh, Descriptive Catalogue of the Anatomical and Pathological Specimens in the Museums, C. W. Cathcart, *rev.*, 539; and the amendment of the Medical Acts, 1205; pass lists, 1315
 ——— Royal, of Surgeons of England, the Membership qualification of, 60; meeting of council of, 177, 435, 976, 1252, 1558; physiological catalogue, 177; Members' gown, *ib.*; medical curriculum, *ib.*; report of the Laboratories Committee, 177, 741; disciplinary, 177; annual meeting of Fellows and Members, *ib.*; centenary at St. Peters-burg, 1-8; Hunterian oration, *ib.*; Midwives Bill, 178, 741; Students' Association of Queen's College, Cork, 178; pass lists, 251, 567, 948, 982, 1377, 1559; conversazione at, 430; Medical Acts, 435; portrait of the late Mr. Henry Lee, *ib.*; standard of preliminary examination, *ib.*; John Tomes prize, 741; prevention of venereal disease, *ib.*; Congress of the Sanitary Institute, *ib.*; College centenary, 741, 1252; Jacksonian prize, 976; report of Committee of Management, *ib.*; Centenary Committee's report, *ib.*; Bradshaw Lecture, *ib.*; International Conference on Venereal Diseases, *ib.*; vacancy on the Court of Examiners, *ib.*; Fellowship by election, *ib.*; the assessment of, 1006; the election to the Council of, 1174, 1244, 1491; election of members of the Court of Examiners, 1252; judgment of the Court of Appeal, *ib.*; Congress on Tuberculosis, *ib.*; the Corporate and Medical Reform Association, *ib.*; diploma of Fellow, 1558; memorial from Members of the College, *ib.*; honorary Fellowship, *ib.*; examinations, 1559
 ——— Royal, of Surgeons in Ireland, the Barker anatomical prizes, 188; pass lists, 509, 567, 1253, 1315; examiners at, 1134; officers, etc., of, 1361, 1444; the vice-presidency of, 1440
 ——— University, Bristol, the endowment of chairs at, 699
 ——— University, Dundee, the professorship of materia medica at, 117
 ——— University, Liverpool, meeting of governors of, 1248
 ——— University, London, Report of the Department of Pathological Chemistry at, V. Harley and F. W. Goodbody, *rev.*, 1101
 ——— University, Sheffield, gifts to, 878
 ——— Yorkshire, Leeds, experimental medicine at, 631
 ——— and Polyclinic medical graduates.

- opening of session of, 750; inaugural dinner of, 1505
Colli, leucoderma, 852
Colliery, practice, 745
Collingwood, F. W., academical costume, 455
Collins, E. T., unusual form of opacity of cornea, 1158
— H. B., ambulance ships in the British Navy, 1308
Colloid, myxoedema treated with, 88, 1460
Coloboma and malformation of auricle, 793
Colonial Medical Service, the, 323, 744
— Office, the, and the British Medical Association, 166
Colopexy for extreme dilatation of the sigmoid, flexure, recovery, 1330
Colotomy membranous colitis and, 456, 515, 1012; simple and complicated, 1026; in chronic dysentery, 1076; case of, 1161; right for chronic colitis, 1217; lumbar followed by the protrusion of a polypus, 1274
Comber, Madame, the "lady doctor," 946
Commission Royal, on London University, notice by as to teachers, etc., 927; draft statutes and regulations issued by, 1426
— Royal, on the London Water Supply, first report of, 230, 306
— Royal, on Sewage disposal, the assistant bacteriologist to, 252
— Special on Plague, the work of, 47, 116, 178, 238, 435, 627, 1244; abstract of proceedings of, 178; analysis of the evidence given before, 817, 872, 936, 979, 1043
Commissions, secret, 612, 859, 924, 1248; secret, in the United States, 1356
Committee, Departmental on Glanders, the work of, 745
Company law amendment and pharmacists, 1548
— practice, the regulation of, 360, 427, 861, 874, 1179, 1423
— the Goldsmiths, gift to medical research by, 492
Compensation for workmen, 1259
Condon, De V., cobra bite, recovery without amputation, 271
Cody's fluid and liquor potassii permanganatis, 191
Conference, Central Poor-law, meeting of, 496
— the Peace, and ambulance work at sea, 1241; the Red Cross at, 1361; the Geneva Convention and modern warfare, 1420; the care of the wounded at sea, *ib.*; condemnation of the dum-dum bullet, *ib.*; and adaptation of Geneva Convention to naval warfare, 1551
— on rivers pollution, 428
Congo, health conditions on the, 1430
Congress, Austrian, Balneological, date, place of meeting, etc., of, 708
— of Balneologists, meeting of, 697
— of French Alienists and Neurologists, meeting of, 1058
— French of Medicine, date, place of meeting, and subjects of discussion at, 511, 1316
— of French Neurologists, date, place of meeting, and subjects of discussion at, 188
— German, Balneological, date, place of meeting, and subjects of discussion at, 384
— German of Internal Medicine, date, place of meeting, and subjects of discussion at, 321; meeting of, 974; entering ceremony, *ib.*; organisation of the, *ib.*; insufficiency of the heart muscle, *ib.*; aortic aneurysm, 975; hyaline degeneration, 976; visits to institutions, *ib.*; diseases of the heart, 1040; demonstrations, 1041; diseases of the stomach and liver, *ib.*; albuminuria of adolescents, 1042; gaseous abscess in the abdominal wall, *ib.*; exhibition, *ib.*; banquet, *ib.*; the behaviour of uric acid in the organism, *ib.*; leukæmia and leucocytosis, 1120; the cutaneous excretion of fat, *ib.*; microbes and intestinal putrefaction, *ib.*; the absorption of oxygen by the blood, *ib.*; close of, 1121
— German Surgical, meeting of, 935; operations in epilepsy, *ib.*; congenital injuries and deformities of the hip, *ib.*; osseous and generalised tuberculosis, *ib.*; gastric ulcer after injury, *ib.*; gastro-enterostomy, *ib.*; new growths following injury, *ib.*; treatment of typhlitis, *ib.*; cartilage grafting, *ib.*; angio-sarcoma, *ib.*; excision of the bladder, *ib.*; large ovarian tumours, *ib.*; concluding proceedings, 936
— International Antivaccination, organisation of, 430
— International of Gynæcology and Obstetrics, date, place of meeting, and subjects of discussion at, 486
— International of Hygiene and Demography, date, place of meeting, and subjects of discussion at, 554
— International of Life Assurance, date, place of meeting, and subjects of discussion at, 1316
Congress, International Medical, provisional German Committee for, 218; the Section of Mental Diseases at, 384; arrangements for membership of, 1546; honorary presidents of, 1550
— International of Medical Ethics, organising committee of, 430
— International of Ophthalmology, date, place of meeting, and subjects of discussion at, 41
— International Otological, the museum of, 554; arrangements as to, 612
— International for the Prevention of the Abuse of Alcoholic Drink, date, place of meeting, etc., of, 200
— International for the Protection of Infants, date, place of meeting of, 641
— International of Public Assistants, subjects of discussion at, 1058
— International Temperance, meeting of, 924
— International on Tuberculosis, arrangements as to, 496, 1188; list of papers to be read at, 630; notice as to papers to be read at, 868; British delegates to, 1053; subscription to, 1188; the organisation of, 1301; ladies' committee, *ib.*; preliminary ceremonies, *ib.*; Wednesday's proceedings, 1302; the dissemination of tuberculosis, *ib.*; the Nursing exhibition, *ib.*; speech by Sir T. Grainger Stewart, 1345; science and practice, *ib.*; the dissemination of tuberculosis, 1346; the etiology of tuberculosis, *ib.*; the prophylaxis of tuberculosis, 1347; the therapeutics of tuberculosis, 1348; sanatoria for tuberculous patients, 1349; concluding ceremonies, 1350; entertainments, *ib.*; the British and Colonial delegates, *ib.*; the Japanese delegates, *ib.*; the outcome of the, *ib.*; leading article on, 1353
— International of Veterinary Surgeons, date, place of meeting, and subjects of discussion at, 1072
— International of Women, date, place of meeting, etc., of, 928
— of Life Assurance, date, place of meeting, and subjects of discussion at, 573
— of Polish Scientists, place of meeting of, 288
— of Royal Institute of Public Health, date, place of meeting, etc., of, 1343
— Russian Medical, date, place of meeting, etc., 1104
Conjoint Board in England, pass lists, 129, 188, 381, 885, 948; books for the final examination of, 643; the second examination of, 1140; regulations of as to five years' curriculum, 1383
— Board in Ireland, pass lists, 449, 768, 1068, 1135, 1253
— Board in Scotland, pass lists, 319, 948, 1135
Connal, J. G., carcinoma of the tonsil, 724
Conscientious objector, a, and his objection, 379
— objectors, the numbers of, 102
Dr. W. Woodward on, 177; the falling away of, 360; Mr. Chaplin's figures as to, 495; in the United States, 1052; parliamentary return as to, 1112
Constantinople, medical education in, 573
Constipation, obstinate, treatment of, 191, 255; and its modern treatment, G. Herschell, *rev.*, 1399
Constructive murder. *See* Murder
Consultants for medical aid associations, 122
Consultations, rules as to, 515
Consumption, the open-air or hygienic treatment of, 833; climate and the cure of, 1128, 1194; pulmonary, treatment of, 1139; at Lowestoft, 1294; a "cure" for, 1317; formalin in, 1440
Consumptives, establishment of sanatoria for in Germany, 50, 117, 368; in South Africa, 98, 1107, 1310; sanatoria for, 182, 246, 247, 826, 1040, 1568; in Cape Colony, 192; the open-air treatment of, 468; as passengers on ocean steamers, 682, 1357; home and foreign sanatoria for, 711; in South Africa, 1127
Contagia, earth in relation to the preservation and destruction of, 457, 525, 587
Contract medical practice, 290, 366, 559, 608, 771, 875, 1055, 1170, 1556
Contracts, not to practise within the area, interpretation of, 129, 380, 1195; with public vaccinators, 1107
Contracture, without paralysis, a case of unilateral spasm and, 1
Convulsions in acute suppurative tonsillitis, 16; epileptiform following injury to head, 907; post-partum, venesection, recovery, 1089
Cook, T. D., lunacy law, 252
— W. G., venesection in cerebral hæmorrhage, 904
Cooke, Dr. J. T., appeal for family of, 1060, 1200, 1260, 1448; death of, 1312
— Mr. T., death of, 365; obituary notice of, 444
Cooking, Indian military, 767
Cooper, Mr. A., presentation to, 253
Copeman, S. M., awarded Fothergillian prize and medal, 536; Vaccination, its Natural History and Pathology, *rev.*, 796
Copenhagen, the Capital of Denmark, *rev.*, 1340
Copley, S., the treatment of traumatic tetanus with antitoxins, 337
Corben, C., extracapsular fracture of femur in a woman of 82, with morbus cordis, recovery, 16
Cord, left, vocal paresis of, 907
— umbilical, rupture of, 832; bifurcation of in placenta dimidiata, 850
Cordes, A., small-pox in a new light, 490; a decimo-duodecimal system, 1140, 1260
Corfield, Professor, on the London water supply, 749
Cork, the prevention of tuberculosis at, 222; contract medical practice at, 366
Cornea, unusual form of opacity of, 1158; sloughing of rapidly following on fracture of base of skull, 1158
Corns, treatment of, 1319
Cornwall, respiratory disorders among arsenic workers in, 926
Coroner and medical witness, 251, 1314; a on patent medicines, 1007; and doctors, 1070, 1133; on post-mortem examinations, 1133
Coroners and medical witnesses, 229; inquiries by and medical evidence, 308; and legal training, 1567
Coronership for, East Sussex, 494, 620
Corps, Royal Army Medical, admissions to, 36; the age of entrance to, 123, 504; promotions and appointments in, 126, 184, 320, 370, 447, 508, 569, 637, 796, 767, 828, 883, 946, 1070, 1195, 1377, 1441, 1512, 1560; pay of juniors in India, 128; the new badge of the, 175, 1005, 1313; successful candidates for, 378, 448; proposed increase of, 496; orderly duty in the, a suggestion, 637; the higher ranks of the, 946, 1314; home defence and the, 1070; annual dinner of, 1511; the manual of the, 1560
Correspondents, a hint to, 1178
Cortex cerebri, exposed, electrical stimulation of, 1030
Coryza, treatment of, 1394
Costume, academical, and the title of "Dr.," 192, 455, 516, 576
Cotterill, J., two cases of gangrene of the lung, 70
Council, General Medical. *See* Medical
Counsellors, irresponsible, 809
Counter prescribing. *See* Prescribing
County Council of London and the establishment of a central bacteriological laboratory, 105; and cremation, 429; and a working colony for epileptics, 512; and the Inebriates Act, 560, 1543; and crematoria, 684; and the London Government Bill, 563; and the Shadwell Tunnel, 1048; and the housing question, 1176, 1513; proceedings of, 1236; and medical research, 1296; proposed improvements by, 1513
— councils, the sanitary powers of, 923
Coupland, Dr. S., presentation to, 321
Court appointments, 116
Court, A., neurotic ulcers of the mouth, 1214
Courtney, L., the census of 1901, 1556
Coutts, J. A., belladonna in the treatment of broncho-pneumonia in children, 207
Coventry, the police surgeoncy at, 128; the public medical service at, 170
Cows, milch, the tuberculous test in, 515
Cox, R. H., continuous intravenous injections, 298
Coxa vara, discussion on, 87; two cases of showing the result of division of the femur below the trochanters, 400, 408; case of, 1029
Crabbe, Mr. W. T., death of, 507
Cradock, Miss, presentation to, 1248
Crane, Dr. S. L., death of, 765
Crawford, D., compound diastasis of lower end of radius, 669
Crawford, R., cystic suprarenal bodies, 151; enlarged spleen with thrill and bruit, 151; myositis ossificans progressiva, 534
Creagh, C. V., to keep mosquitos alive, 1062
Cremation, in Japan, 299; and the London County Council, 429; Sir H. Thompson on, 713; Sir F. S. Haden on, 1261; in Germany, 1324
Crematoria, the London County Council and, 684
Creosote vapour, gangrene of the lung treated by, 532

- Crerar, J. W., abscess of the lung successfully treated by drainage, 122
- Cresswell, R., minor conservative surgery, 148
- Crewe, the prevention of tuberculosis at, 676
- Criccieth, the tragedy at, 42
- Criegern, V., investigations of the heart by the Roentgen rays, 1040
- "Crimson Cross Dispensary," a, and its remedies, 251
- Critchett, G. A., solid oedema of the eyelids, 1158; artificial eyes, *ib.*
- Criticism, an appreciative, 361
- Critzman, D. La Goutte, *rev.*, 1282
- Crochet hook (bone), 4½ inches long accidentally lodged within the peritoneal cavity, 1393
- Crocker, H. R., epithelial tumours of the forehead, 728; lymphangioma tuberosum multiplex, 791
- Croly, H. G., dislocations and fractures of the astragalus, 535; chronic circumscribed abscess of tibia (Brodie's), 1031
- Crook, H. E., the climate of Margate in relation to disease, 346
- Crooke, Dr. G. F., obituary notice of, 1443; appeal for family of, 1490; subscriptions to fund for family of, 1540
- Crookshank, E. H., tropical diseases in the West Indies, 1234
- Croom, J. H., vaginal hysterectomy for cancer, 476
- Crosbie, R. P., a sore diagnosed as cancer of the lip in early life, recovery without operation, 338
- Crosse, W. H., blackwater fever or hæmoglobinuric fever, 730
- Cry of the Children, The, etc., Mrs. Bray, *rev.*, 798
- "Crystal Palace" sanatorium, a, 678
- Cuba, small-pox in, 27
- Cubitus varus following fracture of the lower end of the humerus, pathology of, 345
- Cullingworth, C. J., annual address to Obstetrical Society of London, 341; on Sir W. Roberts, 1065
- Cumberland, the prevention of tuberculosis in, 609
- Cunliffe, R., the Pharmacy Bill and counter prescribing, 1192
- Curettes, nasal, 28
- Curling, W., the Jacksonian prize, 888
- Curnow, J., the Scamen's Hospital Society and its visiting staff, 54
- Curschmann, the prevention of pulmonary tuberculosis, 1348
- Curtis, H. J., anterior displacement of tuberculous carpus, 151
- Curvature, lateral, of the spine, its prevention and treatment, 137, 264, 1207
- Cutter, E., on teetotaler's tippie, 1298
- Cyanide of potassium, commercial use of, 455
- Cycles, information as to, 1199
- Cyst, dermoid, of broad ligament in a girl aged 11 years, 339; ovarian, with uterine fibroid, 475; of posterior vaginal wall, 531; of the pancreas, three cases of treated by incision and drainage through the anterior abdominal wall, 594; pancreatic, treated by incision and drainage, 663; of broad ligament, 733; congenital, at the back of the tongue, 850
- Cystitis of three years' duration due to the typhoid bacillus, 78
- Cystoscope, the, in surgery, 1329
- Cystotomy, suprapubic, prostatic disease, cured by, 688
- Cysts, hydatid, in upper lobe of right lung and liver successfully removed, 663; implantation of the iris, 665; of the liver, paramæcium coli in, 968
- Czar, the, the peace proposals of, 619
- Czerny, A. M., hyaline degeneration, 976
- D.
- D'Abreu, J. F., treatment of chronic diarrhoea, 191
- Da Costa, J. C., A Manual of Modern Surgery, *rev.*, 856
- Da Gama, Sir J. A., appointed member of Portuguese Privy Council, 554
- Dairies, private legislation on tuberculosis in, 677; and the tuberculin test, 677, 1129; Cowsheds and Milkshops Order, 677
- Dairy stock, tuberculosis in, 482
- Daldy, M., a case showing the value of late injections of diphtheria antitoxin, 338
- Dalgetty, A. B., ipecacuanha in dysentery, 903
- Dalton, N., pulsus paradoxus, 1193
- Dandruff, the treatment of, 771
- Daniels, C., the proposed school of tropical medicine, 633
- C. W., the probable parental form of the sharp-tailed filaria found in the blood of the aboriginals of British Guiana, 1459
- Dapper, chloride of sodium mineral waters, 1311
- Darjeeling, Terai, the occurrence of blackwater fever in, 788
- Darling, Mr. Justice, on constructive murder, 614
- Darlington, the prevention of tuberculosis at, 991
- Davidson, J. M., on the stereoscopic examination of skiagraphs of foreign bodies in the eye and orbit, 276; piece of glass localised in the eye by means of the Roentgen rays, 1158
- Davies, D. S., the etiology and prevention of tuberculosis, 399, 835
- E. T., the Medical Sickness and Accident Society, 1060
- L. G., traumatic rupture of the duodenum and jejunum, 470
- K. T. E., treatment of hæmophilia, 339
- S., the prevention of tuberculosis, 57; is Plumstead unhealthy? 315
- Davis, A. H., rupture of uterus treated by abdominal section, recovery, 905
- Dr. A. N., presentation to, 98
- S., post-partum convulsions, venesection, recovery, 1089
- Davidson, W. R., nursing in Irish workhouses, 942, 1061
- Davy, Dr. E. W., obituary notice of, 125
- Day, J. J., the treatment of dysentery, observation of 60 cases, 271
- W., counter prescribing and the Pharmacy Bill, 1192
- Dead disposal of between death and burial, 1359
- Deaf-mutes, education of, 575, 643
- Deanesly, E., excision of urethra for impermeable structure, 1554; nephrolithotomy, *ib.*
- Death of, Rev. B. Price, 38; Dr. J. A. Osborne, Surgeon-General, L. S. Bruce, 59, 125; Professor Gurli, 117; Dr. H. K. Paxton, 126; Dr. J. B. Hamilton, 126, 697; Mr. A. Keble, 126; Mr. T. L. Walford, *ib.*; Dr. Dumontpalier, 180, 445; Dr. W. H. Murray, 184; Dr. J. Coats, 232; Surgeon-General J. Macbeth, 250; Brigade-Surgeon, Lieutenant-Colonel H. Johnstone, *ib.*; Mr. T. Cooke, 265; "Cavendish," 429; Dr. T. Jones, *ib.*; Staff-Surgeon H. S. Jackson, 446; Dr. G. Ransford, *ib.*; Dr. A. Walker, *ib.*; Major W. Kelly, 448; Deputy Surgeon-General H. R. L. MacDougall, *ib.*; Professor Rutherford, 495; Dr. C. Arkle, 496; Mr. W. T. Crabbe, 507; Lord Herschell, 553; Mr. Bader, 567; Lieutenant-Colonel P. B. Gabbett, 569; Surgeon-Major Bowron, 616; Dr. A. Mayer, 635; Mr. J. C. Sergeant, *ib.*; Fleet-Surgeon A. McBride, *ib.*; Surgeon-Major J. S. Smith, 637; Sir D. Galton, 686; Dr. J. S. Burke, 699; Mr. H. J. Knight, 699, 765; Mr. R. Faircloth, 704; Dr. R. P. Harris, *ib.*; Mr. W. Pendleton, *ib.*; Staff-Surgeon J. Rose, 706; Surgeon-Major F. N. Macnamara, *ib.*; Dr. M. C. Halton, 764; Dr. S. L. Crane, 765; Brigade-Surgeon W. W. Quinton, 767; Surgeon-Major-General W. M. Webb, 767, 1005; Major J. F. Evans, 767; Dr. H. Port, 810; Mr. J. T. O'C. Hynes, 882; Mr. J. Benson, *ib.*; Mr. T. A. Reed, *ib.*; Surgeon-Major G. C. Wallich, 883, 1003; Dr. J. De Styrap, 928; Surgeon E. D. Butt, 946; Sir W. Roberts, 987; Mr. J. H. Hemming, 990; Dr. J. A. Duncan, 1004; Mr. E. S. Medcalf, *ib.*; Dr. W. H. Thomas, *ib.*; Mr. W. Renton, *ib.*; Brigade-Surgeon D. F. de Hodgson, 1005; Captain A. O. Hubbard, *ib.*; Dr. T. Nedley, 1050; Mr. E. Birks, 1059; Mr. J. Hogg, 1067; Mr. R. Kyngdon, *ib.*; Brigade-Surgeon J. G. Grant, 1070; Dr. J. H. Etheridge, 1128; Mr. C. L. Prince, 1131; Dr. L. Foucart, *ib.*; Mr. C. Poud, *ib.*; Mr. T. A. H. Dodd, *ib.*; Mr. H. Lawson, *ib.*; Dr. C. L. Studsgaard, *ib.*; Deputy-Surgeon-General G. E. Farrell, 1132; Surgeon-General R. Cockburn, 1132, 1312; Dr. O. Jepson, 1194; Mr. A. H. Reinhardt, *ib.*; Dr. J. Moir, 1237; Mr. G. J. Hinnell, 1312; Mr. W. Thorne, *ib.*; Mr. J. T. Cooke, *ib.*; Mr. H. L. Raphael, 1316; Dr. N. Kerr, 1360; Mr. J. W. H. Mackenzie, 1376; Mr. Lawson Tait, 1486
- occurring fifteen hours after passing catheter, 530; from blackwater fever, 630; certification of by unregistered persons, 637, 1007; threatened under chloroform, 661, 904; from inhalation of poisonous gas, 670; from functional nervous disease, 792; "in the pot," 988, 1060; after administration of gas and oxygen followed by chloroform, 1031; Bertillon classification of causes of, 1051; after coeliotomy, abdominal causes of, 1066; sudden, no inquest, 1133; certification of, 1201, 1315
- registration, Sir H. Thompson on, 713
- Death-rate of measles, 294; from tuberculosis, 667
- Deaths in the profession abroad, 59, 126, 378, 446, 567, 636, 704, 765, 811, 883, 1068, 1131, 1194, 1251, 1312, 1376, 1443, 1564; from tuberculous diseases in London, 387; under chloroform, 468, 762, 881, 1396
- Decimo-duodecimal system, a, 1140, 1260
- Deek, A., the invention of spectacles, 132
- Deformities, congenital, 342
- Degeneracy, its Causes, Signs, and Results, E. S. Talbot, *rev.*, 415
- Degree for doubly-qualified men, 314, 317, 443, 505, 711
- Degrees, colonial, 638; colonial, registration of, 1059; foreign, 1560
- De Hodgson, Brigade-Surgeon D. F., death of, 1005
- De Holstein, V., albumosuria as a sign of primary multiple sarcoma of the bones, 748
- Delagenière, H., Chirurgie de l'Uterus, *rev.*, 217
- De la Tourette, G., Formes Cliniques et Traitement des Myélites Syphilitiques, *rev.*, 857
- De Laverdo, J., incendiary microbes, 772
- Delay, the dangers of, 953
- Delbet, P., Leçons de Clinique Chirurgicale faites à l'Hôtel Dieu, *rev.*, 26
- Delcourt, A., Le Rachitisme, sa Pathogenie, *rev.*, 1227
- Delirium tremens treated by inhalation of chloroform, 24
- Delivery, pyrexia after, 1332
- Dempsey, A., acute pericarditis, 1223
- D'Enjoy, P., kissing from an anthropological point of view, 106
- Dennison, A., picric acid in superficial burns, 1320
- Dent, H. H. C., asphyxia from pressure of an abscess under the chin whilst under the influence of nitrous oxide, 850
- Dental. See Teeth.
- Dentistry, Mechanical Practice in, W. B. Pear-sall, *rev.*, 91
- Dentists, foreign, in the United Kingdom, 387; unqualified, 710; meeting of at Manchester re General Medical Council, 949; unregistered and the administration of anaesthetics, 997; women in Australia, 1009
- De Quency, Notes on, 802
- Depopulation, rural, 1232
- Deputation to Lord Chancellor on the treatment of incipient insanity, 625; to Irish Local Government Board on the Poor-law Service, 748
- Deputy-Surgeons-General (retired) of the Indian Medical Service and general practice, 380
- Derby, a "crimson cross dispensary" at, 251
- De Redmont, L., the duties and trials of public vaccinators, 485
- Dermatitis, acute, caused by handling rhus toxicodendron, 530, 772, 1140; bullous, due to iodoform, 1214
- Derwent, the struggle for the waters of the, 985; the compromise for the waters of, 1488
- Dettweiler, the hygienic and dietetic treatment of pulmonary tuberculosis and sanatorium treatment, 1348
- Desquamation after rubella, 1075
- De Styrap, Dr. J., death of, 928; obituary notice of, 1131
- Devereux, W., gangrene of the lung treated by creosote vapour, 532
- Devices crafty and subtle, 295
- Devon, Thomson, *v.*, 1314
- Diabetes, organotherapy in, 256; rapid changes in refraction in connection with, 275; "phosphatic" following influenza, 456; vascular formation in the vitreous in, 1158
- Diagnosis, bacteriological, 571; Practical, H. A. Hare, *rev.*, 1286
- Diarrhoea, chronic, treatment of, 191, 255
- Diastases, toxins, and venins, 1111
- Diastasis, compound of lower end of radius, 669
- Di Calboli, F., the medical profession in Italy, 229
- Dichotomy in France, 1490
- Dickson, E. D., plague and the Mecca pilgrimage, 1188, 1304
- Dieppe, prosecution for illegal practice of medicine in, 230
- Diet, vegetable, 1397
- Digestion, The Natural History of, A. L. Gillespie, *rev.*, 1165
- Dilatation of the œsophagus, 340; of the stomach, 403; idiopathic of stomach, 412
- Diphtheria and childbed, 105; severe hæmorrhagic, with marked membranous development, 149; serum treatment of, 181; the value of the treatment of by antitoxin, 197, 268, 1192; especially in relation to infection and the use of antitoxin as a prophylactic, 413; bacteriological diagnosis in, 451; at Darenth Asylum, 452; in London, 615, 685, 747; post-scarlatinal,

- a systematic bacteriological examination of the fauces in scarlet fever as a means of preventing, 893; district nurses and, 1011; at Longton and Fenton, 1136
- Diphtheria toxin, resistance of rats to, 902
- Dipsomania, home for, 321
- Director-General, Army Medical Service, the office of the, 102
- Disclaimer, a, 321, 1568
- Disease, food-grains and, 1457
- Addison's. two cases of, 1096
- Bright's, hæmorrhagic erythema with, 1334
- Charcot's, case of, 345
- functional nervous, death from, 792
- Graves's, in a male, 408
- Hodgkin's, case of, 1222
- Riggs's, account of, 323
- Diseases, tropical, the teaching of, 181, 493; tropical, proposed school, 181; zymotic, the co-existence of, 182, 248, 444, 506; tropical, the study of at Liverpool, 237; of the Heart and Aorta, G. A. Gibson, *rev.*, 414
- Disinfection, with formaldehyde, 105; of drains, 364; of rooms, with special reference to the use of formic aldehyde, 1280; of plague-infected dwellings, 1283
- Dislocation, subcoracoid of head of humerus with fracture of great tuberosity, 409; anterior of hip, probably congenital, 535; of the hip, a method for the reduction of, 845; of the radio-carpal joint, 1024, 1332; congenital, of hip, 1029; of acromial end of clavicle, 1152; of the head of the fibula by muscular action, 1214
- Dislocation of the astragalus, 536; of the metatarsus on the tarsus, 1396
- Dispensary, a "crimson cross," and its remedies, 251
- districts and the Irish Local Government Board, 362
- St. Pancras and Holborn, annual report of, 1136
- Dispense, should doctors be allowed to? 1537, 1558
- Dispensers on Dentists Register, dental operations by, 771
- Dispensing, unqualified, 768
- Dixey, H. E., the need for further vaccination legislation, 503
- Dixon, A. F., the sensory distribution of the seventh cranial nerve in man, 793
- Mr. C. A., obituary notice of, 445
- Dobell, H., unsinkable boats, 1200
- Dockrell, E., Dougall, 1117, 1132
- Dr. M., proposed testimonial to, 1429, 1440, 1510; subscriptions to the fund for, 1516
- Doctor, a military, 171; the modern, the "Scotsman," on, 361; the army, "Macmillan's Magazine," on, 365; changing the, 643, 1447; and coroner, 1070, 1132; the burthen of, 1173
- Doctors, Irish Dispensary, 56, 132, 227, 235, 295, 611, 626; and district nurses, 554, 762, 942, 1061; and antivaccination, 1173; the trustful, 1516; should they be allowed to dispense? 1537, 1558
- Dodd, H. W., green vision in a case of tabes dorsalis, 665
- Mr. T. A. H., death of, 1131
- Dod's Parliamentary Companion, *rev.*, 481
- Dog show, a medical, 1257, 1445
- Dogs, a fatal malady prevalent among, 866, 1012; perspiration in, 926
- Donald, A., ectopic gestation, 86; ruptured tubal pregnancy, 670
- R., The Municipal Yearbook for 1899, *rev.*, 541
- Donaldson, E., strabismus fixus, 666
- Donations, 61, 107, 383, 572, 707, 820, 1432
- Donnan, W. D., acute circumscribed cutaneous oedema, 1223; gastric tetanus, *ib.*
- Doran, A., presidential address to the Obstetrical Society, 598; vanishing tumours, 702; fibroid of the broad ligament weighing 114½ lbs. (20 kilos) removed by enucleation, recovery, 1159; Shakespeare and the Medical Society, 1201; removal of a fibroid from a uterus bicornis in a parous subject, 1389; on Mr. Lawson Tait, 1563
- Dorn, L., investigation of the heart by the Roentgen rays, 1040
- Dougall, Dockrell *v.*, 1118, 1132
- Douty, E. H., climate and the cure of consumption, 1128
- Dowse, T. G., syphilis in the army, 191
- "Dr." the title of and academical costume, 192, 455, 516, 576; the title of, 380
- Dracunculus medinensis, a note on, 146
- Drage, L., the Midwives Bill, 503
- Drainage, abscess of the lung successfully treated by, 1212
- tubes, valvular in empyema, 147
- Drains, disinfection of, 364
- Dreaper, R. H., Irish dispensary doctors, 56
- Dreschfeld, J., the treatment of hæmatemesis, 22
- Dreyfus case, the, in the Lyons Medical School, 1547
- Drink bill, the national, 644
- Drought, the of 1897-98, 708
- Drugs and food, legislation as to, 690
- Drummond, D., musical heart murmurs, 794; aneurysm of aorta communicating with superior vena cava, *ib.*
- J., unreduced fracture and dislocation of elbow, 794
- Drumont, M., on small-pox, 361
- Drury, H. C., morphinomania, 910
- Drysdale, J. H., three cases of sprue, 967
- Duars, the, the prevalence of blackwater fever in, 788
- Dublin, the prevention of tuberculosis at, 367; the slaughter yards at, 677; bequests to hospitals in, 1180; the board of guardians and municipal reform, 1316; Weir bequests to hospitals in, 1546
- Duckworth, Sir D., elephantiasis of one leg, 152
- Duct, thoracic, operative injury of, 1052; thyroglossal, probable persistence of, 1088
- Dudfield, T. O., the prevention of tuberculosis, 482
- Dudley, E. C., Diseases of Women, *rev.*, 217
- Dührssen, A., Die Einschnürung des Bauchschnitts durch die vaginale Laparotomie, *rev.*, 1100
- Duka, T., on Sir Spencer Wells, 1118
- Duke of Devonshire on intermediate education, 1073
- Dukes, T. A., axis traction with ordinary forceps, 124
- Dumontpellier, Dr., death of, 180, 445
- Duncan, Dr. J. A., death of, 1004
- J. D., case of complete prolapsus of uterus in a girl 16 years of age, operation, celiohysterectomy, recovery, 404
- Dundee, the prevention of tuberculosis at, 98, 227, 417, 739, 1104, 1303; proposed inebriate reformatory at, 1302
- Dundrum, the election of a dispensary medical officer at, 806, 990
- Dunstable, the disposal of the sewage of, 1379
- Dunwoody, W. G., vaccination rash, 132; qualification of public vaccinators, 515
- Duodenum, traumatic rupture of, 470; growth in the, 474
- Dura mater, osteoma of, 1154
- Durham, contract medical practice at, 250, 559
- Durham, H. E., infection by unsound meat, 1216
- Durno, L., a case of inversion of uterus by a fibroid, enucleation of fibroid, and reposition of uterus, 467
- Dust destructor for towns, 575
- Dutton, T., obstinate constipation, 255
- Duxhurst, the industrial farm colony at, 452
- Dysarthria and delay in learning to speak following cerebral disturbance in infancy, 1027
- Dysentery, the treatment of, observation of sixty cases, 271; green stools in, 469, 712; the treatment of, 575, 1151; acute epidemic, 787; chronic, glycerium acidi tannici in, 887; ipæacuanha in, 903; chronic, colotomy in, 1076
- Dyspepsia, an unnoticed cause of, 1032
- Dysphagia, associated with unilateral paralysis of the eighth and bulbar nerves, 534
- Dystocia, an unusual cause of, 456
- E.
- Eade, Sir P., some modern medical aspects of life assurance, 773
- Eager, R., poisoning by rhus toxicodendron, 701
- Eales, H., embolism of central retinal artery, 1029
- Eames, E. S. B., consumptive patients in Cape Colony, 455
- J. C., an appeal, 1060, 1200, 1260, 1448
- Ear, ligature of the common carotid for hæmorrhage from, 411; The External, G. Schwalbe, *rev.*, 480; The Middle and Labyrinth, F. Siebenmann, *rev.*, *ib.*; works on diseases of the, 951; The Symptomatology and Pathology of, P. Bonnier, *rev.*, 1166
- Records, J. C. Lester and V. Gomez, *rev.*, 1168
- Earl of Kimberley appointed member of Senate of London University, 868
- Earl, A., The Living Organism, an Introduction to the Problems of Biology, *rev.*, 1470
- Earth in relation to the preservation and destruction of contagia, 457, 525, 587
- East Coast sunshine, 687
- Sussex, the coronership for, 494, 620
- East, E., the British Medical Benevolent Fund, 1309
- Eccles, W. McA., profuse spontaneous hæmorrhage into the urinary bladder, 336; treatment of inguinal hernia in children, 1146
- Eccleshall, the prevention of tuberculosis in, 418
- Eclampsia, puerperal, convulsions of mother and child, recovery of both, 469; puerperal case of, 908
- Eczema, varieties of and their treatment, 473; in children, belladonna for, 576; the chronicity of, 669; treated by x rays, 1024
- Eddowes, A., a principle of treatment of infected follicles of the skin, 147
- Eddy, Rev. Mrs. the "apologia" of, 103
- Eden, T., puerperal eclampsia, 908
- Edgar, J., clinical instruction in midwifery and gynecology, 55
- Edge, F., the veiled operator, 1194
- Edgecumbe-Rogers, S., The Local Government Annual for 1899, *rev.*, 481
- Edinburgh, the prevention of tuberculosis at, 98, 287, 418, 1230; Indian and colonial students in, 289; proposed appointment of women sanitary inspectors at, 452; the public health of, 510; heavy death-rate from whooping cough in, 707; the nurses of "at home," 769; bacteriology and public health in 924; correspondence from, 938; farewell reception to Dr. Sophia Jex-Blake, 938; Sir H. Littlejohn's annual report, 939; the history and clinical features of a recent outbreak of typhoid fever at, 1159; the Harveian festival at, 1432
- Edmonds, F. H., the Government medical service British Guiana, 632; malaria and pregnancy, 1023
- Education, secondary and the preliminary examinations, 33, 99, 123, 163, 166; of the feeble-minded in Italy, 37; Some Health Aspects of, P. Lewis, *rev.*, 159; medical, the endowment of, 487; preliminary in Ireland, 553, 633; secondary, the organisation of, 682; intermediate, the Duke of Devonshire on, 1073; in the future, a leading article on, 1110
- Bill. See Bill
- Department, the, and its medical advisers, 1174
- Effusion, peritoneal, in the female, 1221
- Eggs, idiosyncrasy in regard to, 644
- Egypt, vital statistics of, 572; the plague and the pilgrimage, 751; plague in, 1294, 1304, 1351, 1421, 1506, 1551
- Elbow, unreduced fracture and dislocation of, 791
- Elbow-joint, disease of, 474; The and its Mechanics J. W. Hulskrantz, *rev.*, 739
- Electro-magnet, removal of a fragment of steel from the retina with, 335
- Electric mains, use of for medical purposes, 1554
- Electricity, books on, 386; and tinnitus, 455; stimulation of the exposed cortex cerebri by, 1030; in gynecology, 1052
- Electrolysis, cupric, in ozæna, 575
- Elephantiasis of vulva, 22, 148, 516, 596; of one leg, 152; labial, control of hæmorrhage in operation for the removal of, 208
- Elliott-Blake, II., a degree for doubly-qualified men, 711
- Ellis, T. S., treatment of old sinus, 887
- Elsworth, R. C., multiple uterine fibroid, 628; extrauterine gestation, *ib.*; neurectomy for neuralgia, *ib.*
- Embalming, methods of, 771
- Embolism of central artery of retina, 1029
- Emergency attendances, 63
- Employers' Liability Act. See Act
- Empyema, valvular, drainage tubes in, 147; pulmonary, the nature of, 715; of the maxillary sinus, 1218; of antrum, 1281
- Enamelled iron ware, dangers of, 988
- Endocarditis, ulcerative, with pneumococcal septicæmia consecutive to croupous pneumonia, 1222; infective, 1396; acute ulcerative, giving a positive Widal's reaction, 1535
- Endometrium, adenoma of, 792
- Engstrom, O., Mittheilungen aus der gynækologischen Klinik, *rev.*, 1168
- Entropia, Berlin's operation for, 669
- Epidemiology, relations of bacteriology with, 1094
- Epiglottitis, excision of, 1093
- Epilepsy, traumatic, status epilepticus, trephining, recovery, 1083
- Epileptics, in Massachusetts, 451; proposed working colony for, 512; the proposed colony for in the Manchester and Chorlton unions, 1073
- Epiphyses, costal, traumatic separation of the, 150
- Epistaxis, peculiar clot from a case of, 1032, 1164
- Epithelioma, multiple of scalp following upon

- lupus erythematosus, 152; of lip in a youth, 1222
- Erb's juvenile form of muscular atrophy, 109
- Ergebnisse der allgemeinen Pathologie und pathologischen Anatomie des Menschen und der Thiere, O. Lubarsch and K. Ostertag, *rev.*, 1227
- Erysipelas, post-vaccinal, a case of, and its causation, 546
- Erythema, hæmorrhagic, with Bright's disease, 1334
- Erythrol tetranitrate, a caution, 57, 132, 256, 828; headache caused by, 131, 324; in angina pectoris, 1088
- Esmarch, Professor, on the Dum-dum bullet, 51, 754; First Aid to the Injured, *rev.*, 218; Der erste Verband auf dem Schlachtfelde, *rev.*, 1470
- Essays for Students, S. Paget, *rev.*, 972
- Eston, the outbreak of small-pox at, 383
- Etheridge, Dr. J. H., death of, 1128
- Ethics, a question of, 380
- Ethylate of soda in capillary tubes for the treatment of nævi, 675
- Etiquette, medical, 255, 1319; professional and the Workmen's Compensation Act, 1383; medical, specialists and, 1561
- Europeans in India, nursing of, 495
- Eustace, M., a degree for doubly-qualified men, 505
- Evans, Major J. F., death of, 767; obituary notice of, 943
- H. W., ossification of the tendo Achillis, 1094
- J. J., toxic effects of boracic acid, 209; gumma of sclerotic, 732; coloboma and malformation of auricle, 793
- Eve, F., two cases of resection of the large intestine, with recovery, 1149, 1157; chronic empyema of the maxillary sinus, 1218
- H. W., secondary education and the preliminary examinations, 123
- Everton and others, v. Longmore, 1175, 1195
- Ewart, J. C., reversion, 120; The Peniculin Experiments, *rev.*, 1101
- W., a case of mumps with marked enlargement of the spleen, 342; diphtherial membranous tracheitis with temporary obstruction in right bronchus in an adult, *ib.*; calcification of adherent pericardium, 908
- Examinations, preliminary and secondary education, 33, 99, 123, 163, 166; preliminary, 63; post-mortem, 102
- Exercises, treatment of locomotor ataxia by, 1029; and baths in aortic disease, 1094
- Exeter, the prevention of tuberculosis at, 817
- Exhibition, Article Club Industrial, press inspection of, 1542
- Exostosis of the vertebral border of the scapula, removal, 963
- Exstirpation, treatment of aneurysms by, 532
- Extremity, upper, removal of, 161
- Eye, and orbit, stereoscopic examination of skiagraphs of foreign bodies in, 276; trachoma and epidemic affections of, 298; normal, multiple images in the, 362; phenomena of associated with Cheyne-Stokes breathing, 411; artificial method of increasing the movement of, 474; A System of Diseases of the, W. F. Norris and C. A. Oliver, *rev.*, 857; localisation of foreign bodies in the by the x rays, 969; primary carcinoma of secondary to that of the lungs, 1158; piece of glass localised by means of the Roentgen rays, *ib.*; the Neurology of the, H. Wilbrand and A. Saenger, *rev.*, 1340
- complications of the acute specific fevers, 1013
- Eye-ball, advancement of the recti muscles of, 1095; primary carcinoma of, 1158; with fragment of steel lodged in its coats, *ib.*
- Eyelids, solid œdema of, 1158; plexiform neuroma of with ptosis, excision, ptosis relieved by Panas's plastic operation, 1463
- Eyes, artificial, 1158
- Eyre, J. J., nursing homes in Rome, 1193
- F.
- Faculty of Physicians and Surgeons of Glasgow examiners at, 1253
- Faircloth, Mr. R., death of, 704
- Fairfield, Mr. W. W., presentation to, 282
- Faith healing, ancient and modern, 1501
- Falkner, N., peculiar clot from a case of epistaxis, 1032, 1164
- Family proclivities, 688
- Famine, Indian, echoes of the, 822
- Farquharson, Dr. R., chosen chairman of Scottish Liberal members, 365
- Farr, Mr. G. F., obituary notice of, 184
- Farrar, R., counter prescribing and the Pharmacy Bill, 1192, 1375
- Farrell, Deputy-Surgeon-General, G. E., death of, 1132
- Fat, the cutaneous excretion of, 1120
- Fauces, a systematic bacteriological examination of in scarlet fever as a means of preventing post-scarlatinal diphtheria, 893
- Fee, for emergency attendance, 131; for pauper midwifery, 382; midwifery, an ethical question as to, 610; for certificates under Workmen's Compensation Act, 537; extra for fractured thigh, 599; estimate of, 1516
- Feeble-minded in Italy, education of, 37; the care of the, 1175
- Fees, scale of, under the vaccination order, 48, 177, 678, 874, 981, 1191, 1352; dentists', 169; extra to Poor-law medical officers, 228; of public vaccinators, 247; for notification, 383, 451; for attendance at assizes for certifying lunatics, 639; capitation, under the Vaccination Act, 678, 894, 1056; for medical witnesses in magisterial cases, 706; anaesthetists', 711; for ambulance lectures, 771; to medical witnesses, 828; assistants and, 947; for attendance at Parliamentary Committee, 1009; for medical witnesses, question as to, in the House of Commons, 1048; for medical witnesses at coroner's inquests, 1069; midwifery, *ib.*; agent's locum tenens and, 1139, 1200; vaccination, deduction from for superannuation fund, 1256; extra medical exemption from payment of, *ib.*; school board, 1319; for medical witnesses in the police courts, 1374; for pupils in schools, 1383; medical for life assurance examination, 1384; for medical certificates, 1513
- Feet of Chinese ladies, 231
- Felce, S. G., obstinate hiccough, 660
- Female, multilocular tumour in the inguinal region in a, 191; peritoneal effusion in the, 1221
- Femora, both, solution of continuity of, 1092
- Femur, extra-capsular fracture of in a woman aged 82 with morbus cordis, recovery, 16; injury and shortening of, 1030
- Fenton, diphtheria at, 1136
- Fenwick, C., a graduated pocket probe, 28; cocaine in placenta previa, 271
- E. H., clinical notes upon the rectal contour and consistence of 1,000 prostate glands, 395; The Golden Rules of Surgical Practice, *rev.*, 739
- F. C., rupture of a cancerous stomach during operation, 1215; pulsating tumour in the submaxillary region, 1462
- Ferguson, J. E. A., the sleeping sickness, 315
- J. H., labours complicated by slight pelvic contraction, 1221
- J. M., the duties and trials of public vaccinators, 485
- K. L., hyperpyrexia in subacute rheumatic fever, 148; dislocation of the head of the fibula by muscular action, 1214; case of hydranmios with anencephalic fœtus, 1448
- Ferments of the ringworm fungi, experimental note on, 13
- Feulard, Dr., memorial to, 51
- Fever, blackwater, *see* Fever, hæmoglobinuric
- cerebro-spinal, at Omdurman, 769; the etiology and diagnosis of, 1517
- enteric, green stools in, 132, 469, 712; outbreak of in barracks, 180; at Belfast, 193; inoculation against in India, 232, 572, 640; at Nice, 245; operative treatment of perforation in, 345, 1097; the spread of, 411; on the Yukon, 437; at Swinton and Pendlebury, 451; at Kilwick, 493; ten years' experience of in a midland town, 536; and influenza, 711, 888; the surgical complications of, 743; without any lesion of the intestine, 775, 1012; the incubation period of, 806; at Quetta, 823; the "causa causans" of, 879; in general hospitals, 1049; in the Netherlands, 1273; the infectivity of urine in, 1298; the cold-bath treatment of, 1372; at Batavia, 1379
- hæmoglobinuric in British Central Africa, 168; death from, 630; treatment of, 644; Mr. W. H. Crosse on, 730; the prevalence of in Assam and the Duars, 788; Dr. C. F. Harford-Battersby on, 888; the parasite of malaria in the tissues, in a fatal case of, 1325
- Malta, in Philadelphia, 572
- Mediterranean, case of, 876
- puerperal, notice as to issued in Bristol, 829; and midwives, 1007
- Relapsing the Pathology of, L. J. Pisani, *rev.*, 541
- Rheumatic, subacute hyperpyrexia in, 148
- scarlet and small-pox, 167; and intracranial suppuration of rhinitic origin, 726; a systematic bacteriological examination of the fauces in as a means of preventing post-scarlatinal diphtheria, 893; treatment of by sodium salicylate, 1274, 1376
- Fever, tertian, the life cycle of anopheles claviger in, 1373
- Texas, at the Cape, 1049
- tick, prevalence and nature of, 119; the effects of protective inoculation against on meat and milk, 1136; preventive inoculation for, 1444
- typhus in London, 383; in Southwark, 829; in Edinburgh, 1159, 1361
- yellow, scientific prevention of, 252; the Mexican Government and, 440; Yellow in the West Indies, I. Anderson, *rev.*, 540
- Fevers, acute specific, eye complications of, 1013
- Firench, W. L., herpes zoster with aberrant vesicles, 388
- Firench-Mullen, V., treatment of tropical hæmoglobinuria, 644
- Fibro-adenoma of male breast, 725, 828, 1153
- Fibroid, uterine, 88; inversion of uterus by, enucleation of and reposition of uterus, 467; uterine, with ovarian cyst, 475; multiple uterine, 628; of broad ligament weighing 44½ lbs. removed by enucleation, recovery, 1159; removal of from a uterus bicornis in a parous subject, 1389
- Fibroids, uterine, operation for, 213
- Fibroma, molluscum of the skin and brachial plexus, 150; of the base of the skull removed through the cheek, 787
- Fibromyoma of vagina, 262, 469
- Fibrosis, pulmonary, associated with tabes dorsalis and arthropathy, 534
- Fibula, myeloid sarcoma of, 213; dislocation of the head of by muscular action, 1214
- Field, F. A., home for a dipsomaniac, 323
- Fielding, V. G. L., the dangers of chloroform narcosis, 1273
- Fielding-Ould, R., the Pharmacy Bill, 1899, 1061
- Filaria, Demaracqui in St. Lucia, W. L., 145; perstans, the parental form of, 429; sharp-tailed, found in the blood of the aborigines of British Guiana, probable parental form of, 1459
- Finquater, Taylor, v., 706
- Findlay, W., Robert Burns and the Medical Profession, *rev.*, 738
- W., functional aphonia, 469
- Finny, J. G., sarcoma of the suprarenals and secondarily of the lung, 1222
- Fire engines, chemical, 364
- First Aid to the Injured, F. v. Esmarch, *rev.*, 218; books on, 644
- Dressings on the Battlefield, Professor Esmarch, *rev.*, 1470
- Firth, J. C., hæmorrhagic pancreatitis, 876
- Fishbourne, J. W. Y., the education of feeble-minded children, 119
- Fisher, Dr. L., obituary notice of, 378
- Fit, epileptiform, during anaesthesia, 1097
- Fitzgerald, Dr. C. E., obituary notice of, 58
- F. C., the coexistence of zymotic diseases, 444
- Flashlights on Nature, G. Allan, *rev.*, 26
- Flat foot, *See* Foot
- Flats, disinfection of, 1127
- Flemming, P., eye complications of the acute specific fevers, 1313
- Fletcher, H. M., tuberculous cholangitis, 151
- Flooding of basement rooms, 711
- Floors of hospitals, 711
- Florence, the new Clinical Institute in, 355, 364
- the sanitary condition of, 1177
- Flügge, the tubercle bacillus, 1346
- Fluid, ascitic. *See* Ascitic
- Fœtus, anencephalic, case of, 850; an anencephalic, hydranmios with, 1448
- Folkestone, the prevention of tuberculosis at, 676, 981
- Follicles, infected, of the skin, a principle of treatment of, 147
- Fomentation in inertia uteri, 1240, 1260
- Food, tinned, poisoning by, 180; and drugs, legislation as to, 690; use of antiseptics in, 969, 1071; of the German soldier, 1137; of the man-of-war's man, 1313; the prevention of tuberculosis from articles of food, 1348
- Food-grains and disease, 1487
- Foot, diseases of the, 733; flat, support for, 799; partial amputation of the, 1151
- Forbes, F. W., green stools in enteric fever, 132
- Forceps, ordinary, axis traction with, 124; hare-lip, 675
- Ford, Colonel A., erythrol tetranitrate, 828
- Fordyce, W., peritoneal adhesion in the female, 1221
- Forehead, epithelial tumours of the, 728
- Foreign bodies in the bronchi, effect of, 143; in

- the eye and orbit, stereoscopic examination of skiagraphs of, 276
- Foreign body in the oesophagus, 1097
- Formaldehyde, disinfection with, 105
- Formalin in the treatment and removal of inoperable malignant growths, 337; inhalation of in tuberculosis, 773, 1440
- Formic aldehyde in room disinfection, 1280
- Formulaire des Médicaments Nouveaux, H. Bocquillon-Limousin, *rev.*, 972
- Formulary, The Pharmaceutical, J. O. Braithwaite, *rev.*, 972
- Fosse, peritoneal, the anatomy and surgery of the, 522, 591, 657
- Fossil, on medical history, 107
- Foster, Professor M., made K.C.B., 1422
- Fothergill, W. E., relief of suffering in obstetric practice, 215; The Golden Rules of Obstetrics, *rev.*, 739; pathology of the fetal vesicles, 1336
- Foucart, Dr. L., death of, 1131
- Foulerton, A. G. R., on pseudo-tuberculosis, 598; gonorrhoeal salpingitis, 1320
- Fowke, F. W., a central fund for the superannuation of Poor-law medical officers, 123
- Fox, R. F., the province of the spa physician, 24; the local application of a current of hot air, 160; venesection in cerebral hæmorrhage, 726
- T. C., hæmorrhagic erythema with Bright's disease, 1334
- Foxcroft, F. W., tonsil guillotine, 476
- Foxwell, A., duodenal growth, 474; ulcerative colitis, *ib.*
- Fracture, crushing, of the cervical spine, 151
- Fractures in workhouses, payments for, 129; of the astragalus, 536
- Frænkel, the tubercle bacillus, 1346
- Frain, Madame, the case of, 883
- France, practice by English medical men in, 63; sanitation in the colonies of, 118; departmental bacteriological laboratories in, 130; the depopulation of, 165; the oldest doctor in, 209; illegal practice by an M.D. in, 230; the universities of, 300; foreign medical students in, 316; increase of medical practitioners in, 383; medical graduation in, 640; influenza in past times in, 1296; transfer of medical practices in, 1360; dichotomy in, 1490; the medical crisis in, 1543; excursion to the watering places and health resorts in, 1549
- Franks v. Hargreaves, 185
- Fraud, a wicked, 128
- Fraser, L. G., professional etiquette and the Workmen's Compensation Act, 1383
- Frazer, Mr. W., obituary notice of, 1003
- Freeman, Captain E. C., The Sanitation of British Troops in India, *rev.*, 1284
- J., death under chloroform, 763
- Frere, A. H., belladonna in broncho-pneumonia, 314
- Freyer, P. J., operation for impacted stone in the ureter, 211
- Friedeberg, financial considerations in the development of sanatoria, 1349
- Friend, H. E., poisoning by coal gas, recovery, 1153
- Fruit, preserved, 666
- Fry's Law of Vaccination, A. F. Vulliamy, *rev.*, 1284
- (Herbert) Royal Guide to the London Charities, *rev.*, 481
- Fullerton, R., displaced left middle turbinate which obstructed the nasal passage for ten years, 660
- Fulton, G. C. H., insusceptibility to vaccination, 183
- Fund, British Medical Benevolent, annual general meeting of, 175; appeal for left-off clothing for, 1309
- Hospital Saturday, distribution of, 252
- Hospital Sunday, appeal for funds for by Lord Mayor, 1445
- the Hunter, subscription to, 887, 952, 1012, 1076, 1245, 1319, 1383, 1448, 1568; Dr. S. Tidey on, 1308
- Prince of Wales's Hospital, grants by, 61; contributions to, 253, 383, 1136; receipts of, 552; appeal for funds for, 1131
- Royal National Pension for Nurses, report of, 829
- Fungi of ringworm, experimental note on the ferments of, 13
- Fungus, a horn-destroying, 1491
- Furner, Mr. E. J., obituary notice of, 183
- Furnival, W. J., Researches on Leadless Glazes, *rev.*, 738
- Fyfe, P., Housing of the Labouring Classes, *rev.*, 1286
- Gabb, J., the new Vaccination Act, a counsel of despair, 177; vaccination on the leg, 435
- Gabbett, Lieutenant-Colonel P. R., death of, 569
- Gabel, the Tuberculosis Congress and the working classes, 1349
- Gairdner, Sir W. T., direct representation and the British Medical Association, 1439
- Galeotti, G., Osservazione e Note Epidemiologiche sulla Recrudescenza della Epidemia di Peste Bubbonica in Bombay, *rev.*, 26
- Galgey, O., filaria Demarquail in St. Lucia, W.I., 145
- Gall stone, large, 794
- stones, intestinal obstruction due to, 24; operation for, 794
- Gelletly, J., case of acute tetanus successfully treated by antitetanin, 401
- Galloway, J., on pseudo-tuberculosis, 472
- Galloway, Colonel T. J., Egyptian army order as to, 1005
- Galton, Sir D., death of, 686
- Gangee, L. P., hydatid of lung, 1280
- Gangrene of the lung, two cases of, 70; of the left lung, 401, 402; of the lung treated by creosote vapour, 532; of the lung, 732
- Gans, E., microbes and intestinal putrefaction, 1120
- Gant, F. J., Guide to the Examination by the Conjoint Examining Board of England and for the Diploma of Fellow of the Royal College of Surgeons, *rev.*, 1168
- Garden, the Physic, at Chelsea, 231, 808
- Gardner, F. G., fomentations in uterine inertia, 1260
- H. B., a new form of ether inhaler, 601; nitrous gas and oxygen as an anæsthetic in surgical and dental operations, 1031
- Garratt, G. C., a systematic bacteriological examination of the fauces in scarlet fever as a means of preventing post scarlatinal diphtheria, 893
- Garrett, F. C., An Elementary Course of Practical Organic Chemistry, *rev.*, 27
- arrod, A. E., a contribution to the study of Galkaptonuria, 1155
- Gas water, 428, 576; poisonous, death from inhalation of, 670; sewer, typhoid poisoning and, 725; the pathology of poisoning by, 780; coal, poisoning by, recovery, 1153
- Gastrectomy, carcinomatous stomach removed by, 967
- Gastroduodenitis, acute, case of, 904
- Gastroenterostomy, case of, 216
- Gastrostomy by Albert's method, results of, 907; case of, 1161
- Gateshead, the prevention of tuberculosis at, 740
- Gaucher, E., Traitement de la Syphilis, *rev.*, 1166
- Gedarif, the battle of, 60
- Geddie, Dr. G., obituary notice of, 1251
- Gee, S., on the causes and forms of bronchitis, 645; on the nature of pulmonary emphysema, 715; on the nature of asthma, 719
- Gellhorn, G., Ueber die Resultate der Radical-Behandlung des Gebärmutter-Scheidenkrebses mit dem Glühisen, *rev.*, 1100
- Gemmell, J. F., Idiopathic Ulcerative Colitis (Dysentery), *rev.*, 479
- General Medical Council. See Medical
- Genus Sarcina (Das), F. C. Stubenrath, *rev.*, 1167
- George, A. W., death certification by unregistered persons, 1007
- G. A., the open-air treatment of consumption, 468
- Germ theory of disease, the, 730, 846
- Germany, establishment of sanatoria for consumptives in, 50, 147, 369; the vaccination law in, 373; the medical profession in, 572; statistics of universities in, 802; Professor Virchow on the standard of education in, 938; cremation in, 1324
- Germicidal action, chemical combination in relation to, 1217
- Gestation, ectopic, 86; extrauterine, 628
- Gibb, W. F., a case of acute tetanus treated by intracerebral injections of antitoxin, recovery, 805
- Gibbes, C. C., mitral stenosis and its early diagnosis, 23
- Gibbings, Dr. A. T., obituary notice of, 944
- Gibraltar, the sanitation of, 61; annual report of health of, 1444
- Gibson, G. A., Diseases of the Heart and Aorta, *rev.*, 414
- Gillespie, A. L., The Natural History of Digestion, *rev.*, 1165
- Gintl, gastric secretions, 1041
- Ginsburg, B. W., the census of, 1901
- Girardeau, C., Des Péricardites, *rev.*, 1398
- Girl, aged 11 years, dermoid cyst of broad ligament in, 339; aged 16, complete prolapse of uterus in, 402
- Given, J. C. M., dislocation of the radio-carpal joint, 1332
- Glaise, v. Christie, 1377
- Glands, inflamed of head and neck, acute febrile catarrh associated with, 83
- Gland, parotid. See Parotid
- pineal. See Pineal
- prostate. See Prostate
- thyroid. See Thyroid
- Glanders, the prevention of, 1426
- Glands, Digestive, the Work of J. P. Parslow, *rev.*, 1536
- Glasgow, and its late medical officer of health, 42; the prevention of tuberculosis at, 173, 440, 543; the water enterprise of, 219; CORRESPONDENCE FROM, 439; memorial to Professor Coats, 439; proposed dismissal of whole of Poor-law medical staff of, 760; correspondence from, 939; the Royal Infirmary scheme, 939; the medical officers of health, 940; the Muirhead College for Women, *ib.*; the fever and small-pox hospital at, 1009; proposed inebriate reformatory at, 1302
- Glass, piece of localised in the eye by means of the Roentgen rays, 1158
- Glass, A., transplantation of human ovary, 1207
- Glazes, Leadless, Researches on, W. J. Furnival, *rev.*, 738; leadless, 747
- Glegg, W., case of anencephalic foetus, 850
- Glossop Dale, the district council of, and the salary of its medical officer of health, 1071
- Glottis, fatal case of œdema of occurring during pregnancy, 1220
- Gloucester, small-pox and sanitation at, 1117, 1250
- Glover, J. G., on the profession and the General Medical Council, 20
- Gloves, the value of in operating work, 140, 316
- Glycosuria, non-Diabetic, G. Roque, *rev.*, 1338
- Glynn, T. R., idiopathic dilatation of stomach, 412
- Godlee, R. J., on pulmonary abscess, 133; shortening and eversion of the thigh, 152
- Goitre, exophthalmic, thymus extract, in, 12; epidemic, the causation of, 124; exophthalmic in the Russian army, 339; exophthalmic, organotherapy in, 786
- "Golconda," suspected plague on board the, 40
- Gold Coast, the operations on the, 637
- cure, the, 253
- Golden Rules, of Surgical Practice, E. H. Fenwick, *rev.*, 739; of Gynecology, S. J. Aarons, *rev.*, *ib.*; of Obstetrics, W. E. Fothergill, *rev.*, *ib.*
- Golding-Bird, C. H., right colotomy for chronic colitis, 1217
- Goldsmith's Company, see Company
- Golf tournament, proposed, 192, 323, 1547
- Gomez, V., Ear Records, *rev.*, 1168
- Gonococcus joint disease in infants secondary to purulent ophthalmia, 210, 230, 273
- Gonorrhœa, septicæmia and heart disease, 687; the joint affections of, 1298
- Good Regent, the, a chronicle play, 914
- Goodall, E. W., the value of the treatment of diphtheria by antitoxins, 197, 268
- Goodbody, F. W., Report of the Department of Pathological Chemistry at University College, London, *rev.*, 1101
- Goodhart, J. F., opinion the salt of fact, 276
- Gordon, J., spontaneous rupture of heart, 1088
- T. E., "vanishing tumour" of the abdomen, 905
- Gore, Surgeon-General, A. A., the services of, 41; made C.B., 1422
- Gormley, Lieutenant-Colonel J. A., syphilis in the army, 191
- Gostling, T. P., the capitation fees, 1056
- Gould, A. P., spontaneous cure of recurrent carcinoma of the breast, 1094
- Gout, its Pathology and Treatment, A. P. Luff, *rev.*, 157; uric acid and, 205; etiology of, 669; modern views of in relation to treatment, 728
- Goutte (La), D. Critzman, *rev.*, 1282
- Gowers, Sir W. R., on polymyositis, 65; A Manual of Diseases of the Nervous System, *rev.*, 737
- Grabham, M., acute dermatitis caused by handling rhus, 1140
- Graham, J. A., pyrexia after delivery, 1332
- T., notification fees, 451
- Grant, C. G., cinnamon in influenza, 763
- Sir J., the alimentary canal and human decay, 808
- Brigade-Surgeon, J. G., death of, 1070
- Granville, A., death after administration of gas and oxygen followed by chloroform, 1031
- Graves's disease. See Disease
- Gray, W., influenza and typhoid fever, 888
- Great Britain, malaria in, 1179
- Green, C. D., primary carcinoma of the liver, 18; umbilical polypus, 341

- Green, J. L., inhalation of formalin in the treatment of tuberculosis, 772, 1440
- Greenway, H., the treatment of tuberculous meningitis, 95
- Greenwood, J., the General Medical Council and the Society of Apothecaries, 311, 441; the amendment of the Medical Acts, 942; Hunter v. Clare, 329; the Hunter case, 1509
- Griffith, T. W., a correction, 455
- Mr. W. S., obituary notice of, 704
- W. S. A., puerperal eclampsia, 908
- Grimsdale, H. A., rapid changes in refraction in connection with diabetes, 275
- T. B., antistreptococcus serum in puerperal septicæmia, 88
- Grimshaw, T. W., tuberculosis in Ireland, 666
- Grocco, P., the new Clinical Institute at Florence, 355
- Groedel, digitalis in chronic diseases affecting the circulation, 1041
- Grossmann, K. A., localisation of foreign bodies in the eye by the x rays, 969
- Groves, E. W. H., clinical instruction in midwifery and gynaecology, 315
- J., the climate of British health resorts, 204
- Growths, post-nasal, 89
- Grumpell, S., an unusual cause of dystocia, 456
- Grumpelt, symptoms of poisoning by boracic acid, 7
- Guardians, agreement with under Vaccination order, 48; metropolitan conference of as to prevention of tuberculosis, 1039; complaints to against district medical officers, 1136
- Guide to the Examinations by the Conjoint Examining Board in England and for the Diploma of Fellow of the Royal College of Surgeons of England, F. J. Gant, rev., 1168
- Guild, the Medical, Manchester, annual meeting and list of officers, 383; quarterly meeting of, 1106
- Guillotine, tonsil, 476
- Gumma of sclerotic, 732
- Gun-cotton, injuries produced by an explosion of, 1534
- Gunn, Kite v., 1069
- M., a case of obliteration of a branch of the retinal artery following frequent attacks of temporary amblyopia, 1466
- Gunter, F. E., threatened death under chloroform, 1396
- Gurli, Professor, death of, 117
- Gurney, H., obstinate hiccup, 1024
- Guthrie, L., congenital paralysis, 534; acute atrophic paralysis affecting both upper extremities, 16; treatment of locomotor ataxia by exercises, 1020; light terrors, 1247
- Gwynn, E., on the London Government Bill, 545
- N., a correction, 324
- Gynaecology, clinical instruction in, 55, 315; for the Practitioner, W. Nagel, rev., 415; electricity in, 1052
- H.
- Haab, O., Atlas der äusseren Erkrankungen des Auges, rev., 1101
- Haddon, J., typhoid fever without intestinal lesion, 1012
- Haden, Sir S. F., proper and improper burial, with an examination of the claims made for cremation, 1261; the soil as a nursery of pathogenic organisms, 1440
- Hadley, W. J., peculiar lardaceous liver, 968
- Hæmatemesis, the treatment of, 22
- Hæmaturia from a movable kidney cured by nephrorrhaphy, 17
- Hæmoglobinuria. See Fever, hæmoglobinuric
- Hæmophilia, treatment of, 339, 531
- Hæmorrhage, control of, in operations for removal of labial elephantiasis, 203; profuse spontaneous into the urinary bladder, 336; from the ear, ligation of the common carotid for, 411; cerebral, venesection in, 726, 904, 1153; from the Fallopian tube, the significance of, 744; and tonsillotomy, 05; from the bowels in a case of granular kidney, 05; 1025; gastric, operation for, 1267; secondary, following the removal of a renal calculus, lumbar nephrectomy for, 1281; intractable uterine, hysterectomy performed for, 1304
- Hæmostatic, suprarenal gland extract as a, 457
- Hahnemann in the United States Congress, 1427
- Haig, A., a case of death under chloroform, 881; treatment of scarlet fever with sodium salicylate, 1266
- Hair, falling off, treatment for, 575, 1075
- Hairpin in vagina, radiograph of pelvis showing position of, 213
- Halifax, the prevention of tuberculosis at, 541, 1229
- Hall, F. de H., cardiac failure, 1305; vasomotor rhinitis excited by sulphurous acid, 1568
- Hall-Edwards J., radiograph of pelvis showing position of hairpin in vagina, 213
- Hallen, C. E. H. C., school board fees, 1319
- Halliburton, W. D., "spermium Poehl," 1062; the physiological action of choline and neurine, 1082; Kirke's Handbook of Physiology, rev., 1099; The Essentials of Chemical Physiology, rev., 1164
- Halton, Dr. E. C., death of, 764
- Hamburg, proposed school for tropical diseases in, 1508
- Hameau, Dr. J., a precursor of Pasteur, 868
- Hamilton, Dr. J. B., death of, 126, 697
- Surgeon-General J. B., the Royal Army Medical Corps, 504; plague precautions at Bombay, 700
- P. J., epidemic acute pneumonia, 1214
- R. K., acute suppurative tonsillitis with convulsions, 16
- Hammarssten, O., A Textbook of Physiological Chemistry, rev., 1168
- Hampstead, proposed general hospital for, 356; donations for hospital at, 640
- Hand, The Study of the, etc., E. Blake, rev. 857
- Handbill, a medical, 888
- Handbook, a Practical on the Muscular Anomalies of the Eye, H. F. Hansell and W. Reber, rev., 1101
- Handbuch, der Krankenversorgung und Krankenpflege, G. Liebe, P. Jacobsohn, and G. Meyer, rev., 1165; der Schulhygiene, A. Baginsky, rev., 1399
- Handford, L., parietal osteoma treated by trephining improvement, 597
- Bandiwork, play and work, 324
- Hands, the cleansing of, for operative work, 140
- Hanoi, an antirabic institute at, 1016
- Hansell, H. F., A Practical Handbook on the Muscular Anomalies of the Eye, rev., 1101
- Hardaway, W. A., An American Textbook of Genito-Urinary Diseases, Syphilis and Diseases of the Skin, rev., 91
- Harden, A., An Elementary Course of Practical Organic Chemistry, rev., 27
- Hardman, W., the conscience clause, 122; celandine, 1012
- Hardy, H. N., the interpretation of the Medical Acts, 121
- Hare, the, in folk medicine, 1115
- Hare, H. A., Practical Diagnosis, rev., 1286
- Harford-Battersby, C. F., on blackwater fever, 888
- Hargreaves, Franks, v., 185
- Harrington, Major V., a note on dracunculus medinensis, 146
- Harley (George), F.R.S., the Life of a London Physician, Mrs. A. Tweedie, rev., 797
- V., Report of the Department of Pathological Chemistry at University College, London, rev., 1101; an experimental inquiry into the quantity of volatile acids in the stomach, 1271
- Harper, J. E., the secret of success in medicine, 1499
- Harris, A. E., on the London Government Bill, 545
- Dr. R. P., death of, 704
- T., unilateral pulsus paradoxus and indurative mediastino-pericarditis, 1336
- Harrison, G., the duties of a police surgeon, 186
- H. L., transposition of viscera, 877
- R., multiple calculi removed from narrow-necked sacculi connected with male bladder, 789
- Hartley, J., tetanus treated by intracerebral injection of antitoxin, recovery, 1333
- Haslam, W. F., myeloid sarcoma of fibula, 213
- Haslett, W. J. H., the lunacy law and borderland cases, 354, 700
- Haughton, W. S., some recent x-ray work, 21
- Havana, the sanitary state of, 83
- Hay, J., pulsus paradoxus, 1161
- Hayes, opening of new wing of cottage hospital at, 1238
- Head, epileptiform convulsions following injury to, 907; antero-posterior position of the impeding labour, 909
- Headache caused by erythrol tetranitrate, 131, 321
- Health resorts, British, the climate of, 294
- Heard, R. L., decrease of uterine myoma after excision of breast, 51
- Heart, bullet embedded in for thirty-seven years, 38; the conduct of the in the face of difficulties, 85; disease of and gonorrhœa and septicæmia, 687; musical murmurs of, 704; chloroform paralysing the respiratory centre before the, 903; insufficiency of the muscle of, 974; disease of at the German Medical Congress, 1040; spontaneous rupture of, 1088; rupture of, 1154; dilated, the etiology and significance of, 1276; failure of the, 1305; The Principles which Govern Treatment in Diseases and Disorders of the, Sir R. D. Powell, rev., 1398; and Pericardium, Surgery of the, F. Terrier and E. Raymond, rev., 20
- Hearts, with dilated left ventricles, casts of, 968
- Heat, constant, an apparatus for applying, 218; and light, therapeutics of, 658, 832, 853; in the treatment of arthritis, 1140
- Heaton, C., Medical Hints for Hot Climates, rev., 540
- G., splenectomy for rupture, 475; the prognosis and treatment of acute intussusception, 957; electrical stimulation of the exposed cortex cerebri, 1030; primary organs from a case of impacted calculus, 1031
- Hebb, R., umbilical polypus, 341
- Hedley, W. S., hot air bath, 64; a disclaimer, 323; heat and light, 832
- Hegar, P., varying condition of the neuron under stimulation and rest, 1299
- Hellier, J. B., chronic inversion of the uterus, 1224
- Helmholtz, statue to, 365; the brain of, 1180
- Hemming, Mr. J. H., death of, 990; obituary notice of, 1066
- Henry, E., acute epidemic dysentery, 787
- Herbalist, conviction of a, 185
- Herbalists, medical practice by, 1007
- Heredity, books on, 643; or, What Living Things Owe to their Ancestors and what they did not, rev., 856; in tuberculosis, 1347
- Herman, G. E., a case of inversion of uterus by a fibroid; enucleation of fibroid and reposition of uterus, 47; cancer of breast cured by oophorectomy and thyroid extract, 906
- Hermaphroditism, a curious form of, 272
- Hern, J., partial amputation of foot, 1151
- Hernia, strangulated in a pericardial sac, 16; the operative treatment of, 87; inguinal, radical operation for, 664; strangulated inguinal in a boy 2½ years old, operation, recovery, 788; Hydrocele and Varicocele, The Radical Cure of, C. B. Lockwood, rev., 855; prevesical, with the relation of a case in which subacute strangulation occurred, 905; inguinal, treatment of in children, 1146; four unusual cases of, 1328; of the ovary, 1395; umbilical, method of operating for, whether for radical cure or when strangulation has occurred, 1460; Retroperitoneal, B. G. A. Moynihan, rev., 1470
- Heroin, etc., 675
- Herpes zoster, with aberrant vesicles, 388
- Herringham, W. P., experiments upon the toxicity of the urine, 727
- Heubner, J. O. L., mortality of children in the Charité Hospital, Berlin, 1177; prevention of infantile tuberculosis, 1347
- Heuston, F. T., the Poor-law medical service in Ireland, 354
- Hewetson, Mr. H. B., obituary notice of, 1251
- Hewitt, F. W., the effects produced in the human subject by the administration of definite mixtures of nitrous oxide and air and nitrous oxide and oxygen, 404
- Hey, H. D., the value of venesection, 57
- Hey's internal derangement of the knee-joint, 1005
- Hiccough, obstinate, treatment of, 596, 660, 1024, 1139, 1332
- Hicks, Mr. A. B., Mr. Plowden and, 102; letter of sympathy to from Parliamentary Bills Committee and Council, 372
- Higginson, F. W., green stools in enteric fever and dysentery, 712
- Hill warfare, ambulance work in, 1132
- Hill A., use of antiseptics in food, 969
- J., ascitic fluid, 388
- W., facial and palatal paralysis, 342
- Hime, T. W., the increase of hospital patients at Bradford, 38
- Hinnell, Mr. G. J., death of, 1312
- Hip, anterior dislocation of, probably congenital, 535; a method of reduction of dislocation of the, 845; congenital dislocation of, 1029
- Hirschfeld, F., plethora, 1041
- His, W., behaviour of uric acid in the organism, 1042; the medical clinic at Leipzig, 1361
- Histology and physiology, the teaching of, 760, 878
- History, medical, the teaching of, 107
- Hodara, M., the operative treatment of baldness, 492
- Hodge, S. R., proposed school for tropical diseases, 182

- Hodgkin's disease. *See* Disease
Hodgkinson, T. C., the alimentary canal and human decay, 119
Hogarth, R. G., a disclaimer, 1568
Hogg, J., *The Microscope: its History, Construction, and Application*, rev., 1034; death of, 1057
Holland, C. T., radiographs of chest, 278; eczema treated by x rays, 1024
— Sir H., the success of in the practice of medicine, 1430
Holman, C., the Medical Acts and the medical profession, 54
Home, the Dalrymple, annual report of, 1137
— Hospital Convalescent, Parkwood, Swanley, report of, 639
— Mary Wardell Convalescent, annual report of, 1136
— Surgical for Boys, Banstead, annual report of, 560
— Yarrow Convalescent, report of, 1275
Homœopaths in council, 1490
Hong Kong, the plague at, 818, 937, 993, 1056, 1108, 1304, 1307, 1351, 1421, 1507, 1556; correspondence from, 1307, 1556; the College of Medicine for Chinese at, 1307; the new "hinterland," *ib.*; small-pox, 1307, 1556; rinderpest, 1307
Honours, New Year, 21; birthday, 1421, 1512
Hope, Dr. E. W., presentation to, 1352
Hopkins, H. C., fees to medical witnesses in police courts, 1374
Hopkirk, A. F., *Anti-Vacc. Veracities*, rev., 481
Horder, T. G., the interpretation of the Medical Acts, 121; medical aid associations, 1002, 1129; the proposed conciliation Board, 1510
Horfield, proposed reception home for inebriates at, 1197
Horn-destroying fungus, A., 1491
Horrocks, H., the treatment of pulmonary tuberculosis by antituberculous serum, 790
— W. H., fibrous stricture of the rectum, 1331
Horsley, V., the General Medical Council, inspection of documents, 52; the Medical Acts and the medical profession, 54; the General Medical Council and the Hunter case, 374; the amendment of the Medical Acts, 941, 999, 1129; on the Midwives Bill, 1537
Horton Manor Estate, acquirement of by London County Council for asylum purposes, 1430
Hospital for paying patients, 1259
— the Bolingbroke, appeal for funds for, 1360, 1567
— Bucknall, for Infectious Diseases, opening of additions to, 188
— Bute, Luton, annual report of, 321
— Cancer and Skin, Liverpool, disagreement of medical staff, etc., at, 1358, 1426
— Charité, Berlin, mortality of children in, 1177
— for Children, the Belgrave, new rules for, 1233; meeting in aid of funds of, 1253
— for Consumption and Diseases of the Chest, Brompton, proposed rearrangement of wards at, 365; lectures at, 1122; the Helen Fauchit ward at, 1300
— Dental of Ireland, incorporation of, 130
— Dental of London, report of, 750
— East Suffolk and Ipswich, infectious cases at, 571
— Evelina for Sick Children, Lord Rothschild's bequest to, 39
— Eye and Ear, Bradford, annual report of, 1254
— Guy's, report of treasurer of, 1380
— Johns Hopkins, clinical microscopy in the medical school of, 69; The Reports of, rev., 1035
— Kashmir Mission, report of, 1136
— Lebanon, for the Insane, annual report of, 106
— Lock, Liverpool, closing of, 686
— Lying-in, Liverpool, the admission of unmarried women to, 42
— Middlesex, the new school buildings for, 615, 681; institution of Hetley clinical prize at, 624; bequest for founding bed in cancer wing of, 1073
— National for the Paralysed and Epileptic, annual dinner of, 1513
— Norfolk and Norwich, donation of £10,000 by Mr. W. Cadge to, 107
— Northern Liverpool, the surgeoncy of, 502
— Rotunda, obstetrical report of, 733; reports of, 910
— Royal Free, proposed improvements at, 571
— Royal Orthopaedic, the internal administration of, 1357; meeting of special court of governors of, 1482
Hospital, Royal Portsmouth, opening of new blocks at, 553
— Royal Victoria, Netley. *See* Netley
— of St. Francis, resignation of members of honorary staff of, 323
— St. George's, changes in lectureships at, 61; the teaching of vaccination at, 296; contracts for milk supply for, 610; lectures on tropical diseases, 707
— St. Mary's, bazaar in aid of funds of, 1430
— St. Thomas's, endowment of new bed at, 572, 707
— Samaritan for Women, Belfast, two years' work at the, 1160
— Seamen's, Greenwich, and the teaching of tropical diseases, 493; resignation of visiting staff of, 707
— Stanley, Liverpool, appointments at, 1308
— Sussex County, opening of new dormitories for nurses at, 1254
— University College, concert in aid of funds of, 1381
— Victoria for Consumption, Edinburgh, proposed extension of, 429; sale of work in aid of funds of, 1344
— Victoria, Eye and Ear, Dublin, proposed new site for, 571
— West End Diseases of the Nervous System, reopening of children's wards at, 639
— West London, appeal on behalf of funds of, 1342
— Westminster, dance in aid of funds of, 1197
— for Women, Chelsea, opening of nurses' home at, 252
— and Dispensary, French, annual dinner in aid of funds of, 1197
Hospitals, the organisation of laboratories in; cottage and the Coroners Act, 60; rating of in London, 552; and certificates under the Workmen's Compensation Act, 685, 762, 827; floors of, 711; metropolitan in India, 757; abuse of and paying wards, 806; general, typhoid fever in, 1049; for children, the mortality in, 1177; and general practitioners, 1184; prophylaxis of tuberculosis in, 1347; the rating of, 1548
Household troops, medical officers of, 448
Houses, sanitary inspection of, 172; back to back at Leeds, 451; in the spread of tuberculosis, 1347
Housing, of the poor in London, 1114; of the Labouring Classes, P. Fyfe, rev., 1286
Houston, T., cystitis of three years' duration due to the typhoid bacillus, 78
Hovell, T. M., chronic empyema of the maxillary sinus, 1218
Hubard, Captain A. O., death of, 1005
Huber, J. B., on Christian Science, 618
Huddersfield, a vaccination case at, 491
Hughes, A. B., puerperal eclampsia, convulsions of mother and child, recovery of both, 464
Hull, the prevention of tuberculosis at, 97; the Lying-in-Charity at, 499; outbreak of small-pox at, 1235
Hulkranz, J. W., *Das Ellenbogengelenk und seine Mechanik*, rev., 739
Humerus, scurocraic dislocation of head of, with fracture of great tuberosity, 409; fractured, non-union of, 907; ununited fracture of caused by interposition of the musculo-spiral nerve between the fragments, 966; oblique fracture of treated by wiring, 1029
Humphrey, A. D., the occurrence of blackwater fever in Darjeeling, Terai, 788
Humphreys, F. R., the supporters of the Midwives Bill, 1200
Humphry, F. A., the Jacksonian prize, 888
Humphry, the medical profession in, 188
Hunt, E. L., diphtherial membranous tracheitis with temporary obstruction in right bronchus in an adult, 342
— G. B., rheumatoid arthritis with enlarged spleen and glands in a child, 534; splenic anæmia in infants, 967
Hunter v. Clare, an appeal, 827, 880 (*See also* Fund)
— H. K., the appeal in the case of 225, 233; the arguments in the case of, 301; the case of, 374, 441, 504, 559, 1351, 1509; the validity of the M.D. degree of, 999; the case of, and the Penal Cases Committee, 1485
— Dr. J., presentation to, 61
— John, as the founder of scientific surgery, 380
Hunting, W., on tuberculosis in cattle, 286
Hurry, E., district nurses and the medical profession, 943; a Provident Dispensary and Nursing Association
- Hurst, Mr. H. F., presentation to, 1257
Hutchinson, J., jun., localised myositis ossificans following injury, 151; abdominal section, 274
— W., on pseudo-tuberculosis, 473, 598
Hutchison, R., is petroleum emulsion of any nutritive value? 724
Hyaline degeneration, 976
Hydatid, of liver, 1030; of lung, 1280
Hyderabad, the Pasteur Institute at, 591
Hydræmnion, in cases of homologous twins, 1465
Hydræmnios with anencephalic foetus case of, 1448
Hydrocele, subcutaneous rupture of, 1274
Hydrophobia, risk of after treatment, 643
Hygiene (Home), J. F. Sykes, rev., 858
Hygroma, cystic, of neck, 342
Hyndmann, H. F. F., *Radiation*, etc., rev., 1168
Hynes, Mr. J. T. O'C., death of, 882
Hyperpyrexia in subacute rheumatic fever, 148; puerperal, 1221
Hypertrophy, general, of the pylorus, 340; unilateral of the breast from pressure, 533; unilateral of the accessory muscles of respiration, 1093
Hypodermic medication in skin disease, 904
Hypospadias, complete, with cleft scrotum, 152
Hysterectomy, vaginal, for cancer, 477; as a conservative operation, 839; for intractable uterine hæmorrhage, 1394
Hysteria, differential, diagnosis of insular sclerosis from, 1077
- I.
Illinois, small-pox in, 1128
Images, multiple, in the normal eye, 563
Imlach, F., phosphorus in lucifer matches, 968
Immunity in tuberculosis, 1347
Impregnation, artificial, 710
Incubation period in varicella or chicken-pox, 81
India, the plague in, 48, 993, 1056, 1108, 1304, 1351, 1421; inoculation against enteric fever in, 232, 572; medical and sanitary reform in, 446, 1500; the nursing of Europeans in, 495; civil assistant surgeons in, 496; Western, medicine in, 613; bacteriological, vacancies in, 637; medical advertising in, *ib.*; metropolitan hospitals, 759; echoes of the famine in, 822; the number of plague seizures in, 873; a research institute for, 1049, 1491; hospitals and sanitation in, 1132; the Eastern Institute in, 1180; the truth about the plague in, 1237; the Sanitation of British Troops in, Captain E. C. Freeman, rev., 1284; vaccination in, 1341; civil surgeons in, 1377
Indiana, small-pox in, 1128
Inebriates, reception home for, 1197; homes for, 1319
— Act. *See* Act.
Inebriety in Belgium, 188; State treatment of, 619; female, is it increasing? 810; Lady H. Somerset on, 948; treatment at Rickmansworth, 1137
Inertia uteri, fomentation in, 1140
Infancy, dysarthria and delay in learning to speak, following cerebral disturbance in, 1027
Infant, injury to the roots of the brachial plexus in an, 1023; vulvulus in an, operation, recovery, 1215
Infants, gonococcus joint disease secondary to purulent ophthalmia in, 210, 230; splenic, anæmia in, 967; prevention of tuberculosis in, 1347
Infection, schoolboys, and parents, 989
Infections by unsound meat, 1216
Infirmaries, Poor-law, tuberculosis in, 1267
Infirmary, General, Gloucester, and Dr. R. W. Batten, 1559
— Radcliffe, Oxford, donation to, 383, 1560
— Royal, Aberdeen, need for further accommodation at, 440
— Royal, Bristol, annual meeting of subscribers to, 940
— Royal, Edinburgh, the residents at, 805, 866; appointments at, 883
— Royal, Glasgow, annual meeting of managers of, 40; the scheme for, 930
— Royal, Liverpool, and the use of tuberculin, 172
— Shoreditch, nursing at, 691
Influenza, epidemic, 429, 491; "phosphatic diabetes" following, 456; literature of, 491; and its prevention, 550; glimpses of in the past, 607; in London, 615, 685, 747, 859; cinnamon in, 600, 763; at Chicago, 697; and typhoid fever, 711, 888; parliamentary, 746; in Mexico, 768; in Paris, 877; and otitis media, 964, 1153; in 24 times in France, 1296

- Inhaler (ether) new form of, 601
 Injections, continuous intravenous, 298
 Inoculation against enteric fever in India, 232, 572, 640
 Inquest, (no), in sudden death, 1133
 Inquests, the necessity for, 823
 Insane, lesions of the adrenals in the, 851
 Insanity, incipient, the early treatment of, 377, 487, 501, 625; the pathology of, 420; representation of, in Shakespeare's Plays, H. Laehr, *rev.*, 1165
 Inspection, sanitary of houses and schools, 172
 Inspectorships, Government, 191
 Institute of Chemistry, results of examination by, 252
 — Jenner, of preventive medicine, proposed reference library for, 172; proposed alteration of memorandum of association of, 1441
 — the Midwives' and the Midwives Bill, 442, 690
 — for Nurses, Queen Victoria's Jubilee, annual report of Scottish branch of, 130; annual report of the Cardiff branch of, 1054
 — the Sanitary, annual dinner, 1114; results of examinations of, 1250; the coming congress of, 1514
 Institution, Liverpool Medical, perforating ulcer of the stomach, 87; myxoedema treated with colloid, 88; revolver wound of brain, *ib.*; uterine fibroid, *ib.*; the Vaccination Act, 1898, 88, 278, 1161; list of officers, 157; sarcoma of leg, 278; radiographs of chest, *ib.*; faucial tumours, *ib.*; tumours of oesophagus, 279; some points in the surgery of the paralysis of children, *ib.*; house-surgeons and the Workmen's Compensation Act, 412; tuberculosis cases, *ib.*; idiopathic dilatation of stomach, *ib.*; the pineal gland, 477; the dental tissues, 478; specimens, 478, 795; dissection of crystalline lens, 602; cholecystectomy, *ib.*; myositis ossificans, *ib.*; pylorotomy for stenosis of the pylorus, *ib.*; vaginal section, *ib.*; Liverpool school of tropical diseases, 668; traumatic axillary aneurysm, 669; compound diastasis of lower end of radius, *ib.*; Berlin's operation for entropion, *ib.*; the chronicity of eczema, *ib.*; bronchiolitis, 794; multiple rodent ulcer, 795; operative treatment of diseases of jaw, 852; acute leukaemia, *ib.*; suppurative peritonitis, *ib.*; lymphosarcoma, *ib.*; leucodermia colli, *ib.*; phosphorus in lucifer matches, 968; prurigo ferox, *ib.*; pylorotomy, *ib.*; pyloroplasty, *ib.*; localisation of foreign bodies in the eye by *x* rays, 969; general suppurative peritonitis, *ib.*; meeting of Pathological and Microscopical Section of, 1033; pulsus paradoxus, 1161; colotomy, *ib.*; gastrostomy, *ib.*; removal of upper extremity, *ib.*; case of lupus under treatment for seventeen years, 1162; acute rhinitis causing general infection, *ib.*; rupture of kidney, secondary operation, recovery, *ib.*
 — Royal, lectures at, 790; the Fullerian endowments, 888
 — United Kingdom Temperance and General Provident, statistics of, 1214
 Insurance reports, 449
 Intestine, operative treatment of typhoid perforation of, 345, 1097; ruptured, 474; a case of typhoid fever without any lesion of the, 776; distended small, the operative treatment of in acute obstruction and acute peritonitis, 842; removal of navoid tumour of the, 843; large, excision of malignant growths of, 907; distended small, operative treatment of in acute obstruction and in acute peritonitis, 1025; large, two cases of resection of with recovery, 1149, 1157
 Intussusception, two cases of, 10; acute, the prognosis and treatment of, 957
 Intunction, treatment of syphilis by, 64
 Iodiform, bullous dermatitis due to, 1214
 Ipecacuanha in dysentery, 903
 Ipswich, the prevention of tuberculosis at, 368; formation of Branch of National Association for the Prevention of Consumption, etc. at, 1040
 Ireland, ineligibility of Poor-law medical officers in to serve as county councillors, 227; the grievances of Poor-law medical service in, 215; Mr. A. J. Balfour's scheme for universities in, 289, 374, 440, 688; Mr. F. T. Heuston on the Poor-law medical service in, 354; preliminary education in, 533, 633; The University Question in, its difficulties and their solution, W. Whitley, *rev.*, 604; tuberculosis in, 666; distribution of tuberculosis in, 667; nursing in workhouses of, 684, 808, 880, 942, 1003, 1061, 1120, 1123; the Poor-law service of, 748; dispensary elections in, 806, 1090; cancer in, 1280
 Iris, implantation cysts of the, 665; tumours of, 1158
 Isdell, F., a degree for doubly qualified men, 377
 Isle of Man, medical practitioners in the, 750; medical legislation in the, 803; the Medical Bill for, 1053, 1113, 1179
 — of Wight, the diamond jubilee memorial at, 104
 Isolation after infectious disease, 190
 Italy, education of the feeble-minded in, 37; investigations on malaria in, 95, 162; the treatment of phrenasthenic children in, 118; foreign medical practitioners in, 119, 771; the medical profession in, 229; medical students in, 355; prevention of tuberculosis in, 369, 1230, 1421; the Government of and reciprocity, 373; the sanitary condition of, 452; medical students in, 617, 629; homoeopathic pharmacies in, 697; the first ovariectomy in, 1490
 J.
 Jaboulay, stretching the solar plexus for abdominal palpitations, 990
 Jack, W. R., Methods of Staining the Nervous System, *rev.*, 92
 Jackson, Staff Surgeon H. S., death of, 446
 — T. V., compound fracture of skull, 794
 Jacksonian Prize, *See* Prize
 Jacob, A. H., the Irish Medical Association, 879
 — J., neurotic insufficiency of cardiac muscle, 1040
 Jacobsohn, P., Handbuch der Krankenversorgung und Krankenpflege, *rev.*, 1165
 Jaffrey, F., pachydermatocoe of scalp, 907; epileptiform convulsions following injury to head, *ib.*
 Jahrbuch des Bismarck-Landeskrankenhauses in Sarejeva für 1894, 1895, und 1896, *rev.*, 1469
 Jamaica, the law as to notification in, 166; report of the registrar-general of, 640; annual report of the superintending medical officer of, 768
 James, A., hereditary syphilitic osteitis, 1467
 Jamieson, S., the Widal reaction in typhoid fever, 452
 — T. H., chloroform paralysing the respiratory centre before the heart, 903
 Janes, E., The Englishwoman's Yearbook and Directory for 1899, *rev.*, 972
 Japan, cremation in, 299
 Jardine, R., a correction 456; the teaching of midwifery, 506
 Jaubert, the artificial purification of air, 295
 Jaw, so-called phosphorus necrosis of in match makers the cause of, 9, 132; lower, excision of, 704; operative treatment of diseases of the, 852; upper, tumour of the, 1093; lower, amputation of, 1449
 Jeddah, the plague in, 626, 818
 Jee, Deputy-Inspector-General J., obituary notice of, 764
 Jejunum, traumatic rupture of, 470
 Jenner, Sir W., the will of, 868
 — Institute, *See* Institute
 Jennerism literature, 57
 Jenners, the two, 231
 Jepson, E., medical contract work in the county of Durham, 559, 1556
 — Dr. O., death of, 1194
 Jersey, the prevention of tuberculosis in, 482
 Jessett, F. B., operative treatment of malignant disease of the breast and uterus, 603
 Jessop, T. R., aseptic *v.* antiseptic surgery, 853
 — W. H. H., Manual of Ophthalmic Medicine and Surgery, *rev.*, 347
 Jews and cancer, 1384
 Jex-Blake, Dr. S., farewell reception to, 938
 Joel, W., munificent bequests by, 61
 Johns Hopkins Hospital, *See* Hospital
 Johnson, R., cystic hygroma of neck, 342; congenital cyst at the back of the tongue, 850
 Johnston, C. A., hypodermic injections of quinine in malaria, 1153
 — G. J., epithelioma of lip in a youth, 1222; breast containing new growth removed from youth 18 years old, with microscopic specimens, *ib.*
 Johnstone, Brigade - Surgeon - Lieutenant-Colonel H., death of, 250
 — R. J., topographical anatomy, 667; foetal monsters, *ib.*
 Joint affections of gonorrhoea, 1299
 Joints of mammals contrasted with those of man, 659
 Jones, E. J. T., antitoxin in diphtheria, 1192
 — E. L., the topographical distribution of cancer, 813; cancer houses, 943
 — H. E., dissection of crystalline lens, 602
 — R., perforating ulcer of stomach, 87; some points in the surgery of the paralyses of children, 279; myositis ossificans, 602; two cases of operation for perforating gastric ulcer, 962
 — T., malignant renal growths, 412
 — Dr. T., death of, 445
 Jordan, J. F., treatment of pus in the pelvis, 139
 — W., peripheral neuritis, 1030
 Journal, New York Medical, a hint to correspondents, 1178
 Journals, medical students', 131
 Juler, H., orbital tumour, 1158
 Justice, a denial of, 1048
 K.
 Kala-azar, Dr. H. Thornhill on, 746; effect of segregation, etc., on, 1464
 Kanthack, Professor, proposed memorial fund for family of, 493, 559; subscriptions to memorial fund of, 689, 952
 Kaufmann, O. J., spastic paresis, 474
 Keble, Mr. A., death of, 126
 Keen, W. W., the duty of the public to the medical profession, 1295
 Keiffenheim-Trubridge, L. W. A., information as to pellagra, 454
 Keith, S., membranous colitis and colotomy, 575
 Kellock, T. H., complete hypospadias with cleft scrotum, 152
 Kelly, J., Colhoun and others, 320
 — Major W., death of, 448
 Kelson, W. H., diseases of the nose in relation to general diseases, 346
 Kelyack, T. H., malignant renal growths, 412
 Kenny, J., Wilson, 320
 Keng, L. B., chloroform paralysing the respiratory centre before the heart, 903
 Kennedy, A., case of patent urachus, operation, cure, 1396
 Kensington, vital statistics of in 1898, 252
 Ker, C. B., the history and clinical features of a recent outbreak of typhoid fever at Edinburgh, 1159
 Keratitis, filamentary, 1158
 Kerr, J., statistics regarding school children's vision, 624
 — Dr. N., death of, 1360; obituary notice of, 1442
 Kiaochau, health resort at, 384
 Kidney, movable, hamaturia from, cured by nephrorrhaphy, 17; movable, nephrorrhaphy for, 89; malignant, nephrectomy for, 212; granular, some clinical aspects of, 327, 460, 583; movable, 343; malignant growth in, 412; skin affections in disease of the, 966; granular, haemorrhage from the bowels in a case of, 1025; rupture of, secondary operation, recovery, 1162; primary abscess of the, 1223; misplaced, misshapen, case of 1395
 Kildwick, typhoid fever at, 493
 King George IV and the aiguillette, 107
 King, A. F. A., A Manual of Obstetrics, *rev.*, 539
 — Lieutenant-Colonel, W. G., made C.I.E., 1423
 King's evil, the royal cure for, 1182; touching for the, 1235
 Kingsey-Morgan, A., the tuberculin test and dairies, 1129
 Kingston-on-Thames, failure to provide isolation hospital at, 1379
 Kipling, Mr. R., the illness of, 551; the physicians of, 820
 Kirchner, marriage of tuberculous persons, 1347
 Kirk, R., neurotic ulcers of the mouth, 1213
 Kirkes' Handbook of Physiology, W. D. Halliburton, *rev.*, 1099
 Kirkpatrick, T. P. C., room disinfection with special reference to the use of formaldehyde, 1280
 Kissing, from an anthropological point of view, 106; the Book, 299
 Kite, v. Gunn, 1069
 Klemperer, F., Grundriss der klinischen Bakteriologie für Aerzte und Studierende, *rev.*, 158
 Klippel, M., Les Paralysies Générales Progressives, *rev.*, 1284
 Knaggs, L., four unusual cases of hernia, 1328
 Knee, zona below the, 712; tuberculous arthrectomy for, 733
 Knee-joint, injury to the, 697; apparently aseptic suppuration of the following injury, 1091; Hey's internal derangement of, 1095
 Knight, C. F., registration of colonial degrees, 1059
 — Mr. H. J., death of, 699, 765
 Knock-knee, operation for, 1554
 Knott, J., Hey's internal derangement of the knee-joint, 1095
 Kobert, the medicinal treatment of tuberculosis, 1348

- Koch, R., Reise-Berichte über Rinderpest, Bubonenpest in Indien und Afrika, Tsetse oder Surra-Krankheit, Texasfieber, tropische Malaria, Schwarzwasserepidermie, *rev.*, 1033; in Italy, 1374.
- Kranz, M., Diagnose und Therapie der nervösen Frauenkrankheiten infolge gestörter Mechanik der Sexualorgane, *rev.*, 1100.
- Kraske's operation for cancer of rectum, 90.
- Kraus, F. R., absorption of oxygen by the blood, 1120.
- Krieger, influence of occupation on tuberculosis, 1046.
- Kronthal mineral waters, 1169.
- Kymer, Dr., and the University of Oxford, 821.
- Kyngdon, Mr. B., death of, 1067.
- L.
- Laboratories, the organisation of in hospitals, 5; the prevention of infection in, 180.
- Laboratory, the pathological at Claybury, 420; of the Scottish asylums, 615.
- Laboulbène, Professor, obituary notice of, 506.
- Labour, normal, following symphysiotomy for contracted pelvis, 403; The Anatomy of as studied in Frozen Sections, A. H. F. Barbour, *rev.*, 479; antero-posterior positions of the head impeding, 909; complicated by slight pelvic contraction, 1221.
- Lachrymal obstruction, treatment of, 711.
- Lacing (tight), law against, 494.
- Lackie, J. L., puerperal hyperpyrexia, 1221.
- Laehr, H., Die Darstellung krankhafter, Geisteszustände in Shakespeare Dramen, *rev.*, 1165.
- Laing, J. McG., appeal on behalf of the widow of, 455.
- Lamb, Captain G., the neutralising power of Calmette's antivenomous serum, its value in the treatment of snakebite, 781.
- W., papillomata of larynx, 1280; empyema of antrum, 1281.
- Lambeth, the overcrowding of the workhouse infirmary at, 451.
- Lambkin, Major F. J., syphilis in the army, 55; The Treatment of Syphilis in the Public Services, *rev.*, 1468.
- Lamond, R. P., the amendment of the Medical Acts, 1060, 1250.
- Lamont, Mr. J., the case of, 757.
- Lamp (petroleum) accidents, 1257.
- Lancashire, the County Council of and tuberculosis in cattle, 917.
- Landau, T., surgical treatment of uterine cancer and its recurrence, 1269.
- Landerer, Die Behandlung der Tuberkulose mit Zimmtsäure, *rev.*, 1337; Anweisung zur Behandlung der Tuberkulose mit Zimmtsäure, *rev.*, 126.
- Landi, Dr., monument to, 1490.
- Lane, J. E., syphilitic diseases, their prevention, study, and treatment, 1250, 1440.
- W. A., a patient after removal of cerebral tumour, 534; erosion of ankle-joint, 664.
- Langton, J., radical operation for inguinal hernia, 664; aneurysm of abdominal aorta successfully treated by introduction of silver wire into the sac, 791.
- Lankester, Prof. R., elected a corresponding member of the Academy of Sciences of France, 640.
- Lantern slides of physiological subjects, where to obtain, 255.
- Laparotomy for volvulus in an infant, recovery, 1215; a new method of closing the peritoneum after, 1394.
- Larynx, pemphigus of, 151; growths in in young children, 1210; papillomata of, 1280.
- Lathyrism, description of, 1487.
- Laughter as a therapeutic agent, 989.
- Laurie-Robinson, E., laryngeal obstruction, recovery after infection of diphtheria antitoxin, 1319.
- Lavrand, La Nephrite des Saturnins, *rev.*, 1285.
- "Law of Profeta," the, 1293, 1440.
- Law, W. T., case of phthisis treated by the open-air method, 849.
- Lawrence, A. E. A., fibromyomata of the vagina, 469; uterine neuroses, 876.
- James, tetanus treated with intracerebral injections of antitoxin, recovery, 1333.
- John, hypertrophy of the pituitary body without acromegaly, 851.
- T. W. P., hypertrophy of the pituitary body without acromegaly, 851.
- Lawson, A., albuminuric refinitis in a child, 666; vascular formation in the vitreous in diabetes, 1158.
- Lawson, F. H., tetanus treated with intracerebral injections of antitoxin, recovery, 1333.
- Mr. K., death of, 1131.
- Lazarus-Barlow, W. S., dilatation of the oesophagus, 340; on pseudo-tuberculosis, 598.
- Lea, A. W. W., primary sarcoma of sigmoid flexure, 1336.
- Lead poisoning, notification of, 359; in the Potteries, 829, 871, 1116.
- LEADING ARTICLES:—Secondary education and the preliminary examinations, 33, 99, 163; the surgery of the posterior mediastinum, 34; magistrates and the Medical Acts, 35; the lunacy laws and borderland cases, 100; safeguards against antivaccination, 101; impersonation and the "Medical Register," 164; the depopulation of France, 165; the General Medical Council and the Society of Apothecaries, 225; the Irish dispensary doctor, 225, 611; another Bill to amend the Medical Acts, 291; teacher and taught, 292; the working of the new Vaccination Act, 293; the Government and revaccination, 357; the dawn of medical science in Russia, *ib.*; the Inebriates Act 1898, 358; notification of lead poisoning, 359; the Hunterian Oration, 423; diplomas and degrees for opticians, 424; mosquitos and malaria, 425; the treatment of incipient insanity, 487; the endowment of medical education, *ib.*; the cerebrospinal fluid in the human subject, 488; Mr. Chaplin's little Bill, 489; the London Government Bill, 547, 611; medical officers for two army corps, 547; the Government and revaccination, 548; secret commissions, 612; the Midwives Bill, 679; the central health administration of London, 680; "sermons in stones," 681; the surgical complications of typhoid fever, 743; the medical service of Crown colonies, 744; the significance of hæmorrhage from the Fallopian tube, *ib.*; medical legislation in the Isle of Man, 803; the local incidence of cancer, *ib.*; port sanitary work in London, 804; medical practice by companies, 851; the equalisation of notification, 862; the London County Council and the Government Bill, 863; the new Lunacy Bill, 621; the anthropometry of the British army officer, 622; the sanitary powers of County Councils, 623; medical and pharmaceutical legislation, 983; the control of syphilis, 984; the amendment of the Medical Acts, 985; mathematical method in the study of vital phenomena, 1045; the Liverpool school of tropical diseases, 1046; life assurance and vaccination, 1109, 1171; education in the future, 1110; diastases, toxins, and venins, 1111; experimental psychology, 1172, 1232; rural depopulation, 1231; the Birmingham consulting scheme, 1233; the certification of causes of death, 1291; surgical shock, 1292; "the law of Profeta," 1293; the Tuberculosis Congress, 1353; climate in the treatment of consumption, 1354; tuberculosis and hospital milk, 1355; direct representation, 1423; medical practice by companies, *ib.*; metropolitan sanitary administration, 1424; the administration of the Vaccination Act, 1425; the annual meeting of the Association, 1483; the Hunter case and the Penal Cases Committee, 1484; the unconsciousness of anaesthesia, 1415; advertising and canvassing, 1486; the census of, 1901, 1543; the medical crisis in France, *ib.*; the University of London, 1544.
- League, the Antivaccination and its activities, 987.
- and Order of Mercy, the objects, 613; affixing of Great Seal to charter of, 920.
- Lebanon Hospital. See Hospital.
- Leclerc, J., Les Traitements Actuels du Tabes, *rev.*, 797.
- Leçons de Clinique Chirurgicale faites à l'Hôtel Dieu, P. Delbet, *rev.*, 26.
- Lecture, the Croonian, 681; the Cavendish on the etiology and diagnosis of cerebrospinal fever by Dr. W. Osler, 1571, 1548.
- Lectures, the Lettsomian on some aspects of granular kidney, Dr. S. West, 327, 460, 583; the Milroy on earth in relation to the preservation and destruction of contagion, Dr. G. V. Poore, 457, 425, 587; the Arris and Gale on the anatomy and surgery of the peritoneal fossae, Mr. B. G. A. Moynihan, 522, 591, 657; the Goulstonian on the pathology of the thyroid gland, Dr. G. R. Murray, 577, 649; the Lumsleian on bronchitis, pulmonary emphysema, and asthma, Dr. S. Gee, 645, 715; Ambulance: First Aid to the Injured, S. Osborn, *rev.*, 675; the Croonian, on some points connected with sleep, sleeplessness, and hypnotics, Dr. J. B. Bradbury, 1528.
- Lectureship on "trade diseases," 1441.
- Lediard, H. A., sloughing of cornea rapidly following on fracture of base of skull, 1158.
- Lee, Mr. F. F., obituary notice of, 1067.
- Leech, D. J., the various kinds of aloes, 22; glandular carcinoma of oesophagus, 23; on Sir W. Roberts, 1066.
- Leeds, correspondence from, 180, 631, 826; the Leeds Medical Students Debating Society, 130; diphtheria in, 181; the serum treatment of diphtheria, *ib.*; back-to-back houses at, 451; experimental medicine at the Yorkshire College, 631; the prevention of tuberculosis at, 676, 1421; tetanus treated by intracerebral injection, 826; a conference on the tuberculosis question, *ib.*; the annual dinner and clinical meeting of the Leeds and West Riding Medico-Chirurgical Society, *ib.*; the Medical Students' Debating Society, *ib.*.
- Leg, one, elephantiasis of, 152; sarcoma of, 278; vaccination on the, 435.
- Legs, artificial, makers of, 387.
- Leicester, the prevention of tuberculosis at, 816; the Board of Guardians of on vaccination, 1343.
- Leighton, G., the fees under the Vaccination Act in country districts, 781.
- Leipzig, the medical clinic at, 1361.
- Leney, L., an experimental inquiry into the quantity of volatile acids in the stomach, 1271.
- Lens, watchmaker's, 1102.
- Lentaigne, J., chronic intestinal obstruction, 536; arthrectomy for tuberculous knee, 733.
- Leon, G. A., the climate of Sidmouth in cases of bronchial asthma, 255; ascitic fluid, 387.
- Leprosy, in New South Wales, 106, 1176; in Russia, 170; the international "Archives" of, 231; the nasal origin of, 620; in the United States, 829.
- Lermite, E. A., suprarenal gland extract as a hæmostatic, 467.
- Lester, J. C., Ear Records, *rev.*, 1168.
- Letters, P., distribution of tuberculosis in Ireland, 667.
- Leube, v., prophylaxis of tuberculosis in hospitals, 1347.
- Leubusscher, the cutaneous excretion of fat, 1120.
- Leucocytes, the age of, 387; hæmic, the clinical examination of, 1026.
- Leucocytosis and leukaemia, 1120.
- Leucodermia colli, 852.
- Leukæmia, acute, 852; and leucocytosis, 1120.
- Levy, A. G., a case of arrested development of the third and fourth ribs, 1150.
- E., Grundriss der klinischen Bakteriologie für Aerzte und Studierende, *rev.*, 158.
- O. L., medical notes on Montenegro, 801.
- Lewis, Percy, Some Health Aspects of Education, *rev.*, 159.
- Mr. Pitt, on constructive murder, 1175.
- W. B., A Textbook of Mental Diseases, etc., *rev.*, 1468.
- Leyden, E. v., Verhandlungen des Congresses fuer innere Medizin, *rev.*, 1101; the development of the sanatoria movement, 1340.
- Libel, a dispensary doctor's action for, 320; a successful action for, *ib.*.
- Library of the British Medical Association, list of authors and others who have presented books to, 858, 1290.
- Licentiate in dental surgery, formation of defence committee by, 180.
- Liebe, G., Handbuch der Krankenversorgung und Krankenpflege, *rev.*, 1165.
- Liebreich, Professor, monument to Brehmer, 1349.
- Liege, strike of students at, 430.
- Life assurance, some modern medical aspects of, 773; and vaccination, 869, 1102, 1109, 1171; the tuberculin test in, 1317.
- Ligament, broad, dermoid cyst of in a girl aged 11 years, 339; cyst of the, 733; broad, fibroid of the weighing 44½ lbs. removed by enucleation, recovery, 1159.
- Light and heat, therapeutics of, 658, 832, 853.
- Lightning pains, relief of, 386.
- Lille, the town of and the memory of Pasteur, 925.
- Limbs, congenital deformities of, 19.
- Limont, J., tar acne, 215.
- Lincoln, censure on a midwife at, 294.
- Lindsay, J. A., ulcer of the oesophagus, 909; probable tuberculous meningitis, *ib.*; non-febrile pneumonia, 910.
- W. J., antistreptococcal serum in the treatment of small-pox, 1144.
- Lingfield, proposed home for epileptics at, 452.
- Lioness, cataract extraction in a, 1489.
- Lip, a sore diagnosed as cancer of in early life, recovery without operation, 338; epithelioma of in a youth, 1222.

Liquor potassi permanganatis and Condy's fluid, 191

Liquorice pellets and wafers, 1169

LITERARY NOTES.—32, 96, 179, 224, 290, 369, 436, 483, 546, 610, 693, 742, 799, 875, 916, 978, 1044, 1106, 1189, 1245, 1288, 1352, 1435, 1500, 1552; Claude Bernard as a dramatic author, 32; Mr. Rider Haggard and the Jenner Society, 96; Classical lines on influenza, 179; Dr. R. Farrar's protest against "reliable," 224; Major A. Griffiths and the identification of "Jack the Ripper," *ib.*; remarks on J. F. Struensee, *ib.*; Mr. Gladstone's eye, 290; "Mr. Punch" on the death of army surgeons, 370; anecdote about Paginini, 436; Paul Bourget on the medical profession, *ib.*; use of "per orem" in medical writings, *ib.*; Dr. H. C. Gillies on the Gaelic names of diseases, 483; Miss Bailey's index to the "Times," 546; Mr. K. Minakata on the plague, *ib.*; the King's medicines for the plague, 610; Dr. L. Gluck on Ayala's De Lue Venerea, *ib.*; a French inventor of the "water cure," *ib.*; Thackeray and Sir Henry Thompson, 693; rats and insects in the dissemination of plague, *ib.*; Dr. A. Williams on the "spirit of the age," *ib.*; Dante and the action of light on plants, *ib.*; the "Sei-I-Kwai Medical Journal," 742; Professor H. W. Middendorp on Koch's curative method, *ib.*; the discoverers of auscultation, 799; Pliny on the nose as a place of origin of leprosy, 875; Dr. H. Crosse on "Hippocrates John Hunter Brown," 916; Mr. R. A. Sterndale on St. Helena in the olden time, 978; the MS. of the English translation of Guy de Chauliac, *ib.*; the piano as a cause of neuroses, 1044; Dr. Ehlers on leprosy, *ib.*; the "Edinburgh Review" on the history and effects of vaccination, *ib.*; Avicenna's method of straightening the spine, 1106; Professor A. Macalister on Poupart's ligament, *ib.*; the career of Jacques Grévin, 1189; Canon Harford on John of Arderne, 1245; Dr. P. Traire on Laennec, 1288; the Royal cure for the king's evil, *ib.*; The "St. Paul Medical Journal" on inoculation and vaccination, 1289; Dr. F. W. Cock and Dr. G. C. Peachey on the king's evil, 1352; M. J. Texte on "Thomas Browne en France," 1435; Adam as the first accoucheur, *ib.*; "Zadkiel's Almanac" on Mr. Doran's address to the Medical Society, 1500; the spelling of poly(c)linic, *ib.*; Dr. G. M. Gould and the "Index Medicus," 1552

Little, E. M., the interpretation of skiagraphs, 1209

Littledale, H. E., room disinfection, with special reference to the use of formic aldehyde, 1280

Littlejohn, H., the history and clinical features of a recent outbreak of typhoid fever at Edinburgh, 1159

—Sir H., on the prevention of tuberculosis, 87

Liver, primary carcinoma of the, 18; acute yellow atrophy of the, 232; tuberculosis of, 345; hydatid cysts of successfully removed, 663; diffuse syphilitic change in the, 728; paramæcium coli in cysts of the, 668; peculiar lardaceous, *ib.*; the relative excretion of the nitrogenous waste products in a case of abscess of, 1028; hydatid of, 1030; carcinoma of the, 1032; abscess of, 1032; diseases of at the German Medical Congress, 1041; the relation of amœba dysenteriae to abscess of, 1386

Liverpool, correspondence from, 120, 501, 630, 826, 998, 1128, 1247, 1308, 1508; a sanatorium for consumptives near, 120; the school for the study of tropical diseases at, 237, 452, 630, 668, 685, 998, 1046, 1128; treatment of tuberculosis at, 365; proposed retention of vaccination stations at, 428; lectures on vaccination and small-pox, 401; appointment of surgeon to the Northern Hospital, 502; death from blackwater fever, 630; banquet to Professor Oliver Lodge, 631; sanatoria for consumptives, 826; instruction for consumptives, *ib.*; inauguration of the school of tropical diseases at, 925; the Ladies Charity, 998; the Eye and Ear Infirmary, 999; opening of school of tropical medicine at, 1036; post-graduate course of pathology at, 1053; the abolition of the vaccination stations, 1128; daily visiting trained nurses, *ib.*; the Pathological Diagnosis Society, *ib.*; recent appointments, *ib.*; antivivisection and the Ladies Charity, *ib.*; annual report of the medical officer of health, 1247; variation in the death-rate, *ib.*; the sanitary staff, 1248; meeting of governors of University College, *ib.*; lecture by Major Ross on malaria, 1248, 1508; presentation to Miss Craddock, 1248; appointment of bacteriologist to the parish infirmary, 1308; the sanitary condition of the police-courts and

main Bridewell, 1509; the drainage of and the neighbourhood, *ib.*

"Livery" patients, health resorts for, 771

Lives, healthy, some extra ratings of, 807

Livi, R., vaccination and small-pox in the Italian army, 1017

Lloyd, J., nephrectomy for malignant kidney, 212; disease of elbow-joint, 474; nephrectomy for chronic calculous nephritis, 475; pyosalpinx of seventeen years' standing, 732; renal calculus, 1030; tumour of scapula, 1282

Loans, local, repayment of, 1429

Lobe, temporo-sphenoidal, aphasia following abscess of, 212

Lockie, S., insusceptibility to vaccinia, 57

Lockwood, C. B., The Radical Cure of Hernia, Hydrocele and Varicocele, *rev.*, 855; arthro-

tomy for the relief of pain, and for the removal of synovial fringes, loose bodies, and fibro-

cartilages, 1205

Lockyer, Sir N., spectroscopic photography, 1197

Locomotor ataxy. *See* Tables

Lodge, Professor O., banquet to, 631

Lodging or accommodation, proper, 1565

Loeffler, heredity, immunity, and disposition in tuberculosis, 1347

Loewit, M., leukaemia and leucocytosis, 1120

Lombroso, C., Die Lehre von der Pellagra, etc., *rev.*, 282

London, vital statistics of, 37; report of medical officer of health of, 111, 160, 221; the water supply of, 230, 306, 489, 749; the smoke nuisance in, 362; the meat supply of, 382; typhus fever in, 383; rating of hospitals in, 552; influenza in, 615, 685, 747, 859; diphtheria in, 615, 685, 747; The Water Supply of, A. Shadwell, *rev.*, 673; the central health administration of, 680; the warning of Maidstone to, 746; port sanitary work in, 804; the housing of the poor in, 1114; medical, in the eighteenth century, 1178; the Inebriates Act in, 1237; statistics as to, 1356

—County Council. *See* County

—Government Bill. *See* Bill

Long, Mr. W., the prevention of tuberculosis, 286

Longevity, alcohol and, 712

Longmore, Everton and others v., 1175, 1195

Longton, diphtheria at, 1136

Loomis, A. L., A System of Practical Medicine, *rev.*, 282

Lord Chancellor, deputation to, on treatment of incipient insanity 625; the logic of 771

—Curzon on Western medicine in India, 613

—Herschell, death of, 553; resolution of University of Wales as to death of, 707; and the Jenner Society, 767

—Lister, appointed foreign associate of the Paris Academy of Medicine, 554, 620

Louvain, a new bacteriological institute at, 384

Love, D., the vision of school children, 763

Lowell, F. O., influenza and typhoid fever, 711

Low, H., epileptiform fit during anaesthesia, 1097

—R. B., epidemic cerebrospinal meningitis, 276

—W. V., subcoracoid dislocation of head of humerus with fracture of great tuberosity, 409

Lowestoft, consumptives at, 1294

Lowndes, F. W., the hospital treatment of syphilis, 619; syphilitic diseases, their prevention, study, and treatment, 940; fees to medical witnesses in police courts, 1374

Lubarsch, O., Ergebnisse der allgemeinen Pathologie und pathologischen Anatomie des Menschen und der Thiere, *rev.*, 1227

Lucas, R., fatal case of oedema glottidis occurring during pregnancy, 1220

—R. C., gonococcus joint disease in infants secondary to purulent ophthalmia with twenty-three cases, 210, 230; ununited fracture of the humerus caused by interposition of the musculo-spiral nerve between the fragments, 966

Luccheni, the treatment of in prison, 865

Lucknow, aerated waters as factors of disease at, 365

Lückes, E. C. E., General Nursing, *rev.*, 856

Luff, A. P., Gout, its Pathology and Treatment, *rev.*, 153

Lugaro, E., on nerve cells, 93

Lumsden, J., spontaneous rupture of first stage of aorta, 21

Lunacy Bill. *See* Bill

—laws, the, 252; and borderland cases, 314, 504, 634, 700, 711

Lunatics, certification of, 129, 571; certification of for detention in workhouses, 1126, 1379

Lundie, Dr. W. T., obituary notice of, 378

Lung, aneurysm of ascending arch of aorta extending into, 22; two cases of gangrene of, 70; left, gangrene of, 401, 402; gangrene of treated by creosote vapour, 532; right, hydatid cysts of upper lobe of successfully removed, 663; gangrene of the, 732; carcinoma of eye secondary to that of the, 1158; abscess of successfully treated by drainage, 1212; sarcoma of the, 1222; hydatid of, 1280

Lungs, tuberculous cavities in the giving rise to gaseous metastatic abscesses, 406; oxygen inhalations in the treatment of acute and chronic diseases of the, 559, 635, 712; oedema of the, 670

Lunn, J. K., results of operation for enlarged prostate, 407

—K., education of deaf-mutes, 643

Lupus erythematosus, multiple epithelioma of scalp following upon, 152; extensive, 1029; case of under treatment seventeen years, 1162

Lymph, the, of the National Vaccine Establishment, 307, 370, 435, 486

Lymphangioma tuberosum multiplex, 791

Lympho-sarcoma of vermiform appendix, 733; two cases of, 852

Lyons, the Dreyfus case in the medical school of, 1547

M.

Macalister, J. D. L., dislocation of the radio-

carpal joint, 1024

McArdle, J. S., the operative treatment of hernia, 87

Macbeth, Surgeon-General, death of, 250

McBride, Fleet-Surgeon A., death of, 636

—P., the treatment of ozæna, 343

McCardie, W. J., prolongation of nitrous oxide anaesthesia, 668

McConaghey, J. C., aortic aneurysm, rupture of, into œsophagus, 209

MacCormac, Sir W., the Hunterian oration, 389; The Hunterian Oration, *rev.*, 739; dinner to, 1180, 1358; elected honorary president of the International Medical Congress, 1492

McDonagh, Mr. J. A., obituary notice of, 445

MacDonald, I., picric acid in superficial burns, 1152

—J., excision of lower jaw, 794

MacDougall, Deputy-Surgeon General H. R. L., death of, 448

—W. S., intracerebral injection of antitoxin, 456; ascitic fluid, 515

McDowell, L. F., strangulated hernia in a pericardial sac, 16

Macé, E., Atlas de Microbiologie, *rev.*, 1285

McElligott, M., the coexistence of zymotic diseases, 248

MacFadyean, J., on pseudo-tuberculosis, 597; congenital tuberculosis in the calf, 1091

MacFarlan, J. F. and Co., heroin, etc., 675

MacFarland, J., Pathogenic Bacteria, *rev.*, 1227

MacGregor, Sir W., the services, etc., of, 232

McIntosh, J. W., probable persistence of thyroglossal duct, 1088

McIntyre, improvement in x-ray technique, 701

Mackay, G., eyeball with fragment of steel lodged in its coats, 1158

McKay, Lieutenant-Colonel H. K., gets C.I.E., 32

—J. J., the charge of perjury against, 102

—W., dermoid cyst of broad ligament in a girl aged 11 years, 339; vulvulus in an infant, laparotomy, recovery, 1215

Mackenzie, D. J., subcutaneous rupture of hydrocele, 1274

—G. H., nasal curettes, 28; laryngeal growths in young children, 1210

—H. W. G., Graves's disease in a male, 408; a large thoracic aneurysm, *ib.*

—Mr. J. W. H., death of, 1376

—M., on professional secrecy, 683

McKeown, W. A., A Treatise on "Unripe" Cataract, *rev.*, 605

McKerron, R. G., antero-posterior positions of the head impeding labour, 909

Mackie, F. P., cases of generalised septic infection treated with antistreptococcus serum, 142

McLean, C. J. L., the prevention of tuberculosis, 482

MacLeod, K., control of hæmorrhage in operations for the removal of labial elephantiasis, 208

—N., cure of morphine, chloral, and cocaine habits by sodium bromide, 896

"Macmillan's Magazine" on the army doctor, 363

MacMunn, J., parallel expanding rectal speculum, 160

Macnamara, Surgeon-Major F. N., obituary notice of, 635

- Macpherson, Dr. J., appointed Commissioner in Lunacy for Scotland, 810
 — Dr. T. E., gets C.M.G., 32
- McWalter, J. C., poisoning by belladonna plaster, 952; the ethics of sample-taking, 1250
- McWeeney, E. J., agglutinability of different races of the typhoid bacillus, 364; the bacteriological aspect of tuberculosis, 667; pneumococcal septicaemia with ulcerative endocarditis, secondary to croupous pneumonia, 1222; infective endocarditis, 1396
- Madagascar, the plague in, 48, 51, 369, 435
- Madden, F. C., two successful cases of Cesarean section, 1090
 — T. M., uterine cancer and its treatment, 1161
- Madras, hospitals and dispensaries in, 484
- Magee, J. A., the title of physician, 880
- Magennis, E., a midwifery surgical instrument, 1286
- Magistrates and the Medical Acts, 35; medical, 776, 923, 1153, 1554
- Maguire, R., cerebellar abscess, operation, recovery, 408; death from functional nervous disease, 792; aneurysm, 1029
- "Mahamari," 1176
- Mahdi, the, the head of, 572
- Mahomed, G., acute febrile catarrh associated with inflamed glands of head and neck, 83
- Maidstone's warning to London, 746
- Maillard, Surgeon W. J., dinner to, 295
- Maitland, Major C. R., peripheral neuritis following soft sore (? syphilitic), 270
- Makins, G. H., on prevesical hernia, with the relation of a case in which subacute strangulation occurred, 905
- Malaria, investigations on in Italy, 95, 162; and mosquitos, 425, 432; and pregnancy, 1023; the parasite of, 1130; hypodermic injection of quinine in, 1153, 1320; in Great Britain, 1179; and the mosquito, lecture by Major Ross on, 1248; the parasite of in the tissues of a fatal case of blackwater fever, 1325
- Malcolm, W. S., four cases of beri-beri on board ship, 1332
- Malt extract, 1340
- Malta fever. See Fever
- Mamma, axillary, a case of, 1089
- Mammals, joints of contrasted with those of man, 659
- Man, a menstruating, a curious form of hermaphroditism, 272; joints of contrasted with those of mammals, 659; sensory distribution of the seventh cranial nerve in, 793
- Manchester, the prevention of tuberculosis at, 97, 417, 542; sewage disposal at, 169, 512
- Man-of-war's men, the food of, 1313
- Manœuvres, the medical arrangements at the, 360
- Mann, J. D., death from inhalation of poisonous gas, 670
- Manson, P., how to keep mosquitos alive, 823
 — R. T., Zig-Zag Ramblings of a Naturalist, rev., 798
- Manual, of Chemical Analysis, Qualitative and Quantitative, G. S. Newth, rev., 27; of the Practice of Medicine, F. Taylor, rev., 158; of Ophthalmic Medicine and Surgery, W. H. H. Jessop, rev., 347; of Bacteriological Technique and Special Bacteriology, T. Bowhill, rev., 480; of Diseases of the Skin, L. D. Bulkley, rev., 481; of Obstetrics, A. F. A. King, rev., 539; of Diseases of the Nervous System, Sir W. R. Gowers and J. Taylor, rev., 737; of Modern Surgery, J. C. Da Costa, rev., 856; of First Aid, J. A. Austin, rev., 1339
- March, R. E., Where Two Worlds Meet, rev., 739
- Marchand expedition, the medical officer of, 1548
- Margate, the climate of in relation to disease, 346; the cottage hospital at, 452
- Margerison, R., case of angina Ludovici, recovery, 83
- Marasmus, atrophic, of nurslings, 1084
- Marines, unvaccinated, 370
- Marriage of tuberculous persons, 1347
- Marseilles, the Pasteur Institute at, 78; teaching of colonial medicine at, 877
- Marsh, F., nævus of soft palate, 475
 — H., adhesions and their consequences, 152; on the method of operating for umbilical hernia, whether for radical cure or when strangulation has occurred, 1460
- Marshall, C. D., implantation cysts of iris, 665
 — C. F., syphilitic diseases, their prevention, study, and treatment, 1130, 1375; second attacks of syphilis, 1332
 — Capt. D. G., the amoeba dysenteriae, its relation to tropical abscess of the liver, 1386
- Marshall, L., dermoid cyst of broad ligament in a girl aged 11 years, 339
 — P., Small Accumulators; How Made and Used, 1286
- Martin, A. H., the need for further vaccination legislation, 634
 — C., on Mr. Lawson Tait, 1562
 — C. J., the Bolingbroke Hospital, 1557
 — A. M., operation for perforated gastric ulcer, 216
 — S., on pseudo-tuberculosis, 472; auto-intoxication and its relation to the treatment of disease, 535; the prevention of tuberculosis, 1038
- Martindale, W., poisoning by belladonna plaster, 952; Syllabus of Materia Medica, rev., 972
 — W. H., erythrol nitrate, 256
- Martius, F., insufficiency of the heart muscle, 975
- Martley, F. C., the death-rate from tuberculosis, 667; cancer in Ireland, 1280
- Martyns of science, 687
- Masks for operators, 630
- Mason, J. M., case of malignant œdema, amputation at the thigh, recovery, 1273
- Massachusetts, epileptics in, 451; State treatment of inebriety in, 619
- Massage, the market for, 575; the establishment for in the West End, 1006, 1195
 — houses, the raid on, 949
- Masser, H. C. P., the lymph of the National Vaccine Establishment, 435
- Masson, D. T., the prevention of tuberculosis, 388
- Masticator, artificial, 799
- Mastoid suppuration, with hyperpyrexia and jaundice, operation, recovery, 1152
- Matchmakers, so-called phosphorus necrosis of the jaw in, the cause of, 9
- Matches, the inventor of, 750; use of phosphorus in the manufacture of, 765; lucifer, phosphorus in, 968
- Materia medica, etc., books for practitioners on, 951; Syllabus of, W. Martindale, rev., 972; Aids to, W. Murrell, rev., 10
- Mathematical methods in the study of vital phenomena, 1045
- Mathew, G. P., Clinical Observations on 2,000 Obstetric Cases, rev., 25
- Mathieson, Dr. G., presentation to, 610
- Matthews, W. R., the coldbath treatment of typhoid fever, 1372; case of acute (ulcerative) endocarditis giving a positive Widal reaction, 1535
- Maude, A., the General Medical Council and the Society of Apothecaries, 312
- Maunsell, C. R., abdominal aneurysm in a young woman, 272
 — R. C. B., vascular tumours of abdominal wall, 1397
- Mauritius, the plague in, 369
- Maxillary sinus. See Sinus
- Maxims or microbes? 550
- Maxwell, J. P., the proposed school for tropical diseases, 247
- Mayer, the derivation of sugar from albumen, 618
 — Dr. A., death of, 636
- Maylard, A. E., the operative treatment of distended small intestine in acute obstruction and acute peritonitis, 842
- Mayow, John, Professor A. C. Brown on, 1432
- Measles, progressive muscular atrophy after, 151; death-rate of, 294; at Aberdeen, 631
- Meat, frozen, for soldiers, 419; effect of protective inoculation against tick fever on, 1136; unsound, infections by, 1216
 — supply of London, 382
- Mecca, plague and the pilgrimage to, 687, 692, 993, 1188
- Medal, German Red Cross, 582
- Medcalf, Mr. E. S., death of, 1004
- Mediastino-pericarditis, indurative and unilateral pulsus paradoxus, 1336
- Mediastinum, posterior, the surgery of the, 34
- Medical Acts. See Acts
 — charges, 1195
 — Council, General, and the profession, Dr. Glover on, 29; and the Midwives Bill, 43, 1478; inspection of documents, 53, 623, 1366; and unqualified assistants, 186; and the Society of Apothecaries, 225, 233, 301, 311, 441, 504, 559, 702, 1002; the Minutes of the, and of its various Committees and Branch Councils, rev., 541; meeting of Committees of, 550, 622; the late Sir G. Burrows, 622; reappointment of members, 10; finance, 10; illegal certificates, 10; unqualified dispensers, 10; bacteriological laboratories, 10; medical practice in Italy, 10; practice by midwives, 10; vaccination stations, 10; penalties in the metropolis, 623; professional secrecy, 623, 683; identification of registered practitioners, 10; Apothecaries Hall, Dublin, 624; prosecution by the Scottish Branch Council, 10; penal and disciplinary powers, 10; an Amending Medical Bill, 10; colonial degrees, 10; midwives and covering, 10; dental business, 624, 1405, 1478, 1480; prosecution by, 947; meeting of dentists at Manchester, respecting separation from, 949; direct representation on, 997, 1366, 1425, 1439, 1509, 1558; president's address, 1363; examination tables, 1364; the examination for the F.F.P.S.G., 1365, 1419, 1480; practice by companies, 1368; reappointment of registrar, 10; unqualified dispensers, 10; personation, 1368; certificates to midwives and opticians, 1368, 1479; reciprocity with foreign countries, 1368, 1406, 1475, 1476, 1477; the case of S. B. Shekleton, 1402; the real Nugent, 10; the case of J. J. McKay, 1403; medical officer for the Education Department, 1404; the case of W. Stewart, M.D., 10; the case of N. Holland, 1405; the case of W. H. Cossens, 10; proposed increased disciplinary powers, 1406; the examination of the Apothecaries' Hall, Dublin, 1407, 1408; reports of the Education Committee, 1409; the standard of preliminary examinations, 10; report of the Midwives Bill Committee, 1410; the D.P.H. St. Andrews, 1412; medical aid associations, 1412, 1414, 1480, 1557; report of the Medical Aid Associations Committee, 1412; proposed Board of Conciliation, 1413, 1510; fines in the Metropolitan district, 1414; additional qualifications on the Colonial List, 1415; the business of the, 10; restoration to the "Register," 10; the Hunter case, 1415, 1475, 1484; inspection of higher examinations, 1416; the appointment of the legal adviser, 10; proceedings of the Dental Committee, 10; the Dispensing Committee, 10; the first year's course, 1417; the Penal Cases Committee, 1419; new member, 1472; the College of Preceptors, 10; election of the Executive Committee, 10; election of the Penal Cases Committee, 10; report of the Pharmacopœia Committee, 10; report of Finance Committee, 1473; sinking fund, 10; the finances of the Irish Branch Council, 1474; legal expenses, 10; Students' Registration Committee, 1475; "confidential" documents, 1477; amendment of the Medical Acts, 1478; petitions to the Council, 1479; reports of the Council, 10; appointment of examiners, 10; public medical officers in Ireland, 1480; the ventilation of the Council chamber, 10; election of Midwives Bill Committee, 10; Companies Act Amendment Bill, 10; personation, 10; preliminary examinations in Wales, 10; reappointment of committees, 10; vote of thanks, 10
- Medical ethics, in Bavaria, 1050; Dr. Ziemssen on, 1294
 — men, proportion of to population in Continental countries, 711
 — officers, district, complaints to guardians against, 1136; and public vaccination, 1315, 1359
 — officers of health, duties of in relation to small-pox in view of the alterations in the law of vaccination, 736; at conference, 1008; tenure of office of, 1380; union medical officers as, 1444; county, 10
 — officers, Poor-law, superannuation of, 57, 123, 248, 252; in Ireland, ineligibility of to serve as county councillors, 227
 — officers of Poor-law schools, powers and privileges of, 383
 — officers, union, as medical officers of health, 1444
 — Register, the inaccuracy of the, 1173
 — Register and Directory of the Indian Empire, J. R. Wallace, rev., 415
- Medicine, the Principles and Practice of, W. Osler, rev., 216; Western in India, 613; mud as a, 616; Clinical, Contributions to, T. McC. Anderson, rev., 1283; scientific, the century's progress in, 1437; the secret of success in, 1490; books on, 1516
- Medicines, patent, a coroner on, 1007; patent, particulars as to, 1319
- Mediterranean fever. See Fever
- Melbourne, correspondence from, 119, 502, 698; the prevalence and nature of "tick fever," 119; feeble-minded children, 10; malignant growths in the lower animals, 120; the consumption of tea and coffee, 10; confiscation of plague bacilli, 502; a nail in the brain, 503; the late Miss Castilla, 10; pass and pluck in the medical faculty of, 10; mesmeric performances, 698; mode of election to hospital staffs, 10; the finances of the Melbourne Hospital,

- 699; plucking at the University, *ib.*; the late Dr. Burke, *ib.*
- Mellish, H., the temperature of the soil, 1137
- Memoria technica medica, 1287
- Meninges, sarcoma of, 794
- Meningitis, epidemic cerebro-spinal, 276; Dr. J. Barron, 537; tuberculous, a case of, 832; probable tuberculous, 909; tuberculous, treatment of, 951, 1011
- Meningo-myelocoele, excision of a, 1093
- Mental. *See* Mind
- Menzies, J. A., the vision of school children, 77, 506
- Mercantile marine, sight tests in the, 1294
- Mering, V., the influence of the nervous system on the gastric functions, 1041
- Metatarsus, dislocations of on the tarsus, 1396
- Metric system, *the*, 867, 1137
- Metropolitan Water Companies Bill. *See* Bill
- Mexico, the Government of and yellow fever, 440; influenza in, 768
- Meyer, financial consideration in the development of sanatoria, 1349
- G. Handbuch des Krankenversorgungs und Krankenpflege, *rev.*, 1165
- Miall, P. E., treatment of chronic diarrhoea, 191
- Microbes or maxims? 550; incendiary, 772; and intestinal putrefaction, 1120
- Micro-organisms of Faulty Rum, J. H. and L. J. Veley, *rev.*, 416; in cancer, 748
- Microscope, The, its History, Construction, and Application, J. Hogg, *rev.*, 1034
- Microscopy, clinical, at Johns Hopkins medical school, 69
- Middleton, J., a large child, 881
- Midwife, censure on a, 294, 427, 560; the, abroad, 1481
- Midwifery, clinical instruction in, 55, 315, 506; charitable in Paris, 109; coincidences in the practice of, 644, 832; practice of by midwives, 1007; a surgical instrument for, 1286
- engagements, 1516
- Midwives, midwifery practice by, 1007; training of, 1011
- Bill of Midwives Bill Committee, text of, 46; of Parliamentary Bills Committee, text of, 350. *See also* Bill, Midwives
- Milan, school for children suffering from trachoma at, 484
- Miles, A., aphasia following abscess of temporosphenoidal lobe, 212
- C. H., large children, 1012
- Militia, promotion and appointments in the medical staff of, 126, 706, 1560; annual dinner of medical staff of, 1132
- Milk, condensed, as a substitute for fresh milk, 454; condensed separated, 829; tuberculosis in, 917; tuberculous, clauses in the Bill as to, 986; effect of protective inoculation against tick fever on, 1136; hospital, and tuberculosis in, 1355
- sterilised, 255
- supply, influence of on the spread of tuberculosis, 169, 400
- Millard, C. K., the coexistence of zymotic diseases, 182, 506; trichorrhæxia nodosa, 1280
- Millerained cloth, 255, 387
- Milligan, W., intracranial suppuration of otitic and rhinitic origin, 22
- Mills, Y. H., strangulation by a solitary band, operation, recovery, 1275
- Milward, F. V., osteoma of arm, 475
- Mind, temporary unsoundness of, 1139; a new classification of diseases of the, 1178
- Mineral waters. *See* Waters
- Minnesota, report of the State Board of Health of, 1429
- Mitchell, W. M., formalin in the treatment and removal of inoperable malignant growths, 327
- Mittheilungen aus der gynäkologischen Klinik. O. Engstrom, *rev.*, 1168
- Moffat, W. A., cartridge in the right bronchus, 531
- Moffatt, Dr. R. N., gets C.M.G., 32
- Moir, D. R., case of acute (ulcerative) endocarditis giving a positive Widal reaction, 1535
- Dr. J., death of, 1237; obituary notice of, 1311
- Surgeon-Major R., obituary notice of, 1564
- Mole, hydatid, case of, 1215
- Monaco, sanitary progress in, 1290
- Moneylander's circular, a, 256
- Mongolia, the plague in, 48
- Monsters, foetal, 667
- Montenegro, medical notes on, 801
- Montgomery, Dr. A., presentation to, 886
- Montizambert, Dr. F., appointed director-general of public health in Canada, 991
- Montreal, correspondence from, 51; College of Physicians and Surgeons of the Province of Quebec, 51; the "British Pharmacopœia" in Canada, 52; interprovincial registration, *ib.*; medical faculty of McGill University, *ib.*
- Moor, C. G., The Analysis of Food and Drugs, *rev.*, 1469
- Moore, B., Elementary Physiology, *rev.*, 1035
- F. C., tuberculosis of liver, 345
- J. L. I., post-mortem Casarean section, 64
- Moorhead, Surgeon-Lieutenant-Colonel J., abscess of liver, 1031
- T. H., nursing in the Irish workhouses, 942
- Morbus eponymicus, 170
- Morère, Dr., sketch of career of, 209
- Morgan, J. H., Affections of the Urinary Apparatus in Children, *rev.*, 858
- Morison, A., unilateral hypertrophy of the accessory muscles of respiration, 1093
- R., gastroenterostomy, 216; bone transplantation, *ib.*; operation for pyloric obstruction, 791
- W. M., large children, 1319
- Morphine habit cured by sodium bromide, 806
- Morris, C. A., intestinal obstruction due to gall stones, 24
- J. M., erythematous rash produced by small doses of quinine, 516
- M., Diseases of the Skin; an Outline of the Principles and Practice of Dermatology, *rev.*, 348; Ringworm in the Light of Recent Research, *rev.*, 1226
- Morrison, J. T. J., trephining for head injury with convulsions, 1281
- Mortality (insurance) alcohol and, 1214
- Mortimer, J. W. E., delirium tremens treated by inhalation of chloroform, 24
- Morton, C. A., adeno-carcinoma of the breast, 1558
- W. J., "Cataphoresis" or Electric Medicamental Diffusion as applied in Medicine, Surgery, and Dentistry, *rev.*, 1338
- Moscow, institutes for treatment, etc., of diphtheria cases in, 903; bequest for university for women in, 1009
- Mosquitos and malaria, 425, 432; how to keep alive, 828, 1062
- Motor cars, 63, 455, 1446
- Mott, F. W., the physiological action of choline and neurine, 1082
- Mouat, Sir J., obituary notice of, 125
- Mouat-Biggs, C. E. F., factitious urticaria, 534; new splint for fractured clavicle, 1093
- Moullin, C. W. M., second attacks of syphilis, 964
- Mouillot, F. A. de T., modern views of gout in relation to treatment, 728
- Mould, G. E., lunacy law and borderland cases, 634, 711
- Mouth, pemphigus of the, 151; neurotic ulcers in the, 900, 1213
- Moynihan, B. G. A., the anatomy and surgery of the peritoneal fossae, 522, 591, 657; On Retro-peritoneal Hernia, *rev.*, 1470
- Mracek, F., Atlas der Hautkrankheiten, *rev.*, 217
- Mud as a medicine, 616
- Müller, Dr. H. F., prize in memory of, 321
- O., homologous heredity of general paralysis, 1118
- Mumps, a case with marked enlargement of the spleen, 342
- Mundé, P., ligature of internal iliac for aneurysm of uterine artery, 228
- Munich, disposal of the dead between death and burial at, 1359
- Munk, Dr. W., the will of, 253
- Munro, N. G., pemphigus contagiosus, 1021
- Munson, E. L., on irresponsible councillors, 809
- Murder, constructive, 448; Bill, as to, 553, 560; Mr. Justice Darling on, 614; Mr. Pitt Lewis on, 1175
- Murmurs, musical, of heart, 794
- Murphy, Mr. J. St. J., presentation to, 358
- S., the annual report of (vital statistics), 111, 160, 221
- Murray, G. R., on the pathology of the thyroid gland, 577, 649
- R. W., suppurative peritonitis, 852, 969
- Dr. W. H., death of, 184
- Murrell, W., the action of some essential oils and other volatile substances on the growth of the bacillus tuberculosis, and in the treatment of phthisis, 202; Aids to Materia Medica, *rev.*, 972
- Mursell, H. T., the diagnosis and treatment of urethral stricture, 24
- Muscles, progressive atrophy of after measles, 151; progressive atrophy of and unusual distribution, 152; accessory of respiration, unilateral hypertrophy of, 1093
- Muter, J., Short Manual of Analytical Chemistry, *rev.*, 92
- Mutton essence, 1399
- Myelitis, Syphilitic, The Clinical Varieties and Treatment of, G. De la Tourette, *rev.*, 857
- Myles, T., perforating gastric ulcer, 734
- Myocardium, diseases of, 1277
- Myoma, multinodular of uterus, 475; uterine, decrease of after excision of breast, 531
- uterine, pregnancy in cases of, 643
- Myopathy in a boy aged 5 years, necropsy, 406
- Myositis, ossificans, localised, following injury, 151; ossificans progressiva, 534; ossificans, 602
- Myotic, bromohydrate of arecoline as a, 82
- Myrtle, A. S., on the hot-air bath, with illustrative cases, 144
- Myrsore, the plague in, 627
- Myxœdema, treated with colloid, 88, 1460
- Myxœdeme (Le), Thibierge, *rev.*, 1339
- N.
- Nævus of soft palate, 475
- Nagel, A., Tafeln zur Diagnose der Farbenblindheit, *rev.*, 159
- W., Die Gynäkologie des praktischen Aertzes, *rev.*, 415
- Nail in the brain, 503
- Nailbrush, the use of in surgical asepsis, 316
- Narcosis, chloroform, dangers of, 1273
- Nash, W. G., four cases of sewer-gas poisoning, 201
- Nason, E. N., local conditions and malignant disease, 794, 812
- Natal, consumptive patients sent to, 1060
- Naumann, J. F. C., medical notes on Montenegro, 801
- Navy, Royal, promotions and appointments in the medical service of, 59, 126, 184, 250, 320, 379, 447, 507, 568, 636, 705, 767, 828, 883, 946, 1005, 1070, 1195, 1256, 1312, 1376, 1441, 1512; Statistical report of the health of the for 1897, 507; myopia as a disqualification for the medical service of, 515; ambulance ships in, 1308, 1568; successful candidates for admission to medical service in, 1312
- United States, report of the surgeon-general of the, 127; the medical department of the, 973
- Neale, K., membranous colitis and colotomy, 456, 1012
- Neck, cystic hygroma of, 342; removal of malignant growth in together with pneumogastric nerve, 794; tumours from the containing giant cells, 1092
- Nedley, Dr. T., death of, 1050
- Neisser's diagnostic stain for the diphtheria bacillus, a modification of, 1213, 1384
- Nephrectomy for malignant kidney, 212; for chronic calculous nephritis, 475; lumbar for pyonephritis and perinephritic inflammation, 1281; lumbar, for secondary hæmorrhage following the removal of a renal calculus, *ib.*
- Nephrite (La) des Saturnins, H. Lavrand, *rev.*, 1285
- Nephritis, chronic calculous, nephrectomy for, 475
- Nephrolithotomy, calculi from three cases of, 1554
- Nephrorrhaphy, hæmaturia from a movable kidney cured by, 17; for movable kidney, 89
- Nerve, seventh cranial, sensory distribution of in man, 793; pneumogastric, removal of, 794; left spinal accessory, paralysis of, 907; musculo-spiral, ununited fracture of the humerus caused by interposition of between the fragments, 966
- fibres, staining of sheath on, 734
- Nerves, eighth and bulbar, dysphagia associated with paralysis of, 534; optic, traumatic division of both, 1466
- Netherlands, typhoid fever in the, 1278
- Netley, the classes of instruction at, 59, 126; distribution of prizes at, 378
- Neubauer, Anleitung der qualitativen und quantitativen Analyse des Harns, *rev.*, 1286
- Neuralgia, neurectomy for, 628
- Neurectomy for neuralgia, 628
- Neurine, the physiological action of, 1082
- Neuritis, peripheral, following soft sore (?syphilitic), 270; peripheral, 1030; peripheral, home for case of, 1199
- Neuroma, plexiform of eyelids, with ptosis, excision, ptosis relieved by Panas's plastic operation, 1463
- Neuron, varying condition of under stimulation and rest, 1299
- Neuroses, uterine, 876; the piano as a cause of, 988, 1044, 1076

- Nevill, W. H., public or private vaccination, 1056
- Newcastle, the prevention of tuberculosis at, 1357
- Newell, A. G., syphilis in the army, 132
- Newman, G., small-pox and sanitation in Gloucester, 117, 1250
- Newport, intoxicated children at, 811
- Newsholme, A., the prevention of tuberculosis, 153
- Newspapers, paragraphs in, 1075
- Newth, G. S., Manual of Chemical Analysis, Qualitative and Quantitative, rev., 27
- New South Wales, leprosy in, 106, 1176; report of the inspector-general of insane in, 511
- New Year honours, 31
- New York, medical examination of teachers in, 253; medical students in the State of, 400; proposed State home for aged persons at, 512; regulations as to sale of poisons in, 529; pure beer for, 640; the post-graduate medical school at, 641; proposed State school of public health in, 949; food adulteration in, 993
- Nice, typhoid fever at, 243
- Nicholson, F., acute dermatitis caused by handling the rhus toxicodendron, 530
- Dr. H. A., obituary notice of, 248
- Nicoll, J. H., removal of navoid tumour of the intestine, 843
- Night terrors, 1247
- Nitrogen gas, effect of on the excretion of urea and uric acid, 1028
- Nitrous oxide gas and air and nitrous oxide and oxygen, effects produced in the human subject by the administration of definite mixtures of, 404; apparatus for giving, 475; prolongation of anaesthesia from, 568; and oxygen, 46; asphyxia from pressure of an abscess under the chin whilst under the influence of, 850; and oxygen as an anæsthetic in surgical and dental operations, 1031; and oxygen followed by chloroform, death after administration of, 46
- Nobel bequest, the, 884
- Noble, J. B., Totland Bay as a health resort, 192
- Nodules, rheumatic, 851
- Non-combatant, a 151 action, 835, 1492
- Noorden, C. V., the organisation of laboratories in hospitals, 5
- Nordrach-upon-Mendip, the sanatorium for consumptives at, 5
- Norman, C., peritoneal tumour, 345; the clinical features of beri-beri, 409
- Norris, W. F., System of Diseases of the Eye, rev., 857
- North West Provinces, hospitals and dispensaries in, 484
- Northampton, the prevention of tuberculosis at, 1230
- Norwich, the prevention of tuberculosis at, 542
- Nose, diseases of in relation to general diseases, 346
- Notification of lead poisoning, 359; in duplicate, 427; of mercurial poisoning, 1009
- Nottingham, the prevention of tuberculosis at, 288, 817, 1230
- Nova et vetera, 283, 607, 821, 914, 1121, 1182, 1287, 1342, 1502
- Nugent, Regina v., 164, 185
- Sir J., obituary notice of, 319
- Nuisance and smoke nuisance, 1008
- Nurse, monthly, engagement of, 131; disappointed monthly, fee for, 387
- Nursery, Health in the, H. Ashby, rev., 348
- Nurses, village, 386; female, in the United States army, 512; male for male patients, 46; district, doctors and, 554, 762, 942, 1061; Notes on Surgery for, J. Bell, rev., 858; district and diphtheria, 1011; English in Græco-Turkish war, medal and diploma for, 1059
- Nursing, ambulance and home, in the evening continuation schools code, 41, 124 of Europeans in India, 495; skilled, in South London, 640; a new order of for consumptives, 678; in Irish workhouses, 684, 808, 880, 942, 1003, 1061, 1129, 1238; at the Shoreditch Infirmary, 691; of the sick in Germany, 697; General, E. C. E. Lückes, rev., 856; at the Camberwell Infirmary, 1289
- Profession, the, How and Where to Train, Sir H. C. Burdett, rev., 1100
- Nursings, atrophic marasmus of, 1084
- Nutting, E. S., the Pharmacy Bill and counter prescribing, 1249; direct representation and the British Medical Association, 1439
- Nyulasy, F. A., a case of hydatid mole, 1215
- O
- Obituary notice of Dr. Tillie, 58; Dr. C. E. Fitzgerald, 46; Sir J. Mouat, 125; Dr. E. W. Davy, 46; Mr. A. H. Wilson, 183; Mr. E. J. Furner, 46; Dr. R. Pringle, 184; Mr. G. F. Farr, 46; Dr. J. A. Sewell, 46; Dr. H. A. Nicholson, 248; Sir A. Roberts, 249; Dr. J. Cappie, 46; Dr. T. Cole, 46; Dr. J. M. Bright, 250; Professor J. Coats, 317; Sir J. Nugent, 319; Dr. J. H. Paul, 377; Dr. L. Fisher, 378; Dr. W. T. Lundie, 46; Mr. T. Cooke, 444; Mr. C. A. Dixon, 445; Mr. J. A. McDonagh, 46; Professor Laboulaye, 506; Sir J. Struthers, 501; Professor Rutherford, 504; Dr. C. J. Arkle, 507; Dr. J. Y. Rotherick, 635; Dr. M. A. Boyd, 46; Dr. F. N. Macnamara, 46; Dr. J. S. Smith, 636; Dr. W. H. Willshire, 703, 764; Dr. J. S. Rose, 46; Dr. J. Williamson, 704; Dr. W. S. Griffith, 46; Deputy Inspector-General J. Jee, 764; Mr. H. J. Butler, 46; Dr. W. Squire, 881; Dr. H. Port, 882; Major J. F. Evans, 943; Dr. A. T. Gibbings, 944; Dr. J. Brunton, 46; Mr. J. Rowlands, 1003; Mr. W. Frazer, 1061; Mr. W. Roberts, 1063; Mr. F. H. Hemming, 1066; Mr. W. Caste, 1067; Mr. F. F. Lee, 46; Dr. J. de Styrar, 1130; Mr. H. B. Hewetson, 1251; Dr. G. Geddie, 46; Dr. J. Moir, 1311; Dr. N. Kerr, 1442; Dr. J. G. Sinclair Coghill, 46; Dr. G. F. Crooke, 46; Mr. Lawson Tait, 1501; Surgeon Major R. Moir, 1504
- Obstruction, intestinal, due to gall stones, 24; chronic intestinal, 536; pyloric operation for, 791; acute, operative treatment of distended small intestine in, 842; acute, operative treatment of distended small intestine in, 1025; laryngeal, recovery after injection of diphtheria antitoxin, 1319; acute intestinal caused by an adherent vermiform appendix forming a band, 1334
- Occupation, influence of on tuberculosis, 1346
- O'Connor, C. W., rupture of the cord, 832
- W. M., sanitation in Aldershot, 376
- Extension, the, 1446
- Ocular, See Eye
- O'Dwyer, Dr. J., memorial to, 1197
- Oedema, of the lungs, 670; solid of the eyelids, 1158; glottitis, fatal case of occurring during pregnancy, 1220; acute circumscribed cutaneous, 1223; malignant, amputation at the thigh, recovery, 1273; tropical on shipboard, 1402
- Oesophagus, aneurysm of descending arch of the aorta perforating, 22; glandular carcinoma of, 23; rupture of aortic aneurysm into, 209; tumours of, 279; dilatation of the, 340; malignant disease of, 601; of child, open safety-pin removed from, 66; coin in the removed by the aid of the fluorescent screen, 789; ulcer of the, 909; foreign body in, 1009
- O'Farrell, Sir G. P., knighthood for, 31
- Ogle, C., syphilitic stenosis of both bronchi, 965
- O'Gorman, Captain P. W., treatment of chronic diarrhoea, 255
- Ogden, A., continental criticism of English rifle bullets, 752
- O'Hara, H., a new method of closing the peritoneum after laparotomy, 1394
- Oils, essential action of on the bacillus tuberculosis and on the treatment of phthisis, 202
- Oldham, the conscientious objector at, 360
- Oleate of mercury in syphilis, 190
- Oliver, C. A., System of Diseases of the Eye, rev., 357
- J., adenoma of endometrium, 792
- T. thoracic aneurysm, 216
- Ondurman, cerebrospinal fever at, 769
- Oophorectomy in cancer of the breast, 257, 442, 906
- Operator, the veiled, 1194, 1296
- Ophthalmia prevalent, gonococcus joint disease in children secondary to, 210, 230, 273; tarsi, treatment of, 403
- Opinion, the salt of fact, 276
- Opisthotonos, functional, 216
- Opium poisoning, strychnine in, 1534
- Oppenheimer, H., treatment of syphilis byunction, 64
- Opticians, diplomas and degrees for, 424, 631, 881
- Orange Free State, the plague in, 818
- Oration, the Hunterian, 389, 423; Sir W. Mac Cormac, rev., 739
- Order, the Dairies, Cowsheds, and Milkshops, 677
- Orezza mineral water, 1102
- Organism (The Living) an Introduction to the Problems of Biology, A. Earl, rev., 1470
- Organotherapy, in diabetes, 256; in exophthalmic goitre, 736
- Orme W. B., the age of leucocytes, 387
- Ormsby, G. H., should doctors be allowed to dispense? 1568
- L. H., the Vice-Presidency of the Royal College of Surgeons in Ireland, 1440
- Orr, J., staining of sheath of nerve fibres, 734
- Osborn, S., Ambulance Lectures: First Aid to the Injured, rev., 675
- Osborne, Dr. J. A., death of, 59
- Osler, W., clinical microscopy at Johns Hopkins Medical School, Baltimore, U.S.A., 69; The Principles and Practice of Medicine, rev., 216; the etiology and diagnosis of cerebro-spinal fever, 1517
- Ossification of the tendo Achillis, 1094
- Osteitis, hereditary syphilitic, 1407
- Osteoma of arm, 475; parietal, treated by trephining, 597; of dura mater, 1154
- "Osteopathy," 616
- Ostertag, K., Ergebnisse des allgemeinen Pathologie und pathologischen Anatomie des Menschen und der Thiere, rev., 1227
- Otitis media and influenza, 964, 1153
- Oubain arrow poison, 1428
- Ough, hospitals and dispensaries in, 484
- Ovary-hysterectomy in domestic animals, 1299
- Ovary, human, transplantation of, 1297; hernia of the, 1395
- Overseer's order for medical attendance, 187, 426
- Owen-Snow, Mr. C., "phosphatic diabetes" following influenza, 456
- Oxygen and nitrous oxide, effects produced in the human subject by the administration of definite mixtures of, 404; inhalations of in the treatment of acute and chronic diseases of the lungs, 559, 635, 712; and nitrous oxide, 668; and nitrous oxide gas as an anæsthetic in surgical and dental operations, 1031; absorption of by the blood, 1120
- Oxyuris vermicularis in children, 808
- Oyster, the histology and bacteriology of, 297
- Oysters, poisoning by at Brighton, 1545
- Bill, See Bill
- Ozema, the treatment of, 343; cupric electrolysis in, 575
- Ozzard, A. T., the sleeping sickness, 964
- P
- Pachydermatocoele of scalp, 907
- Pad, a truss, 666; pneumatic pressure-preventing for lady cyclists, 46; an elastic truss, 1102
- Padua, establishment of sanatorium for consumptives at, 369
- Page, E., varicose aneurysm of femoral artery, 794; gall stones, 46; removal of malignant growth in neck together with pneumogastric nerve, 46; sarcoma of meninges, 46
- Paget, S., Essays for Students, rev., 372
- Pake, W. C., on pseudo-tuberculosis, 598
- Palate, soft, nœvus of, 475; paresis of left side of, 928; hard, revolver shot of the brain through the, operation, recovery, 1093
- Palpitations, abdominal, stretching the solar plexus for, 990; abdominal, treatment of, 1451
- Panas's plastic operation for ptosis, 1463
- Pancreas, three cases of cyst of treated by incision and drainage through the anterior abdominal wall, 594; cyst of treated by incision and drainage, 663
- Pancreatitis, hemorrhagic, 876
- Panhysterectomy, cases of, 1281
- Pannwitz, the families of patients in sanatoria, 1349
- Papillomata of larynx, 1280
- Paralyses, of children, some points in the surgery of, 270; Traumatic, Birth of the Upper Extremity, H. B. Robinson, rev., 1167; General Progressive, M. Klippel, rev., 1284
- Paralysis, pseudo-hypertrophic, 152, 704; facial and bulbar, 342; facial, prognosis in, 454; infantile, muscular atrophy commencing long after, 533; congenital, 534; acute atrophic, affecting both upper extremities, 46; unilateral of the eighth and bulbar nerves, dysphagia associated with, 46; asthenic bulbar, 46; general of the insane in a child, 784; of left spinal accessory nerve, 907; of trapezius muscles, 1029; diphtheritic, the pathology of, 1002; post-anæsthetic, 1009; general, homologous heredity of, 1118; agitans, palliative treatment of, 1336
- Paramœcium colic in cysts of the liver, 968
- Parasite, the malarial, 1130
- Parents, schoolboys and infection, 980
- Paresis, spastic, 474; of left side of palate, pharynx, and left vocal cord and right side of tongue, 907
- Paris, correspondence from, 51, 118, 180, 246, 311, 439, 620, 877, 1058, 1127, 1307; medical experts in the law courts, 51; the plague at Tamatave, 46; a memorial to Dr. Feulard, 46; charitable midwifery in, 109; sanitation in the French colonies, 118; necropsy of the "shepherd killer," 46; gratuitous medical aid in the Sautre Department, 46; the prevention of infection in laboratories, 180; poisoning by tinned food, 46; outbreak of typhoid fever in barracks, 46; death of Dr. Dumontpallier, 46; Professor Proust on sanatoria for tuberculous patients, 246; new gynæcological wards at the Broca Hospital, 46; the Assistance Publique

and the maternity hospitals, 311; general news, 311, 629, 1059; shorthand for medical student in, 380; the prevention of hospital abuse in, 439; excursions to watering places, *ib.*; the abatement of the smoke nuisance, *ib.*; help for the blind, 629; masks for operators, 630; the new Medical Society in, 640; professional secrecy at, 823; influenza in, 877; an action for damages caused by the x rays, *ib.*; the teaching of colonial medicine, *ib.*; medical providence, *ib.*; the Conseil de Surveillance of the Assistance Publique, 1059; a new radio-scope, *ib.*; dust removal in, *ib.*; an International Congress of Public Assistance, *ib.*; Congress of French Alienists and Neurologists, *ib.*; consumption of alcohol in different countries, *ib.*; proposed extension of hospital accommodation at, 1119; the hospitals of, 1127; the University of and the Berlin Congress on Tuberculosis, *ib.*; the French First Aid Society, *ib.*; disinfection of flats, *ib.*; paying patients in hospitals, 1307; illegal practice by a priest, *ib.*; cremation, *ib.*; friendly societies and hospitals, *ib.*; the new school of medicine, *ib.*

Parker, R., pylorotomy, 968; pyloroplasty, *ib.*; removal of upper extremity, 1161; plexiform neuroma of eyelids, with ptosis, excision, relief of ptosis by Panas's plastic operation, 1463

W. R., thymus extract in exophthalmic goitre, 12; a menstruating man, a curious form of hermaphroditism, 272

Parke, L. C., on the London Government Bill, 545

Parkinson, C. H. W., the Midwives Bill, 442

PARLIAMENT, medical notes in, 366, 431, 497, 555, 751, 811, 929, 991, 1054, 1119, 1181; opening of, 366; the Queen's speech, *ib.*; the Midwives Bill, 366, 431, 929, 991, 1054, 1119, 1181, 1239, 1550; Private Members Bill, 366; vaccination, 366, 431, 997, 621; amendments to the Queen's speech, 366; the prevention of tuberculosis, *ib.*; the practice of massage, *ib.*; the Revaccination Bill, 431; Poor-law reform, *ib.*; the half-time system, *ib.*; the Petroleum Bill, 431, 689; the purity of milk, 431; the Universities Degrees Bill, 431, 689, 991; the pollution of rivers, 431, 621; the University of London, 431; the doctrine of constructive murder, *ib.*; the sick and wounded in Egypt, 497; the Metropolitan Water Companies Bill, 497, 991, 1239, 1431; the Cottage Homes Bill, 497, 1550; the Amendment of the Indecent Advertisement Act, *ib.*; amendment as to the law as to constructive murder, *ib.*; the London Government Bill, 555, 751, 929, 1054, 1119, 1181, 1300, 1431, 1550; the Inebriates Act (1898) Amendment Bill, 555, 1300; the nursing staff in the Egyptian campaign, *ib.*; the Sale of Food and Drugs Act Amendment Bills, 555, 621, 751, 811, 991, 1054, 1119, 1181, 1239, 1402; rabies in Ireland, 555; the Universities (Scotland) Acts Amendment Bill, *ib.*; the Education of Children Bill, 555, 1431; the Army Estimates, 621, 751; sanitary inspectors, 621; notifications of infectious diseases, *ib.*; vivisection, 621, 1181; Volunteer Medical Staff Corps, 621; the Constructive Murder Bill, *ib.*; the prevention of tuberculosis, *ib.*; the London School for Tropical Disease, 689, 1239; the London Hospital Bill, 689, 1402; venereal disease in the army, 689, 991; the tuberculosis debate, 689; army nursing sisters, *ib.*; the contamination of oysters by sewage, *ib.*; Poor-law administration, 751; the London water supply, *ib.*; the Imperial Institute, *ib.*; the Conscientious Objectors' Vaccination Bill, *ib.*; old age pensions, *ib.*; fees to medical witnesses, 811; sewage disposal, *ib.*; the Peculiar People, *ib.*; the Infectious Disease (Notification) Act (1889) Extension Bill, 811, 1054, 1181, 1300, 1431; phosphorus and lead poisoning, 811; the Pharmacy Act, 1868, Amendment Bill, *ib.*; the vaccination of very young children, *ib.*; the Civil Service estimates, *ib.*; water questions, 929; lead poisoning in the Potteries, 929, 991; the Secret Commission Bill, *ib.*; the Navy estimates, 991; the Budget proposals, *ib.*; the Small Houses (Acquisition of Ownership) Bill, *ib.*; the Royal Army Medical Corps, *ib.*; the Lunacy Bill, 991, 1119; army medical matters, 1054; the Prevention of Corruption Bill, *ib.*; inebriate reformatories, *ib.*; feeble-minded and defective children, 1054, 1300, 1402; recruits and their teeth, 1054; oysters and legislation, 1119; the transport of invalid soldiers, *ib.*; a medical officer for the Education Department, *ib.*; hydrophobia in the Indian army, *ib.*; the Old Age Pensions Committee, 1119, 1550; ozone in the House of Commons, 1119; Seats for Shop Assistants (Scotland) Bill, 1181; vaccination

and small-pox, *ib.*; the law of constructive murder, *ib.*; preservatives in food, *ib.*; the health of the Gibraltar Garrison, *ib.*; the Imbecile (Training Institutions) Bill, *ib.*; cattle diseases, *ib.*; the Local Government (Scotland) Act (1894) Amendment Bill, 1239; unqualified dispensers, *ib.*; the Companies (Medical Profession) Bill, *ib.*; the Isolation Hospitals (Amendment) Bill, *ib.*; the Parish Councillors (Tenure of Office) Bill, *ib.*; post-mortem examinations in Scotland, *ib.*; the Commons Committee on the Derwent Water Bills, *ib.*; the Oysters Bill, 1300, 1492; tuberculosis in cattle, 1300; barrack schools for pauper children, 1431; dropped bills, *ib.*; child labour in jam factories, *ib.*; the sewage farm at Aldershot, *ib.*; the dum-dum bullet, *ib.*; the new Vaccination Act and order, *ib.*; votes of thanks for the Soudan, 1492; the adulteration of tea, *ib.*; the troops at Ladysmith, *ib.*; the Seats for Shop Assistants (England and Ireland) Bill, *ib.*; the Undersized Fish Bill, *ib.*; the Reformatory Schools Amendment Bill, *ib.*; ambulance service at the House of Commons, *ib.*; the rations of recruits, 1550; the business of the House, *ib.*; the Youthful Offenders Bill, *ib.*; the Drainage Separation Bill, *ib.*; the case of Dr. Lamont, *ib.*

Parotid gland, scirrhus carcinoma of the, 152

Parrot, so-called hospitalism or athrepsy of, 1084

Parrots and tuberculosis, 455

Parsons, F. G., the joints of mammals contrasted with those of man, 659

Partnerships, medical, book on, 831

Parturition, instrumental assistance in, 274

Pasteur, monument to, 640; a precursor of, 868; the town of Lille and the memory of, 925

Pasteurism in Berlin, 1507

Patella, wiring the, 876

Paterson, H. J., the choice of an anæsthetic, 712

Pathology of insanity, 420; at Oxford and Birmingham, 1489

Patients, circulars to, 60

Patteson, R. G., fibro-adenoma of male breast, 725, 828

Paul, F. T., the dental tissues, 478; cholecystectomy, 602; multiple rodent ulcer, 795; colotomy, 1161; gastrostomy, *ib.*

Dr. J. B., obituary notice of, 377

Paullez, L., open-air shelters, 887

Pauper patients, attendance of private practitioners on, 323; spectacles and nurses for, 1256

Pawlow, J. P., Die Arbeit der verdauungs Drüsen, *rev.*, 1536

Paxton, Dr. H. K., death of, 126

Payne, J. F., on pseudo-tuberculosis, 599; spermium Poehl, 1129

Peace Conference. *See* Conference

Peace, Sir W., consumptive patients sent to Natal, 1060

Pearmain, T. H., The Analysis of Food and Drugs, *rev.*, 1469

Pearsall, W. B., Mechanical Practice in Dentistry, *rev.*, 91

Pearson, A. E., operative treatment of typhoid perforation, 1097

H. L., hospitals and certificates under the Workmen's Compensation Act, 762

Peculiar People, the, 809

Pellagra, Etiological, etc., Researches on, C. Lombroso, *rev.*, 282; information as to, 454

Pelvis, treatment of pus in the, 139, 312; radiograph of showing position of hairpin in vagina, 213; labour complicated by slight contraction of, 1221

Pemphigus of the mouth, larynx, pharynx, and skin, 151; contagious, 1021

Penberthy, J., a fatal malady prevalent among dogs, 866

Pendlebury, enteric fever at, 451

Pendleton, Mr. R. W., death of, 704

Penicuk Experiments, The, J. C. Ewart, *rev.*, 1101

Pennefather, R. D., strychnine in opium poisoning, 1534

Pennsylvania, the prevention of tuberculosis in, 223

Penny, J., inversion of the uterus, 401

Pensions in the asylum service, 1051, 1140, 1243

Pepper, Dr. W., the memorial to, 928

Perchloride of iron, treatment of pneumonia by, 596

Percival, A. S., retinoscopy, 255

Perforation, typhoid of intestine, operative treatment of, 345, 1097; gastric, operation for, 1267

Pericarditis (Des), C. Giraudeau, *rev.*, 1398

Pericarditis, rheumatic, 1155; acute, 1223; remote, prognosis of, 1464

Pericardium, certain points in the pathology of the, 792; adherent, calcification of, 908

Peristalsis, increased and peritonitis, 669, 960

Peritoneal cavity, bone crochet hook accidentally lodged within, 1393

Peritoneum, a new method of closing after laparotomy, 1394

Peritonitis, diffuse in appendicitis, 211; perforative, individual value of the symptoms in, more especially as regards operation, 517; and increased peristalsis, 669, 960; acute operative treatment of distended small intestine, in, 842; suppurative, 852, 969; acute, operative treatment of distended small intestine, in, 1025

Perkins, G. S., the traffic in abortifacients, 506

J. J., progressive muscular atrophy of, unusual distribution, 152

Permewan, W., the Vaccination Act, 1898, 278; tumours of oesophagus, 279; acute rhinitis, causing general infection, 1162

Perrin de la Touche, medico-legal aspects of rupture of aorta, 1300

Perrott, H. C., ambulance and home nursing in the evening continuation schools code, 124

Persia, the plague in, 1421, 1507

Personation by unqualified assistants, 1308; case of, 1376

Perspiration in dogs, 922

Pessary, the, in gynaecological practice, 476

Petit, A. L., hæmorrhage from the bowels in a case of granular kidney, 1025

Petridis, A., Etude Chirurgicale Clinique sur un Nouveau Procédé Opératoire Explorateur concernant les Abscès du Foie, *rev.*, 416

Petroleum emulsion, is it of any nutritive value? 724, 880

Petrushky, the diagnosis and treatment of primary tuberculous gastric ulcer, 1042

Pfeiffer, E., Verhandlungen des Congresses fuer innere Medizin, *rev.*, 1101

R., heredity, immunity, and disposition in tuberculosis, 1347

Pfounder, gastric secretions, 1041

Pharmacies, homœopathic, in Italy, 697

"Pharmacopœia," the German, revision of, 50

the United States, revision of, 168; the British, proposed Colonial and Indian "Addendum" to, 299; a new for Argentina, 384; the Swiss, 689; the Spanish, 1197

Pharmacists and company law amendment, 1548

Pharmacy Act Amendment Bill. *See* Bill

Pharyngitis, chronic, 1096

Pharyngo-mycosis leptothricia, so-called, 408

Pharynx, pemphigus of the, 151; paresis of left side of the, 907

Phear, A. G., technical examination of the hæmic leucocytes, 1026

Philadelphia, Malta fever in, 572; correspondence from, 698; the new water supply, *ib.*; the University of Pennsylvania new laboratory, *ib.*; resignations, *ib.*

Philippines, Casarean section in the, 107; the diseases of the, 868

Phillimore, R. H., acute thyroiditis, suppuration, operation, recovery, 1462

Phillips, F. L., treatment of ophthalmia tarsi, 403; ulerythema sycciforme, 475; a caution, 1260; treatment of nocturnal incontinence of urine, 1274; the proposed conciliation Board, 1510

G. A., operation for knock-knee, 1554

J., fibromyomata of the vagina, 262

W. F., antenatal therapeutics, 1062

Phosphaturia, 772

Phosphorus, use of in the manufacture of lucifer matches, 765

necrosis, so-called, of the jaw in match makers, the cause of, 9, 132; in lucifer matches, 968

Photography, stereoscopic, 1197

Phthisis, action of essential oils, etc., in the treatment of, 202; in lunatic asylums, 430; case of treated by the open-air method, 849; mixed infection of, 1347; general measures for the prevention of, 1347

Physician, the title of, 225, 233, 301, 374, 441, 504, 559, 880

Physiology and histology, the teaching of, 760, 878; Elementary, B. Moore, *rev.*, 1135; Chemical, the Essentials of, W. D. Halliburton, *rev.*, 1164

Piano, the, as a cause of neuroses, 988, 1044, 1076

Picric acid in superficial burns, 1152, 1320

Piershill barracks, Edinburgh, insanitary condition of, 1313

Pike v. Webb, 321

Pills, varnished, 606

Pin, ordinary, as a nucleus of stone in the bladder, 1275
 Pineal gland, the anatomy of, 477
 Pins, new vaccinating, 1286
 Pisani, L. J., The Pathology of Relapsing Fever, *rev.*, 541
 Pisenhi, G., cataract extraction in a lioness, 1489
 Pituitary body, hypertrophy of without acromegaly, 851
 Placenta, prævia, cocaine in, 271; dimidiata, with bifurcation of the cord, 850
 Plague, Bubonic, in Bombay, Observations and Epidemiological Notes on the Recrudescence of, G. Galeotti and G. Polverini, *rev.*, 26; suspected on board the "Golconda," 40; the work of the Special Commission on, 47, 116, 178, 238, 369, 435, 627, 692, 817, 872, 936, 937, 979, 1043, 1244; in Mongolia, 48; in India, 48, 993, 1056, 1108, 1304, 1351, 1421; in Madagascari, 48, 51, 369, 435; in Bangalore, 178; in Calcutta, 179, 500, 692, 937; in Madras, 179; in China, 48; in Bombay, 369, 435, 500, 627, 692, 700, 751; in Mauritius, 369; in Sindhi, 434; in Pretoria, 435; the geographical distribution of, 495; in Samarkand, 500; in the Transvaal, 500, 626; laboratory in Cochinchina, 626; in Jeddah, 627, 818; in Mysore, 627; army medical officers of and duty on, 637; and the Mecca pilgrimage, 687, 692, 993, 1188, 1304; in Poona, 692; Egypt and the pilgrimage, 751; in Hong Kong, 818, 937, 993, 1056, 1108, 1304, 1351, 1421, 1507, 1556; in Orange Free State, 818; the number of seizures in India, 873; endemic, methods of dealing with, 925; Professor Roux's serum in, 1108; in Bulgaria, 48; in India, the truth about, 1237; preventive inoculation at Broach, 1244; in Egypt, 1294, 1304, 1351, 1421, 1506, 1556; on the West Coast of Africa, 1304; disinfection of dwellings infected by, 1383; in Persia, 1421, 1507
 Platt, J. E., fracture of shaft of ulna associated with dislocation of head of radius, 215; pathology of cubitus varus following fracture of the lower end of the humerus, 345; the operative treatment of typhoid perforation of the intestine, 345
 Play, work, and handiwork, 924
 Plexus, solar, stretching the, for abdominal palpitations, 990; brachial injury to the roots of the in an infant, 1093
 Plimmer, H. G., micro-organisms in cancer, 748
 Plowden, Mr., and the charge of perjury against J. J. Mackay, 102
 Plumbers, proposed registration of, 383; registration of, 1137
 Plumstead, is it unhealthy? 315
 Plymouth, the workhouse infirmary at, 252; the prevention of tuberculosis at, 542
 Pneumonia and bronchitis, 278; discussion on at the Ulster Medical Society, 410; treatment of by perchloride of iron, 596; the cure of, 657; non-febrile, 910; prevalence of in Chicago, 1228; epidemic acute, 1214; croupous, pneumococcal septicæmia with ulcerative endocarditis, secondary to, 1222
 Pocket case, an aseptic, 675
 Pocket-handkerchiefs, paper, 606
 Poisoning, by boracic acid, symptoms of, 17; by tinned food, 186; by sewer-gas, four cases of, 201; acute by sulphonal, 209; by belladonna, 469; by rhus toxicodendron, 530, 701, 762; by carbolic acid, 684, 1274; by gas, the pathology of, 780; by the application of belladonna plaster, 849, 952; mercurial, notification of, 1009; by coal gas, recovery, 1153; by opium, strychnine in, 1534
 Poisons, regulations as to sale of, 117, 166, 430; regulations as to sale of in New York, 529
 Police, payment for calls by, 1314
 — surgeon, the duties of a, 128, 186
 Pollard, B., three cases of cyst of the pancreas treated by incision and drainage through the anterior abdominal wall, 594
 Poverini, G., Osservazione e Note Epidemiologiche sulla Recrudescenza della Epidemia di Peste Bubbonica in Bombay, *rev.*, 26
 Polymyositis, Sir W. R. Gowers on, 65
 Polypus, umbilical, 341; protrusion of, following lumbar colotomy, 1274
 Ponder, C. F., instrumental assistance in parturition, 214
 Poole, T. D., treatment of scarlet fever with sodium salicylate, 1274
 — H. W., one-mark vaccination, 1056
 Poona, the plague in, 692
 Poor, housing of in London, 1114
 — Law, appointments under, 323; tuberculous patients under, 365, 552, 1115
 Poore, G. V., earth in relation to the preservation and destruction of contagion, 457, 525, 587; exhibition of buried rabbits, etc., by, 496; medical London in the eighteenth century, 1178

Pope, the, the illness of, 629; the health of, 807
 Pope, F. M., the Midwives Bill, 455
 Popham, R. B., coincidences in midwifery practice, 832
 Poplar, bacteriological diagnosis at, 571
 Port, Dr. H., death of, 810; obituary notice of, 882
 Portsmouth, the prevention of tuberculosis at, 542, 740, 816
 Portugal, the prevention of tuberculosis at, 740, 1040; compulsory revaccination in, 800
 Posen, a hygienic institute at, 373
 Posner, C., Therapie der Harnkrankheiten, *rev.*, 1168
 Pot, death in the, 988, 1060
 Potassium cyanide, commercial use of, 455
 Potter, H. P., crushing fracture of the cervical spine, 151
 Potteries, lead poisoning in the, 829, 871, 1116
 Potts, Mrs. L., action against, 1006
 Pound, Mr. C., death of, 1131
 Powell, A., the prevalence of blackwater fever in Assam and the Duars, 788
 — Sir R. D., On the Principles which Govern Treatment in Disorders and Diseases of the Heart, *rev.*, 1398
 Power, D. A., two cases of intussusception, 19; vanishing tumours, 599; case of strangulated inguinal hernia in a boy 2½ years old, operation, recovery, 788; cystic disease of the breast in a boy aged 3 years, 851, 1026
 Poynton, F. J., rheumatic nodules, 851; rheumatic pericarditis, 1155; diseases of myocardium, 1277
 Practice, unqualified, case of, 128; What is it? 115; medical, by lay associations, 1175, 1195
 Practices, medical, transfer of in France, 1360
 Practitioner, private, attendance of on pauper patients, 323; general books for, 831, 951; registered medical and unregistered dental, 951
 Practitioners unregistered, 1116; general, hospitals and, 1184
 Prausnitz, W., tuberculosis in railway carriages, 614
 Pregnancy, tubal, 213; in cases of uterine myoma, 643; ruptured tubal, 670; and malaria, 1023; fatal case of oedema glottidis occurring during pregnancy, 1220; of unmarried girl, duty of medical man as to, 1259
 Prescribing, counter, made easy, 1105; counter, under the Pharmacy Bill, 1192, 1249, 1310; in general practice, 1375, 1510
 Presentation to Dr. J. Hunter, 61; Dr. A. N. Davis, 98; Mr. A. Cooper, 253; Mr. W. W. Fairfield, 282; Mr. J. St. J. Murphy, 358; Dr. G. Mathieson, 610; Dr. F. C. Bryan, 707; Dr. W. S. Young, 885; Dr. F. Turtle, 48; Dr. A. Montgomery, 886; Dr. Roberts Thomson, 990; Dr. J. H. Walker, 1053; Miss Cradock, 1248; Mr. H. F. Hurst, 1257; Dr. E. W. Hope, 1332; Mr. C. White, 1505
 Pressure, unilateral hypertrophy of the breast from, 533
 Pretoria, the plague in, 435
 Pribram, A., albuminuria of adolescents, 1042
 Price, Rev. B., death of, 38
 — Mr. C. L., death of, 1131
 Prichard, A. W., wiring of the patella, 876
 Prince of Wales, letter from on the prevention of tuberculosis, 173; and public abattoirs, 48
 Pringle, J. J., multiple epithelioma of scalp following upon lupus erythematosus, 152
 — Dr. R., obituary notice of, 184
 Prison medical service, the, 711
 Prize, the Carmichael, award of, 982
 — the Chadwick, award of, 883
 — the Fothergillian, award of, 536
 — the Jacksonian, a retrospect, 818, 888
 — the Lenval, conditions as to, 1073
 — Marshall-Hall, award of, 556
 Prizes, the Vallauri, conditions as to, 1381
 Probe, a graduated pocket, 28
 Proclivities, family, 688
 Profession, the medical and the General Medical Council, 29; the medical and the Medical Acts, 54; the medical and temperance, 708; the medical, the debt of the public to, 1295
 Professor Hieronimus, A. Skram, *rev.*, 1469
 Profeta's law. See Law
 Prostate gland, enlarged, results of operation for, 407; disease of cured by suprapubic cystotomy, 688
 Prostate gland, clinical notes upon the rectal contour and consistence of, 1000, 395
 Prostectomy, suprapubic, 22
 Proust, Professor, on sanatoria for tuberculous patients, 246; on the plague, 495
 Prurigo ferox, 968
 Prussia, the suppression of quackery in, 373; the vaccination law in, 48
 Pseudo-tuberculosis, discussion on at the Path-

ological Society, 471, 597; report of Committee of Pathological Society on, 1216
 Psychology, experimental, 1172, 1232
 Ptosis, treatment of, 575; Panas's plastic operation for, 1463
 PUBLIC HEALTH.—Health of English and Scotch towns, 60, 129, 186, 251, 321, 381, 451, 510, 571, 639, 707, 766, 829, 885, 1008, 1071, 1135, 1196, 1254, 1315, 1379, 1444, 1513, 1565; English urban mortality, 186, 509; the Registrar-General's quarterly return, 382, 1135; vital statistics of London sanitary districts, 450, 638, 944; English urban mortality, 451, 1071; zymotic mortality in London, 570, 1255; books for the examination for a diploma in, 710; abstract of marriages, births, deaths, etc., in England, 88; annual reports of the Registrar-General for England and Scotland, 976; books on, 1199; vital statistics for 1898, 1513
 Public Health Acts Amendment Bill. See Bill
 Pulpit, the doctor in the, 1549
 Pulsation of the Foot, S. Tatti, *rev.*, 1398
 Pulsus, bisferiens, 75; paradoxus, 1093, 1161; paradoxus, unilateral and indurative medias-tino-pericarditis, 1336
 Punishments, military, 1361
 Punjab, hospitals and dispensaries in, 484
 Purdy, J. S., a coincidence in midwifery practice, 644
 Purslow, C. E., uterine fibroid with ovarian cyst, 475; cyst of broad ligament, 733; panhysterectomy, 1281; two cases of intractable uterine hæmorrhage for which vaginal hysterectomy had to be performed, 1394
 Purvis, J. P., the duties and trials of public vaccinators, 485; the lymph of the National Vaccine Establishment, 486
 Pus in the pelvis, treatment of, 139, 312
 Pustule, malignant, 215
 Putrefaction, intestinal and microbes, 1120
 Pye-Smith, Dr. P. H., appointed representative of London University on the General Medical Council, 1118
 Pylorectomy for stenosis of pylorus, 602; case of, 968
 Pyloroplasty, case of, 968
 Pylorus, general hypertrophy of the, 340; pyloroplasty for stenosis of, 602
 Pyonephritis, with perinephritic inflammation, lumbar nephrectomy for, 1281
 Pyosalpinx, double, 212, 1220; of seventeen years' standing, 732

Quack, an aristocratic, 1121
 — doctor, the rating of a, 1195
 Quackery, the repression of in Prussia, 373; a pamphlet on, 575
 Queen, the, visit of to Cimiez, 491; tuberculosis in the herd of the, 986; presents Dr. Sturge with silver inkstand, etc., 1118; the health of the, 1355
 Queensland, preventive inoculation for tick fever in, 1444
 Quesnay, François, remarks on, 104
 Quetta, enteric fever at, 823; the health of, 1313
 Quinine, erythematous rash produced by small doses of, 324, 516; hypodermic injection of in malaria, 1153, 1320; the consumption of in the United States, 1316
 Quinton, Brigade-Surgeon W. W., death of, 767

R.
 Rabinowitch, tubercle bacilli in butter, 171
 Race, trachoma and, 1086
 Rachitisme (Le), sa Pathogénie, A. Delcourt, *rev.*, 1227
 Radiation, Electro-magnetic, an Elementary Treatise on, H. H. F. Hyndman, *rev.*, 1168
 Radiocarpal joint, dislocation of the, 1024, 1332
 Radiograph, of pelvis showing position of hair-pin in vagina, 213; of foreign bodies in the eye and orbit, stereoscopic examination of, 276; of chest, 278
 "Radiography," "skiagraphy," or "aktinography," 297
 Radius, dislocation of head of associated with fracture of shaft of ulna, 215; compound diastasis of lower end of, 669
 Railway carriages, tuberculosis in, 614; the cleaning of, 1008
 — servant, a colour-blind, myopic, 1274; amputation of fingers of, liability for payment for, 1441
 Rambaut, D. F., carcinoma of liver, 1032
 Ramsey, O., the surgery of the suprarenal capsule, 1237
 Ranaghat, the medical mission to, 708
 Ransford, Dr. G., death of, 446
 Ransome, A., the prospect of abolishing tuber-

- culosis, 19; the crusade and plan of campaign against tuberculosis, 174
- Raphael, Mr. H. L., death of, 1316
- Rash, erythematous, produced by small doses of quinine, 324, 516
- Rating of a quack doctor, 1105
- Ratings, some extra of healthy lives, 807
- Rats, resistance of to diphtheria toxin, 902
- Raven, T. F., the lymph of the National Vaccine Establishment, 435
- Raw, N., traumatic axillary aneurysm, 69; traumatic epilepsy, status epilepticus, trephining, recovery, 1083
- Rayner, H., the case of Regina v. Reichardt, 313
- Reber, W., A Practical Handbook on the Muscular Anomalies of the Eye, *rev.*, 1101
- Recherches Cliniques et Thérapeutiques sur l'Epilepsie, l'Hystérie et l'Idiotie pendant l'Année, 1897, au Bicêtre, Bourneville, *rev.*, 92
- Reckett, Major J. D., dislocation of acromial end of clavicle, 1152
- Recruit, the teeth of the, 617, 1117
- Recruiting, statistics as to, 1011
- Recruits, charge for examination of, 1011
- Recti muscles of the eyeball, advancement of, 1095
- Rectum, Kraske's operation for cancer of the, 90; alveolar sarcoma of the, 341; fibrous stricture of the, 1331
- Red Cross, a British central committee of the, 1047; the Italian in Africa during the campaign of 1895-96, 1127; the, at the Peace Conference, 1361
- Society. *See* Society
- Reed, Mr. T. A., death of, 882
- Refraction, rapid changes in in connection with diabetes, 275
- Regina v. Reichardt, 100, 313; v. Nugent, 164, 185; v. Webb and another ex parte Hawker, 320, 448
- "Registers," the new editions of, 1113
- Registration of plumbers, 1137
- Reichardt, Regina v., 100, 313
- Dr. fund to pay costs of, 247, 356, 456, 771, 952; the lunacy law and borderland cases, 504
- Reid, E. W., on intestinal absorption, 1749
- Sir J., appointed physician in ordinary to the Prince of Wales, 42
- J. M., syphilis in the army, 122
- Reigate, annual report of industrial farm colony at, 572
- Reinfection in syphilis, 927
- Reinhardt, Mr. A. H., death of, 1194
- Renal. *See* Kidney
- Renton, Mr. W., death of, 1004
- Report of medical officer of the Local Government Board (England) for 1897-98, 109, 161; of the medical officer of health for London, for 1897, 111, 160, 221; of Sub-committee of Parliamentary Bills Committee on tuberculosis, 242; on the use of phosphorus in the manufacture of lucifer matches, 765
- Reports and Transactions, *rev.*, 1101
- Representation, direct. *See* Medical Council General
- Respiration, unilateral hypertrophy of accessory muscles of, 1093
- Respiratory centre, paralysed by chloroform before the heart, 903
- disorders among arsenic workers in Cornwall, 926
- Responsibility, professional, and professional secrecy, 63
- Retainer system, the, 63
- Retina, removal of a fragment of steel from, with the electro-magnet, 335; embolism of central artery of, 1029
- Retinitis, albuminuric, in a child, 666
- Retinoscopy, 255
- Retreat, the, York, annual report of, 511
- Retreats, the placing of patients in, 387
- Revaccination, the Parliamentary Bills Committee on the necessity for, 353; the Government and, 357, 548; compulsory in Portugal, 800
- Reversion, cases of, 120
- Reymond, E., Chirurgie des Cœur et der Péricarde, *rev.*, 1398
- Revolver shot of the brain through the hard palate, operation, recovery, 1093
- wound of brain, 88
- Reynolds, E. S., some uncertainties in the diagnosis of cerebral tumour, 333
- Rheumatism, acute, chromocyte clumping in, 1001; chronic, mineral waters for, 1568
- Rhinitis, acute, causing general infection, 1162; vasomotor, excited by sulphurous acid, 1568
- Rhinoplastic operation, the, 335
- Rhus toxicodendron, acute dermatitis caused by handling, 530, 701, 772, 1140; poisoning by, 762
- Ribs, third and fourth, case of arrested development of, 1150
- Richards, J. S., pemphigus of the mouth, larynx, pharynx, and skin, 151
- Richardson, Sir B. W., unveiling of memorial tablet to, 1316
- C. B., obstinate hicough, 1130
- W., the infectivity of typhoid urine, 1298
- Richmond, B. L., the General Medical Council and the Hunter case, 504
- Rickmansworth, treatment of inebriety at, 1137
- Rideal, T., Practical Organic Chemistry, *rev.*, 27
- Riegel, the influence of drugs as regards secretions of the stomach, 1041
- Ries-Clarke's operation for cancer of the cervix uteri, 1116
- Riga's disease. *See* Disease
- Rinderpest, and bile inoculation, 556; Bubonic Plague in India and Africa, Teitse or Surra Disease, Texas Fever, Tropical Malaria and Blackwater Fever, Travel Reports on, R. Koch, *rev.*, 1033
- Ringworm, experimental note on the ferments of the fungi of, 13; in the Light of Recent Research, M. Morris, *rev.*, 1226
- Ritchie, J., chemical combination in relation to germicidal action, 1217
- Rivers, conference on the pollution of, 428
- Riviera, temperature on the, 123; correspondence from, 245, 998; the weather good and bad, 245; for the aged, *ib.*; defective provision for open-air treatment of phthisis, *ib.*; the recent outbreak of typhoid fever at Nice, *ib.*; the end of the season, 998; intermediate stations for phthisis, bronchitis, etc., *ib.*
- Roberts, Sir A., obituary notice of, 249
- A. M., the use of heat in the treatment of arthritis, 1140
- Dr. L., elephantiasis of vulva, 22
- H., cancer of Fallopian tube, 599
- L., experimental note on the ferments of the ringworm fungi, 13; the chronicity of eczema, 669
- N. E., the Vaccination Act, 1898, 88
- T. P., motor tricycles, 1446
- Sir W., death of, 987; obituary notice of, 1063
- Robertson, H. A., a case of gangrene of the lung, 402
- W. G. A., tonsillar calculi, 14
- Robinson, G. H. D., vulvitis in children, 86
- H. B., multilocular tumour from the inguinal region in a female, 151; scirrhous carcinoma of the parotid gland, 152; the Surgical Aid Society and its methods, 443; hydatid cyst in upper lobe of right lung and liver successfully removed, 663; exostosis of the vertebral border of the scapula, removal, 963; some complicated forms of appendicitis, 1028; Traumatic Birth Paralysis of the Upper Extremity, *rev.*, 1167; acute intestinal obstruction caused by an adherent vermiform appendix forming a band associated with foetal arrangement of the peritoneum, 1334; misplaced testes and their surgical treatment, 1385
- W., pseudo-hypertrophic paralysis, 794
- Robson, A. W. M., the dangers of delay, 953
- Rodocanachi, A. J., colotomy, simple and complicated, 1026
- Roe, E. H., the General Medical Council, inspection of documents, 53
- Roentgen rays, some recent work with, 21; employment of in affections of the skin, 38; in military surgery, 112; Endoscopy by Means of, L. Bouchacourt, *rev.*, 159; outfit for, 255; instruction in photography by, 323; improvement in the technique of, 551, 701, 763; in Spain, 641; action for damages caused by, 877; localisation of foreign bodies in the eye by the, 969; eczema treated by, 1024; piece of glass localised in the eye by means of, 1158
- Rogers, Captain L., the results of segregation of cases and moving from infected sites in eradicating the Assam epidemic malaria fever or kala-azar, 1464
- Rollston, H. D., vacuolated carcinoma of the antrum, 851; syphilitic stenosis of both bronchi, 965
- Rollit, Sir A., repayment of local loans, 1429
- Rome, correspondence from, 118, 373, 629, 697, 1127, 1373; the treatment of phrenasthenic children in Italy, 118; foreign medical practitioners in Italy, 119; the Italian Society "Pro Infantia," *ib.*; the Italian Society of the Medical Press, *ib.*; the Italian Society for the Study of Malaria, *ib.*; the Italian Government and reciprocity, 373; the illness of the Pope, 629; the University disorders in Italy, *ib.*;
- homeopathic pharmacies, 657; Anglo-American nursing home in, 1050, 1193; the Italian Red Cross in Africa during the campaign of 1895-96, 1127; the health of in 1898, *ib.*; the centenary of Spallanza, 1128; the life cycle of the parasite of tertian fever in the anopholes claviger, 1373; Professor Koch in Italy, 1374; school for mentally deficient children in, *ib.*
- Roque, G., Les Glycosuries non Diabetiques, *rev.*, 1338
- Rose, Staff-Surgeon J., obituary notice of, 703
- Rosenfeld, diagnosis of stomach and liver diseases, 1041
- Ross, A. M., acute leukaemia, 852
- D. M. M., the treatment of dysentery, 1151
- J. C., cinnamon in influenza, 660
- J. H., climate and the cure of consumption, 1194
- Major R., mosquitos and malaria, 425, 432, 1248; elected lecturer on tropical medicine at Liverpool, 998; the inaugural lecture of, 1429
- S. J., the ophthalmic joint disease of children, 273; the Midwives Bill, 559
- Rossa, E., Die Gestielten Anhänge des Ligamentum Latum, *rev.*, 1100
- Roth, general measures for the prevention of phthisis, 1347
- Rothschild, the sternogoniometer, 1041
- Roughton, E. W., oblique fracture of the humerus treated by wiring, 1029; tumour of the upper jaw, 1093
- Roumania, the prevention of tuberculosis in, 543; medical women in, 573
- Roux, Dr., elected member of the Académie des Sciences, 383; the plague serum, 1108
- Rowan, J., carcinoma of the eye secondary to that of the lung, 1158
- Rowlands, Mr. J., obituary notice of, 1003
- Roxburg, A. B., coin in the oesophagus removed by the aid of the fluorescent screen, 789
- Royal Army Medical Corps. *See* Corps
- Ruata, C., vaccination in the Italian army, 1509
- Rubella, desquamation after, 1075
- Rubner, houses, workshops, and public vehicles in the spread of tuberculosis, 1347
- Russell, A. E., paramæcium coli in cysts of the liver, 968
- Dr. J. B., honorarium for, 42; address on presentation to, 739
- W. B., desquamation after rubella, 1075
- Russia, leprosy in, 107; the dawn of medical science in, 357; medical graduation in, 596; the teeth of school children in, 1112
- Rutherford, Professor, death of, 495; obituary notice of, 564; the will of, 567; the funeral of, *ib.*
- Rutishauser, the connections of the frontal lobe, of the brain, 1297
- Ryle, J., National Association for Prevention of Consumption, 1200
- S. S.
- Sac, pericardial, strangulated hernia in a, 16
- Saddles, cycle, 575
- Saenger, A., Die Neurologie des Auges, *rev.*, 1340
- Safety-pin, open, removed from child's oesophagus, 661
- St. Dogmell's rural district, divided counsels in, 1071
- St. George Southwark, annual report of vestry of, 252; the prevention of tuberculosis in, 1040
- St. John, Leeward Islands, sanitary report of, 61
- St. Leger, F. E., consumptive patients in Cape Colony, 192
- St. Louis, establishment of hospital for coloured patients at, 823
- St. Lucia, filaria Demarquai in, 145
- St. Pancras, overcrowding in, 1378; sanitary administration in, 1424
- St. Saviour's, Southwark, the prevention of tuberculosis in, 288
- Salicylate of sodium. *See* Sodium
- Salisbury plain, medical officers for, 1512
- Salpingitis, gonorrhoeal, treatment of, 1220, 1320
- Salter R. H., typhoid fever in the Netherlands, 1278
- Samakand, the plague in, 500
- Sample-taking, the ethics of, 1250
- Samuel, J. A., district nurses and the medical profession, 1061
- Samways, D. W., temperature on the Riveira, 123
- Sanatoria, for consumptives, establishment of in Germany, 50, 117, 368; for consumptives, 182, 246, 247, 826, 1040, 1568; home and foreign for consumptives, 711; discussion on at the Berlin Congress, 1349

Sanatorium, a "Crystal Palace," 678
 Sanderson, J. B., the Croonian lecture, 681;
 baronetcy conferred on, 1421
 Sandhurst, report of visitors as to Royal Military College at, 544
 Sanitary authorities and tuberculosis, 108
 — inspectors, the duties of, 1008
 — Institute. See Institute
 Sanitation in Aldershot, 170, 376, 455; and the Church crisis, 920
 Santiago, the medical hero of, 683
 Sarcoma, myeloid of fibula, 213; of leg, 278;
 alveolar of the rectum, 341; of meninges, 794;
 of the suprarenals and secondarily of the lung, 1222; of vagina, 1281; primary, of sigmoid flexure, 1336; central, of bone, 1397
 Sarcomata, multiple, of skin, 534
 Sargeant, Mr. J. C., death of, 636
 Saundby, R., the Hospital Reform Association, 1249; a charge against, 1439
 Sauria, C. M., the inventor of matches, 750
 Sausages and cat's-meat, 1235
 Savage, E. S., tubal pregnancy, 213; hydatid of liver, 1030; sarcoma of vagina, 1281
 — G. H., the Reichardt fund, 356
 Savory, C. B., hypodermic medication in skin disease, 904
 Sawdon, F. J., ascitic fluid, 516
 Scalp, pachydermatocele of, 907
 Scapula, exostosis of the vertebral border of the, removal, 963; tumour of, 1282
 Scarlet fever. See Fever.
 Scarlatina. See Fever scarlet.
 Schäfer, Professor E. A., appointed to the chair of physiology at Edinburgh, 1549
 Schaeffer, O., Anatomischer Atlas der gebürtshilflichen Diagnostik und Therapie, *rev.*, 1399
 Schjerning, tuberculosis in the German army, 1346
 Schlatter, removal of stomach, 867
 Schmeiden, the planning of sanatoria, 1349
 Schmidt, aortic aneurysm, 975
 Schmidt-Rimpler, trachoma and epidemic eye affections, 298
 School, Army Medical. See Netley
 — of Instruction, Volunteer Ambulance, the proficiency examination of, 128
 — of Medicine for Women, London, the Bostock scholarship at, 509
 — for Tropical Diseases, 181, 247, 313, 633;
 donations to the, 928, 1009, 1119; banquet in promotion of, 1189; list of officers, etc., of, 1356
 Schoolboys, parents, and infection, 989
 Schools, medical, in the United States, 27; sanitary inspection of, 172; workhouse, new order as to, 430
 Schoull, beards and bacilli, 1427
 Schroetter, v. jun., gaseous abscess in the abdominal wall, 1042
 — L. v., insufficiency of the heart muscle, 974
 Schürmayer, Medicinische Bibliothek für praktische Aerzte, *rev.*, 158
 Schumburg, disinfection with formaldehyde, 105
 Schwalbe, G., Das Aeusserere Ohr, *rev.*, 480
 Science, martyrs of, 687
 Scirrhus of breast, excision of, "recurrence" nearly twelve years afterwards, 1025
 Sclerosis, disseminated, 1029; insular, differential diagnosis of hysteria from, 1077
 Sclerotic, gumma of, 732
 Scotland, lunacy changes in, 1254; post-mortem examinations in, 1314; parish medical officers, 1319
 "Scotsman," the, on the modern doctor, 361
 Screen, fluorescent, coin on the oesophagus removed by aid of, 789
 Scott, K., traumatic division of both optic nerves, 1466
 Scrotum, cleft, in complete hypospadias, 152
 Sea, the ambulance work at and the Peace Conference, 1241
 — voyages in the treatment of tuberculosis, 1321
 Secondary Education Bill. See Bill
 Secrecy, professional, and professional responsibility, 63, 951; professional, Mr. M. Mackenzie on, 683; professional, in Paris, 823; professional, in the United States, 928
 Semon, Sir F., the choice of an anæsthetic, a disclaimer, 376; a disclaimer, 1260
 Semple, Major D., the treatment of tetanus by the intracerebral injection of antitoxin, 10;
 the neutralising power of Calmette's antivenomous serum, its value in the treatment of snakebite, 781
 Senior, A. W., consultants for medical aid associations, 122
 Senn, N., on the heroism of medical men, 550
 Septicæmia, puerperal, antistreptococcus serum in, 88; gonorrhœa and heart disease, 687;

pneumococcal, with ulcerative endocarditis secondary to croupous pneumonia, 1222
 Sequeira, J. H., the remote prognosis of pericarditis, 1464
 Serum, antidiaphtheric, the value of in the treatment of diphtheria, 197, 268, 1192; treatment of diphtheria by, 213; a case showing the value of late injections of, 338; in laryngeal obstruction, 1319
 — antistreptococcus in puerperal septicæmia, 88; generalised septic infection treated with, 142; in the treatment of small-pox, 1144
 — antitetanic, treatment of tetanus by the intracerebral injection of, 10, 324, 456, 826, 895, 1332; acute tetanus treated with, death, 17;
 treatment of traumatic tetanus by, 337; acute tetanus successfully treated with, 401
 — antituberculous, the treatment of pulmonary tuberculosis by, 790
 — Calmette's antivenomous, the neutralising power of, its value in the treatment of snakebite, 781
 — of sobriety, 683
 Sevenoaks, weather at in 1898, 455
 Sevestre, R., effect of foreign bodies in the bronchi, 143
 Sewage, disposal of at Manchester, 169; disposal of at Dunstable, 1379; at Welton, disposal of, 46
 Sewell, Dr. J. A., obituary notice of, 184
 Sewer gas, four cases of poisoning by, 201
 Seymour, H. R., Physical Training: its Theory and Practice, *rev.*, 218
 Shadwell, A., The London Water Supply, *rev.*, 673
 Shakespeare and the Medical Society, 1201
 Shanghai, the health department of, 1379
 Sharpe, G. M., the lymph of the National Vaccine Establishment, 435
 Sharpin, H. W., "death in the pot," 1063
 — W. A., case of angina Ludovici, recovery, 83
 Shattock, S. G., the buffy coat, 340; perspiration in dogs, 926; chromocyte clumping in acute rheumatism, 1091
 Shaw, C., post-nasal growths, 89
 — H. B., severe hæmorrhagic diphtheria with a marked membranous development, 149; injury to the roots of the brachial plexus in an infant, 1093
 Shaw-Mackenzie, S. C., celandine, 1139; reinfection in syphilis, Profeta's law, 1440
 Sheen, A., traumatic rupture of duodenum and jejunum, 470
 — A. W., cholecystotomy, 628; a case of misplaced, misshapen kidney, 1395
 Sheffield, the prevention of tuberculosis at, 173, 699, 1059, 1104, 1228, 1248; correspondence from, 690, 878, 1059, 1248, 1555; improvements and extension of the hospitals, 699; death of Mr. H. J. Knight, *ib.*; gifts to University College, 878; general practitioners and consultants, *ib.*; the infectious hospitals, *ib.*; death of the treasurer of University College, 1059; the Home Office report on dangerous trades, *ib.*; formation of branch of National Association for the Prevention of Tuberculosis at, 1228; Medico-Chirurgical Society, 1248; Hospital Saturday, *ib.*; Jessop Hospital for Women, *ib.*; voluntary notification of phthisis, 1555; schools and diphtheria, *ib.*; female sanitary inspectors, *ib.*; the antivivisectionists, *ib.*
 Sheldon, John, anatomist and surgeon, 1342
 Shelters, open-air, 887, 951, 1011
 Shennan, T., aphasia following abscess of the temporo-sphenoidal lobe, 212
 Sherrington, C. S., the teaching of physiology and histology, 878; the spinal animal, 1276
 Shipboard, tropical oedema on, 1262
 Ships, hospital, statistics as to 1004; ambulance for the Royal Navy, 1308, 1568
 Shock, surgical, 1202
 Shortland for Paris medical students, 380
 Siam, medical progress in, 1137
 Sibbald, Dr. J., retirement of, 749; knighthood conferred on, 1422
 Sibley, W. K., neurotic ulcers in the mouth, 900
 Sichel, Surgeon E., injuries produced by an explosion of gun-cotton, 1534
 Siddall, J. B., the treatment of hæmophilia, 531
 Sidmouth, antivaccination at, 1117
 Siebenmann, F., Mittelohr und Labyrinth, *rev.*, 483
 Sierra Leone, information as to, 455; the visit of the Liverpool School of Tropical Medicine to, 1550
 Sight, recovery of after partial occlusion of the central artery, 1454

Sight tests in the mercantile marine, 1204
 Sigmoid flexure, two cases of extreme dilatation of colopexy, recovery, 1330; primary sarcoma of, 1336
 Silcock, A. Q., traumatic aneurysm of sciatic artery, 661
 Simon, M. F., a useful manoeuvre in some cases of ruptured urethra, 819
 Simpson, J. C., membranous colitis and colotomy, 513; treatment of tuberculous meningitis, 1011
 Sinclair, Colonel D., gets C.S.I., 31
 Sindh, the plague in, 434
 Sinus, old, treatment of, 587; maxillary empyema of the, 1218
 Skerritt, E. M., Mediterranean fever, 876
 Skiagraph of excision of meningo-myelocele, 1094
 Skiagraphs of foreign bodies in the eye and orbit, stereoscopic examination of, 276; the interpretation of, 1209
 "Skiagraphy," "radiography," or "aktinography," 297; the automobile in, 888
 Skin, employment of chemical and x rays in affections of the, 38; influence of pathological states on the elimination of carbon dioxide and water by, 79; a principle of treatment of follicles of the, 147; fibroma moluscum of the, 150; pemphigus of the, 151; Diseases of the, M. Morris, *rev.*, 348; multiple sarcomata of, 534; hypodermic medication in disease of, 904; affections of the in renal disease, 966; multiple adenomata of the, 1533
 Skram, A., Professor Hieronimus, *rev.*, 1469
 Skull, fibroma of base of removed through the cheek, 787; compound fracture of, 794; sloughing of cornea rapidly following on fracture of base of, 1158
 Sleep, a new theory of cerebral activity and, 93; sleeplessness and hypnotics, some points connected with, 1528
 Sleeping sickness, the, 315, 964; death of patient suffering from, 429
 Small-pox, in Cuba, 27; and scarlet fever, 167; M. Dumont on, 361; at Eston, 383; Dr. A. Cordes on, 490; duties of medical officers of health in relation to in view of the alterations in the law of vaccination, 736; and vaccination in the Italian army, 1017; in Illinois and Indiana, 1128; antistreptococcus serum in the treatment of, 1144; outbreak of in Hull, 1235
 Smith, A., Ueber Temperenz Anstalten, *rev.*, 1339
 — E. T., vaginal fixation of the uterus, 726
 — Captain J. B., operation for elephantiæsis of the vulva, 148; sanitary precautions at Bombay, 113
 — J. L., the pathology of gas poisoning, illustrated by five recent cases, 750
 — J. R., the epidemic of typhoid fever at Belfast, 193
 — Surgeon-Major J. S., obituary notice of, 636
 — J. W., suprapubic prostatectomy, 22
 — N., spasmodic torticollis, 908
 — P., method of increasing the movement of an artificial eye, 474
 Smithson, O., poisoning by the application of belladonna plaster, 849
 Smoke nuisance, the, in London, 362; and nuisance, 1008
 Smyly, W. J., abdominal causes of death after cœliotomy, 1026
 Smyth, W. J., relief of lightning pains, 386
 Snakebite, value of Calmette's antivenomous serum in the treatment of, 781
 Sneezing, recurrent, and nasal catarrh, 1319, 1446
 Snell, S., on the removal of a fragment of steel from the retina with the electro-magnet, with notes of two cases, 335; primary carcinoma of eyeball, 1158; traumatic ptosis, *ib.*
 Snow, H., excision of the breast in a patient almost pulseless, 272; excision of breast, scirrhus, "recurrence" nearly twelve years afterwards, 1025; lumbar colotomy followed by the protrusion of a polypus, 1274
 Sobriety, the serum of, 683
 Société d'Études Psychiques, formation of, 640
 Societies, provident and antivaccination, 228; medical aid and doctors' clubs, 827; friendly and medical aid associations, 1055
 Society of Anæsthetists, the choice of the anæsthetic, 20, 277; prolongation of nitrous oxide anæsthesia, 668; nitrous oxide and oxygen, *ib.*; paper, *ib.*; nitrous oxide gas and oxygen as an anæsthetic in surgical and dental operations, 1031; death after administration of gas and oxygen followed by chloroform, *ib.*; post-anæsthetic paralysis, 1098; epileptiform fit

during anæsthesia, *ib.*; close of the session, *ib.*;
 Society Antivivisection, New England, free fight at annual meeting of, 493; the quarrels at, 687
 Apothecaries. See Apothecaries
 Balneological and Climatological, British, the province of the spa physician, 24; the climate of Margate in relation to disease, 346; therapeutics of heat, 670, 853; "conversazione" of, 1099; meeting of, 1467
 Charity Organisation meeting of Council of as to Central Hospital Board for London, 1184
 the Childhood, lectures under auspices of, 253
 Clinical, Chelsea, mitral stenosis and its early diagnosis, 23; delirium tremens treated by inhalation of chloroform, 24; intestinal obstruction due to gall stones, *ib.*; meeting of, 281, 671, 737, 854; the prevention of tuberculosis, 1038, 1186; annual dinner of, 1425
 Clinical, Ipswich, meeting of, 157, 855, 1224
 Clinical, of London, localised myositis ossificans following injury, 151; enlarged spleen with thrill and bruit, *ib.*; anterior displacement of tuberculous carpus, *ib.*; pemphigus of the mouth, pharynx, larynx, and skin, *ib.*; progressive muscular atrophy after measles, *ib.*; complete hypospadias with cleft scrotum, 152; progressive muscular atrophy of unusual distribution, *ib.*; shortening and eversion of the thigh, *ib.*; scirrhus carcinoma of the parotid gland, *ib.*; pseudo-hypertrophic paralysis, *ib.*; elephantiasis of one leg, *ib.*; multiple epithelioma of scalp following upon lupus erythematosus, *ib.*; abdominal section, 274; rheumatic tonsillitis, *ib.*; tuberculous cavities in the lungs giving rise to gaseous metastatic abscesses, 406; myopathy in a boy, aged 5 years, necropsy, *ib.*; results of operations for enlarged prostate, 407; muscular atrophy, recommencing long after infantile paralysis, 533; unilateral hypertrophy of the breast from pressure, *ib.*; pulmonary fibrosis associated with tabes dorsalis and arthropathy, 534; rheumatoid arthritis with enlarged spleen and glands in a child, *ib.*; a patient after removal of cerebral tumour, *ib.*; factitious urticaria, *ib.*; myositis ossificans progressiva, *ib.*; congenital paralysis, *ib.*; acute atrophic paralysis affecting both upper extremities, *ib.*; dysphagia associated with unilateral paralysis of the eighth and bulbar nerves, *ib.*; rheumatoid arthritis, *ib.*; asthenic bulbar paralysis, *ib.*; multiple sarcoma of skin, *ib.*; anterior dislocation of the hip, probably congenital, 535; hydatid cysts in upper lobe of right lung and liver successfully removed, 663; pancreatic cyst treated by incision and drainage, *ib.*; removal of a large malignant frontal tumour with underlying bone, 664; erosion of the ankle-joint, *ib.*; Report of the Committee of the Antitoxin of Diphtheria, *rev.*, 739; aneurysm of abdominal aorta successfully treated by introduction of silver wire into the sac, 701; operations for pyloric obstruction, *ib.*; lymphangoma tuberosum multiplex, *ib.*; wound of a large superficial inguinal artery in which the blood was flowing from the trunk to the thigh, 966; syphilitic stenosis of both bronchi, *ib.*; ununited fracture of humerus caused by interposition of the musculo-spiral nerve between the fragments, 966; skin affections in renal diseases, *ib.*; achondroplasia, 1092; solution of continuity of both femora, *ib.*; revolver shot of the brain through the hard palate, operation, recovery, 1093; tumour of the upper jaw, *ib.*; spontaneous cure of recurrent carcinoma of the breast, *ib.*; unilateral hypertrophy of the accessory muscles of respiration, *ib.*; new splint for fractured clavicle, *ib.*; excision of the posterior half of the tongue and epiglottis, *ib.*; injury to the roots of the brachial plexus in an infant, *ib.*; pulsus paradoxus, *ib.*; a case of aortic disease with musical "bruit" remedied by baths and exercise, 1094; excision of a meningomyelocele, with skigraph, *ib.*; ossification of the tendo Achillis, *ib.*; right colotomy for chronic colitis, 1217; empyema of the maxillary sinus, 1218; chronic empyema of the maxillary sinus, *ib.*; the presidency, etc., of, 1244; acute intestinal obstruction caused by an adherent vermiform appendix forming a band associated with fetal arrangement of the peritoneum, 1334; hæmorrhagic erythema with Bright's disease, *ib.*; aneurysm of the subclavian artery treated by

ligature of the first portion, followed in thirty-eight days by the removal of the aneurysm, *ib.*; annual general meeting, election of council, etc., 1335
 Society Clinical, Manchester, elephantiasis of vulva, 22; suprapubic prostatectomy, *ib.*; case of mental and nervous disease, *ib.*; fracture of shaft of ulna associated with dislocation of head of radius, 215; operation for uterine fibroids, *ib.*; relief of suffering in obstetric practice, *ib.*; the operative treatment of malignant disease of the breast and uterus, 603; aseptic versus antiseptic surgery, 853
 Cremation of England, annual meeting of, 708
 Dermatological of Great Britain and Ireland meeting of, 280, 537, 796, 1162, 1337
 Epidemiological, the prospect of abolishing tuberculosis, 19; epidemic cerebro-spinal meningitis, 276; ten years' experience of typhoid fever in a midland town, 536; black-water fever or hæmoglobinuric fever, 730; relations of bacteriology with epidemiology, 1094; typhoid fever in the Netherlands, 1278
 First Aid, French, notes on, 1127
 Graphic, St. George's Hospital, annual meeting of, 1514
 Gynecological, British, annual meeting, 155, 412; list of officers, *ib.*; presidential address, *ib.*; specimens, 29, 712, 1220; the germ theory of disease, 730; adenoma of endometrium, 792; abdominal causes of death after colicotomy, 1096; treatment of gonorrhœal salpingitis, 1220; double pyosalpinx, *ib.*
 Harveian of London, adhesions and their consequences, 153; list of officers of, 139; president's address, 276; election of officers, *ib.*; "conversazione," *ib.*; cystic hygroma of neck, 342; congenital deformities, *ib.*; a case of mumps with marked enlargement of the spleen, *ib.*; facial and palatal paralysis, *ib.*; diphtherial membranous tracheitis with temporary obstruction of the right bronchus in the adult, *ib.*; varieties of eczema and their treatment, 473; vanishing tumours, 599; a new form of ether inhaler, 601; modern views on gout in relation to treatment, 728; excision of malignant growths of large intestine, 907; syringomyelia with pharyngeal and laryngeal symptoms, *ib.*; complete paralysis of left spinal accessory nerve, *ib.*; paresis of left side of palate, pharynx, and left vocal cord and right side of tongue, *ib.*; spasmodic torticollis, 908; calcification of adherent pericardium, *ib.*; coxa vara, 1029; congenital dislocation of the hip, *ib.*; aneurysm, *ib.*; oblique fracture of the humerus treated by wiring, *ib.*; extensive lupus erythematosus, *ib.*; disseminated sclerosis, *ib.*; paralysis of trapezius muscle, *ib.*; treatment of locomotor ataxia by exercises, *ib.*; a series of cases of arthromy for the relief of pain and for the removal of synovial fringes, loose bodies, and fibro-cartilages, 1219; considerations as to the etiology and significance of dilated heart, 1276; diseases of myocardium, 1277
 Hunterian, diseases of the nose in relation to general diseases, 346
 Italian, of the Medical Press, formation of, 119
 Italian "Pro Infantia," lectures by, 119
 Italian for the Study of Malaria, meeting of, 119
 the Jenner and Lord Herschell, 767; the annual report of, 864; request for information as to agitation against vaccination, 868
 Lancashire and Cheshire for the Permanent Cure of the Feeble-minded, meeting of, 1175
 Laryngological, of Berlin, honorary members of, 620, 630; the "jubilee" of, 630
 Laryngological, Italian, subjects of discussion at annual meeting of, 1533
 Laryngological, of London, meeting of, 90, 1397; annual meeting and list of officers, 279
 Life Saving, annual meeting of, 1445
 London School Nurses, annual meeting of, 1540
 Medical, Athens, officers of, 906
 Medical Benevolent, Birmingham, registration of as a friendly society, 1374; annual dinner of, *ib.*
 Medical Benevolent Fund of Ireland, annual meeting of, 1434
 Medical, Berlin, and female members, 493
 Medical, Birkenhead, fee for certificates under Workmen's Compensation Act, 537; meningitis, *ib.*; meeting of, 912, 1033; officers, etc., of, 1282

Society Medical, Folkestone, meeting of, 347
 672
 Medical, Glasgow Eastern, list of officers of, 1335
 Medical, Glasgow Southern, pneumonia and bronchitis, 278; the prevention of tuberculosis, 344
 Medical, Islington, meeting of, 1397
 Medical, Kidderminster, meeting of, 280, 911
 Medical, of London, the conduct of the heart in the face of difficulties, 85; appendicitis with diffuse peritonitis, 211; operation for impacted stone in the ureter, *ib.*; coxa vara after operation, 405; cerebellar abscess, operation, recovery, *ib.*; so-called pharyngomycosis lepto-thricia, *ib.*; Graves's disease in a male, *ib.*; a large thoracic aneurysm, *ib.*; subcoracoid dislocation of head of humerus with fracture of great tuberosity, *ib.*; auto-intoxication and its relation to the treatment of disease, 535; Fothergillian prize and medal, 536; annual dinner of, 617, 712; radical operation for inguinal hernia, 664; deaths from functional nervous disease, 792; certain points in the pathology of the pericardium, *ib.*; cephalohydrocele, 906; recurrent cancer of breast cured by oophorectomy and thyroid extract, *ib.*; results of gastrectomy by Albert's method, 907; non-union of fractured humerus, *ib.*; pachydermatocele of scalp, *ib.*; epileptiform convulsions following injury to head, *ib.*; some complicated cases of appendicitis, 1028; effects of nitrogen gas on the excretion of urea and uric acid, *ib.*; the relative excretion of the nitrogenous waste products in a case of liver abscess, *ib.*; report of committee on Mr. Battle's case illustrating the value of Coley's fluid in the treatment of inoperable tumours, 1156; election of officers, *ib.*; reports, 1157; encysted calculi in the urinary bladder, *ib.*; resection of the large intestine, *ib.*; Shakespeare and, 1201; "conversazione" at, 1238
 Medical, Manchester, annual meeting, 155; list of officers, *ib.*; president's address, 345; the operative treatment of typhoid perforation of the intestine, *ib.*; death from inhalation of poisonous gas, 670; ruptured tubal pregnancy, *ib.*; communications, *ib.*
 Medical, Midland, meeting of, 604, 671, 735, 795, 855, 910; officers, etc., of, 971
 Medical, Newport, meeting of, 25, 347, 539
 Medical, Northumberland and Durham, tar acne, 215; malignant pustule, *ib.*; gastroenterostomy, 216; bone transplantation, *ib.*; operation for perforated gastric ulcer, *ib.*; thoracic aneurysm, *ib.*; functional opisthotonos, *ib.*; sphygmometer and new form of sphygmograph, *ib.*; meeting of, 538; pseudo-hypertrophic paralysis, 794; excision of the upper jaw, *ib.*; unreduced fracture and dislocation of elbow, *ib.*; varicose aneurysm of femoral artery, *ib.*; gall stones, *ib.*; removal of malignant growth in neck, together with pneumogastric nerve, *ib.*; sarcoma of meninges, *ib.*; musical heart murmurs, *ib.*; aneurysm of aorta communicating with superior vena cava, *ib.*; specimens, *ib.*
 of Medical Officers of Health, the prevention of tuberculosis, 153, 417; diphtheria especially with regard to the duration of infection and the use of antitoxin as a prophylactic, 413; the duties of medical officers of health in relation to small-pox in view of the alterations in the law of vaccination, 736; the use of antiseptics in food, 969
 Medical, Oxford, meeting of, 478, 437
 Medical Protection, East Suburban, and the Midwives Bill, 1537
 Medical Protection, London and Counties, annual meeting of, 980
 Medical Protection and Medico-Ethical, East London, meeting of, 384
 Medical Sickness and Accident, meeting of executive committee of, 178, 356, 621, 920, 1257; the age limit of, 1060; annual meeting of, 1344
 Medical, South-West London, meeting of, 24, 157; some points in the treatment of tuberculosis, 419
 Medical Students Debating, Leeds, address by Professor A. Macalister to, 180; annual extempore prize speaking at, 826
 Medical, Ulster, post-nasal growths, 89; operation for perforated typhoid ulcer, *ib.*; nephrorrhaphy for movable kidney, *ib.*; Kraske's operation for cancer of rectum, 90; cases, 410, 1032, 1223; microscopic specimens, 410; the prevention of tuberculosis, *ib.*; pneumonia, *ib.*; topographical anatomy, 667; fetal mon-

- sters, *ib.*; abscess of liver, 1032; an unnoticed cause of dyspepsia, *ib.*; acute pericarditis, 1223; acute circumscribed cutaneous oedema, *ib.*; gastric tetany, *ib.*; Belfast Board of Guardians and consulting fees, *ib.*
- Society, Medical, of Vienna, annual meeting of, 929
- Medical, West Penwith, meeting of, 1337
- Medical, Wigan, annual meeting of, and list of officers, 479; meeting of, 1467
- Medical, Wood Green and District and the Midwives Bill, 1537
- Medico-Chirurgical, Bradford, meeting of, 156, 216, 347, 691, 911, 1225
- Medico-Chirurgical, Bristol, meeting of, 414, 736, 1099, 1282
- Medico-Chirurgical, Edinburgh, cases, 20, 212, 343, 669, 1279, 1464; specimens, 21, 212, 343, 669, 1150, 1279, 1464; exhibits, 21; aphasia following abscess of temporo-sphenoidal lobe, 212; diseases of the cerebellum, *ib.*; the treatment of ozena, 343; movable kidney, *ib.*; peritonitis and increased peristalsis, 669; etiology of gout, *ib.*; exhibit, 670; the history and clinical features of a recent outbreak of typhoid fever in Edinburgh, 1159; hereditary syphilitic osteitis, 1467
- Medico-Chirurgical, Glasgow, meeting of, 414, 538, 604; officers of, 1282
- Medico-Chirurgical, Leeds and West Riding, the serum treatment of diphtheria, 213; ocular phenomena associated with Cheyne Stokes breathing, 411; the spread of typhoid fever, *ib.*; ligature of the common carotid for hæmorrhage from the ear, *ib.*; specimens, 411, 601, 852, 1224; malignant disease of œsophagus, 601; appendicitis, 670; oedema of the lungs, *ib.*; annual dinner, etc., of, 826; cases, 852, 1224; operative treatment of typhoid perforation, 1097; foreign body in œsophagus, *ib.*; diagnosis of cerebellar lesions, *ib.*; primary abscess of the kidney, 1223; chronic inversion of the uterus, 1224; gout, *ib.*; annual meeting, *ib.*; election of officers, *ib.*
- Medico-Chirurgical, Norwich, meeting of, 672
- Medico-Chirurgical, Nottingham, meeting of, 90, 280, 478, 603, 672, 706, 1008
- Medico-Chirurgical, Sheffield, meeting of, 157, 736, 970, 1033; dinner by Sir W. Broadbent, 1249
- Medico-Chirurgical, West Kent, meeting of, 414, 911, 1164
- Medico-Chirurgical, West London, meeting of, 156, 346, 672, 912, 1163, 1307
- Medico-Ethical, Bradford, list of officers of, 216
- of Members of the Royal College of Surgeons and the supplementary Charter of the College, 1381
- the Midwives, Transactions of, 1481
- Neurological of London, annual meeting and list of officers, 346; the localisation of intracranial tumours, 868
- Obstetrical, Edinburgh, specimens, 214, 476, 1220; instrumental assistance in parturition, 214; the pessary in gynaecological practice, 476; vaginal hysterectomy for cancer, 477; fatal case of œdema glottidis occurring during pregnancy, 1220; puerperal hyperpyrexia, 1221; labour complicated by slight pelvic contraction, *ib.*; peritoneal effusion in the female, *ib.*
- Obstetrical of London, ectopic gestation, 86; vulvitis in children, *ib.*; specimens, 87, 342, 599, 1159, 1466; president's address, 341, 599; election of officers, *ib.*; election of honorary Fellows, *ib.*; votes of thanks, 342; cancer of Fallopian tube, 599; puerperal eclampsia, 908; antero-posterior positions of the head impeding labour, 909; fibroid of the broad ligament weighing 44½ lbs. (20 kilos.) removed by enucleation, recovery, 1159; hydramnion in cases of homologous twins, 1465
- Obstetrical and Gynaecological, Glasgow, meeting of, 24, 281, 976, 1225, 1536
- Obstetrical and Gynaecological, North of England, specimens, 88; antistreptococcus serum in puerperal septicaemia, 88; paper, 89; meeting of, 280, 538, 1163, 1337
- Ophthalmological, Russian, formation of, 512
- Ophthalmological of the United Kingdom, rapid changes in refraction in connection with diabetes, 275; the stereoscopic examination of skiagraphs of foreign bodies in the eye and orbit, 276; card specimens, 276, 666, 1466; implantation cysts of the iris, 665; green vision in a case of tabes dorsalis, *ib.*; albuminuric retinitis in a child, *ib.*; strabismus fixus, *ib.*; admission of women as members of, 682; tumour of iris, 1158; unusual form of opacity of cornea, *ib.*; vascular formation in the vitreous in diabetes, 1158; sloughing of cornea rapidly following on fracture of the base of the skull, *ib.*; primary carcinoma of eyeball, *ib.*; carcinoma of the eye secondary to that of the lung, *ib.*; traumatic ptosis, *ib.*; piece of glass localised in the eye by means of the Roentgen rays, *ib.*; eyeball with fragment of steel lodged in its coats, *ib.*; solid oedema of eyelids, *ib.*; artificial eyes, *ib.*; filamentary keratitis, *ib.*; orbital tumour, *ib.*; a case of obliteration of a branch of the retinal artery following frequent attacks of temporary amblyopia, 1466; recovery of sight after partial occlusion of the central artery, *ib.*; traumatic division of both optic nerves, *ib.*; the operative treatment of myopia, 1535
- Society, Optical, Yorkshire, formation of, 1546
- Orthopædic, British, meeting of, 537
- Pathological of London, primary carcinoma of the liver, 18; apparent thickening of subcutaneous veins, *ib.*; two cases of intussusception, 19; congenital deformities of limbs, *ib.*; card specimens, 19, 151, 341, 508, 728, 852, 968, 1092, 1217; sequel to a case of papilliferous carcinoma of the thyroid gland, 150; fibroma molluscum of the skin and brachial plexus, *ib.*; crushing fracture of the cervical spine, 151; cystic suprarenal bodies, *ib.*; tuberculous cholangitis, *ib.*; multilocular tumour from the inguinal region in a female, *ib.*; congenital hypertrophy of the pylorus, 340; the buffy coat, *ib.*; dilatation of the œsophagus, *ib.*; alveolar sarcoma of the rectum, 341; carcinoma of stomach, *ib.*; umbilical polypus, *ib.*; discussion on pseudo-tuberculosis, 471, 597; experiments upon the toxicity of the urine, 727; epithelial tumours of the forehead, 728; diffuse syphilitic change in the liver, *ib.*; congenital cyst at the back of the tongue, 850; rheumatic nodules, 851; cystic disease of the breast in a boy aged 3 years, *ib.*; hypertrophy of the pituitary body without acromegaly, *ib.*; vacuolated carcinoma of the antrum, *ib.*; biliary calculi in children, *ib.*; lesions of the adrenals in the insane, *ib.*; carcinomatous stomach removed by gastrectomy, 967; splenic anaemia in infants, *ib.*; three cases of sprue, *ib.*; casts of hearts with dilated right ventricles, 968; paramæcium coli in cysts of the liver, *ib.*; peculiar lardaceous liver, *ib.*; congenital tuberculosis in the calf, 1091; a case of apparently aseptic supuration of the knee-joint following injury, *ib.*; chromocyte clumping in acute pneumonism, *ib.*; the pathology of diphtheritic paralysis, 1092; tumours from the neck containing giant cells, *ib.*; tuberculous ulcers of the stomach in children, *ib.*; report of the committee appointed to consider the nomenclature of the condition sometimes described as pseudo-tuberculosis, 1216; infections by unsound meat, *ib.*; chemical composition in relation to germicidal action, 1217
- Pathological, of Manchester, glandular carcinoma of œsophagus, 23; intracranial supuration of otitic and rhinitic origin, *ib.*; pathology of cubitus varus following fracture of the lower end of the humerus, 345; Charcot's joint disease, *ib.*; tuberculosis of liver, *ib.*; ulceration of the cæcum, *ib.*; card specimens, 345, 1336; the diphtheria bacillus, 411; diverticulum of the bladder, 412; malignant renal growth, *ib.*; rupture of the heart, 734; ureteral calculi, *ib.*; staining of sheath on nerve fibres, *ib.*; unilateral pulsus paradoxus and indurative mediastino-pericarditis, 1336; primary sarcoma of sigmoid flexure, *ib.*; teratoma of lesser peritoneal cavity, *ib.*; pathology of the fetal vesicles, *ib.*
- Pathological, Reading, the metric system, 1137
- Pathological and Clinical, Glasgow, meeting of, 854; officers of, 1282
- Pathological Diagnosis, Liverpool, the work of, 56; annual report of, 1128
- Pharmaceutical, of Great Britain and the sale of poisons, 117, 166; the annual dinner of, 1235; the presidency of, 1430
- Psychical Research, officers of, 1109
- Red Cross, British, work of in the Græco-Turkish war, 171
- Red Cross, Greek, work of in the Græco-Turkish war, 171
- Red Cross, Russian, report of, 1089
- for the Relief of Widows and Orphans of Medical Men, quarterly court of directors of, 188, 1009
- Royal, the conversazione of, 1112, 1547; new Fellows of, 1118, 1169
- Royal Agricultural, and the prevention of tuberculosis, 482
- Society, Royal Medical, Edinburgh, dinner of, 686
- Royal Medical and Chirurgical, aortic aneurysm as a cause of hypertrophy of the left ventricle, 84; aortic aneurysm involvement of sensory nerve roots, sudden paraplegia, laminectomy, death, *ib.*; gonococcus joint disease in infants, secondary to purulent ophthalmia, with twenty-three cases, 210; the effects produced in the human subject by the administration of definite mixtures of nitrous oxide and air and nitrous oxide and oxygen, 404; the treatment of aneurysms by extirpation, 532; annual general meeting, 556; report of Council, *ib.*; the award of the Marshall Hall prize, *ib.*; president's address, *ib.*; election of officers and council, *ib.*; the morbid anatomy and pathology of Dr. Bradshaw's case of myelopathic albumosuria, 662; multiple calculi removed from narrow-necked sacculi connected with male bladder, 789; the treatment of pulmonary tuberculosis by antituberculous serum, 790; on prevesical hernia with the mention of a case in which subacute strangulation occurred, 905; the clinical examination of the hæmic leucocytes, 1026; dysarthria and delay in learning to speak following cerebral disturbance in infancy, 1029; rheumatic pericarditis, 1155; a contribution to the study of alkaptonuria, *ib.*; the spinal animal, 1276; the result of segregation of cases and moving from infected sites in eradicating the Assam epidemic, malaria fever or kala-azar, 1464; the remote prognosis of pericarditis, *ib.*
- Seamen's Hospital and its visiting staff, 54
- for the Study of Inebriety, annual meeting of, 1073
- the Surgical Aid and its methods, 443-506
- Therapeutical, Manchester, the various kinds of aloes, 22; the treatment of hæmatemesis, *ib.*; palliative treatment of paralysis agitans, 1336; artificial calamines, *ib.*; valsois and vasogens, 1337
- Sodium biurate, solvent action of certain British and foreign mineral waters on, 1392
- bromide, cure of morphia, chloral, and cocaine habits by, 896
- chloride, effects of on the secretion of the urine, 793
- salicylate, treatment of scarlet fever with 1274, 1376
- Soil, the temperature of the, 1137; the, as a nursery of pathogenic organisms, 1374, 1440
- Soldier, the comfort of the, 130; the German, the food of the, 1137
- Soldiers, frozen meat for, 419
- Soloids, carbolic acid, 1340
- Sore, soft (? syphilitic), peripheral neuritis following, 1270
- Sorrento, theatrical performance in aid of hospital at, 769
- Soudan, the operations in the, 1195; honours for the campaign in, 1216
- South Africa, and consumptive patients, 98, 1107, 1310; information as to, 1259
- Australia, the prevention of tuberculosis in, 865
- London, skilled nursing in, 640
- Shields, the prevention of tuberculosis at, 740
- Uist, vaccination certificates in, 757
- Wimbledon, proposed cottage hospital for, 1380
- Southam, F. A., Charcot's joint disease, 345
- Southend, a "lady doctor" at, 946
- Southport, conviction under the Vagrants Act at, 295
- Southwark, typhus fever in, 829
- Spa physician, the province of, 24
- Spain, the Roentgen rays in, 641
- Spallanza, the centenary of, 1128
- Spasm, unilateral (hemiplegic) and contracture without paralysis, 1, 67
- Specialism in the United States, 1053
- Specialists and medical etiquette, 1568
- Spectacles for paupers, 1256
- Speculum, parallel expanding rectal, 160
- Spencer, W. G., tuberculous cavities in the lungs giving rise to gaseous metastatic abscesses, 406; wound of a large superficial inguinal artery in which the blood was flowing from the trunk to the thigh, 965; excision of meningo-myelocoele, with skiagraph, 1094
- Spermatocystitis, Gonorrhœic, W. Collam, *rev.*, 858
- "Sperminum Poehl," 1062, 1199
- Spine, lateral curvature of the, its prevention and treatment, 137, 265, 1207; cervical, crushing fracture of the, 151; diseases, and deformity of the, 180

- Spitting nuisance, the, 39
Spleen, enlarged, with thrill and "bruit," 151;
marked enlargement of in a case of mumps,
342; enlarged, with rheumatoid arthritis in a
child, 534
Splenectomy for rupture, 475
Splint, new, for fractured clavicle, 1093
Sponges (aseptic) 1470
Springer, on mental disturbances in children,
924
Sprue, three cases of, 967
Spurway, J., bronchitis excited by sulphurous
acid, 1260
Squire, B., the Fullerian endowments, 888
Squire, J. E., the prevention of tuberculosis,
248, 315
— P., Squire's Companion to the British
Pharmacopœia, *rev.*, 673
— P. W., Squire's Companion to the British
Pharmacopœia, *rev.*, 673
— Dr. W., obituary notice of, 881
Squire's Companion to the British Pharma-
copœia, P. and P. W. Squire, *rev.*, 673
Staining, the Nervous System, Methods of, W.
R. Jack, *rev.*, 92; of health of nerve fibres,
734
Stammering, books on, 771
Stanley, D., irregular ataxia, 1281
Statistics, vital, 1565
Steamers. ocean, consumptive passengers on,
682, 1357
Stedman, F. O., injury to the knee-joint, 697
— T. L., Twentieth Century Practice of
Modern Medical Science, *rev.*, 281, 1282
Steel, removal of a fragment of from the retina
with the electro-magnet, 335; fragment of
lodged in coats of eyeball, 1158
Steen, R. H., rupture of heart, 1154; osteoma of
dura mater, *ib.*
Stenosis, mitral, and its early diagnosis, 23;
syphilitic, of both bronchi, 965
Stephen, W. H., large gall stone, 704
Stereoscopic examination of skiagraphs of
foreign bodies in the eye and orbit, 276
Sterilisers, milk, 253
Sternogoniometer, the, 1041
Steven, J., pneumonia and bronchitis, 278
Stevenson, L. E., the causation of epidemic
goutre, 124; dermatitis caused by rhus toxicod-
endron, 772
— T., threatened death under chloro-
form, 661
Stewart, A., sarcoma of leg, 278
— J., ligature of the common carotid for
hæmorrhage from the ear, 411; primary
abscess of the kidney, 1223
— Sir T. G., a case of unilateral (hemi-
plegic) spasm and contracture without para-
lysis, 1, 67; The Good Regent, a chronicle
play, 914; speech of at the Tuberculosis Con-
gress, 1345
— Surgeon-General W., army convalescent
homes, 701
— W. R. H., influenza and otitis media,
964
Stiles, H. J., on dissemination of cancer of the
breast, 1452
Still, G. F., congenital hypertrophy of the py-
lorus, 310; a correction, 456; rheumatic
nodules, 851; biliary calculi in children, *ib.*;
oxyuris vermicularis in children, 898; tuber-
culous ulcers of the stomach in children,
1092
Stillbirths, and undertakers, 560; information as
to, 1075
Stirling, A. W., phosphaturia, 772
Stockman, R., the cause of so-called phosphorus
necrosis of the jaw in match makers, 9, 132
Stockport, the St. John Ambulance Association
at, 992, 1072, 1316
Stoker, G., oxygen inhalations in the treatment
of acute and chronic diseases of the lungs, 559,
712
Stokes, Sir W., on the rhinoplastic operation,
325; amputation of the lower jaw, 1449
Stomach, perforating ulcer of, 87; carcinoma of,
341; dilatation of, 403; idiopathic dilatation of,
412; fourteen months without a, 867; car-
cinomatous, removed by gastrectomy, 967;
diseases of at the German Medical Congress,
1041; tuberculous ulcers of in children, 1092;
cancerous, rupture of during operation, 1215;
some cases illustrating the surgery of the,
1265; an inquiry into the quantity of volatile
acids in the, 1271
Stone, impacted in the urethra, operation for,
211; in the bladder with an ordinary pin as a
nucleus, 1275
Stoney, R., a urethral syringe, 28
Stools, green, in enteric fever, 132; in enteric
fever and dysentery, 469, 712
Story, J. B., advancement of the recti muse
of the eyeball, 1095; recovery of sight after
partial occlusion of the central artery, 1446
Strabismus, fixus, 666
Strangulation by a solitary band, operation,
recovery, 1275
Stricture, urethral, in which death occurred 15
hours after passing a catheter, 530; fibrous, of
the rectum, 1331
Stroebe, O. H., Ueber die Wirkungen des neuen
Tuberculin TR auf Gewebe und Tuberkel-
bacillen, *rev.*, 25
Strong, R. H., tonsillar calculi, 1089
Struthers, Sir J., obituary notice of, 561; funeral
of, 563; the will of, 1115
Strychnine in opium poisoning, 1534
Stubenrath, F. C., Das Genus Sarcina, *rev.*, 1167
Students, medical, in Italy, 617, 629
Studsgaard, Dr. C. L., death of, 1131
Sturge, Dr. A., presentation to by the Queen,
1118
— H. H., the case of Dockrell v. Dougall,
1440
Sturgess, G. W., bile inoculation and rinderpest,
556
Sturrock, C. A., a method for the reduction of
dislocation of the hip, 845
Sufferings, relief of, in obstetric practice, 215
Submaxillary region, pulsating tumour in the,
1462
Sugar, as a ration, 105; the derivation of from
albumen, 618
Sulphonal, acute poisoning by, 209
Sulphurous acid, bronchitis excited by, 1260;
vasomotor rhinitis excited by, 1568
Sultan, the, and his surgeon, 1137
Sunshine, east coast, 687
Superannuation of Poor-law medical officers, a
central fund for, 57, 123, 248, 252, 543, 761, 1059,
1174
Suppuration, intracranial, of otitic and rhinitic
origin, 23; intracranial, of rhinitic origin and
scarlet fever, 726; apparently aseptic of knee-
joint following injury, 1091; mastoid, with
hyperpyrexia and jaundice, operation, recovery,
1152
Suprarenal bodies, cystic, 151
— capsule, the surgery of the, 1237
— gland, extract of as a hæmstatic.
467; the pharmacology of, 575; the functions of
the, 1327
Suprarenals, sarcoma of the, 1222
Surgeon, the, of the Sultan, 1137
Surgeons, certifying factory, duties of, 63
Surgery, minor conservative, 148; aseptic versus
antiseptic, 853; A Synopsis of, R. F. Tobin.
rev., 857; of the suprarenal capsule, 1237; of
the stomach, 1265; the cystoscope in, 1329
Sutherland, G. A., albuminuric retinitis in a
child, 666
Sutton, the children at the schools at and Derby
day, 1257
Sutton, J. B., hysterectomy as a conservative
operation, 839
Swearing, aseptic, 572
Swinton, enteric fever at, 451
Switzerland, medical students in, 356
Sydney, proposed new maternity hospital at,
511
Sykes, J. F., Home Hygiene, *rev.*, 858
— W., incubation period of varicella or
chicken pox, 81
Syme, J. O., Neisser's diagnostic stain, 1384
— W. S., the Hunter case, 1351
Symes, W. L., Erb's juvenile form of muscular
atrophy, 409
Symington, J., topographical anatomy, 667; the
acromion, 793
Symonds, C. J., individual value of the sym-
ptoms in perforative peritonitis, more espe-
cially as regards operation, 517
Symons, H. B. T., belladonna for eczema in
children, 576
— W. H., cancer houses, 880
Symphysiotomy for contracted pelvis, followed
by nearly normal labour two years later,
463
Sympson, E. M., obstinate hiccough, 1024
Syngron, Mr. A., bequests by, 1101
Syphilis in the army, 55, 121, 132, 191, 387;
treatment of by injection, 64, 190; a problem
in, 191; the hospital treatment of, 619; rein-
fection in, 927, 1440; second attacks of, 964,
1332; the control of, 984; Treatment of, E.
Gaucher, *rev.*, 1166; in the Public Services,
Treatment of Major F. J. Lambkin, *rev.*, 1468
Syphilitic diseases, their prevention, study, and
treatment, 940, 1130, 1375, 1440
Syringe, a urethral, 28; aseptic aural and nasal
for own use, 1169
Syringomyelia, with pharyngeal and laryngeal
lesions, 607
System (A), of Practical Medicine, A. L. Loomis
and W. G. Thompson, *rev.*, 282; of Medicine,
T. C. Allbutt, *rev.*, 912
Szabárdi, mortality of children in the Charité
Hospital, Berlin, 1177
T.
Tabes dorsalis, pulmonary fibrosis associated
with, 534; green vision in a case of, 665; The
Prescott Method of Treating, J. Leclerc, *rev.*,
797; treatment of by exercises, 1029
Tablets, chocolate-coated, 1340
Tabloids, 1340
Tactics and the army surgeon, 1071
Tafeln zur Diagnose der Farbenblindheit, W. A.
Nagel, *rev.*, 159
Tait, L., infantile uterus, 212; double pyosalpinx,
ib.; "a contribution to the treatment of pus
in the pelvis," 312; multinodular myoma of
uterus, 475; the "causa causans" of typhoid
fever, 879; a charge against the Chairman of
Council, 1439; death of, 1486; obituary notice
of, 1561
Talbot, E. S., Degeneracy, its Causes, Signs and
Results, *rev.*, 415
Tar acne, 215
Tarsus, dislocations of the metatarsus or, 1396
Taste, a question of, 514
Tatte, S., La Pulsation du Pied, *rev.*, 1398
Tawse, G. W. H., cyst of posterior vaginal wall,
531
Taylor, v. Findlater, 706
— F., A Manual of the Practice of Medicine,
rev., 158
— J., A Manual of the Diseases of the
Nervous System, *rev.*, 737; disseminated
sclerosis, 1029
— J. W., ruptured intestine, 474; treatment
of gonorrhœal salpingitis, 1220
Teacher and taught, 292
Teacher, J. H., on William Hunter, 1225
Teeth, the tissues of the, 478; of the recruit,
617, 1117; of Russian school children, 1112
Teetotaler's tippie, 1298
Teovan, A., treatment of pneumonia by iron
perchloride, 596
Temperance, the medical profession and, 708
— Institutions, A. Smith, *rev.*, 1339
Temperature of the soil, 1137
Tempest, J., the case of, 947
Templeton, G., a case of maxillary mamma, 1089
Tendo Achilles, ossification of, 1054
Tennant, J., the epidemic of typhoid fever at
Belfast, 193
Teratoma in lesser peritoneal cavity, 1356
Terret, Vallance v., 320
Terrier, F., Chirurgie du Cœur et du Péricarde,
rev., 1358
Test-chart, an astigmatic, 28
Testes, misplaced, and their surgical treatment,
1385
Tetanus, the treatment of by the intracerebral
injection of antitoxin, 10, 826, 895; acute,
treated with antitoxin, death on the fourth
day, 17; traumatic, the treatment of with anti-
toxins, 337; acute, successfully treated by
antitetanus, 401
Tetany, gastric, 1223
Texas fever. See Fever
Textbook, An American, of Genito-Urinary Dis-
eases, Syphilis and Diseases of the Skin, L. B.
Bangs and W. A. Hardaway, *rev.*, 91; of Mid-
wifery, F. Ahlfeld, *rev.*, 540; An Elementary
of Botany, S. H. Vines, *rev.*, 1164; of Mental
Diseases, W. B. Lewes, *rev.*, 1468
Therapeutics, antenatal, 880, 1062
Therapie der Harukrankheiten, C. Posner, *rev.*,
1168
Thermometers, Toogood's improved clinical,
1102
Theses, Northern University, *rev.*, 674
Thibierge, Le Myxœdème, *rev.*, 1339
Thin, G., the parasite of malaria in the tissues
in a fatal case of blackwater fever, 1325
Thiocol, 666
Thomas, J. L., the value of gloves in operation
work, with a note on cleansing the hands, 140
— J. T., deep water, 57
— W., wrench for clubfoot, 794; traumatic
clubfoot, *ib.*; injury and shortening of the
femur, 1030
— Dr. W. H., death of, 1004
— W. T., the cystoscope in surgery, 1329
Thompson, A. H., tumours of iris, 1158
— E., nursing in Irish workhouses,
808, 880, 1002, 1129; action for libel by, 1069
— Sir H., baronetcy for, 31; on crema-
tion and on death registration, 713
— W. G., A System of Practical Medi-
cine, *rev.*, 282
— W. H., effects of sodium chloride on
the secretion of urine, 793; anæsthetics and
urinary secretion *ib.*

Thompson, W. J., aneurysm of ascending arch of the aorta extending into lung, 22; aneurysm of descending arch of aorta perforating oesophagus, *ib.*
 Thomson, v. Devon, 1314
 (Odessa) acute yellow atrophy of the liver, 232
 — D. G. P., coroners' inquiries and medical evidence, 308
 — J., family proclivities, 688; a case of general paralysis of the insane in a child, 784
 — Dr. J. R., presentation to, 990
 — Sir C., the cerebrospinal fluid in the human subject, 488; dysphagia associated with unilateral paralysis of the eighth and bulbar nerves, 534; the nasal origin of leprosy, 620; empyema of the maxillary sinus, 1218
 Thorax, new instrument for measuring, 1041
 Thorne, Mr. W., death of, 1312
 Thorn, May, after-effects of abdominal section, 264
 — Sir R., The Administrative Control of Tuberculosis, *rev.*, 1164
 — W. B., obstinate hiccup, 1024; a case of aortic disease with musical bruit remedied by baths and exercises, 1094
 Thornthwaite, W., degrees and diplomas for opticians, 631
 Throat (The) and Nose and their Diseases, L. Browne, *rev.*, 913
 Thurnam, R., a correction, 324
 Thyms gland, extract of in exophthalmic goitre, 12
 Thyroid gland, papilliferous carcinoma of the, 150; the pathology of the, 577, 649; extract of in cancer of the breast, 906
 Thyroiditis, acute, suppuration, operation, recovery, 1462
 Tibia, chronic (circumscribed), abscess in, 1031
 Tick fever. *See* Fever
 Tidey, S., the Hunter fund, 1358
 Tilley, H., syringomyelia with pharyngeal and laryngeal lesions, 907; complete paralysis of left spinal accessory nerve, *ib.*; paresis of left side of palate, pharynx, and left vocal cord and right side of tongue, *ib.*
 Tillie, Dr. J., obituary notice of, 58
 Tinnitus and electricity, 455
 Tirah, the medical service in the campaign to, 60
 Tirard, N., Albuminuria and Bright's Disease, *rev.*, 1226
 Title of physician. *See* Hunter, H. K.
 Titles, medical, 5, 6, 575, 637, 1441
 Tiverton, the district medical officers of and public vaccination, 1359
 Tobin, R. F., A Synopsis of Surgery, *rev.*, 857
 Tongue, congenital cyst at the back of the, 850; paresis of right side of, 907; excision of posterior half of the, 1093
 Tonkin, A. J., scarlet fever and intracranial suppuration of rhinitic origin, 726
 Tonsil, carcinoma of the, 724
 Tonsillitis, acute suppurative, with convulsions, 16; rheumatic, 274
 Tonsillectomy and hemorrhage, 951
 Tooth impacted in left bronchus, gangrene of left lung, death, 401
 Torticollis, spasmodic, 908
 Totherick, Dr. J. Y., resolution of sympathy as to death of, 558; obituary notice of, 633
 Totland Bay as a health resort, 192, 323
 Tourniquet, the universal, 218
 Townsend, C. F., Chemistry for Photographers, *rev.*, 1537
 Tracheitis, diphtherial membranous, with temporary obstruction of the right bronchus in a child, 342
 Tracheotomy tube, anaesthetics through a, 1534
 Trachoma, and epidemic eye affection, 298; and race, 1086
 "Trade diseases," lectureships on, 1441
 Trades, dangerous, report on, 1059
 Training, Physical, its Theory and Practice, H. R. Seymour, *rev.*, 218
 Transactions and Reports, *rev.*, 1101
 Transvaal, the plague in, 500, 626
 Trapezius muscle, paralysis of, 1029
 Treatise (A) on "Unripe" Cataract, W. A. McKeown, *rev.*, 605
 "Tremendous experiment," the, 36
 Trephining, parietal osteoma heated by, 597; in traumatic epilepsy, recovery, 1083
 Tresillian, F., a case of acute sulphonal poisoning, 209
 Tressider, R., the Surgical Aid Society and its methods, 506
 Trevelyan, E. F., the serum treatment of diphtheria, 213; the diphtheria bacillus, 411
 Trichorhexis nodosa, 1280
 Trinidad, a new medical ordinance for, 615, 606; the study of tropical diseases in, 1234; annual report of surgeon-general of, 1444

Tropics, age for residents in the, 1011
 Trotter, the prevention of tuberculosis, 344
 Trusses for paupers, 1256
 Tuith, painful, 867
 Tubby, A. H., multiple sarcoma of skin, 534; anterior dislocation of the hip probably congenital, 535; on operations for gastric hæmorrhage and perforation, 1267
 Tube, Fallopiian, cancer of, 599
 Tubercle of the breast, 634
 Tuberculin, the use of in the Liverpool Royal Infirmary, 172; the test by and dairies, 677, 1129; the test by in life assurance, 1317; treatment of pulmonary tuberculosis with, 1348
 — T. R., the Action of upon the Tissues and Tubercle Bacilli, H. Stroebe, *rev.*, 25
 Tuberculosis, the prospect of abolishing, 10; the prevention of, 57, 97, 173, 124, 153, 173, 222, 245, 248, 286, 309, 315, 344, 362, 367, 388, 410, 412, 417, 482, 541, 609, 676, 739, 816, 826, 835, 916, 980, 997, 1038, 1104, 1186, 1187, 1228, 1303, 1320, 1420, 1531; and canaries, 63; bovine, the extirpation of, 98; sanitary authorities and, 108; in Poor-law infirmaries, 167; influence of the milk supply on the spread of, 169, 490; report of subcommittee of Parliamentary Bills Committee on, 242; the Government and the stock-keepers, 286; in cattle, 286, 917; of liver, 345; and the British Medical Association, 362; and parrots, 455; in dairy stock, 482; in railway carriages, 614; in Ireland, 666; the death-rate from, 667; the bacteriological aspect of, *ib.*; distribution of in Ireland, *ib.*; private legislation on in dairies, 677; the detection of infection by in second-hand clothing, 678; inhalation of formalin in, 772, 1440; pulmonary, the treatment of by anti-tuberculous serum, 790; the notification of in South Australia, 865; in milk, 917; pulmonary, treatment of, 951; in the Queen's herd, 986; congenital in the calf, 1091; under the Poor Law, 1115; The Administrative Control of, Sir R. Thorne, *rev.*, 1164; the problem as to in the United States, 1236; climate and sea voyages in the treatment of, 1321, 1354; The Treatment of with Cinnamic Acid, A. Landerer, *rev.*, 1327; the discussion on at the Berlin Congress, 1346; and hospital milk, 1355
 Tumour, multilocular, from the inguinal region in a female, 151; cerebral, some uncertainties in the diagnosis of, 333; peritoneal, 745; cerebral, a patient after removal of, 534; large malignant frontal with underlying bone, removal of, 664; nevoid of the intestine, removal of, 843; "vanishing of the abdomen," 903; of the upper jaw, 1093; orbital, 1158; of scapula, 1282; pulsating in the submaxillary region, 1462
 Tumours, facial, 278; of oesophagus, 229; vanishing, 509, 702; epithelial of the forehead, 728; intracranial, the localisation of, 868; from the neck containing giant cells, 1022; inoperable, Coley's fluid in, 1156; of iris, 1158; vascular, of abdominal wall, 1397
 Turbinate, displaced middle, which obstructed the nasal passage for ten years, 660
 Lurin, the antirabic institute at, 1459
 Turner, G. R., the Seamen's Hospital Society and its visiting staff, 54; non-union of fractured humerus, 907
 — W., achondroplasia, 1092
 Turney, H. G., aortic aneurysm, involvement of sensory nerve roots, sudden paraplegia, laminectomy, death, 84; post-anaesthetic paralysis, 1097
 Turtle, Dr. F., presentation to, 825
 Tweedie, Mrs. A., George Harley, F.R.S., The Life of a London Physician, *rev.*, 797
 Twentieth Century Practice of Modern Medical Science, T. L. Stedman, *rev.*, 281, 1282
 Twins, homologous, hydræmia in cases of, 1465
 Typhilitis wrongly diagnosed as inflammation of the vermiform appendix, 722
 Typhoid fever. *See* Fever enteric
 — poisoning and sewer gas, 725
 Tyres, bicycle, 1260
 U.
 Ulcer, perforating of stomach, 87; perforated typhoid, ulcer for, 89; perforated gastric, operation, recovery, 475; gastric, surgical treatment of, 695; perforating gastric, 734; multiple rodent, 795; of the oesophagus, 909; perforating gastric, two cases of operation for, 962
 Ulcers, cancerous, constant warmth in the treatment of, 297; neurotic in the mouth, 900, 1213; tuberculous of stomach in children, 1092
 Urticaria, sycosiforme, 475
 Ulna, fracture of shaft of associated with dislocation of head of radius, 213

Undertakers and stillbirths, 560
 Union, Bradford and West Riding Medical, formation of, 452; confirmation of the rules and by-laws of, 612
 — County of Durham Medical, and contract practice, 290, 1055, 1556
 — Medical Defence, address of, 387; annual meeting of, 917; officers, etc., of, 1197
 — Railway Medical Officers, proposed formation of, 762
 United States of America, medical schools in the, 27; permanent hospital for the army of, 28; a new military hospital in, 39; Christian Science in the, 40, 103, 230; sale of cocaine in, 204; the prevention of tuberculosis in, 223, 338, 677; the prevention of hospital abuse in, 313; medical students in universities of, 640; leprosy in the, 829; antivaccination in, 928; professional secrecy in, 929; the conscientious objector in, 1059; specialism in, 1053; duration of courses of medical education in, 1075; Principal Poisonous Plants of the, V. K. Chestnut, *rev.*, 1101; the tuberculosis problem in, 1236; the study of tropical diseases in, 1299; consumption of quinine in, 1316; secret commissions in the, 1356; Hahnemann in the Congress of, 1427
 Universities, German, statistics of, 802
 University of Aberdeen, proposed subdivision of chair of natural history, 509; teaching of tropical medicine, 509, 631; proposed gymnasium, 509; examiners, 567; honorary degrees, 631; the Gifford lectureship, *ib.*; anthropological museum, 878; graduation ceremony at, 947
 — of Berlin, students at, 175
 — of Birmingham, contribution to funds of, 431
 — of Brussels, M.D. the degree of, 186, 1200; pass lists, 567
 — of Cambridge, the professorship of pathology at, 172, 427; benefactions, 251; degrees, 251, 380, 508, 639, 706, 828, 1134, 1252, 1513; assistant to the Downing professor, 319; John Lucas Walker studentships, *ib.*; a University Association, *ib.*; benefactions, 380; pharmaceutical chemistry, *ib.*; electoral Boards, 449; Balfour studentship, *ib.*; botany, 508; agricultural science, *ib.*; examination for degrees, 508, 829, 1444; master of surgery, 639, 1513; honorary degrees, 706, 1133; Allen studentship, 706; diploma in public health, 828; council of the Senate, 829; pass lists, 1068, 1196, 1559; speech of Public Orator on admission of Sir W. Turner to hon. D.Sc., 1133; history of anatomy, 1134; zoological stations, *ib.*; pathology, 1196; science scholarships, *ib.*; long vacation course, 1252, 1362, 1513; new appointments, 1252, 1513; speech of Public Orator on admission of Professor Kowalevsky to hon. D.Sc., 1252; medical science buildings, 1315; examiners, *ib.*
 — of Chicago, the professorship of obstetrics and gynaecology at, 1781
 — of Colling, medical education at, 512
 — of Dublin, conferring of degrees at, 449, 1061
 — of Durham, pass lists, 982, 1068, 1134; conferring of degrees at, 1252
 — of Edinburgh, annual report, 60; honorary degrees, *ib.*; Fellowship and prizes, *ib.*; Universities Commission, 61; benefactions, *ib.*; library, *ib.*; appointments, *ib.*; resignation, *ib.*; the Cameron prize, 310; lectures on teratology and antenatal pathology in connection with, 320; diseases of tropical climates, 508; research grants, 509; extra-academical teachers, *ib.*; the second professional examination at, 514; the chair of physiology in, 613, 1315, 1426, 1549; honorary degrees, 706; meeting of University Court of, 707; pass lists, 884, 947, 982, 1252; graduation ceremony at, 982; meeting of general council of, 1334; students at, *ib.*; statistics of preliminary examinations at, 1196
 — of Glasgow, the chair of pathology at, 363, 440, 810, 928; pass lists, 984; graduation ceremony at, 1068
 — of Halle, mixed clinical classes at, 938
 — Harvard, proposed college of comparative physiology at, 550
 — of Jurjew, students at, 449
 — of Kiel, the chair of surgery at, 333
 — Laval, proposed chair of pathological anatomy at, 1445
 — of Lille, lectureship in laryngology at, 629
 — London, pass list, 61, 280, 1377; meeting of convocation of, 120, 187, 1196; books for the intermediate M.D. examination of, 831; report of Standing Committee of Convocation, 1134; the future of the, 1179; and the Royal College of Science, 1240; leading article on, 1544

- University, McGill, the medical faculty of, 52
— of Melbourne, pass and pluck at the
— medical faculty of 503, 698
— of Mexico, the climatological labora-
— tory of, 769
— of Oxford, Radcliffe travelling fellow-
— ship, 187; Dr. Kymer and, 821; examinations,
— 1133; pathology at, 1489; honorary degrees at,
— 1559
— of Paris and the Berlin Congress on
— Tuberculosis, 1127
— of Pennsylvania, new laboratory at,
— 698; the Professorship of Medicine at, 1542
— Royal of Ireland, pass lists, 1068,
— 1134, 1253; election of representatives on
— Senate of, 1238; new member, 1253; Sir. Gabriel
— Stokes, *ib.*; the conjoint Board in England,
— *ib.*; exhibitions, etc., *ib.*; the recent election
— of senator in, 1430
— Victoria, pass lists, 885; meeting of
— convocation of, 1134; conferring of degrees at,
— 1513
— of Vienna, students at, 1119
— of Wales and the late Lord Herschell,
— 707
Unverricht, preparations of digitalis, 1041
Upton, J. R., the assistant's certificate of the
— Society of Apothecaries, 879
Urachus, patent, operation, cure, 1396
Urea, effects of nitrous oxide gas in the excre-
— tion of, 1028
Ureter, operation for stone impacted in the, 211
Urethra, ruptured, a useful manoeuvre in some
— cases of, 849; excision of for impermeable
— stricture, 1554
Uric acid, and gout, some points in the physi-
— ology of uric acid, 205; effects of nitrous oxide
— gas on the excretion of, 1028; behaviour of in
— the organism, 1042
Urinary organs from a case of impacted calcu-
— lus, 1031
Urine, experiments upon the toxicity of the, 737;
— effects of sodium chloride on the secretion of,
— 793; anaesthetics and secretion of, *ib.*; treat-
— ment of nocturnal incontinence of, 1274;
— Guide to the Qualitative and Quantitative
— Analysis of, Neubauer and Vogel, *rev.*, 1286;
— typhoid, the infectivity of, 1298; infective,
— 1384
Urosine, 1470
Urticaria factitious, 534
Usher, Dr. J. E., in the pulpit, 1549
Uterus, gravid, operations on the, 47; fibroid of,
— 88; infantile, 212; operation for fibroids of,
— 213; Surgery of the, H. Delagènière, *rev.*, 217;
— inversion of the, 402; complete prolapsus
— of in a girl aged 16, coelohysteropy, re-
— covery, 404; inversion of by a fibroid, enu-
— cleation of fibroid and reposition of uterus,
— 467; multinodular myoma of, 475; fibroid
— of with ovarian cyst, *ib.*; decrease of myoma
— of after excision of breast, 531; operative treat-
— ment of malignant disease of, 603; multiple
— fibroid of, 628; vaginal fixation of the, 726;
— rupture of treated by abdominal section, re-
— covery, 965; Reis-Clarke's operation for cancer
— of cervix of 1116; fomentation in inertia of,
— 1140, 1260; cancer of and its treatment, 1161;
— chronic inversion of the, 1224; surgical treat-
— ment of cancer of and its recurrence, 1269;
— unicornis, removal of a fibroid from in a
— parous subject, 1389
- V
Vaccinate, the offer to, 1050
Vaccination, insusceptibility to, 57, 183, 247, 323;
— the teaching of to students, 296; exemptions
— from, 324; the need for further legislation as
— to, 353, 593, 634; in Germany, 373; one-mark or
— two-mark, 435; on the leg, *ib.*; of school board
— teachers, *ib.*; Facts Concerning, *rev.*, 481; suc-
— cessful, grants for, 554, 1073, 1137, 1153, 1257, 1512;
— official by private practitioners, 678, 823; its
— Natural History and Pathology, S. M. Cope-
— man, *rev.*, 796; public, or private? 823, 874, 981,
— 1056; and life insurance, 869, 1102, 1109, 1171;
— in a tuberculous family, 874; and small-pox in
— the Italian army, 1017; Mr. Chaplin on, 1047;
— one-mark, 1056, 1107; in the United States
— army, 1300; in the Italian army, 1309; public,
— and district medical officers, 1315, 1359; in the
— army, 1316; in India, 1341; the Leicester
— Board of Guardians on, 1343, 1565
— Act, *See* Act
— assault, alleged, 1314
— case, A., 320, 421
— officers, appointment of, 546
— order, suggestions, etc., as to, 42;
— agreements with guardians under, 48; scale
— of fees under, *ib.*; the administration of the,
— "rash," 112
- Vaccinators, public, and their fees, 247, 981; de-
— puty of, 307; duties of, 370; qualifications of,
— 387, 515; and medical etiquette, 435; the duties
— and trials of, 485, 546; and private practi-
— tioners, 546; grants to, 887; contracts with,
— 1107; public and club patients, 1352; public
— and police-court cases, 1434; public and the
— certificate from, *ib.*
Vaccinia, insusceptibility to, 57, 183
Vacher, necropsy on, 118
Vagina, radiography of pelvis, showing position
— of hairpin in, 213; fibromyomata of, 262, 469;
— cysts of posterior wall of, 531; sarcoma of,
— 1281
Vaginal section, cases of, 602
Vagrancy Act, *See* Act
Valgus, paralytic, treatment of, 454
Vallauri prize, *See* Prize
Vallon, medico-legal aspects of rupture of aorta,
— 1300
Vallance v. Terrett, 320
Valsols and vasogens, 1337
Vanderstraeter, Dr. J. L., dinner to, 1316
Van Deventer, C. M., Physical Chemistry for Be-
— ginners, *rev.*, 92
Varicella, incubation period of, 81, 183
Varix and Thrombosis, W. H. Bennett, *rev.*, 1286
Vasogens and valsols, 1337
Vaughan, A. E., persistence of branchial clefts,
— 148
Vegetable diet, 1397
Vehicles, public, in the spread of tuberculosis,
— 1347
Veiled operator, the, 1194, 1296
Veins, subcutaneous, apparent thickening of,
— 18
Voley, J. H., Micro-organisms of Faulty Rum,
— *rev.*, 416
— L. J., Micro-organisms of Faulty Rum,
— *rev.*, 416
Vena cava superior, aneurysm of aorta com-
— municating with, 794
Venesection, the value of, 57; in cerebral
— hæmorrhage, 726, 904, 1153; in post-partum
— convulsions, 1089
Ventricles, dilated right, casts of hearts with,
— 968
Veracities, Anti-Vacc., A. F. Hopkirk, *rev.*, 481
Verhandlungen, des Congresses fuer innere
— Medizin, E. v. Leyden and E. Pfeiffer, *rev.*,
— 1101
Vermiform appendix, *See* Appendix
Vermisol, 1399
Vesicles, foetal, pathology of, 1336; vaccination
— and area, 1352
Victoria, report of the Board of Health of, 644
— Cross, the bestowal of, 60
Villous Growths and the Common Affections of
— the Rectum, T. Bryant, *rev.*, 971
Vines, S. H., An Elementary Textbook of
— Botany, *rev.*, 1164
Virchow, Professor, on the standard of educa-
— tion in Germany, 938; the prevention of
— tuberculosis from articles of food, 1348
Viry, H., frozen meat for soldiers, 419
Viscera, abdominal, surgical affections of, 876;
— transposition of, 877
Vision of school children, 77, 443, 506, 634, 763;
— green in a case of tabes dorsalis, 665
Visit, the courtesy, 1446
Vitrous, vascular formation in in diabetes, 1158
Voelcker, A. F., pseudo-hypertrophic paralysis,
— 152
Vogel, Anleitung der qualitativen und quanti-
— tativen Analyse des Harns, *rev.*, 1286
Volunteer Medical Staff Corps, promotions and
— appointments in, 59, 126, 185, 379, 767, 1313
Volunteers, promotions and appointments in
— the medical service of, 59, 185, 250, 379, 448, 508,
— 637, 706, 767, 946, 1005, 1070, 1257, 1313, 1441, 1512,
— 1560
Volvulus in an infant, laparotomy, recovery,
— 1215
Vulliamy, A. F., Fry's Law of Vaccination, *rev.*,
— 1284
Vulva, elephantiasis of, 22, 148, 516, 596
Vulvitis in children, 86
- W
Wade, J., Introduction to the Study of Organic
— Chemistry, *rev.*, 27
— Sir W., on the treatment of abdominal
— palpitations, 1451
Wagstaffe, W. W., weather at Sevenoaks 1898,
— 455
Wakley, T., the life and times of, 283
Walford, E. L., Jews and cancer, 1384
— Mr. T. L., death of, 126
Walker, Dr. A., death of, 446
— B., oxygen inhalations in the treatment
— of acute and chronic diseases of the lungs, 635
— Dr. J. H., presentation to, 1053
- Wallace, C., appendicitis with diffuse periton-
— itis, 211
— D., movable kidney, 343
— J. J., tinnitus and electricity, 455
— J. K., The Medical Register and Direc-
— tory of the Indian Empire, *rev.*, 415
Waller, A. D., the teaching of physiology and
— histology, 760
Wallich, Surgeon-Major G. C., death of, 835, 1003
Walsh, D., infective urine, 1384
Walsham, W. J., the treatment of aneurysms by
— extirpation, 532
Walters, F. R., the prevention of tuberculosis,
— 1320
War, aid to the wounded in, 1114
— Hispano-American, American losses in, 828
— Office, red tape at the, 1486
Warburton, Colonel W. P., gets C.S.I., 31
Ward, A. C., the vision of school children, 443
Warmth, constant, in the treatment of cancer-
— ous ulcers, 297
Warner, F. A., influenza and otitis media, 1152
Warrack, J. S., a case of tooth impacted in left
— bronchus, gangrene of left lung, death, 401
Warrington, W. B., the morbid anatomy and
— pathology of Dr. Bradshaw's case of myelo-
— pathic albumosuria, 662
Washbourn, J. W., on pseudo-tuberculosis, 472;
— a patient after removal of cerebral tumour,
— 534; the Clinical Research Association, 644; a
— systematic bacteriological examination of the
— fauces in scarlet fever as a means of prevent-
— ing post-scarlatinal diphtheria, 893
Wassermann, M., the cure of pneumonia, 617
Water, influence of pathological states on the
— elimination of by the skin, 79
— supply of Glasgow, 219
Waters, deep, 57; aerated, as factors of disease,
— 365; mineral, British and foreign, the solvent
— action of on sodium biurate, 1392
Watkins, A. H., bullous dermatitis due to iodo-
— form, 1214
Watkins-Pitchford, W., the modern doctrine of
— bacteriology, 943
Watson, D. C., uric acid and gout, some points
— on the physiology of uric acid, 205; etiology of
— gout, 669
— J., intracerebral injections of antitoxin,
— 324
— J. A., on the repression of bovine tuber-
— culosis, 98
Watt, T. M., on the registration of midwives, 115,
— 175
Weather cycles, 168
Webb and another, ex parte Hawker, the Queen
— v., 320, 448
— T. C., the etiology of cancer, 1372
— Surgeon-Major General W. M., death of,
— 767, 1005
Webber, H. W., a case of urethral stricture in
— which death occurred 15 hours after passing a
— catheter, 530; fibro-adenoma of the male
— breast, 1153
Weber, F. P., apparent thickening of subcutane-
— ous veins, 18; muscular atrophy recommencing
— long after infantile paralysis, 533; diffuse
— syphilitic change in the, 728; dysarthria and
— delay in learning to speak following cerebral
— disturbance in infancy, 1027
— Sir H., knighthood for, 31; climate and
— sea voyages in the treatment of tuberculosis,
— 1521, 1354
Webster, W., improvement in x-ray technique,
— 763
Wellnelt, an improvement in x-ray technique,
— 551
Weir, A. M'C., the new Midwives Bill, 120, 174;
— sanatoria for consumptives, 182; the Kan-
— thack memorial fund, 559
— Mr. J., charitable bequests by, 1180
Welch, Surgeon-Colonel F. H., syphilis in the
— army, 121
Wellingborough, the Board of Guardians of
— and the appointment of vaccination officer,
— 546
Wells, Sir T. S., Dr. Duka on, 1118
Welsh, D. A., a case of general paralysis of the
— insane in a child, 784
Welton, disposal of sewage at, 1379
West, S., some aspects of granular kidneys, 327,
— 460, 583; skin affections in renal disease, 966
West Africa, a nursing staff for, 104; the medi-
— cal service of, 575
— Australia, practice in, 1486
— Indies, tropical diseases in the, 1234
— Riding of Yorkshire, the prevention of
— tuberculosis in, 173
Wethered, F., on pseudo-tuberculosis, 598
Wharton, W. H., fomentation in inertia uteri,
— 1140
Wheeler, W. I. de C., diseases of the foot, 733
— central sacoma of bone, 1397

- Whelan, J. H., the malarial parasite, 1130
 Where Two Worlds Meet, R. E. March, *rev.*, 739
 Whipple, F. J. W., bicycling without the use of the handles, 1048
 Whitaker's Naval and Military Directory and Indian Army List, 1899, *rev.*, 541
 White, Mr. C., presentation to, 1365
 — C. P., the Liverpool Pathological Diagnosis Society, 56; malignant disease of oesophagus, 601; Neisser's diagnostic stain, 1384
 — E. F., the choice of an anæsthetic, 20
 — H., organotherapy in exophthalmic goitre, 786
 — Jane, conviction of, 448
 — W. H., right colotomy for membranous colitis, 1217
 Whiteford, C. H., operative treatment of distended small intestine in acute obstruction and in acute peritonitis, 1025
 Whitehead, W., ocular phenomena associated with Cheyne Stokes breathing, 411
 Whitfield, A., varieties of eczema and their treatment, 473; extensive lupus erythematosus, 1029
 Whitford, W., case of lupus under treatment for 27 years, 1162
 Whitla, W., on the pathology of pneumonia, 410; The University Question in Ireland, its Difficulties and their Solution, *rev.*, 604; elected honorary member of the Pharmaceutical Society, 1197
 Whooping-cough, heavy death-rate from in Edinburgh, 707
 Widal reaction, positive, in a case of acute (ulcerative) endocarditis, 1535
 Wigham, J. H., the new Midwives Bill, 121
 Wilbrand, H., Die Neurologie des Auges, *rev.*, 1340
 Wild, R. B., artificial calamines, 1336; valsols and vasogens, 1337
 Will, of persons of unsound mind, 1076
 Williams, C. T., the treatment of pulmonary tuberculosis by antituberculous serum, 790; the open-air cure or hygienic treatment of consumption, 833
 — H. W., prescribing in general practice, 1375
 — H. S., the century's progress in scientific medicine, 1427
 — L., the case of Dockrell v. Dougall, 1510
 — O., tuberculosis in milk, 917
 — W., diphtheria and childbed, 105
 — W. R., tubercle of the breast, 634; fibro-adenoma of male breast, 828
 Williamson, R. T., palliative treatment of paralysis agitans, 1336
 Willie: a Story of a Children's Hospital, M. Calderwood, *rev.*, 1101
 Willshire, Dr. W. H., obituary notice of, 703, 764
 Willson, R., the Hunter fund, 887, 952, 1012, 1076, 1319, 1383, 1448, 1568; the Hunter case, 1351
 Wilson, Kenny v., 320
 — A., death under chloroform, 762
 — Mr. A. H., obituary notice of, 183
 — J., the Midwives' Institute and the Midwives Bill, 442
 — T., hydræmion in cases of homologous twins, 1465
 — T. S., acute transient general anasarca, 732; gangrene of the lung, *ib.*, casts of hearts with dilated right ventricle, 968
 Wine, St. Raphael Quinquina tonic, 606
 Wines, Vibrona, 606
 Wingrave, V. H. W., aseptic aural and nasal syringe for self-use, 1169
 Wire, silver, aneurysm of abdominal aorta successfully treated by the introduction of into the sac, 791
 Wiring of the patella, 876; oblique fracture of the humerus treated by, 1029
 Wise, A. T. T., tuberculosis and canaries, 63
 Withers, O., venesection in cerebral hæmorrhage, 1153
 Witness, medical and coroner, 251, 1314
 Witnesses, medical, coroners and, 229
 Wolstenholme, R. H., Manchester Warehousemen and Clerks' Provident Association, 377
 Woman, of 22, with morbus cordis, extracapsular fracture of femur in, recovery, 16; young, abdominal aneurysm in a, 272
 Women, diseases of and the bicycle, 38; Diseases of, E. C. Dudley, *rev.*, 217; in learned societies, 682; Chinese medical, 927; Diagnosis and Treatment of Nervous Diseases of, dependent on Mechanical Disorders of the Sexual Organs, M. Kranz, *rev.*, 1100
 Wood, F. C., treatment of chronic diarrhoea, 191
 — General L., sketch of career of, 683; as governor of Santiago da Cuba, 973
 — T. O., the early treatment of incipient insanity, 377
 — W. C., traumatic aneurysm of sciatic artery, 661
 Woodford, opening of cottage hospital at, 1445
 Woodhead, G. S., appointed professor of pathology at Cambridge, 427; on pseudo-tuberculosis, 471; the prevention of tuberculosis, 1038
 Woods, H., direct representation and the British Medical Association, 1509
 — H. H., a case of acute gastroduodenitis, 904
 — R., chronic pharyngitis, 1096
 Woodward, W., the conscientious objector, 177
 Woolmer, S. L., two cases of extreme dilatation of the sigmoid flexure, colopexy, recovery, 1350
 Woolsorter, anthrax in a, 188
 Woolsorters, the prevention of anthrax in, 494
 Woolwich, report of board of visitors as to Royal Military Academy at, 544
 Worcester, the prevention of tuberculosis in, 676
 Work, play, and handiwork, 924
 Workhouses, visiting medical officers of, 253; certification of lunatics for detention in, 1136, 1379
 Working classes, the and the Tuberculosis Congress, 1349
 Workmen, compensation of, 1259
 Workshops in the spread of tuberculosis, 1347
 Worsley, R. C., imperforate anus, operation, recovery, 904
 Wound of a large superficial inguinal artery in which the blood flowed from the trunk to the thigh, 965
 Wounded in war, aid to, 1114
 Wrench for clubfoot, 794
 Wright, A. E., inoculation against enteric fever, 232, 572, 640
 — T. N., organotherapy in diabetes, 256
 Wyatt-Smith, F., typhoid poisoning and sewer gas, 725; consumptive patients in South Africa, 1310
 Wyllie, D. S., teratoma in lesser peritoneal cavity, 1336
 Wyllie, Dr. J., dinner to, 769
 X-ray. See Roentgen
 Y.
 Yarr, Major. M. T., the London school of tropical medicine, 313; trachoma and race, 1086
 Yearbook of Treatment for 1899, *rev.*, 539; Municipal for 1899, R. Donalds, *rev.*, 541; and Directory, the Englishwoman's, E. Janes, *rev.*, 972; The American of Medicine and Surgery, G. M. Gould, *rev.*, 1226
 Yellow fever. See Fever
 Yencken, R. F., influenza and typhoid fever, 711
 Yeomanry, promotions and appointments in medical staff of, 1005, 1313
 York, the prevention of tuberculosis at, 541
 Young, H. S. S., the Queen v. Webb and another, 448
 — R. J. E., threatened death under chloroform, 904
 — W. McG., anæsthetics through a tracheotomy tube, 1534
 — Dr. W. S., presentation to, 885
 Youth, epithelioma of the lip in a, 1222; 18 years old, breast containing new growth removed from, *ib.*
 Yukon, typhoid fever in the, 437
 Z.
 Ziemssen, Dr., on medical ethics, 1204
 Zig-zag Ramblings of a Naturalist, K. T. Manson, *rev.*, 798
 Zona below the knee, 712

INDEX TO THE EPITOME FOR VOLUME I FOR 1899.

The Figures in this Index refer to the Number of the Paragraph NOT the Page.

A.

- Abel, epinephrin, 163
 Abortion, the treatment of, 50, 288; tubal and pelvic hæmatocele, 273; saline solution in septicæmia after, 290; induction of in uncontrollable vomiting, 517
 Abscess, psoas, or "retroperitoneal lymph cyst," 364
 Absorption, the power of in childhood, 257
 Acardiacus with "cyclops" deformity, 300
 Acne, treatment of, 508
 Actinomycosis, pulmonary, 243
 Actol and itrol, 558
 Addison's disease. *See* Disease
 Adult, double uterus and vagina with cloaca in an, 534
 Air, entrance of into veins and heart during operation, 385; and light, treatment of consumption by, 502
 Albarran, nephrectomy with total removal of the ureter for papilloma, 287
 Albers-Schönberg, Roentgen rays in dermatology, 36; Roentgen rays in lupus, 397
 Albert, bilateral cancer of breast in male and female, 176
 Albuminuria, in diabetes, 244; and uterine fibroids, 274; post-epileptic, 340
 Albumosuria, asthenic bulbar paralysis associated with, 207; multiple myeloma and, 208
 Alcoholism, acute, the brain cells in, 223
 Alessandri, the surgery of the biliary passages, 227
 Aleuronat in infant feeding, 374
 Alexander's operation, 309; the value of, 347
 Alimentation, intravenous and subcutaneous, 203
 Amblyopia, experimental quinine, 149
 Amœbæ, cystic goitre with, 338
 Anæmia, pernicious, the blood corpuscles in, 57
 Anæsthesia, Schleich's infiltration, 503
 Analgesia, ulnar, a diagnostic sign in general paralytics, 174; epigastric, in tabes, 494
 Anatomy, pathological, of rabies in man, 357
 Andrievsky, calomel in typhoid fever, 16
 Andvord, the rest treatment of phthisis, 520
 Aneurysm of the aorta, spare diet in the treatment of, 293
 Angina pectoris, 526
 Angiotribe, use of in gynaecology, 351
 Anschütz, pigmentary cirrhosis with diabetes, 320
 Antihydrotic and hydrotic remedies and the number of leucocytes in the blood, 333
 Antipyrin, skin eruptions caused by, 37
 Antiseptic, peroxide of hydrogen as an, 354
 Antitoxin, intracerebral injections of in tetanus, 184, 396; in epilepsy and erysipelas, 537
 ——— diphtheria, the limits of usefulness of, 317
 Anuria, nephrotomy for, 551
 Anus, congenital imperforate, 250
 Aorta, obliteration of the, 96; abdominal, embolism of and paraplegia, 246; spare diet in the treatment of aneurysm of, 293
 Apostoli's treatment of catarrhal affections of the appendages, 33
 Appendicitis or epityphlitis? 62; and floating kidney, coexistence of, 150; drained by the rectal route, 195
 Appendix, inflamed, removal of during pregnancy, 198
 Argonin, in purulent ophthalmia, 35; soluble, in gonorrhœa, 535
 Arrhythmia, cardiac, observed by the Roentgen rays, 321
 Arseniate of iron, injections of in malaria, 333
 Arsenious acid in malignant disease, 92
 Arthritis deformans, chronic, microbes in, 117; tuberculous of hip-joint, treatment of, 212
 Arx, v., leptothrix cellulitis, 541
 Ascoli, the treatment of tetanus, 72
 Aspidium spinulosum in the treatment of tape-worm, 505
 Association, American Laryngological, pathological conditions in the nose and asthma, 527
 Asthma, treatment of, 15; pathological conditions in the nose and, 527
 Ataxia, acute, in children, 152; acute, 508
 Atheroma, congenital, 542
 Atresia, acquired, of the vagina, 140
 Audebert, the pulse in pregnancy and the puerperium, 515
 Axenfeld, blenorrhœa not caused by the gonococcus, 251
 Ayers, hæmostatic injections into the placenta, 85
 Azzarello, treatment of burns by injection of artificial serum, 521

B.

- Babinski, the great-toe reflex, a new diagnostic sign in disease of the spinal cord, 493
 Bacaloglu, enterotomy for ileo-cæcal cancer, 268
 Bachimont, fetal nutrition, 340
 Bacilli of tubercle in butter, 359
 Bacillus, typhosus in a case of puerperal infection, 14; of plague, action of disinfectants on, 398; of typhoid in bone marrow, 400
 Backhaus, fatal chorea in pregnancy, 392
 Bacteria, action of on the photographic plate, 150
 Bacteriology of chronic osteomyelitis, 188
 Balvay, injections of normal saline solution in diabetic coma, 143
 Bang, parachymosin, 167
 Bareggi, the differential diagnosis of typhoid from acute tuberculosis, 300
 Baron, puerperal eclampsia, 11
 Bastian, treatment of post-partum hæmorrhage, 159

- Bayer, a probable source of danger in operation for the radical cure of hernia, 327
 Beach, chylous cyst of mesentery, 196
 Beck, the diagnostic value of tuberculin, 282
 Beckett, hernia of ovary, oöphorectomy in an infant, 393
 Bégouin, mesenteric tumours, solid and cystic, 266
 Behla, the endemic occurrence of cancer, 25
 Berlioz, treatment of phthisis by medicated serum, 202
 Bernstein, mercurial inunctions in lupus, 186
 Bertrand, painful paralysis in children, 283
 Biesenthal, sanose, 518
 Billhaut, use of the angiotribe in gynaecology, 351
 Biliary passages, surgery of the, 227
 Bladder, female, removal of foreign bodies from the, 104; treatment of tuberculosis of the, 194; trophic affections of after gynaecological operations, 331; laminaria tent in the, 373; treatment of exstrophy of the, 528; congenital invagination of into ureter, 549
 Blanc, craniectomy in microcephalic idiocy, 30
 Bleeding in pneumonia, 259
 Blenorrhœa not caused by the gonococcus, 251
 Blondel, treatment of fissure of the nipple, 68; male hermaphrodite married as a wife, 233; pessary 32 years in vagina, 236
 Blood, syphilitic, the reaction of to mercury, 20; toxicity of the in epilepsy, 261; the number of leucocytes in and hydrotic and antihydrotic remedies, 335
 ——— corpuscles in pernicious anemia, 57
 Blumenthal, the serum treatment of tetanus, 376
 Börner, brain presentation in labour, 370
 Bohland, hydrotic and antihydrotic remedies and the number of leucocytes in the blood, 335; chemotactic action of toxins upon leucocytes, 560
 Boissard, ectopic gestation, operation late in pregnancy, 271
 Boix, urinary toxicity in pregnancy, 389
 Bone, calcined, use of in bone repair, 156
 ——— marrow, typhoid bacillus in, 400
 Bosquier, bacteriology of chronic osteomyelitis, 187
 Bossi, conservative gynaecology, 499
 Bouchacourt, the Roentgen rays for fœtus papyraceus, 311
 Bowel, conservative treatment of stricture of the, 83
 Brain, the cells of in acute alcoholism, 223; surgical treatment of syphilis of, 305
 ——— presentation in labour, 370
 Braun-Fernwald, the early diagnosis of pregnancy, 328
 Breast, operative treatment of cancer of, 137; bilateral cancer of in male and female, 176
 Bright's disease. *See* Disease

Copies of the Index to the Epitome, with Title-page, for binding in separate form can be had on application to the Office, 429, Strand, W.C.

Broca, nephrotomy for anuria, 551
Brocard, glycosuria in pregnancy, 12
Brocq, drawbacks of orthoform, 375
Brodowski, tubal abortion and pelvic hæmatocele, 273
Bromoform in whooping-cough, 240
Browne, hernia of the ovary, 106
Brühns, the spleen in syphilis, 561
Brunner, obliteration of the aorta, 96
Bruno, the serum diagnosis of diphtheria, 1
Buchanan, magnesium sulphate in dysentery, 111
Budd, cirrhosis of, 170
Bulow-Hansen, poliomyelitis anterior acuta, 401
Bugs, infection with organisms through, 540
Bull, the radical cure of hernia, 63
Burns, treatment of by injection of artificial serum, 521
Burwinkel, duodenal ulceration, 135
Busch, typhoid bacillus in bone marrow, 400
Butter, tubercle bacilli in, 359
Button, Murphy's, the use of, 103

C.

Cabanès, pulmonary actinomycosis, 243
Cæcum sloughing in inguinal hernia, 308
Cæsarean section, versus symphysiotomy, 9;
craniotomy and the patient, 216; incision of fundus in, 201; the uterine wound in, 390
Callomon, fermentation in the stools of sucklings, 360
Calomel in typhoid fever, 16
Calot's treatment of spinal caries, 192
Calvo, subcutaneous injections of artificial serum in typhoid fever, 183
Cancer of the stomach, surgical treatment of, 7;
of the pancreas, 46; the endemic occurrence of, 95; nerve effects of, 131; of the breast, operative treatment of, 137; bilateral of breast in male and female, 176; of the rectum a modification of Kraske's operation for, 177; of pancreas, exploratory incision, 228; ileo-cæcal enterotomy for, 268; of the stomach, early operation in, 285; mammary, long-retarded recurrence of, 497; of pancreas, 512; of body of uterus, slow progress of, 555
Cardarelli, the indirect treatment of hepatic cirrhosis, 296
Cardiac. See Heart
Caries, spinal. See Spine
Carle, hernia, sloughing cæcum, foreign body, 308
Carrel, congenital invagination of bladder into ureter, 549
Carrière, Woillez's disease, 78
Caruso, fatal rickets and lymphangiectasic elephantiasis, 524
Casalmi, a case of syphilitic reinfection, 270
Casarini, vulvo-vaginitis in children, 88
Casein digestion, 205
Casselli, puerperal fever, 148
Cassel, euchinin in whooping cough, 559
Castaigne, puerperal eclampsia, 11
Castration, with excision of the vesiculæ seminales and vas deferens for tuberculosis, 547
Catarrh, atrophic gastric, 97; of intestine, treatment of, 519
Catellani, micro-organisms in strangulated hernia, 358
Cavities, serous, milky effusions in, 114
Cavity, peritoneal, free body in, 556
Ceconi, milky effusions in serous cavities, 114
Cellulitis, septic, antistreptococcal serum in, 336; leptothrix, 541
Chapin, erysipelas toxins in leprosy, 54
Charles, Cæsarean section versus symphysiotomy, 9; pharyngeal hyperæmia, 341
Chauvel, non-typhoid perforation cured by operation, 81
Chenevière, the treatment of abortion, 50
Chicotot, central pneumonia discovered by the radioscope, 342
Child, intestinal invagination in a, 387
Childhood, the power of absorption in, 257
Children, vulvo-vaginitis in, 88; acute ataxia in, 152; movable kidney in, 281; painful paralysis in, 283; treatment of stomatitis in, 353
Chirchoff, papilloma of the Fallopian tube, 554
Chloralbacid, 333
Chloride of zinc or curette in chronic metritis? 142, 312
Cholelithiasis, the microbe origin of, 41; glycosuria in, 263
Chondrodystrophia, fatal, 108
Chorea, oil of gaultheria in, 39; fatal in pregnancy, 392
Chrysarobin and pyrogallol derivatives, 219
Circulation, introduction of serum into the, 295

Cirrhosis, of Budd, 170; hypertrophic, in several members of the same family, 245; hepatic, indirect treatment of, 296; pigmentary, with diabetes, 320
Clavicle, greenstick fracture of the, 6
Cloaca, double vagina with in an adult, 534
Cohn, bromoform in whooping cough, 240
Coley, the radical cure of hernia, 63
Colombini, protargol in gonorrhœa, 110
Colon, transverse, removal of, 286; transverse, ptosis of, 536
Coma, diabetic, injections of normal saline solution in, 143; diabetic, treatment of, 332
Comby, tuberculosis verrucosa cutis, 24; movable kidney in children, 281
Consumption, pulmonary, the hypodermic injection of silver nitrate over the course of the vagi in the treatment of, 218; treatment of by air and light, 502
Coprostasis, psychoses due to, 299
Cord, spinal, the great-toe reflex, a new diagnostic sign in diseases of the, 493
Cornea, scabies of the, 178
Cornet, therapeutics of saline enemata, 130
Coronado, hemicephalic, ectromelic, exomphalic foetus, 254
Corrosive sublimate, disinfecting power of, 399
Cosaprin and phesin, 239
Cragin, pelvic kidney, threatening dystocia, vaginal nephrectomy, 217
Craniectomy in microcephalic idiocy, 30
Craniotomy, analysis of 125 cases of, 215; Cæsarean section and the patient, 216
Critzman, the renal theory of gout, 173
Croup, suffocating laryngitis in, 362
Cryzewicz, incision of fundus in Cæsarean section, 291
Curette or chloride of zinc in chronic metritis? 142, 312
Curvature, spinal. See Spine
Cushing, the surgery of perforation in typhoid, 82
"Cyclops" deformity, acardiacus with, 500
Cyst, pancreatic, in lesser omentum, 48; chylous, of mesentery, 196; "retroperitoneal lymph" or psoas abscess? 364; of the urachus, 510
Cystitis, the bactericidal effect of acid urine on the course of, 40
Cysts, hymeneal, 350; hydatid, operative treatment of, 365

D.

Dana, brain cells in acute alcoholism, 223
De Boeck, artificial serum injections in the insane, 504
Deciduoma malignum simulating acute tuberculosis, 32; and lung infection, 391
Delagenière, testes in inguinal hernia, hermaphroditism, 155; operation for gall stones, 324
Delbet, chloride of zinc or curette in chronic metritis? 142
Delirium tremens, lesions in the central nervous system in, 242
Dermatology, Roentgen rays in, 36
Desguin, the relics of old tubal pregnancy, 329
Destot, suprarenal extract in Addison's disease, 165
Destree, muscular work, 294
De Voogt, the female organs and the thyroid gland, 368
Diabetes, ocular troubles in, 2; insipidus, and pregnancy, 13; obesity and gout, 22; mellitus, assimilation, etc., in, 43; insipidus, and hysteria, 189; albuminuria in, 244; pigmentary cirrhosis with, 320; complicated by peripheral neuritis, 507; insipidus, bimtemporal hemianopsia associated with, 546; treatment of, 557
Dianoux, ocular troubles in diabetes, 2
Diarrhoea, infantile, changes in the nerve cells in, 298
Dickinson, posture in obstetric operations, 179
Diet, fever, 166; spare, in the treatment of aneurysm of the aorta, 293
Diétel, rupture of uterus during removal of placenta, 123
Digestion, casein, 205
Dionin, 168, 394
Diphtheria, the serum diagnosis of, 1
Dippé, H., hysterical fever, 525
Disease, Addison's, suprarenal extract in, 165
Bright's, œdema in, 171
malignant, arsenious acid in, 92
Woillez's, article on, 78
Disinfectants, action of on the plague bacillus, 398
Dislocations, sudden, in the course of hip-joint

disease, 119; congenital of the hip, the modern treatment of, 136
Dobbin, the bacillus typhosus in a case of puerperal infection, 14
Dönitz, the limits of usefulness of diphtheria antitoxin, 317
Dolérus, congenital prolapsus and spina bifida, 122
Domenicis, the therapeutic value of fasting, 55
Douche, nasal, danger of the, 74
Drago, bleeding in pneumonia, 259
Drejer, treatment of abortion, 288
Dressen, deciduoma malignum simulating acute tuberculosis, 32
Drobný, recent research in the gonococcus, 506
Drugs, dangers in preparing, 169
Dubrisay, hydrorrhœa three months, foetus outside membranes, 272
Duchamp, appendicitis drained by the rectal route, 195
Ducray, orthoform in laryngitis, 297
Ducroquet, reduction of spinal curvature, 64
Dungern, v., microbes and chronic arthritis deformans, 117
Duodenum, ulceration of, 135
Durante, congenital atheroma, 542
Dysentery, magnesium sulphate in, 111
Dysmenorrhœa, treatment of, 161
Dysphagia, syphilitic, 44
Dystocia, pelvic kidney threatening, vaginal nephrectomy, 217

E.

Eberhart, artificial serum in puerperal fever, 18
Ebstein, obesity, gout and diabetes, 22; thyroid treatment in obesity, 109
Eclampsia, puerperal, fetal origin of, 11
Eczema, picric acid in, 185
Edebohl, coexistence of floating kidney and appendicitis, 158
Effusions, milky, in serous cavities, 114; pleural and pericardial, 172
Egg yolk, subcutaneous administration of in malnutrition, 316
Elephantiasis, lymphangiectasic, and foetal rickets, 524
Ellinger, multiple myeloma and albumosuria, 208
Elytrotomy, juxta-cervical, the treatment of pelvic exudations by, 34
Embolism of abdominal aorta, 246
Emphysema, pulmonary, morbid anatomy of, 206
Empyema, antral, powdered silver nitrate in, 539
Eranthem, the, of German measles, 80
Encephalitis, acute non-suppurative, 545
Endocarditis, malignant, 77; varieties of, 280
Enemata, saline, therapeutics of, 130
Engel, the blood corpuscles in pernicious anaemia, 57
Enterostomy in peritonitic paralysis, 269
Enterotomy for ileo-cæcal cancer, 268
Epididymitis, suppurative, after typhoid fever, 121
Epilepsy, senile, 25; sympathectomy in, 175; toxicity of the blood in, 261; resection of the cervical sympathetic in, 284; antitoxin in, 537
Epinephrin, 163
Epityphlitis or appendicitis? 62
Erysipelas, toxins of in leprosy, 54; antistreptococcal serum in, 336; antitoxin in, 537
Euchinin in whooping cough, 559
Eulenburg, heroin, 315
Everke, chronic inversion, conservative operation, 197; the uterine wound in Cæsarean section, 390
Ewing, lesions of the central nervous system in delirium tremens, 242
Exanthemata, the, as factors in producing pelvic disorders, 234
Exstrophy of the bladder, treatment of, 528
Exudations, pelvic, treatment of by juxta-cervical elytrotomy, 34
Eye troubles in diabetes, 2

F.

Fabre, intestinal obstruction from torsion of the mesentery, 210
Fasting, the therapeutical value of, 55
Fatigue, muscular, sugar and, 260
Feeding, rectal, 355
Fein, powdered silver nitrate in antral empyema, 539

Ferguson, cyst of the urachus, 510
 Fermentation in the stools of sucklings, 360
 Fever, diet in, 166
 — enteric, calomel in, 16; artificial serum in, 18; recovery from operation for perforation in, death from the fever, 81; the surgery of perforation in, 82; suppurative epididymitis after, 121; subcutaneous injections of artificial serum in, 183; renal, 225; operation for pus in gall bladder in, 229; the bacteriological diagnosis of, 262; the differential diagnosis of from acute tuberculosis, 300; sudoral, 321; meningitis and meningism, 382
 — hysterical, 525
 — puerperal, the bacillus typhosus in a case of, 14; etiology of, 148
 — scarlet, peptonuria in, 134
 Fibroid, uterine, thyroid extract in, 141
 Fibroids, uterine, fatal intestinal obstruction by, 213; uterine and albuminuria, 274
 Filatoff, acute ataxia in children, 152
 Finkelstein, a diagnostic sign in the initial stage of measles, 45
 Finney, pylorectomy, 248
 Fiocco, treatment of acute mercurial poisoning, 222
 Fissure of the nipple, treatment of, 68
 Fistula, faecal, after pelvic operation, 553
 Flatau, acute non-suppurative encephalitis, 545
 Fleiner, chloralbacid, 334
 Flies and water supply, relative importance of in spreading disease, 58
 Fœtus, hemicephalic, ectomelic, exomphalic, 254; outside membranes in hydrorrhœa, 272; papyraceous, the Roentgen rays for, 311; at term in extrauterine pregnancy, 313; nutrition of, 349
 Foot, the tabetic, 153
 Foote, volvulus of sigmoid flexure, three operations, 366
 Forceps left in peritoneum, 124
 Forcheimer, the enanthem of German measles, 80
 Forehead presentation, 552
 Foreign bodies, removal of from female bladder, 104
 Formalin in whooping-cough, 220
 Fossa, supratorsillar, as the starting-point of infection, 241
 Fournier, somatose in syphilis, 75; preventive treatment of hereditary syphilis, 144, 378
 Fracture, ununited, treated by thyroid extract, 536
 Fraenkel, resection of second division of trigeminus, 230
 Frankland, action of bacteria on the photographic plate, 150
 Free body in the peritoneal cavity, 556
 Fresson, parietal taken for intra-abdominal tumour, 235
 Friedenthal, introduction of serum into the circulation, 295
 Friedlander, surgical treatment of brain syphilis, 305
 Fromme, dionin, 394

G

Galante, post-epileptic albuminuria, 340
 Gall bladder, operation for pus in in typhoid fever, 229
 — stones, operation for, 324
 Galland, ununited fracture treated by thyroid extract, 536
 Gangitano, protracted tubal pregnancy, 180
 Ganglion, Gasserian, resection of the, 61; cervical sympathetic, resection of in epilepsy, 284
 Gangrene of lung, pleurotomy in, 326
 Gardiner, treatment of consumption by air and light, 502
 Garel, pharyngeal hyperæmia, 341
 Gastroptosis, 59
 Gestation, ectopic, occurring twice in the same patient, 199; ectopic, operation late in pregnancy, 271; fatal interstitial, 314
 Gidney, treatment of tuberculous arthritis of hip-joint, 212
 Giglioli, subcutaneous injections of artificial serum in typhoid fever, 183
 Gilbert, microbial origin of cholelithiasis, 41
 Ginsburg, morbid anatomy of pulmonary emphysema, 206
 Giordano, the method of reaching the heart surgically, 28
 Gland, mammary. *See* Mammary
 — suprarenal. *See* Suprarenal
 — thyroid. *See* Thyroid
 Glandulen in tuberculosis, 90

Glantenay, parietal taken for intra-abdominal tumour, 235
 Glycosuria and pregnancy, 12; transitory, and somatose, 94; in cholelithiasis, 263; alimentary, 339
 Göppert, treatment of stomatitis in children, 353
 Goltre, cystic, with amœbæ, 338
 Goldschmidt, treatment of asthma, 15
 Gonococcus, blenorrhœa not caused by, 251; recent research on the, 506
 Gonorrhœa, protargol in, 110; soluble argonin in, 535
 Gout, obesity, and diabetes, 22; skin changes in, 23; the renal theory of, 173
 Gregor, malt soup for infants, 145
 Greene, artificial respiration in Landry's paralysis, 277; the Schott method in heart disease, 356
 Greenstick fractures of the clavicle, 6
 Guédroyt de Bèloséroff (Princess), castration with excision of the vesiculæ seminales and vas deferens for tuberculosis, 547
 Guinard, surgical treatment of cancer of the stomach, 7
 Guiranna, the treatment of diabetes, 557
 Guizzetti, ulcerative stomatitis, 562
 Gunshot wounds, multiple of intestine, 118
 Gynæcology, use of the angiotribe in, 351; conservative, 499

H

Hæmatemesis, treatment of, 56
 Hæmatin and hæmoglobin preparations, 379
 Hæmatocele, pelvic and tubal abortion, 273; pelvic, treatment of, 330
 Hæmaturia from vesical varices, 307
 Hæmoglobin preparations and hæmatin, 379
 Hæmorrhage, post-partum, treatment of, 159; in early tubal pregnancy, 182; renal, in influenza, 381
 Hæmorrhoids, mercurial suppositories in, 238
 Hair balls in stomach, 345
 Hairiness, abnormal, and uterus duplex, 69
 Halsted, tuberculosis of the mammary gland, 120; operative treatment of cancer of the breast, 137
 Hanot, cirrhosis of Budd, 170
 Harbitz, endocarditis, 280; poliomyelitis anterior acuta, 401
 Hasenlever, hypertrophic cirrhosis in several members of the same family, 245
 Hauser, symptomatic varicocele, 27
 Heart, experimental inorganic murmurs in, 21; method of reaching surgically, 28; a needle in the, 65; disease of and marriage, 66; congenital primary hypertrophy of, 115; abdominal massage in disease of, 147; mammalian, action of suprarenal extract on, 164; the Schott method in disease of, 356; disease of the and the menopause, 369; entrance of air into during operation, 385; the surgery of the, 495
 Heckel, intracerebral injection of antitetanus serum, 127
 Hegar, uterus duplex and abnormal hairiness, 69
 Heiligenthal, paraplegia and embolism of abdominal aorta, 246
 Helm, aleuronat in infant feeding, 374
 Hemianopsia, bitemporal, associated with diabetes insipidus, 546
 Hemser, peptonuria in scarlet fever, 134
 Hennes, craniotomy, 215
 Hepatorrhaphy, case of, 548
 Hermaphrodite, male, married as a wife, 233
 Hermaphroditism, case of, 155
 Hernia, the radical cure of, 63, 386; of the ovary, 106; double congenital diaphragmatic, 126; accidental, 138; inguinal, testes in, 155; strangulated, operation for in pregnancy, 214; of Fallopian tubes, 252; inguinal, sloughy cæcum, foreign body, 308; a probable source of danger in operation for the radical cure of, 327; strangulated, micro-organisms in, 358; of ovary, oophorectomy in an infant, 393
 Heroin, 276, 315
 Herter, cancer of pancreas, exploratory incision, 228
 Hertes, toxicity of the blood in epilepsy, 261
 Herzog, malignant endocarditis, 77; lymphosarcoma of mesentery, 267; treatment of diabetic coma, 332
 Hessler, antitoxin in epilepsy and erysipelas, 537
 Heurtaux, long-retarded recurrence of mammary cancer, 497
 Hibbard, leucocytosis in pregnancy, 201
 Hierokles, venous thrombosis in phthisis, 133

Hildebrandt, the cure of tuberculous peritonitis by laparotomy, 26
 Hintz, double congenital diaphragmatic hernia, 126
 Hip, the modern treatment of congenital dislocation of, 136; treatment of congenital displacement of, 306
 Hip-joint, sudden dislocations in disease of, 119
 Hoffmann, cardiac arrhythmia observed by the Roentgen rays, 321
 Holden, experimental quinine amblyopia, 149
 Horwitz, treatment of tuberculosis of the bladder, 194
 Hosskiewitz, the menopause and heart disease, 369
 Hubert, uterine fibroids and albuminuria, 274
 Huchard, abdominal massage in heart disease, 147
 Huismann, œsophagitis and peri-œsophagitis phlegmonosa, 509
 Huyghe, acute ataxia, 508
 Hyde, expectancy of life in syphilis, 154; the exanthemata as factors in producing pelvic disorders, 234
 Hydrastis canadensis, toxic symptoms from, 258
 Hydrogen peroxide in the treatment of puerperal sepsis, 10
 Hydrorrhœa three months, fœtus outside membranes, 272
 Hydrotic and antihydrotic remedies and the number of leucocytes in the blood, 335
 Hyperæmia, pharyngeal, 341
 Hyperidrosis spinalis superior, 265
 Hypertrophy, prostatic, the operative treatment of, 5, 325; malarial, splenectomy for, 84; congenital primary cardiac, 115
 Hysteria, simulating intestinal obstruction, 60, and diabetes insipidus, 189

I

Ichthyol in pulmonary tuberculosis, 278
 Idiocy, microcephalic, craniectomy in, 30
 Infant, oophorectomy in for hernia of ovary, 393
 Infants, newborn, a source of lead poisoning in, 3; malt soup for, 145; aleuronat in the feeding of, 374
 Infection, the supratorsillar fossa as the starting point of, 241
 Influenza, renal hæmorrhage in, 381; treatment of optic neuritis after, 523
 Injections, hæmostatic, into the placenta, 85
 Intracerebral of antitoxin in tetanus, 184, 396
 Insane, artificial serum injections in the, 504
 Intaglietta, endovenous injections of quinine in malarial pneumonia, 377
 Intestine, multiple gunshot wounds of, 118
 Intestine, large, treatment of catarrhal ulcers of, 275; strangulated, in perforated skin of sloughing herniac sac, 346; invagination of in a child, 387; large, polyadenomata of the, 511; treatment of catarrh and ulceration of, 519
 Intestines, the visible outlines of, 100
 Intussusception, operative treatment of, 303
 Invagination, intestinal, in a child, 387
 Irol and actol, 558

J

Jaboulay, sympathectomy in epilepsy, 175
 Jaccoud, sudoral typhoid, 322
 Jacob, the tabetic foot, 153; serum treatment of tetanus, 376
 Jacobs, rectal feeding, 355
 Jacobson, oxycamphor, 337
 Jakubowitsch, the power of absorption in childhood, 257
 Janet, treatment of chronic urethritis, 513
 Jellink, soluble argonin in gonorrhœa, 535
 Jess, chronic valvular disease in pregnancy, 139
 Joachim, the administration of somatose, 38
 Johannessen, fetal chondrodystrophia, 108
 Jonnesco, splenectomy for malarial hypertrophy, 84; resection of the cervical sympathetic in epilepsy, 284
 Jordan, Murphy's button, 103
 Jourdanet, syphilitic dysphagia, 44
 Julliard, intracerebral injections of antitoxin in tetanus, 396

K.

- Kalinowsky, treatment of dysmenorrhœa and sterility, 161
 Kaplau-Lapina, Apostoli's treatment of catarrhal affections of the appendages, 33
 Kaposi, hyperidrosis spinalis superior, 265
 Kassel, orthoform emulsion, 93
 Kaufmann, accidental hernia, 138
 Kairsch, glycosuria in cholelithiasis, 263
 Keen, operation for perforated gastric ulcer, 29; resection of the Gasserian ganglion, 61; a modification of Kraske's operation for cancer of the rectum, 177
 Keim, lactose as an oxytocic, 105
 Keraval, ulnar analgesia, a diagnostic sign in general paralytics, 174
 Kidney, disease of, of malarial origin, 116; floating, and appendicitis, coexistence of, 158; pelvic, threatening dystocia, vaginal nephrectomy, 217; movable, in children, 281; hæmorrhage from in influenza, 381
 Kingman, double ovariectomy in hydatidiform molar pregnancy, 232
 Kirmisson, sudden dislocations in hip-joint disease, 119; acquired deformities of the toes, 249
 Kleine, antitoxin, treatment of tetanus, 146
 Klempner, fever diet, 166
 Kiewtzw, mercurial suppositories in hæmorrhoids, 238
 Klippel, nerve effects of cancer, 131
 Knoepfelmacher, casein digestion, 205
 Koeppen, renal hæmorrhage in influenza, 381
 Kollmann, the treatment of tetanus, 221
 Korte, dionin, 168
 Kouwer, ovarian pregnancy, 348
 Kraske's operation for cancer of the rectum, a modification of, 177
 Kromayer, chrysarobin and pyrogallol derivatives, 219
 Krusen, fecal fistula after pelvic operation, 553
 Kirzysztalowicz, Koch's new tuberculin in lupus, 187
 Küster, appendicitis or epityphilitis? 62
 Kummer, acquired atresia of the vagina, 140
 Kuperwasser, the reaction of syphilitic blood to mercury, 20
- L.
- Laache, spare diet in the treatment of aneurysm of the aorta, 233
 Labadie-Lagrave, urinary toxicity in pregnancy, 389
 Labour, delayed, 231; normal, abortive ovum discharged three days after, 255; brain presentation in, 370; rupture of symphysis pubis in, 512
 Lætophenin, the physiological action of, 128
 Lactose as an oxytocic, 105
 Lambert, multiple gunshot wounds of intestine, 118
 Laminaria tent in the bladder, 373
 Landau, treatment of leucorrhœa, 289
 Landel, polyadenomata of the large intestine, 511
 Landouzy, early operation in cancer of the stomach, 285
 Lange, Calot's treatment of spinal caries, 192
 Lannois, sympathectomy in epilepsy, 175
 Laparotomy, the cure of tuberculous peritonitis by, 26
 Laplace, treatment of varicose ulcer, 304
 Laroynne, chloride of zinc or curette? 312
 Laryngitis, orthoform in, 297; suffocating, in croup, 362
 Lauren, aspidium spinulosum in the treatment of tapeworm, 505
 Laurent, ulnar analgesia, a diagnostic sign in general paralytics, 174
 Lea, the treatment of ophthalmia as met with in South Africa, 73
 Lead poisoning in newborn infants a source of, 3
 Le Count, tuberculosis of the mammary gland, 120
 Le Dentu, nephrectomy with total removal of the ureter for papilloma, 287
 Leeches, infection with organisms through, 540
 Le Filliatre, removal of inflamed appendix during pregnancy, 198
 Lejars, congenital imperforate anus, 250; pleurotomy in gangrene of lung, 326; treatment of rupture of the quadriceps tendon, 406
 Leo, heroin, 315
 Leon, hysterical blue cedema, 363
 Leprosy, erysipelas toxins in, 54
 Leptothrix cellulitis, 541
 Lesser, an adult monotrematous woman, 125;

- double uterus and vagina with cloaca in an adult, 534
 Leucocytes, number of in the blood and hydrotic and antihydrotic remedies, 335; chemiotactic action of toxins on, 560
 Leucocytosis in pregnancy, 201
 Leucorrhœa, treatment of, 289
 Leukæmia, case of, 99; parasitic nature of, 380
 Lewandowsky, introduction of serum into the circulation, 295
 Lichtwitz, danger of the nasal douche, 74
 Life, expectancy of in syphilis, 154
 Ligament, round, tumours of the, 516
 Light and air, treatment of consumption by, 502
 Lilienfeld, intravenous and subcutaneous alimentation, 203
 Linde, dangers in preparing drugs, 169
 Liver, localised tuberculosis of, 132; enlargement of in pneumonia, 384
 Locomotor ataxy. See Tabes
 Löwit, leukæmia, 380
 Löwy, partus serotinus, 231
 Lohnstein, the operative treatment of prostatic hypertrophy, 5
 Lorenz, treatment of congenital displacement of the hip, 306
 Luigi, oil of gaultheria in chorea, 39
 Lung, pleurotomy in gangrene of, 326; infection of and deciduoma malignum, 391
 Lupus, mercurial inunctions in, 186; Koch's new tuberculin in, 187; Roentgen rays in, 397
 Luxenburger, nirvanin, 129
 Luys, fatal intestinal obstruction by uterine fibroids, 213
 Lymphosarcoma of mesentery, 267

M.

- Mabbott, prevention of sore nipples, 19
 Mager, cancer of pancreas, 46
 Magnesium sulphate in dysentery, 111
 Maillefert, vaccine infection of the vulva, 371
 Malaria, injections of arseniate of iron in, 333
 Males, osteomalacia in, 530
 Malarin, 53
 Malin, enlargement of the liver in pneumonia, 384
 Malnutrition, subcutaneous administration of egg yolk in, 316
 Malt soup for infants, 145
 Mammary gland, tuberculosis of, 120; "breaking nipple-strings," non-development of, 501
 Man, pathological anatomy of rabies in, 357
 Manicatis, changes in the nerve cells in infantile diarrhoea, 298
 Mann, sodium cinnamate in pulmonary tuberculosis, 237
 Mannaberg, multiple gunshot wounds of intestine, 118
 Maragliano, albuminuria in diabetes, 244; typhoid meningitis and meningism, 382; tuberculosis and pregnancy, 514
 Marchesi, hymeneal cysts, 350
 Marcuse, treatment of indolent ulcers, 102
 Mariani, treatment of pelvic hæmatocœle, 330
 Marriage and heart disease, 66
 Martini, use of calcined bone in bone repair, 156
 Massage, abdominal, in heart disease, 147
 Matas, acute traumatic pneumothorax, 343
 Mathieu, diabetes insipidus and hysteria, 189
 Maygrier, treatment of fissure of the nipple, 68
 Mayo, radical cure of hernia, 386
 Mays, the hypodermic injection of silver nitrate over the course of the vagi in the treatment of pulmonary consumption, 218
 Measles, a diagnostic sign in the initial stage of, 45; German, the enanthem of, 80; an early symptom of, 151
 Meningism, meningitis, and typhoid, 382
 Meningitis, meningism, and typhoid, 382
 Menopause, the, and heart disease, 369
 Menstruation, precocious, 86
 Mercury, reaction of syphilitic blood to, 20; inunctions of in lupus, 186; treatment of acute poisoning by, 222
 Merkens, cystic goitre with amœbæ, 338
 Mesentery, chylous cyst of, 196; intestinal obstruction from torsion of, 210; lymphosarcoma of, 267
 Methyl salicylate in rheumatism, 395
 Metritis, chronic, chloride of zinc or curette in? 142, 312
 Meunier, an early symptom of measles, 151
 Meyer, gland ulcer in tuberculosis, 90; treatment of hypertrophy of the prostate, 325
 Michaelis, post-influenzal spastic paralysis, 2047]

- Micholitsch, acute torsion of uterus by myoma, 498
 Microbes in chronic arthritis deformans, 117
 Micro-organisms in strangulated hernia, 358
 Minin, operative treatment of relapsing typhilitis, 388
 Mirowski, toxic symptoms from hydrastis canadensis, 258
 Mirabeau, trophic bladder affections after gynecological operations, 331
 Missin, progressive ossifying myositis, 226, 544
 Mogt, action of suprarenal extract on the mammalian heart, 164
 Morestin, forceps left in peritoneum, 124; laminaria tent in the bladder, 373
 Morian, necrosis of pancreas, 47; hæmorrhagic necrosis of pancreas, 302
 Morris, operation for pus in gall bladder in typhoid fever, 229
 Mühlhng, infection with organisms through bugs and leeches, 540
 Müller, changes in the nerve cells in infantile diarrhoea, 298
 Muggia, subcutaneous administration of egg yolk in, 316
 Muxmura, experimental inorganic cardiac, 21
 Murphy's button. See Button
 Myeloma, multiple, associated with asthenic bulbar paralysis, 207; multiple, and albumosuria, 208
 Myoma, acute torsion of uterus by, 498
 Myopia, operative treatment of, 193, 367
 Myositis, progressive ossifying, 226, 323, 544
 Myxœdema, acute, with tachycardia, glycosuria, melæna, mania, and death, 264

N.

- Namercz, the physiological action of lactophenin, 128
 Naphthalan, 522
 Naphthalin in the treatment of ulcers, 318
 Necrosis of pancreas, 47; hæmorrhagic of pancreas, 302
 Needle in the heart, 65
 Nephrectomy, vaginal, for pelvic kidney threatening dystocia, 217; with total removal of the ureter for papilloma, 287
 Nephritis, malarial, 79
 Nephrolithiasis, the Roentgen rays in the diagnosis of, 8
 Nephrotomy for anuria, 551
 Nephro-typhoid, 98
 Nerve, peripheral, transplantation of, 529
 Nerve cells, changes in the in infantile diarrhoea, 298
 Nerve, effects of cancer, 131
 Nervous system, the central, lesions of in delirium tremens, 242
 Neumann, deciduoma malignum and lung infection, 391
 Neuritis, peripheral diabetes complicated by, 507; optic, treatment of after influenza, 523
 Nicolaysen, myositis ossificans progressiva, 323; infantile tuberculosis, 361
 Nipple, treatment of fissure of, 68
 Nipples, sore, prevention of, 19
 Nipple-strings, breaking, non-development of mammary gland, 501
 Nirvanin, 129
 Noble, ventrifixation of uterus, an after-history, 310
 Noël, urinary toxicity in pregnancy, 389
 Northrup, cancer of pancreas, exploratory incision, 228
 Nose, local use of suprarenal gland in diseases of, 204; pathological conditions in the and asthma, 527
 Nové-Jossand, treatment of exstrophy of the bladder, 528
 Nutrition, foetal, 349
- O.
- Obesity, gout, and diabetes, 22; thyroid treatment in, 109
 Obliteration of the aorta, 96
 Obstruction, intestinal, hysteria simulating, 60; intestinal from torsion of the mesentery, 210; fatal intestinal by uterine fibroids, 213
 Ocular. See Eye
 Odebrecht, slow progress of cancer of body of the uterus, 555
 Oderfeld, operative treatment of intussusception, 303
 Œdema, in Bright's disease, 171; hysterical blue, 363

Esophagitis and peri-esophagitis phlegmonosa, 509
 Ogilvie, congenital immunity to syphilis, 279
 O'Hara, hairballs in stomach, 345
 Oil of gaultheria in chorea, 39
 Olliphant, formalin in whooping-cough, 220
 Ombredanne, intracerebral injection of antitetanus serum, 127
 Omentum, lesser pancreatic cyst in, 48
 Oöphorectomy in an infant for hernia of ovary, 393
 Ophthalmia, purulent, protargol and argonin in, 35; the treatment of as met with in South Africa, 73
 Opitz, fatal interstitial gestation, 314; acardiacus with "cyclops" deformity, 500
 Organisms, infection with through bugs and leeches, 540
 Organs, the female and the thyroid gland, 368
 Orthmann, hæmorrhage in early tubal pregnancy, 182
 Orthiform, emulsion of, 93; in laryngitis, 297; drawbacks of, 375
 Osler, acute myxœdema, with tachycardia, glycosuria, melena, mania, and death, 264
 Osteomalacia in males, 430
 Osteomyelitis, chronic, bacteriology of, 188
 Ostermayer, saline solution in septicæmia after abortion, 290
 Ottaviano, disinfecting power of sublimate, 399
 Ovariectomy in pregnancy, uterine adhesions, 70; double, in hydatidiform molar pregnancy, 232
 Ovary, hernia of the, 106; hernia of, oöphorectomy in an infant, 393
 Ovum, abortive, discharged three days after normal labour, 255
 Oxycamphor, 337
 Oxytocic, lactose as a, 105

P.

Pancreas, cancer of, 46; necrosis of, 47; in congenital syphilis, 49; cancer of, exploratory incision, 228; hæmorrhagic necrosis of, 302; cancer of, 512
 Paquez, enterotomy for ileo-cæcal cancer, 268
 Papilloma, nephrectomy with total removal of the ureter for, 287; of the Fallopian tube, 554
 Parachymosin, 167
 Paralysis, asthenic bulbar, associated with multiple myeloma and albumosuria, 207; general, hereditary antecedents of, 203; post-influenzal spastic, 224; peritonitic, enterostomy in, 266; Landry's, artificial respiration in, 277; painful, in children, 283; bulbar, without anatomical changes, 543
 Paralytics, general, ulnar analgesia, a diagnostic sign in, 174
 Paraplegia and embolism of abdominal aorta, 246
 Parturition, acute inversion of the uterus following, 52
 Partus. *See* Labour
 Paterson, the suprasternal fossa as the starting point of infection, 241
 Payr, pancreatic cyst in lesser omentum, 48
 Peck, protargol and argonin in purulent ophthalmia, 35
 Pelk, thyroid extract in uterine fibroid, 141
 Pelvis, the exanthemata as factors in producing disorders of, 234
 Peptonuria in scarlet fever, 134
 Perforation, in typhoid fever, recovery from operation for, death from the fever, 81; in typhoid fever, the surgery of, 82; of the uterus, 372
 Peri-esophagitis phlegmonosa and esophagitis, 509
 Peritoneum, forceps left in, 124
 Peritonitis, tuberculous, cure of by laparotomy, 26
 Peroxide of hydrogen as an antiseptic, 354
 Pessary 32 years in vagina, 236
 Peterson, peripheral nerve transplantation, 529
 Phehin and cosaprin, 239
 "Phloridzin diabetes" in pregnancy, 200
 Photographic plate, action of bacteria on, 150
 Phthisis, venous thrombosis in, 133; treatment of by medicated serum, 202; incipient, the Roentgen rays in, 492; the rest treatment of, 520
 Picqué, removal of foreign bodies from the female bladder, 104
 Picric acid in eczema, 183
 Pinard, puericulture during pregnancy, 87; the fœtus at term in extrauterine pregnancy, 313

Piorkowski, the bacteriological diagnosis of typhoid fever, 262
 Pitres, epigastric analgesia in tabes, 494
 Piutti, pyrantin, 91
 Placenta, hæmostatic injections into the, 85; rupture of uterus during removal of, 123
 Plague serum as a therapeutic agent, 352
 Platt, greenstick fractures of the clavicle, 6
 Pleurotomy in gangrene of lung, 326
 Pneumonia, due to mixed infection, 190; bleeding in, 259; central, discovered by the radio-scope, 342; malarial, endovenous injections of quinine in, 377; enlargement of the liver in, 384
 Pneumothorax, acute traumatic, 343
 Podrez, the surgery of the heart, 495; recent research on the gonococcus, 506
 Poisoning by lead in newborn infants, a source of, 31; acute mercurial, treatment of, 222
 Poliomyelitis anterior acuta, 401
 Pollosson, uncontrollable vomiting, induction of abortion, tubal (?) pregnancy discovered, 57
 Polyadenomata of the large intestine, 511
 Pomara, hepatorrhaphy, 548
 Porak, disappearance of the uterus by superinvolution, 107; pregnancy in a double uterus, death from embolism, 181; abortive ovum discharged three days after normal labour, 255
 Posadas, operative treatment of hydatid cysts, 365
 Pospeloff, skin changes in gout, 23
 Posture, in obstetric operations, 179
 Pozzo, ovariectomy in pregnancy, uterine adhesions, 70
 Praubner, sugar and muscular fatigue, 260
 Pregnancy, and glycosuria, 12; diabetes insipidus, and, 13; extrauterine, 51; extirpation of the spleen during, for traumatic rupture, 67; ovariectomy in, uterine adhesions, 70; puericulture during, 87; chronic valvular disease in, 139; ventrifixation and, 160; protracted tubal, 180; in a double uterus, death from embolism, 181; early tubal, hæmorrhage in, 182; removal of inflamed appendix during, 198; fetal urine and "phloridzin diabetes" in, 200; leucocytosis in, 201; operation for strangulated hernia in, 214; hydatidiform molar, double ovariectomy in, 232; twin, in tubal sac, 253; operation late in, in ectopic gestation, 271; extrauterine, the fœtus at term in, 313; the early diagnosis of, 328; old tubal, the relics of, 329; ovarian, 348; and urinary toxicity in, 389; fatal chorea in, 392; and tuberculous, 541; and the puerperium, the pulse in, 515; (?) tubal in uncontrollable vomiting, 517
 Presentation, brain, 370; forehead, 552
 Price, extrauterine pregnancy, 51
 Prostate, the operative treatment of hypertrophy of, 535
 Protargol, in purulent ophthalmia, 35; in gonorrhœa, 110
 Psychoses due to coprostasis, 299
 Ptoxis of transverse colon, 55
 Puech, rupture of symphysis pubis in labour, 532
 Puericulture during pregnancy, 87
 Puerperal fever. *See* Fever
 Puerperium, normal, slackening of pulse in, 162; and pregnancy, the pulse in, 515
 Pulse, slackening of in normal puerperium, 162; the in pregnancy and the puerperium, 515
 Purpura, retroperitoneal and other fatty tumours in unusual situations, 101
 Pus in gall bladder in typhoid fever, operation for, 229
 Pyrorectomy, case of, 248
 Pyrantin, 91
 Pyrogallic derivatives and chrysarobin, 219

Q.

Quadriceps tendon, treatment of rupture of, 406
 Quénu, wound of the peritoneal portion of the rectum, 247; polyadenomata of the large intestine, 511
 Quinine, endovenous injections of in malarial pneumonia, 377
 ——— amblyopia, experimental, 149

R.

Rabies, pathological anatomy of in man, 357
 Rabinowitsch, tubercle bacilli in butter, 359
 Radaeli, picric acid in eczema, 185
 Radioscope, central pneumonia discovered by, 342
 Radzikowsky, the treatment of sciatica, 112

Ransome, A., some conditions necessary for the spread of tuberculosis, 76
 Rectum, a modification of Kraskie's operation for cancer of, 177; wounds of the peritoneal portion of the, 247; feeding by the, 355
 Reflex, the great-toe, a new diagnostic sign in disease of the spinal cord, 493
 Reichel, œdema in Bright's disease, 171
 Reichmann, atrophic gastric catarrh, 97
 Reinfection, syphilitic, a case of, 270
 Ren-Picci, renal disease of malarial origin, 116
 Renal. *See* Kidney
 Rénon, somatose and transitory glycosuria, 94
 Respiration, artificial, in Landry's paralysis, 277
 Rest, treatment of phthisis by, 520
 Reynolds, treatment of tuberculous arthritis of hip-joint, 212
 Reznès, intracerebral injection of antitetanus serum, 127
 Rheumatism, methyl salicylate in, 305
 Richter, treatment of catarrhal ulcers of large intestine, 275; treatment of catarrh and ulceration of intestine, 519
 Rickets, foetal and lymphangiectatic elephantiasis, 524
 Rindfleisch, free body in the peritoneal cavity, 556
 Ringel, the Roentgen rays in the diagnosis of nephrolithiasis, 8; osteomalacia in males, 530
 Riss, perforation of the uterus, 372
 Robin, the therapeutic uses of suprarenal gland, 17
 Robinson, antistreptococcal serum in puerperal septicæmia, septic cellulitis, post-operative sepsis, and erysipelas, 336
 Roentgen rays in the diagnosis of nephrolithiasis, 8; in dermatology, 36; the, for fœtus papyraceus, 311; cardiac arrhythmia observed by the, 321; in lupus, 397; in incipient phthisis, 492
 Roget, injections of normal saline solution in diabetic coma, 143
 Rohleder, naphthalan, 522
 Roncaglia, the value of the Alexander operation, 347
 Rousse, forehead presentation, 552
 Rosen, cosaprin and phehin, 239
 Rosenfeld, the size, form, and position of the stomach, 191
 Rosenthal, pneumonia due to mixed infection, 159
 Rosier, senile epilepsy, 25
 Ross, ectopic gestation occurring twice in the same patient, 199
 Rostoksi, the bactericidal effect of acid urine on the course of cystitis, 40; renal typhoid fever, 225
 Rothbrook, artificial respiration in Landry's paralysis, 277
 Roussel, a source of lead poisoning in newborn infants, 3
 Ruge, venous thrombosis in phthisis, 133
 Rumpf, diabetes mellitus, 43

S.

Saalfeld, treatment of acne, 538
 Sabrazès, pulmonary actinomycosis, 243
 Sac, tubal, twin pregnancy in, 253; hernial, sloughing of, intestine strangulated in the perforated skin, 346
 Saemisch, scabies of the cornea, 178
 Salicylate of methyl, 292
 Saline solution, normal, injections of in diabetic coma, 143; in septicæmia after abortion, 290
 Sanaberger, angina pectoris, 526
 Sanatoria, treatment of tuberculosis in, 89
 Sanose, 515
 Savor, extirpation of the spleen during pregnancy for traumatic rupture, 67
 Scabies of the cornea, 178
 Scarlet fever and scarlatina. *See* Fever, Scarlet
 Schaller, fetal urine and "phloridzin diabetes" in pregnancy, 200
 Schiefs, operative treatment of myopia, 367
 Schiele, ichthyol in pulmonary tuberculosis, 278
 Schleich's infiltration anaesthesia, 503
 Schlesinger, the pancreas in congenital syphilis, 49; operative treatment of brain syphilis, 305; hair balls in stomach, 346
 Schmolli, methyl salicylate in rheumatism, 395
 Schnaper, senile changes in the Fallopian tube, 31
 Schneider, microbes in chronic arthritis deformans, 117

Schott method in heart disease, 356
 Schoule, salicylate of methyl, 202
 Schüle, pleural and pericardial effusions, 172; bulbar paralysis without anatomical changes, 542
 Schultz, action of disinfectants on the plague bacillus, 398
 Schwarz, malaria, 53
 Schwilzer, removal of the transverse colon, 286
 Sciatica, the treatment of, 112
 Scognamiglio, glandulen in tuberculosis, 90
 Semb, Alexander's operation, 309
 Senator, asthenic bulbar paralysis associated with multiple myeloma and albumosuria, 207
 Senn, the limitations of operative treatment for varicocele, 157
 Sepsis, puerperal, hydrogen peroxide in the treatment of, 10; post-operative, antistreptococic serum in, 36, 331
 Septicæmia after abortion, saline solution in, 290; puerperal, antistreptococic serum in, 336
 Serum, diagnosis of diphtheria by, 1; artificial, in puerperal fever, 18; treatment of pulmonary tuberculosis by, 71; antitetanus, intracerebral injection of, 127; antitetanic, in tetanus, 146, 376; artificial, subcutaneous injections of in typhoid fever, 153; medicated, treatment of phthisis by, 202; introduction of into the circulation, 295; antistreptococic, in puerperal septicæmia, septic cellulitis, post-operative sepsis, and erysipelas, 336; artificial, injections of in the insane, 504; artificial, treatment of burns by the injection of, 521; antistreptococic, in puerperal sepsis, 531
 Sevestre, suffocating laryngitis in croup, 362
 Shepherd, a needle in the heart, 65
 Sigmoid flexure, volvulus of, three operations, 266
 Silberstein, prolapse of inverted uterus, reduction after fifteen years, 256
 Silver nitrate, hypodermic injection of over the course of the vagi in the treatment of pulmonary consumption, 218; powdered, in antral empyema, 539
 Simmonds, congenital primary cardiac hypertrophy, 115; localised tuberculosis of liver, 132
 Sinton's operation for strangulated hernia in pregnancy, 214
 Skin, changes in in gout, 23; eruption on caused by antipyrin, 37
 Sloughing of hernial sac, intestine strangulated in the perforated skin, 346
 Smith, L., ventrifixation and pregnancy, 160
 Society, American Gynecological, antistreptococic serum in puerperal sepsis, 531
 Sodium cinnamate in pulmonary tuberculosis, 237
 Solder, psychoses due to coprostasis, 299
 Somatoses, the administration of, 38; in syphilis, 75; and transitory glycosuria, 94
 South Africa, the treatment of ophthalmia as met with in, 73
 Spanbock, temporal hemianopsia associated with diabetes insipidus, 546
 Spiller, resection of the Gasserian ganglion, 61
 Spina bifida, congenital prolapsus and, 122
 Spine, reduction of curvature of the, 64; Calot's treatment of caries of, 192
 Spinelli, the treatment of pelvic exudations by juxta-cervical eletrotomy, 34
 Spleen, extirpation of during pregnancy for traumatic rupture, 67; the, in syphilis, 561
 Splenectomy for malarial hypertrophy, 84
 Stark, v., hæmatin and hæmoglobin preparations, 379
 Sternhaus, temporal hemianopsia associated with diabetes insipidus, 546
 Stepkowsky, craniotomy, Cæsarean section, and the patient, 216
 Sterility, treatment of, 161
 Stern, the visible outlines of the stomach and intestines, 100
 Sternberg, entrance of air into veins and heart during operation, 385
 Stoecklin, ulcerative membranous tonsillitis, 113
 Stomach, surgical treatment of cancer of, 7; the visible outlines of, 100; the size, form, and position of, 101; early operation in cancer of the, 285; hair balls in, 345
 Stomatitis in children, treatment of, 353; ulcerative, acute
 Stone, acute inversion of the uterus following parturition, 52
 Stools of sucklings, fermentation in, 360
 Stowasser, sugar and muscular fatigue, 260
 Strasburger, suppurative epididymitis after typhoid fever, 121
 Strauss, hysteria simulating intestinal obstruction, 60; alimentary glycosuria, 339

Strehl, "retroperitoneal lymph cyst" or psosas abscess, 364
 Stricture of the bowel, conservative treatment of, 83
 Strube, heroin, 276
 Stubbart, the sanatorium treatment of tuberculosis, 82
 Sublimite. See Corrosive
 Sucklings fermentation in the stools of, 360
 Sugar and muscular fatigue, 260
 Superinvolution, disappearance of the uterus by, 107
 Suppositories, mercurial in hæmorrhoids, 238
 Suprarenal gland, the therapeutic uses of, 17; action of extract of on the mammalian heart, 164; extract of in Addison's disease, 165; local use of in diseases of the throat and nose, 204
 Swain, H. L., local use of suprarenal gland in diseases of the throat and nose, 204
 Symmers, plague serum as a therapeutic agent, 352
 Sympathectomy in epilepsy, 175
 Symphysiotomy versus Cæsarean section, 9
 Symphysis pubis, rupture of in labour, 532
 Syphilis, congenital, the pancreas in, 49; somatose in, 75; hereditary, preventive treatment of, 144, 378; expectancy of life in, 154; reinfection by, 270; congenital, immunity to, 279; of brain, surgical treatment of 305; the spleen in, 561

T.

Tabes, traumatic, 4; the symptomatology of, 42; after traumatism, 383; epigastric analgesia in, 494
 Takowlow, naphthalin in the treatment of ulcers, 348
 Talma, experimental inorganic cardiac murmurs, 21
 Tapeworm, aspidium spinulosum in the treatment of, 505
 Tchernischeff, pathological anatomy of rabies in man, 357
 Testes in inguinal hernia, 155
 Tetanus, the treatment of, 72, 221; antitoxin, treatment of, 146, 376; intracerebral injection of antitoxin in, 184, 396
 Thayer, malarial nephritis, 79
 Thevelin, sloughing of hernial sac, intestine strangulated in perforated skin, 346
 Thomas, the symptomatology of tabes, 42
 Thompson, triplets consisting of a double monster and a single child, 533
 Throat, local use of suprarenal gland in diseases of, 204
 Thrombosis, venous, in phthisis, 133
 Thue, gastroprosis, 133
 Thyroid gland, treatment by in obesity, 109; extract of in uterine fibroid, 141; the female organs and, 368; extract of in ununited fracture, 536
 Tinker, operation for perforated gastric ulcer, 29
 Toes, acquired deformities of the, 249
 Tolot, cancer of pancreas, 512
 Tonsillitis, ulcerative membranous, 113
 Touchard, peroxide of hydrogen as an antiseptic, 354
 Toupet, removal of inflamed appendix during pregnancy, 198
 Toxicity of the blood in epilepsy, 261; urinary, in pregnancy, 389
 Toxins, chemotactic action of on leucocytes, 560
 Trauma and tuberculosis, 319
 Traumatism, tabes after, 383
 Tricomi, the radical treatment of simple gastric ulcer, 344
 Trigemini, resection of second division of, 230
 Tripter treatment of hæmatemesis, 56
 Triplets, consisting of a double monster and a single child, 533
 Trümmer, tabes after traumatism, 383
 Trümmer, traumatic locomotor ataxy, 4
 Trzeleicky, Schleich's infiltration anæsthesia, 503
 Tube, Fallopian, senile changes in, 31; hernia of, 25; papilloma of, 554
 Tuberculin, Koch's new, in lupus, 187; the diagnostic value of, 282
 Tuberculosis, verrucosa cutis, 24; acute, decidua malignum simulating, 32; pulmonary, the serum treatment of, 71; some conditions necessary for the spread of, 76; the sanatorium treatment of, 89; glandulen in, 90; of the mammary gland, 120; localised, of liver, 132; of the bladder, treatment of, 194; pulmonary, sodium cinnamate in, 237; pulmonary, ichthyol in, 278; acute, the differential dia-

gnosis of from typhoid, 300; and trauma, 319; infantile, 361; and pregnancy, 514; castration with excision of the vesiculæ seminales and vas deferens for, 54
 Tuffer, supraclavicular fatty tumour, 211; ptosis of transverse colon, 550
 Tumour, supraclavicular fatty, 211; parietal, taken for intra-abdominal, 235
 Tumours, retroperitoneal and other fatty, in unusual situations, 101; mesenteric, solid and cystic, 266; of the round ligament, 516
 Typhlitis, relapsing, operative treatment of, 388
 Typhoid fever. See Fever, enteric

U.

Ulcer, perforated gastric, operation for, 29; varicose, treatment of, 304; simple gastric, the radical treatment of, 344
 Ulceration, duodenal, 135; of intestine, treatment of, 519
 Ulcers, indolent, treatment of, 102; catarrhal, of large intestine, treatment of, 275; naphthalin in the treatment of, 318
 Upshur, hydrogen peroxide in the treatment of puerperal sepsis, 10
 Urachus, cyst of the, 510
 Urban, trauma and tuberculosis, 319
 Ureter, total removal of in nephrectomy for papilloma, 287; congenital invagination of bladder into, 549
 Urethritis, chronic, treatment of, 513
 Urine, acid, bactericidal effect of on the course of cystitis, 40; foetal, in pregnancy, 200; toxicity of in pregnancy, 389
 Uterus, Apostoli's treatment of catarrhal affections of appendages of, 33; acute inversion of following parturition, 52; duplex, and abnormal hairiness, 69; disappearance of by superinvolution, 107; congenital prolapsus of and spina bifida, 122; rupture of during removal of the placenta, 123; thyroid extract in fibroid of, 141; double, pregnancy in a, death from embolism, 181; chronic inversion of, conservative operation, 197; fatal intestinal obstruction by fibroids of, 213; inverted, prolapse of, reduction of after fifteen years, 256; fibroids of and albuminuria, 274; incision of fundus of in Cæsarean section, 291; ventrifixation of, an after-history, 310; perforation of, 372; the wound of in Cæsarean section, 390; acute torsion of by myoma, 408; double, in an adult, 534; slow progress of cancer of body of the, 555
 Vaccine infection of the vulva, 371
 Vagi, hypodermic injections of silver nitrate over the course of in the treatment of pulmonary consumption, 218
 Vagina, acquired atresia of, 140; pessary 32 years in, 236; double with cloaca in an adult, 534
 Valentiner, malarin, 53
 Valvassori-Peroni, injections of arseniate of iron in malaria, 333
 Van Arsdale, enterostomy in peritonitic paralysis, 269
 Vanderlinden, intestinal invagination in a child, 387
 Varices, vesical, hæmaturia from, 307
 Varicocele, symptomatic, 27; the limitations of operative treatment for, 157
 Variot, central pneumonia discovered by the radioscope, 342
 Varnier, slackening of pulse in normal puerperium, 162
 Vas deferens, excision of for tuberculosis, 547
 Veeder, relative importance of flies and water supply in spreading disease, 51
 Veins, entrance of air into during operation, 385
 Ventrifixation and pregnancy, 160
 Vesiculæ seminales, excision of for tuberculosis, 547
 Vigerani, vulvo-vaginitis in children, 88
 Vinay, diabetes insipidus and pregnancy, 13; marriage and heart disease, 66; "breaking nipple strings," non-development of mammary gland, 501
 Volvulus of sigmoid flexure, three operations, 266
 Vomiting, uncontrollable, induction of abortion in, 517
 Vulva, vaccine infection of, 371
 Vulvo-vaginitis in children, 88

W.

Wahl, hereditary antecedents of general paralysis, 209
 Wallace, action of suprarenal extract on the mammalian heart, 164

Washburn, Cæsarean section versus symphysiotomy, 9
 Water supply and flies, relative importance of in spreading disease, 58
 Waterman, treatment of tuberculous arthritis of hip-joint, 212
 Weber, tumours of the round ligament, 516
 Wechselmann, skin eruptions caused by anti-pyrim, 37
 Weil, progressive ossifying myositis, 544
 Wenzel, leukæmia, 99
 Wersilow, diabetes complicated by peripheral neuritis, 507
 White, twin pregnancy in tubal sac, 253

Whooping-cough, formalin in, 220; bromoform in, 240; eucinin in, 559
 Wiart, hernia of Fallopian tube, 252
 Wife, male hermaphrodite married as a, 233
 Williams, the Roentgen rays in incipient phthisis, 492
 Wilson, nephro-typhoid, 98; artificial respiration in Landry's paralysis, 277
 Winzenroth, treatment of optic neuritis after influenza, 523
 Woillez's disease. *See* Disease
 Woman, an adult monotrematous, 125
 Woodward, recovery from operation for typhoid perforation, death from the fever, 81

Work, muscular, 294
 Wound, the uterine in Cæsarean section, 390
 Wounds of the peritoneal portion of the rectum, 247
 Wyeth, conservative treatment of stricture of the bowel, 83; arsenious acid in malignant disease, 92

X rays. *See* Roentgen X.

Z.
 Zandoni, the serum treatment of pulmonary tuberculosis, 71

ILLUSTRATIONS.

| | PAGE | | PAGE |
|---|--|---|------------------------|
| A Case of Unilateral (Hemiplegic) Spasm and Contracture without Paralysis, Sir T. Grainger Stewart (Six Figures) ... | 1, 3, 4 | Hysterectomy as a Conservative Operation, Mr. J. B. Sutton (Two Figures) ... | 839, 841 |
| Thymus Extract in Exophthalmic Goitre, Dr. W. Rushton Parker (Four Figures) ... | 12, 13 | Removal of a Nævoid Tumour of the Intestine, Mr. J. H. Nicoll (Three Figures) ... | 844 |
| Tonsillar Calculi, Dr. W. G. A. Robertson ... | 15 | A Method for the Reduction of Dislocations of the Hip, Mr. C. A. Sturrock (Three Figures) ... | 845 |
| An Astigmatic Test Chart, Mr. E. Beaumont ... | 28 | Portrait of Major-General Leonard Wood ... | 973 |
| Nasal Currettes, Dr. G. Hunter Mackenzie ... | 28 | Pemphigus Contagiosus, Mr. N. Gordon Monro (Two Figures) ... | 1022 |
| A Urethral Syringe, Mr. R. Stoney ... | 28 | Eczema treated by X Rays, Mr. C. Thurston Holland (Two Figures) ... | 1024 |
| The Influence of Pathological States upon the Elimination of Water and Carbon Dioxide by the Skin, Dr. J. O. Wakelin Barratt (Three Figures) ... | 80 | Portrait of Sir William Roberts ... | 1063 |
| A New Theory of Cerebral Activity and Sleep, Dr. Lugaro (Three Figures) ... | 93, 94 | The Localisation and Symptoms of Disease of the Cerebellum Considered in Relation to its Anatomical Connections, Dr. A. Bruce (Four Figures) ... | 1080, 1081, 1082 |
| Lateral Curvature of the Spine, its Prevention and Treatment, Mr. K. Barwell (Nine Figures) ... | 137, 138, 266, 267, 1208, 1209 | The Atrophic Marasmus of Nurslings, Dr. A. Baginsky (Three Figures) ... | 1085, 1086 |
| Valvular Drainage Tubes in Empyema, Dr. E. A. C. Baylor ... | 147 | Toogood's Improved Clinical Thermometer ... | 1102 |
| Minor Conservative Surgery, Mr. R. Creswell ... | 148 | Encysted Vesical Calculi, with an Account of 27 cases, Mr. W. Bruce Clarke (Five Figures) ... | 1141, 1142, 1143 |
| A Case of Severe Hæmorrhagic Diphtheria with Marked Membranous Development, Dr. H. Batty Shaw ... | 149 | A Case of Arrested Development of the Third and Fourth Ribs, Dr. A. G. Levy (Two Figures) ... | 1150 |
| Parallel Expanding Rectal Speculum, Dr. James MacMunn ... | 160 | Rupture of Heart, Dr. R. H. Steen ... | 1154 |
| The New Badge of the Royal Army Medical Corps ... | 175 | Aseptic Aural and Nasal Syringe for Self-Use, Mr. Wyatt Wingrave ... | 1169 |
| The Action of Some Essential Oils and other Volatile Substances on the Growth of the Bacillus Tuberculosis and in the Treatment of Phthisis, Dr. W. Murrell ... | 202 | The Interpretation of Skiagraphs, Dr. E. Muirhead Little ... | 1210 |
| The University Touriquet ... | 218 | Laryngeal Growths in Young Children, Dr. G. Hunter Mackenzie ... | 1211 |
| Obphorectomy in the Treatment of Cancer of the Breast, Mr. Stanley Boyd (Eight Figures) ... | 257, 253, 259 | Case of Abscess of the Lung successfully Treated by Drainage, Mr. J. W. Crerar (Two Figures) ... | 1212 |
| Fibromyomata of the Vagina, Dr. J. Phillips ... | 262 | A Case of Stone in the Bladder, which had Formed Around an Ordinary Pin as a Nucleus, Dr. H. B. Nicholson (Two Figures) ... | 1275 |
| Portrait of Mr. Thomas Wakley ... | 283 | A Midwifery Surgical Instrument, Dr. E. Maginnis (Two Figures) ... | 1286 |
| Portrait of Professor Coats ... | 317 | Portrait of Dr. John Moir ... | 131 |
| The Rhinoplastic Operation, Sir W. Stokes (Five Figures) ... | 326, 327 | The Amœba Dysenteriae: its Relation to Tropical Abscess of the Liver, Captain D. G. Marshall (Five Figures) ... | 1387, 1388 |
| The Rectal Contour and Consistence of 1,000 Prostate Glands, Mr. E. Hurry Fenwick (Eight Figures) ... | 396, 397 | The Removal of a Fibroid from a Uterus Unicornis in a Parous Subject, Mr. A. Doran (Four Figures) ... | 1389, 1390, 1391 |
| The Pathological Laboratory of the County of London Asylum at Claybury (Six Figures) ... | 420, 421, 422 | Bone Crochet Hook (4½ inches long) Accidentally Lodged within the Peritoneal Cavity, Mr. H. Briggs (Two Figures) ... | 1393 |
| Mosquitos and Malaria, Major R. Ross (Three Figures) ... | 432 | Portrait of Dr. Norman Kerr ... | 1442 |
| M. Louis de Redmount on his Rounds ... | 485 | Amputation of the Lower Jaw, Sir W. Stokes (Two Figures) ... | 1449, 1450 |
| The Anatomy and Surgery of the Peritoneal Fossæ, Mr. B. G. A. Moynihan (Twenty-one Figures) ... | 522, 523, 524, 525, 591, 592, 593, 657 | The Dissemination of Cancer of the Breast, Mr. H. J. Stiles (Twelve Figures). Double-Plate Page between ... | 1454 and 1455 |
| Earth in Relation to the Preservation and Destruction of Contagia, Dr. G. V. Poore (Five Figures) ... | 526, 527 | The Probable Parental Form of the Sharp-Tailed Filaria found in the Blood of the Aborigines of British Guiana, Dr. C. W. Daniels (Nine Figures on Special Plate), and One Figure on ... | 1459 |
| Acute Dermatitis caused by handling the Rhus Toxicodendron, Dr. F. Nicholson ... | 530 | Myxœdema Treated with "Colloid" Material, Dr. R. J. M. Buchanan (Seven Figures) ... | 1461 |
| Portrait of Sir John Struthers ... | 561 | Pulsating Tumour in the Submaxillary Region, Mr. P. C. Fenwick ... | 1463 |
| Portrait of Professor Rutherford ... | 564 | Plexiform Neuroma of Eyelids, with Ptosis, Excision, Ptosis Relieved by Panas's Plastic Operation, Mr. R. Parker (Three Figures) ... | 1463, 1464 |
| The Pathology of the Thyroid Gland, Dr. G. R. Murray (Thirteen Figures) ... | 579, 580, 581, 582, 651, 652, 655 | Haslar Hospital: Main Entrance ... | 493 |
| The Therapeutics of Heat and Light and Electric Heat and Light Baths, Dr. H. Lewis Jones ... | 658 | Royal Portsmouth Hospital ... | 494 |
| Displaced Left Middle Turbinate which Obstructed the Nasal Passage for Ten Years, Dr. R. Fullerton ... | 661 | Esplanade, Southsea, showing "Victory's" Anchor, and Pier and Hotel ... | 1495 |
| Hard-lip Forceps, Dr. Carline ... | 675 | Portsmouth Harbour, with "Victory" and "St. Vincent" ... | 1495 |
| Carcinoma of the Tonsil, Mr. J. B. Connal (Two Figures) ... | 725 | Faith Healing, Ancient and Modern (Eight Figures and Full Page Plate) ... | 1501, 1502, 1503, 1504 |
| A Case of General Paralysis of the Insane in a Child, Dr. J. Thomson and Dr. D. A. Welsh ... | 785 | The Etiology and Diagnosis of Cerebro-Spinal Fever, Dr. W. Osier (Two Figures) ... | 1521, 1527 |
| Fibroma of Base of Skull removed through the Cheek, Mr. W. F. Brook ... | 787 | Some Points Connected with Sleep, Sleeplessness, and Hypnotics, Dr. J. B. Bradbury (Two Figures) ... | 1529 |
| An Aseptic Obstetric Case, Mr. H. Rowe ... | 799 | Multiple Adenomata of the Skin, Dr. R. Y. Aitken (Two Figures) ... | 1533 |
| Medical Notes on Montenegro, Dr. O. L. Levy and Dr. J. C. F. Nau- mum (Two Figures) ... | 801, 802 | Portrait of Mr. Lawson Tait ... | 1561 |
| Hebrun Working Class Sanatorium, Dr. C. T. Williams ... | 834 | | |

INJURIES PRODUCED BY AN EXPLOSION OF GUN-COTTON.

By GERALD SICHEL, F.R.C.S.ENG.,
Surgeon, R.N.

[Communicated by the Director-General, Royal Naval Medical Service.]

On February 9th, 1897, in the afternoon, when we were lying at Zanzibar, an explosion of a dry primer for a torpedo occurred on board the ship I was then in. The primer contained $12\frac{3}{4}$ ozs. of dry gun-cotton, and the detonator 38 grs. of fulminate of mercury; the weight of the metal fittings was probably under $\frac{1}{2}$ lb. Four men were fatally injured, and two slightly.

CASE I.—A. M., aged 23, was killed at once. The body was almost severed. The anterior wall of the abdomen was blown away, the intestines protruding, and all his clothes were blown off. There were severe injuries to the limbs also, with much pulping and splintering of bones.

CASE II.—J. J. J., aged 23. The left hand was blown off, the right hand was just hanging on by a little skin and a few tendons. There was compound fracture of the left femur. Much contusion generally, and numerous smaller wounds. Shock was great. Amputation was performed in the upper third of the left thigh. Death occurred in two hours.

CASE III.—A. W. R., aged 21. Wounds of scalp (from one of which there was arterial bleeding), limbs, and trunk, especially of the right thigh, in which numerous large splinters of bone from another man (A. M.) were sticking. There was much laceration and contusion and intense shock. Death occurred in three hours.

CASE IV.—C. H., aged 20. There was pulping of the right thigh along the line of the femoral artery, a punched-out wound of the anterior abdominal wall, not penetrating, a compound fracture of the right metatarsal bones, and numerous other cuts and bruises. Shock was intense, and death occurred in five hours.

CASE V.—J. J., aged 22. Two scalp wounds, a wound of the upper lip, the alveolar margin of the upper jaw was fractured, and the central incisors were loose. There was a skin abrasion over the front of the chest, and much bruising of the face. The patient recovered.

CASE VI.—A Seedieboy, who had a slight cut of the left side of the chest, also recovered.

Although the effects of the explosion were terribly violent, they were very localised. With the exception of the Black, who was some dozen yards off, and probably struck by a flying bit of metal, all the men were within four or five yards. The scene of the accident was on the starboard side of the fore-shelter deck, which was covered with blood. The deck in places was slightly splintered, and several indentations, some of them a quarter of an inch deep, were seen in the metal fittings, where pieces of the primer itself had struck.

The injured men were all very deaf. Arterial bleeding occurred from one wound only. The most serious features were the intense shock, the number of small oozing wounds many of which had been caused by small bits of tinfoil from the primer, while from many others oil was oozing (the primer had just been cleaned with oil), and the amount of bruising. In Case IV the wound in the abdominal wall appeared to have been caused by one of his metal trouser buttons having been driven in; it was not, however, left in the wound.

The faces of all the men were easily recognisable. It is probable that A. M. had the explosive on his knees (he sitting down), and that J. J. J.'s hands were touching it at the time.

I think that this is an occasion where the "compressed air" ("projectile air") theory must be allowed to be responsible for the major injuries, partly splitting the skin itself, partly entering through small wounds caused by the tinfoil, and perhaps the oil. It is allowed that "windage" may rupture the membrana tympani; surely the skin itself may also be split by the force of impactly compressed air—it is a question of degree. Clothes may be torn and rent by the force of an explosion alone, if this force is only strong enough the tougher and more elastic skin also has to give way.

This is a very different matter from "explosive" results after a projectile has travelled several hundred yards; it is also different from "wind contusions" when a shot has gone some distance.¹ The visible wounds were no indication of the amount of injury really sustained.

It may be questioned whether it was wise to perform amputation of the thigh in Case II, but taking into consideration the facts that probably the femoral artery was pulped up, and that if he lived both forearms would subsequently require amputation, probably the course pursued offered him his only chance.

Beyond the amputation in this case, the only treatment carried out was staunching the oozing wounds by swathing them

in sal alembroth wool, and attempting to combat the intense shock. For this, 30-minim doses of tincture of opium and large doses of brandy were given. Externally, hot-water bottles were applied. Later injections of morphine with atropine were administered. (Tablets for this purpose are provided by the service.)

As to the administration of opium in shock, Surgeon-Colonel Stevenson remarks: "Opium in any form or quantity must be applied with the greatest caution, if at all, in the treatment of cases of extreme shock of collapse." In these cases, however, the accompanying pain and great mental disturbance urgently demanded a powerful sedative. I believe the classical treatment for shock is summed up in three words: "opium, food, and stimulation." (Travers). My own opinion is, that although all the patients were considerably eased, they were given too little rather than too much opium, and should I be called upon to again treat similar cases, I shall feel inclined to give the tincture in 3j doses. I think, however, that nothing could possibly have saved these men.

REFERENCE.

¹ See Colonel Stevenson's remarks on such cases in *Wounds of War*, pp. 57 and 77.

MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL, THERA- PEUTICAL, PATHOLOGICAL, Etc.

ANÆSTHETICS THROUGH A TRACHEOTOMY TUBE.

ANYONE who has given an anæsthetic through a tracheotomy tube in an extensive jaw or tongue operation must have often been worried by finding himself continually in the operator's way, or, trying to keep out of the way, by failing to maintain a sufficient anæsthesia; not to mention the constant soiling of the lint or towel by blood.

In administering chloroform some little time ago in an extensive Kocher's operation performed by Mr. Mayo Robson, where a preliminary tracheotomy had been done, I inserted one end of an ordinary rubber drainage tube into the outer tracheotomy tube; the other end I brought down on the patient's chest some 7 or 8 inches from the field of operation, and gave a C.E. mixture over it on a Skinner's mask with the greatest comfort to myself as well as to the operator.

Trendelenburg has an apparatus, I believe, specially made for this purpose, but anyone who tries this simple expedient will find it work admirably. It will be advisable to allow the patient to have a few breaths of air first before inserting the rubber tube.

Leeds.

W. MCGREGOR YOUNG, M.A., M.B., Ch.M.

STRYCHNINE IN OPIUM POISONING.

At 7.30 p.m. on May 5th I was called to see Miss A. B., a stout lady aged about 38. She was in a comatose state—the pulse at the wrist was imperceptible, the heart sounds were extremely faint, respirations gasping, about six to the minute, the pupils pinhole, the skin moist and warm. She had gone to bed at 3 p.m., having been nursing a friend the previous sixty hours, during which time she had had no sleep, and scarcely any nourishment. I found beside the bed an empty glass smelling of opium. Having tried in vain to rouse her by flicking with a wet towel and vigorous friction to the limbs, I gave her $\frac{1}{10}$ grain of strychnine hypodermically. Almost immediately the muscles of the face and arms twitched, then she opened her eyes, and when sufficiently aroused to swallow I gave her a pint of strong coffee. There was some difficulty in keeping her awake for a couple of hours. She made a rapid recovery and admitted having taken fifty minims of laudanum as she had frequently done before. She may not have taken more, but on account of the exhaustion, the opium might have taken much greater effect. This will show what an invaluable agent strychnine is in such cases. If the patient is able to swallow or a stomach pump is at hand, potassium permanganate is extolled as a specific antidote.

Herne Hill.

R. D. PENNEFATHER.

Barnsley doctors in particular. As a straw soon shows which way the wind is blowing, so often does one sentence in a letter show the cause and explain the animus of that letter: "In this town (Barnsley), out of twenty-five doctors all but one have their medicine dispensed at their own surgeries," and, he cruelly adds, "I think that not one single qualified dispenser is engaged by these *men*" (the italics are once again my own).

Now, I am not going to defend dispensing by unqualified persons, neither am I going to take up the cudgels for my brother-practitioners at Barnsley (they are, doubtless, well able to defend themselves), but I cannot keep silence when it is gravely suggested to Her Majesty's Privy Council that, because various irregularities may occasionally occur in doctors' surgeries, therefore the whole body of practitioners should be debarred dispensing their own prescriptions. Moreover, it would be impossible to pass a workable law to this effect, as urgent cases frequently arise where remedies must be dispensed by the doctor himself, *cito, tuto, et* (I hope) *jucunde*.

Is this dispensing by doctors to be stopped by law, and are our patients to suffer till the nearest chemist can be found, who possibly may be miles away? Our professional reputation—not to say our common humanity—would bid us defy such a law, which would be "more honoured in the breach than in the observance."—I am, etc.,

W. L'HEUREUX BLENKARNE, L.S.A., M.R.C.S.,
Formerly Surgeon to the Leicester and Leicestershire
Provident Dispensary.

Worthing, June 10th, 1899.

SIR,—For the last five years I have practised here and have not dispensed. I have clubs, and my method is as follows. The chemist who does my dispensing supplies me with prescription papers to fold in the form of a letter, with his name printed on the back. On one of these forms I write my prescription, either in the case of private or club patient. Private patients pay for their own medicine in the ordinary way, but the chemist agrees with me not to repeat their medicines without an order from me. He also keeps a separate book in which all my prescriptions are entered. Club medicines are charged to me, and are supplied by the chemist at a reduced rate agreed on between us.

I find the system works well, and is suitable for town practice, where there is a reliable chemist. I have no reason to believe that my prescriptions are made use of, but I know there is a good deal of promiscuous prescribing done by the chemists. This matter should be taken in hand. It is not only unfair to us, but also a source of danger to the public.—I am, etc.,

Runcorn, May 24th. GEORGE H. ORMSBY, M.R.C.P.I., etc.

DIRECT REPRESENTATION.

SIR,—If doubt existed in the mind of the general practitioner as to the inadequacy of his representation upon the General Medical Council, it surely would be dispelled if he but scanned the remarks of Sir W. Gairdner, Sir C. Nixon, Sir R. Thorne, Dr. Little, and Mr. Carter, who one and all by their action prove that the universities and corporations which they represent take the primary place in their affections, and that the rank and file of the profession are of small moment, albeit the money with which the Council was formed and sustained came not from the coffers of the universities nor the corporations, but was mainly squeezed from the pocket of the general practitioner, who has been taxed to support a Council as valueless to him as the old Parliament of our forefathers. But a radical change is approaching, and instead of one or two additional representatives the whole Council must be made truly representative, or they will suffer the fate of the old packed Parliaments of the past, and be succeeded by some modern system which will jealously guard the interests of the profession at large, and be less wedded to universities and corporations, these collective masses having already more than their share of Parliamentary representation. That the resolution on increased direct representation should be shelved no doubt was a foregone conclusion. But all honour to the seven who supported Mr. Brown's motion. Their names will not be forgotten, and although their number is small, the hour is coming when the genera-

practitioner will rise up, and as the cloud the size of a man's hand was the first sign of the deluge, so will these few presage the numbers who will follow. The general practitioner must make a supreme effort in his own interests. It is his bounden duty to speedily agitate amongst his brethren at large, and when thoroughly combined place their many grievances before Parliament and secure its mighty aid to extinguish the present qualifying bodies who are nothing but obsolete competitors for the £ s. d. of the poor student, and who care little for him when his siller is extracted. In their place let there be substituted one Government examination, without which no one can be placed upon the *Register*. Let the licensee pay a regular yearly fee for a protection similar to what lawyers have, and the necessity of Defence Unions and other similar bodies will disappear.—I am, etc.,

June 13th, 1899.

SENEX.

"ADENO-CARCINOMA" OF THE BREAST.

SIR,—Mr. Harold Stiles in his paper in the *BRITISH MEDICAL JOURNAL* of June 17th refers to Professor Halsted's recent description of "adeno-carcinoma" of the breast. When Professor Halsted sent me a reprint of his paper some months ago I at once recognised in the beautiful drawings the ringlike masses of epithelial cells which I had myself described seven years ago. In a paper read before the Pathological Section of the British Medical Association at Nottingham in 1892, and published in the *JOURNAL* for 1892, vol. ii, p. 676, will be found my description of this cancerous tissue, which so closely mimics gland tissue, together with a drawing and microphotograph of it. I found these carcinoma rings in 2 out of 20 cancers of the breast which I examined, but as at that time I was a pathologist rather than a surgeon, I was not able to say anything as to the clinical features of tumours containing such "adenomatous tissue;" but I observe on reading my paper that I found such rings in a recurrent growth, and my statement that I had not been able to find them reproduced in the affected glands shows that the glands were cancerous. I did not propose to call cancers containing such gland-like tissue "adeno-carcinoma" as Professor Halsted has done, because I did not wish to confuse this tissue with a mixture of cancer alveoli and adenoma of the ordinary adenomatous epithelial type, in which the epithelial cells are quite different from those of the carcinoma ring-like masses.

In the same paper I called attention to the frequent presence of lumina amongst the cancer cells in the alveoli in typical scirrhus growths. This condition is of course quite distinct from the large ring-like masses of cancerous epithelium.—I am, etc.,

Bristol, June 20th.

CHARLES A. MORTON.

UNIVERSITIES AND COLLEGES.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

An ordinary meeting of the Council was held on June 8th, the President, Sir William MacCormac, Bart., K.C., V.O., in the chair.

Diploma of Fellow.—On the recommendation of the Court of Examiners, the Council amended Clause 4, Section 1, of the Regulations for the Diploma of Fellow, to the effect that the first winter session, if spent at a recognised science institution, may be counted in place of one of the three winter sessions at a recognised medical school required for the first examination for the Fellowship of the College.

Memorial from Members of the College.—A draft memorial was received from some of the members endorsing the proposal that power should be obtained to confer the Fellowship of the College upon persons who are not Members, and at the same time asking the Council to include in the proposed supplementary charter some scheme for the representation of Members of the College upon the Council. The Secretary was directed to write in reply that the Council considered it inopportune to introduce more than the first matter in the application.

Honorary Fellowship.—The draft petition and draft charter relating to this were presented to and approved by the Council, with the exception that Members of the College are to be

eligible for the honorary Fellowship, and that the number of Honorary Fellows is never to exceed fifty. It was resolved that a meeting of Fellows and Members should be summoned for Wednesday, July 5th, 1899, at 3 p.m., to consider the draft petition and charter, and that copies of these documents should be supplied to Fellows and Members applying for them.

Examinerships.—Mr. Henry Morris was elected a member of the Court of Examiners. The following examiners were appointed:

Elementary Biology under the Examining Board in England.—Peyton T. B. Beale, Frederick Gymer Parsons, Thomas William Shore, Thomas George Stevens. **Anatomy and Physiology under the Examining Board in England.**—Anatomy: Stanley Boyd, William Bruce Clarke, Arthur Robinson, and Arthur Thomson. **Physiology:** John Rose Bradford, George Alfred Buckmaster, and Leonard Erskine Hill. **Anatomy and Physiology for the Fellowship of the College.**—Anatomy: James Ernest Lane, Berkeley G. A. Moynihan, Frederick Gymer Parsons, and Alfred Harry Young. **Physiology:** Thomas Grigor Brodie, D'Arcy Power, Ernest Henry Starling, and William Henry Thompson. **Midwifery:** William Radford Dakin, Walter S. H. Griffith, Arthur H. N. Lewers, and Herbert Ritchie Spencer. **Public Health.**—Part I: Arthur Pearson Luff. Part II: Sydney Arthur Monckton Copeman.

UNIVERSITY OF OXFORD.

A NUMBER of the foreign guests who had been present at the Stokes's Jubilee Celebration at Cambridge and at the Centenary of the Royal Institution, were invited to Oxford on June 8th, when the honorary degree of D.C.L. was conferred on some of them. Among these was Dr. Oscar Liebreich, Professor of Therapeutics and Pharmacology in the University of Berlin. In presenting him, the Regius Professor of Civil Law, Dr. H. Goudy, said: *Salutamus deinceps virum e finibus Germaniae insignem. Ille secreta cerebri feliciter rimatus ad ipsa materiae atomata penetrando phosphorum capitale Phosphorus et Lucifer ipse clarissimus nobis primo patefecit. Idem acerbissimos animi corporisque dolores impune extinxit.* Spargens chlorea venena soporiferumque papaver.

Immo somnum insonnibus attulit, mollem, mortique similimum. (We next greet a distinguished man from the confines of Germany. He successfully exploring the secrets of the brain by penetrating to the very indivisible elements of matter first revealed to us the phosphorus of the head, himself a most illustrious Phosphor-Lucifer. He also abolished the most bitter pains of mind and body safely, sprinkling pale poisons [chloral] and drowsy poppy. To the sleepless he brought sleep, gentle and like unto death.)

UNIVERSITY OF CAMBRIDGE.

SECOND EXAMINATION FOR MEDICAL AND SURGICAL DEGREES.—The following candidates have satisfied the Examiners:—

Part I. Pharmaceutical Chemistry.—C. Akerman, Cai.; C. B. M. Aldridge, Christ's; C. A. Anderson, B.A., Trin.; H. J. Beddow, Christ's; H. J. D. Birkett, Trin.; G. T. Birks, King's; W. F. Buckle, B.A., Cai.; G. V. Bull, B.A., Cai.; S. H. Clarke, Cai.; D. H. W. Cotes-Predy, Emm.; G. Cowan, King's; W. L. Cripps, Trin.; A. H. Crossley, Cla.; S. Dixon, Trin.; A. B. Dunne, B.A., Queens'; G. G. Ellett, B.A., Cath.; H. Falk, King's; H. N. Fink, B.A., Trin. H.; A. D. Fox, B.A., Emm.; D. H. Fraser, Cai.; H. E. Graham, Jes.; J. E. Hailstone, B.A., H. Selw.; J. M. Hamill, Trin.; L. Harke, B.A., Pemb.; A. F. Heald, Non-Coll.; F. A. Hepworth, Joh.; E. Higson, Magd.; H. F. Horne, King's; A. B. Howitt, Cla.; W. E. Hume, Pemb.; F. A. G. Jeans, Joh.; P. W. Leathart, B.A., Cla.; R. O. Lee, B.A., Emm.; R. Luker, Pemb.; C. G. Martin, B.A., Down.; C. D. Mathias, B.A., Trin.; R. C. Mott, Trin.; W. H. Newton, Emm.; L. Orton, B.A., Joh.; H. B. Owen, Cai.; B. H. Pain, Emm.; N. C. Patrick, B.A., Christ's; O. V. Payne, Joh.; J. E. Pellow, Joh.; D. Pennington, B.A., Cai.; R. N. Poignand, Cai.; J. C. A. Rigby, B.A., Cai.; C. T. Y. Robson, M.A., Joh.; J. Sharples, B.A., Cai.; L. Shingleton-Smith, Joh.; H. Statham, B.A., Christ's; B. L. Thurlow, Cai.; F. C. Trapnell, King's; A. W. Wakefield, B.A., Trin.; L. G. A. West, Joh.; R. G. Willis, Joh.; A. B. Wilson, Pemb.; C. J. Wilson, Christ's; H. W. Wiltshire, Cla.

Part II. Human Anatomy and Physiology.—J. F. Alexander, B.A., Trin.; H. W. Atkinson, B.A., Cai.; R. L. Bell, B.A., Pet.; H. C. Brown, B.A., Emm.; F. Bryan, B.A., King's; W. F. Buckle, B.A., Cai.; F. R. Carroll, B.A., Trin.; S. Child, B.A., Pemb.; H. H. Clarke, B.A., Trin.; L. Courtald, B.A., Trin.; H. A. Cutler, B.A., Cla.; R. S. Drew, B.A., Pemb.; W. H. Fisher, B.A., Emm.; E. H. Harrison, Cla.; J. P. Hedley, B.A., King's; F. L. Henderson, B.A., Cai.; T. G. M. Hine, B.A., King's; H. C. Hocken, Cai.; H. T. Hodgkin, B.A., King's; W. W. Jeudwine, B.A., H. Selw.; P. A. Lloyd-Jones, B.A., Joh.; W. T. D. Mart, B.A., Joh.; T. M. Neatby, M.A., Joh.; L. Noon, Trin.; H. E. Norton, B.A., Trin.; R. G. Nothwanger, B.A., Joh.; C. de C. Pellier, M.A., Cla.; R. M. Ranking, B.A., Pemb.; R. Rees, B.A., Down.; J. C. Rix, B.A., Trin.; R. Rolfe, Cla.; C. Roper, B.A., Cai.; E. S. Scott, B.A., Pemb.; F. E. Shipway, B.A., Christ's; H. F. Skrimshire, B.A., Jes.; J. E. B. Snell, B.A., Cai.; R. Spearman, B.A., Cai.; W. H. E. Stewart, B.A., Cai.; E. Weatherhead, Joh.; G. A. Weir, B.A., Trin.; H. C. Williams, B.A., Pemb.; G. R. Wilson, B.A., Trin.; H. M. Wilson, B.A., Trin. H.; H. P. Wiltshire, B.A., Joh.; C. R. Worthington, Cai.; G. A. Wright, Christ's.

FIRST EXAMINATION FOR MEDICAL AND SURGICAL DEGREES.—The following candidates have satisfied the Examiners:

Part I. Chemistry and Physics.—E. D. Anderson, Pemb.; H. B. Atkinson, Trin.; A. L. Baly, Emm.; J. B. Banister, Jes.; J. R. Beale, Cla.; J. W. B. Bean, H. Selw.; A. S. Burgess, Cai.; H. C. Cameron, Joh.; M. A. Cassidy, Cla.; J. W. Chell, Joh.; R. P. Cockin, Cai.; W. I. Cumberland, Christ's; G. E. Davidson, Cai.; G. B. Davis, B.A., Corp. Chr.; T. Drysdale, Jes.; L. Dukes, Trin.; T. W. N. Dunn, Cai.; W. G. P. Ellis, M.A., Cath.; T. I. Faulder, B.A., Cla.; C. F. Fothergill, Emm.; E. Garnsey, Cai.; T. R. Glynn, Cla.; J. R. C. Greenlees, Joh.; C. R.

F. Hall, Trin.; E. C. Hardwicke, Corp. Chr.; W. Hastings, Christ's; D. Humphrey, Sid. Suss.; F. A. Juler, Trin.; J. C. Lawton-Roberts, Cla.; E. Lloyd, Emm.; G. H. K. Macalister, Joh.; J. T. Macrab, Christ's; M. McPherson, Cla.; H. F. Marris, Cai.; S. H. Nixon, Emm.; S. A. Owen, Trin.; C. E. Palmer, Cai.; C. W. Ponder, Emm.; R. Puttock, Emm.; W. H. Rayner, Trin.; W. H. Robinson, Down.; F. Shingleton-Smith, King's; C. M. Stevenson, Joh.; B. H. Stewart, B.A., Jes.; H. C. Turner, Emm.; W. E. Weber, H. Selw.; A. Wilkin, King's; E. K. Williams, Cai.; R. G. Williams, Cai.; J. K. Willis, Queens'; C. D. Wilson, M.A., Corp. Chr.; W. H. Woodburn, Christ's; F. Worthington, Joh.

Part II. Elementary Biology.—G. D. Alexander, Cai.; E. D. Anderson, Pemb.; H. M. Aviss, Down.; J. G. Back, Trin. H.; A. S. B. Bankart, Trin.; S. Barradell-Smith, Joh.; J. R. Beale, Cla.; J. W. B. Bean, H. Selw.; F. Black, Cai.; A. S. Burgess, Cai.; H. C. Cameron, Joh.; R. A. Cassidy, Cla.; D. A. Chamberlain, Cla.; J. W. Chell, Joh.; R. P. Cockin, Cai.; S. B. Couper, B.A., Cla.; G. L. Cox, Christ's; H. P. Crampton, Cla.; W. I. Cumberland, Christ's; N. R. Cunningham, Cai.; H. M. Davies, Trin.; L. G. Davies, Trin.; H. S. Dickson, Christ's; T. Drysdale, Jes.; L. Dukes, Trin.; T. W. N. Dunn, Cai.; W. G. P. Ellis, M.A., Cath.; R. G. Elwell, B.A., Trin.; H. J. A. Evans, Cla.; A. H. Fardon, Christ's; T. I. Faulder, B.A., Cla.; A. T. Field, Emm.; C. F. Fothergill, Emm.; E. Garnsey, Cai.; T. R. Glynn, Cla.; S. Gooding, Joh.; V. W. Hardie, Trin. H.; E. C. Hardwicke, Corp. Chr.; W. Hastings, Christ's; G. Holroyd, Christ's; E. C. Hughes, Cla.; D. Humphrey, Sid. Suss.; C. H. T. Hott, Cai.; R. W. Ironside, Pemb.; C. D. Isaac, Joh.; C. King, Trin.; J. Lambert, Down.; J. C. Lawton-Roberts, Cla.; C. S. Lee, Cai.; E. Lloyd, Emm.; M. J. Logan, Down.; K. Lucas, Trin.; G. H. K. Macalister, Joh.; S. M. Mackenzie, Trin.; J. T. Macrab, Christ's; C. M. Macnaghten, Trin.; M. McPherson, Cai.; E. H. Mayhew, Emm.; S. H. Nixon, Emm.; S. A. Owen, Trin.; C. E. Palmer, Cai.; P. R. Parkinson, Cai.; M. Phillips, Cai.; C. W. Ponder, Emm.; J. M. Postlethwaite, Emm.; H. T. Rich, Pemb.; R. F. Robinson, Trin.; H. Schumann, King's; F. F. Shout, Cai.; K. S. Singh, Pemb.; P. S. Stephens, Trin.; C. M. Stevenson, Joh.; L. St. G. Stubbs, Christ's; H. C. Turner, Emm.; J. D. C. White, M.A., Trin.; J. K. Willis, Queens'; F. Worthington, Joh.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

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

F. W. Robinson, M.D., C.M.Aberd., F. M. Ogilvie, M.B., B.C.Cantab., L.R.C.P.Lond., A. Gaskell, Surg.R.N., L.R.C.P.Lond., W. C. Wood, M.D., Lond., L.R.C.P.Lond., F. N. Cookson, M.D.Lond., L.R.C.P.Lond., H. J. Scharlieb, M.D., B.S.Lond., L.R.C.P.Lond., S. Copley, L.R.C.P.Lond., Felix B. Carter, M.D.Lond., L.R.C.P.Lond., F. Riley, M.B., B.S.Lond., L.R.C.P.Lond., A. W. Sanders, M.D.Lond., L.R.C.P.Lond., A. R. J. Douglas, M.B., B.S.Lond., L.R.C.P.Lond., A. M. Crabtree, L.R.C.P.Lond., J. T. Hewetson, M.B., C.M.Édin., L.R.C.P.Lond., A. B. Tucker, M.B.Lond., L.R.C.P.Lond., S. H. Berry, M.B.Lond., L.R.C.P.Lond., E. J. Fox, B.Sc.Lond., L.R.C.P.Lond., W. J. Harding, M.B.Lond., L.R.C.P.Lond., G. T. Watson, M.B. and B.C.Camb., L.R.C.P.Lond., J. J. Evans, M.B., C.M.Édin., L.R.C.P.Lond., H. S. Newland, M.B., Ch.R.Adel., L.R.C.P.Lond., M. V. Dec, M.B., C.M., L.R.C.P.Lond., J. Battersby, L.R.C.P.Lond., P. L. Daniel, L.R.C.P.Lond., H. T. H. Williams, M.D.Lond. (Canada), L.R.C.P.Lond., and W. B. Stokes, M.D.Dubl., M.R.C.P.Lond.

Two other gentlemen passed the examination, but not having attained the legal age will receive their diplomas at future meetings of the Council. Twenty-two gentlemen were referred for six months and one for one year.

HOSPITAL AND DISPENSARY MANAGEMENT.

GLOUCESTER GENERAL INFIRMARY.

At the last meeting of the Gloucester General Infirmary Dr. Batten, the senior physician, tendered his resignation. The chairman stated that the resignation was received with the greatest regret, as Dr. Batten had not only for many years given his medical services to the institution, but also as senior of the staff had taken an active part in the administration of the hospital. He moved the following resolution, which, having been warmly supported by other members of the committee, was adopted unanimously:

"That in accepting Dr. Batten's resignation the committee desire to place on record their deep appreciation of the valuable services rendered by him to this institution for thirty-three years, and also their intention to recommend the governors to ask him to accept the post of Consulting Physician of the infirmary at the earliest opportunity."

THE CITY OF LONDON ASYLUM.

DURING the year 1898 there were 621 patients under treatment in this Asylum, and the average number daily resident was 480, showing a decrease of 7 upon the previous year. There were 149 patients admitted and 103 discharged; of these the recovery-rate amounted to 47.75 per cent., while the death-rate was 8.3 per cent. The number of private patients received in this institution has shown an increase of 33 in twelve months, so that at the close of the year there were no fewer than 112 in the Asylum, and Professor White, the medical superintendent, remarking upon the success of the undertaking, states that he has been obliged to decline many cases for want of space. This, however, will soon be remedied, as the new buildings are rapidly approaching completion, which will permit a further extension of the accommodation for those who cannot pay more than 21s. a week. For such accommodation there is a never-failing demand. Beyond a severe epidemic of influenza, which cost 7 lives the

the correct principles for the treatment of this rare disease. Hence, in the surgery of tumours of the urachus, Tait once more appears as a pioneer whose claims will not be forgotten.

Perhaps the most original and at the same time most valuable innovation which surgery owes to Lawson Tait is the washing of the peritoneum, after an operation, with large quantities of water for the purposes of cleansing and hæmostasis. Many other terms have been applied to this method, but his original contribution on this subject in the third volume of the *British Gynecological Journal* is named *Methods of Cleansing the Peritoneum*, and the only other term in this remarkable essay besides "cleansing" is "washing." Whatever it should strictly be called in accordance with the science of hydraulics, this cleansing of the peritoneum has proved of the greatest benefit, and, although it has been much abused and often applied when unnecessary, though harmless, it has been found by later observers to act favourably on the patient in certain ways quite unrecognised by its famous inventor. Tait avowedly claimed cleansing and hæmostasis as the aim of washing of the peritoneum. Within a few years it was found that it was also a process of transfusion. Later, it was shown that when some of the water was left behind in the peritoneal cavity it ensured the rapid removal of poisonous products from the peritoneum. It has further been discovered that the addition of salt greatly increases the transfusing and antiseptic value of the water used for cleansing the peritoneum. Such remarkable developments of a new surgical practice greatly redound to the credit of its inventor. Lawson Tait was, in respect to washing of the peritoneum, once again a bold projector who successfully carried an original design into practice. He did so on the sound surgical principle that the less the surgeon fears the peritoneum and the more thoroughly he cleans it and checks bleeding and oozing, the better it will be for the patient.

Enough has been said to show that Lawson Tait will always be remembered as a bold surgeon of unusual originality. His merits, widely recognised in his lifetime, will not be forgotten after his death, for he made a name for himself in the glorious history of British surgery.

Mr. Tait in 1871 was married to Sybil Anne Stewart, a daughter of the late Mr. William Stewart, solicitor, Wakefield. With this lady, who survives him, very widespread sympathy will be felt in the irreparable loss she has sustained.

Mr. Tait's remains were cremated at Liverpool, and the ashes were interred in the garden of his house at Llandudno.

ROBERT MOIR, M.D., F.R.C.S. EDIN.,

Surgeon-Major, Indian Medical Service (Retired).

THIS able and highly-esteemed officer of the Indian Medical Service died at St. Andrews, N.B., on June 7th, 1899, aged 68 years. He was the eldest son of Dr. David Macbeth Moir, of Musselburgh, the well-known "Delta" of *Blackwood's Magazine*, author of the novel *Mansie Waugh*, a history of ancient medicine, and other works, and a poet of great refinement and feeling. Robert Moir was educated at the Musselburgh Grammar School and Edinburgh Academy, and studied medicine in the University of Edinburgh, and subsequently in Paris. He obtained the Licence of the Royal College of Surgeons, Edinburgh, in 1851, and was admitted to the Fellowship in 1859. He took the degree of M.D. of the Edinburgh University in 1852, the subject of his thesis being *Injuries and Diseases of the Vertebrae*. He held the office of Resident Physician and Surgeon in the Edinburgh Infirmary, and was appointed to the service of the Honourable East India Company by the Marquis of Dalhousie, who was a friend of his father's, in 1853 in which year he arrived in India.

He served at Dibrugarh in Assam in charge of a Goorka regiment and the civil station until he was sent home on sick furlough in 1858. He was in Assam during the Mutiny. Returning to India in 1860 he was appointed to the civil charge of Haupper in the North-Western Provinces, and subsequently served as Civil Surgeon of Naini Tal and Benares, and Superintendent of the Central Gaol at Agra. Thence he proceeded to Simla, where he obtained the important charge of Joint Civil Surgeon, a coveted appointment then tenable for a period of two years, at the close of which he was posted to the

Civil Surgeoncy of the 24th Pergunnahs, Bengal, with the added appointment of Medical Inspector of Emigrants. While holding this charge he was deputed to inquire into the causes of excessive mortality in the gaols of Behar, and officiated for a time as Professor of Midwifery in the Calcutta Medical College. He proceeded on furlough in 1875, and while at home was offered by Sir Richard Temple, then Lieutenant-Governor of Bengal, the appointment of Principal of the Calcutta Medical College and Professor of Medicine. This is one of the prizes of the Bengal Medical Service, and would have been a worthy climax of a most meritorious career; but circumstances occurred which induced him to retire from the service with the rank of Surgeon-Major in June, 1877, and during the remaining twenty-two years of his life he practised in St. Andrews in partnership with his brother, Dr. John Wilson Moir. In this capacity he earned by his great attention and skill a high reputation as a physician and surgeon, and by his amiable disposition, kindly manner, and sympathetic services, he endeared himself to the community of the ancient Scottish burgh. His popularity and the great esteem and regard in which he was held were attested by the numbers who attended his funeral and the visible signs of regret which were manifested on that occasion. Upwards of one hundred beautiful wreaths were placed on his grave.

Robert Moir was a strikingly handsome man. He was gifted with good abilities, which had been developed by an excellent education. He was a man of modest and diffident disposition, and though everything he wrote and did bore the stamp of culture and sense, he was not given to writing or publishing, and limited his intellectual and professional output to the work which it was his duty to perform. To this he devoted himself with diligence and success. His strength and charm arose mainly from his sterling personal character, his kindness, truthfulness, fidelity, manliness, and courtesy. He was one of those men whom it was not easy to know well, but whom to know well was to esteem and like greatly; and with longer and more intimate acquaintance, esteem and liking increased. He was kind to the poor. He took an immense interest in the St. Andrews Cottage Hospital, and was instrumental in augmenting its scope and efficiency.

Robert Moir's memory will long remain treasured in the recollection of those who knew and worked with him in India, and of numerous patients and friends (for the terms were mostly synonymous in his case) at home who derived benefit and pleasure from his ministrations.

He leaves a widow and family of three sons and three daughters. His eldest son, David Macbeth Moir, M.B., is a captain in the Indian Medical Service, and his youngest son, an officer in the Indian Staff Corps.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Professor Serafino Biffi, for many years President of the Società Freniatria Italiana, and author of numerous contributions to the literature of mental diseases; Dr. A. Ziegler, Surgeon-General of the Swiss Army; Dr. Inverardi, Professor of Obstetric Medicine in the University of Padua; Dr. Franz Groh, sometime Professor of Surgery in the now defunct Medico-Chirurgical Institute of Olmutz, aged 77; Dr. Hugo Weidel, Professor of Chemistry in the University of Vienna; Dr. Alejandro Torres Puig, sometime President of the Spanish Medico-Chirurgical Academy; Dr. Paul Vogelgesang, Medical Superintendent of the Berlin Municipal Institution for Epileptics, aged 41; Dr. Hermann Immermann, Professor of Clinical Medicine in the University of Basel, aged 61; Dr. Josef Aics, a well-known neurologist of Cologne, aged 39; Dr. Franz von Chelius, son and former assistant of the famous Professor of Surgery in the University of Heidelberg; and Dr. Caerman, sometime President of the Belgian Medical Federation.

BEQUESTS.—The late Alderman R. Farley, of West Bromwich, has bequeathed £1,000 to the endowment fund of the West Bromwich District Hospital. Mr. John Abraham, of Northfield, who died in April last, has left £100 each to the following Birmingham charities: General Hospital, Queen's Hospital, Women's Hospital, Eye Hospital, Skin and Lock Hospital, Ear and Throat Hospital, Children's Hospital, and the General Dispensary.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

PROPER LODGING OR ACCOMMODATION.

IN the case of *Warwick v. Graham*, an important point involving the construction of Section CXXIV of the Public Health Act, 1875, was decided on appeal from the decision of the justices of Workington, by a Divisional Court consisting of Mr. Justice Day and Mr. Justice Lawrence. The section was as follows: "Where any suitable hospital or place for the reception of the sick is provided within the district of a local authority, or within a convenient distance of such district, any person who is suffering from any dangerous infectious disorder, and is without proper lodging accommodation.....may, in a certificate signed by a legally qualified medical practitioner.....be removed by order of any justice to such hospital or place at the cost of the local authority."

It appeared that the respondent Graham and his family, which consisted of seven persons, lived in a four-roomed house. One of his sons, who was suffering from scarlet fever, was kept apart in the parlour on the ground floor, but it was impossible to isolate him, and it was proved that there would be danger of infection to the other people in the house if he continued to occupy the room. The boy was properly nursed and fed, and had adequate medical attendance, and so far as he himself was concerned, had proper accommodation.

The Workington Corporation applied to the justices for an order to remove the boy to the hospital, but the justices held that the words "without proper lodging or accommodation" must be construed with regard to the wants of the infected person and dismissed the application.

On the appeal, however, the Court held that the section was clearly directed to the protection of persons from infection, and not only to the protection of the infected person himself, and that the justices ought to have made an order for the removal of the boy.

VITAL STATISTICS.

THE marriage-rate for 1898 was not included in these statistics (given to T.H.R.) last week. The number of persons married per 1,000 living, according to the quarterly returns of the Registrar-General, was 16.2. This is a slight increase upon the rates for 1896-7, which were 15.8 and 16.0 respectively upon the estimated population of those years.

HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 6,695 births and 3,607 deaths were registered during the week ending Saturday last, June 17th. The annual rate of mortality in these towns, which had been 17.7 and 16.4 per 1,000 in the two preceding weeks, rose again to 16.5 last week. The rates in the several towns ranged from 9.0 in Croydon, 9.3 in Cardiff, 11.4 in Brighton, and 11.8 in West Ham, to 20.8 in Halifax, 21.7 in Burnley, 22.0 in Salford, and 24.8 in Manchester. In the thirty-two provincial towns the mean death-rate was 17.4 per 1,000, and was 2.3 above the rate recorded in London, which was only 15.1 per 1,000. The zymotic death-rate in the thirty-three towns averaged 1.9 per 1,000; in London the rate was equal to 1.8 per 1,000, while it averaged 2.0 in the thirty-two provincial towns, among which the highest zymotic death-rates were 3.0 in Swansea, 3.2 in Burnley, 3.3 in Sheffield, and 4.1 in Manchester. Measles caused a death-rate of 1.2 in Liverpool and 2.8 in Manchester; scarlet fever of 1.3 in Bradford; and whooping-cough of 1.0 in Plymouth and in Salford, 1.3 in Hull, and 1.5 in Gateshead. The mortality from "fever" showed no marked excess in any of the large towns. The 83 deaths from diphtheria in the thirty-three towns included 35 in London, 10 in Sheffield, 6 in Leicester, 5 in Swansea, 4 in Liverpool, and 4 in Leeds. One fatal case of small-pox was registered in Liverpool and one in Hull, but not one in London or in any other of the thirty-three large towns; and only one small-pox patient was under treatment last week in the Metropolitan Asylum Hospitals. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had increased from 2,161 to 2,269 at the end of the four preceding weeks, had further risen to 2,280 on Saturday last, June 17th: 262 new cases were admitted during the week, against 229, 260, and 278 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, June 17th, 1,025 births and 546 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 19.9 and 18.9 per 1,000 in the two preceding weeks, further declined to 17.9 last week, but was 1.4 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 13.5 in Perth and 17.0 in Edinburgh to 19.6 in Paisley and 21.9 in Aberdeen. The zymotic death-rate in these towns averaged 2.2 per 1,000, the highest rates being recorded in Leith and Glasgow. The 248 deaths registered in Glasgow included 1 from small-pox, 10 from measles, 5 from scarlet fever, 2 from diphtheria, 6 from whooping-cough, 3 from "fever," and 12 from diarrhoea. Three fatal cases of scarlet fever were recorded in Edinburgh, and 2 of diphtheria in Dundee and in Aberdeen.

GLASGOW UNIVERSITY CLUB.—The next dinner of this club will be held at the Trocadero Restaurant, Piccadilly Circus, on Friday, June 30th, at 7 P.M., when Lord Kelvin will take the chair. The guest of the evening will be Professor Sir William Gairdner, K.C.B. Further particulars can be obtained from either of the Honorary Secretaries, Mr. Norman M. MacLehose, 13, Queen Anne Street, Cavendish Square, W., or Mr. James M. Dodds, M.A., Dover House, Whitehall, S.W.

MEDICAL NEWS.

MR. CHARLES WHITE, Honorary Consulting Surgeon to the Warrington Infirmary, who has practised in that town for over 40 years, was recently on the occasion of his seventieth birthday the recipient of a most charming compliment from the medical profession of the town. A deputation consisting of Drs. Gornall, Sherratt, Fox, and Joseph waited upon him on that day and presented him with a piece of silver plate. Dr. Gornall, who made the presentation, in a few well-chosen words expressed the kindly feelings felt by the local profession towards Mr. White, who feelingly acknowledged the gift.

BRUSSELS MEDICAL GRADUATES' ASSOCIATION.—The annual meeting of this Society will take place at the Café Royal, Regent Street, W., on Wednesday, July 5th, at 6.30 P.M. At 7.30 P.M. the members and their friends will dine together, and among the guests of the President and Council are expected the Right Hon. Earl Russell, Dr. Ward Cousins (President-elect of the British Medical Association), Dr. Mitchell Bruce, and Mr. Edmund Owen. Brussels medical graduates wishing to be present at the dinner are requested to communicate with the Honorary Secretary, Dr. Major Greenwood, 243, Hackney Road, N.E.

MEDICAL VACANCIES.

The following vacancies are announced:—

ABERDEEN UNIVERSITY.—Additional Examiner for Graduation in (1) Zoology, (2) Medicine, including Clinical Medicine, and (3) Midwifery. Appointments for each year. Grants of £30 per annum to Examiners in Zoology and Midwifery and £40 to the Examiner in Medicine. Applications to the Secretary by July 4th.

BETHLEM HOSPITAL.—Two Resident House-Physicians. Appointment for six months. Honorarium, £12 12s. each per quarter, with apartments, board, and washing. Applications, endorsed "House-Physicians," to the Treasurer, Bridewell Hospital, New Bridge Street, E.C.

BIRKENHEAD BOROUGH HOSPITAL.—Visiting House-Surgeon. Salary, £75 per annum, with board, lodging, and washing. Applications to the Chairman of the Weekly Board.

BIRKENHEAD UNION.—Assistant Medical Officer for the Infirmary, Workhouse, and Schools. Salary, £80 per annum, with board, washing, and apartments. Applications, endorsed "Assistant Medical Officer," to the Clerk to the Guardians, 45, Hamilton Square, Birkenhead, by July 3rd.

BIRMINGHAM GENERAL HOSPITAL.—House-Physician. Appointment for one year, but eligible for re-election. Salary, £70 per annum, with residence, board, and washing. Applications to the House-Governor by June 30th.

BIRMINGHAM: MASON UNIVERSITY COLLEGE.—Professorship of Physiology. Applications to the Secretary by June 30th.

BOURNEMOUTH: ROYAL VICTORIA HOSPITAL.—House-Surgeon. Salary, £80 per annum, with board. Applications to the "Chairman of the Committee," by July 15th.

BRADFORD POOR-LAW UNION.—Two Resident Assistant Medical Officers for the hospitals and workhouse: unmarried. Appointments for one year. Salary of senior, £125, and junior £110 per annum, with prescribed rations, apartments, and washing. Applications to the Clerk to the Guardians, Poor-Law Offices, 22, Manor Row, Bradford, before July 3rd.

BRADFORD ROYAL INFIRMARY.—Dispensary Surgeon; unmarried. Salary, £100 per annum, with board and residence. Applications, endorsed "Dispensary Surgeon," to the Secretary by June 28th. Also Junior House-Surgeon: unmarried. Salary, £50 per annum, with board and residence. Applications, endorsed "Junior House-Surgeon," to the Secretary by June 26th.

BRIGHTON TERNAT AND EAR HOSPITAL, Church Street.—Non-resident House-Surgeon. Appointment for six months, but renewable. Salary at the rate of £75 per annum. Applications to the Secretary, 10, Black Lion Street, Brighton, by July 5th.

BISTOL: UNIVERSITY COLLEGE.—Professorship of Physiology. Applications to the Secretary by July 5th.

BURTON-UPON-TRENT, BOROUGH OF.—Medical Officer of Health for the Borough. Salary at the rate of £350 per annum. Applications, endorsed "Medical Officer of Health," to the Town Clerk, Town Hall, Burton-upon-Trent, by June 28th.

CANOE HOSPITAL (FREE), Brompton, S.W.—Two Honorary Assistant Surgeons. Must be F.R.C.S. Eng. Applications to the Secretary by July 8th.

CARDIFF INFIRMARY.—Honorary Pathologist. Applications to the Secretary by July 10th.

CENTRAL LONDON OPHTHALMIC HOSPITAL, Gray's Inn Road, W.C.—(1) House-Surgeon. Board and residence provided. (2) Assistant House-Surgeon. Salary at the rate of £50 per annum. Applications to the Secretary by July 10th and 11th respectively.

COLOCHESTER: ESSEX AND COLOCHESTER HOSPITAL.—House-Surgeon; unmarried. Salary, £100 per annum, with board, washing, and residence. Applications to the Secretary by July 14th.

DERBYSHIRE ROYAL INFIRMARY.—Honorary Surgeon. Applications to the Secretary, Royal Infirmary, Derby, by June 30th.

EVELINA HOSPITAL FOR SICK CHILDREN, Southwark, S.E.—Junior Resident Medical Officer and Registrar. Salary, £50, with board and washing. Applications to the Committee of Management.

GLASGOW CORPORATION.—Bacteriologist. Salary at the rate of £350 per annum. Applications to the Interim Clerk to the Corporation (Police Department), City Chambers, Glasgow, by June 30th.

GLASGOW: UNIVERSITY OF.—Ass't Exam. Appointment till December 31st, 1901. Salary, £30 per annum. Applications to the Secretary of the Court, 91, West Beattie Street, Glasgow, by July 8th.

GLOUCESTER: COUNTY ASYLUM.—Third Assistant Medical Officer; unmarried, not over 27 years of age. Salary, £105 per annum, with board, lodging, and washing. Applications to the Medical Superintendent by July 7th.

GLOUCESTER: GENERAL INFIRMARY AT GLOUCESTER AND THE GLOUCESTER-SHIRE EYE INSTITUTION.—Physician. Applications to the Secretary by July 5th.

GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road, N.—(1) Physician to Out-patients; (2) Dental Surgeon. Applications to the Secretary by July 10th.

GREENOCK INFIRMARY.—House-Surgeon. Salary, £80 per annum, with board and residence. Applications to the Secretary, 2, Hamilton Street, Greenock, by July 3rd.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, E. Hampton.—(1) Resident House-Physician. (2) Assistant Resident Medical Officer. Salary, £50 per annum, with board and residence. Applications to the Secretary by June 22nd and July 4th respectively.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—A House-Physician and a House-Surgeon; unmarried. Appointments for six months. Salary in each case £20, with board and residence. Applications to the Secretary.

HUDDESFIELD INFIRMARY.—Assistant House-Surgeon. Salary, £60 per annum, with board, residence, and washing. Applications to the Secretary.

INVERNESS: NORTHERN INFIRMARY.—House-Surgeon and Dispenser. Salary, £70 per annum, with board, etc. Applications to the Honorary Secretary, 15, High Street, Inverness, by July 15th.

KILBURN PROVIDENT MEDICAL INSTITUTE.—Vacancy on the Medical Staff. Applications to the Secretary, 7, Cavendish Road, Brondesbury, by July 1st.

KING'S COLLEGE, London.—Assistant Physician for Out-Patient, Children's Department. Applications to the Secretary.

LANCASHIRE COUNTY ASYLUM, Whittingham. Locum tenens for four or five months. Not exceeding 30 years of age. Two guineas a week. Applications to the Medical Superintendent.

LIVERPOOL NORTHERN HOSPITAL.—Assistant House-Surgeon. Salary, £70 per annum, with residence and maintenance. Applications to the Chairman by June 28th.

MANCHESTER: OWENS COLLEGE.—Senior Demonstrator in Physiology. Stipend, £150 per annum, rising to £200. Applications to the Registrar by July 3rd.

MANCHESTER CHILDREN'S HOSPITAL.—Medical Officer. Salary, £180 per annum. Applications to the Secretary, Children's Dispensary, Gartside Street, Manchester, by June 28th.

MANCHESTER COUNTY ASYLUM, Prestwich. Junior Assistant Medical Officer; unmarried. Salary to commence £125 per annum increasing to £230, with apartments, board, attendance, and washing. Applications to the Superintendent.

MANCHESTER ROYAL INFIRMARY.—Resident Surgical Officer; not less than 25 years of age and unmarried. Appointment for twelve months. Salary, £150 per annum, with board and residence. Applications to the General Superintendent and Secretary by July 6th.

NEW HOSPITAL FOR WOMEN.—Fully qualified medical woman as Senior Assistant to the Out-patient Department for Children. Appointment for two years. Applications to the Secretary, 144, Euston Road, by June 28th.

NORTHAMPTON: BERRYWOOD ASYLUM.—Assistant Medical Officer; unmarried and under 30 years of age. Appointment for five years but eligible for re-election. Salary, £150, increasing to £200, with board, lodging, washing, and attendance. Applications to the Medical Superintendent by July 8th.

NORTH LONDON HOSPITAL FOR CONSUMPTION, Hampstead, N.W.—(1) Surgeon. Appointment for six months. Honorarium at the rate of £60 per annum. Applications to the Secretary at the offices, 41, Fitzroy Square, W., by June 28th.

NORTH-WEST LONDON HOSPITAL, Ealing. Resident Assistant Medical Officer, eligible for election to the senior post when vacant. Salary at the rate of £50 per annum. Personal application to the Medical Committee on Thursday, July 6th, at 5 o'clock.

OLDHAM INFIRMARY.—(1) Senior House-Surgeon. Salary, £85 per annum. (2) A Junior House-Surgeon. Salary, £70 per annum. Board, residence, and washing in each case. Appointments for one year. Applications to the Honorary Secretary by July 10th.

PORTSMOUTH: ROYAL PORTSMOUTH HOSPITAL.—Assistant House-Surgeon. Salary at the rate of £50 per annum, with board, lodging, etc. Eligible for election as Senior House-Surgeon when vacancy occurs. Applications to the secretary before July 6th.

READING: ROYAL BERKS HOSPITAL.—Assistant House-Surgeon. Appointment for six months; eligible for senior post when vacancy occurs. Salary at the rate of £30 per annum, with board, lodging, and washing. Applications to the Secretary by June 30th.

ROYAL HOSPITAL FOR DISEASES OF THE CHEST, City Road, E.C.—House-Physician. Appointment for six months. Salary at the rate of £40 per annum, with furnished apartments, board, and washing. Application to the Secretary by July 4th.

RYDE: ROYAL ISLE OF WIGHT INFIRMARY AND COUNTY HOSPITAL.—House-Surgeon. Salary, £50 per annum, with a fee of £10 10s. for lecturing to the nurses. Applications to the House-surgeon by July 15th.

ST. BARTHOLOMEW'S HOSPITAL MEDICAL SCHOOL.—Assistant Demonstrator of Chemistry. Applications to Dr. James Calvert, Warden, by July 8th.

ST. MARLBORNE GENERAL DISPENSARY.—Ophthalmic Surgeon. Applications to the Secretary, 77, Welbeck Street, W., by July 1st.

ST. PANCRA'S AND NORTHERN DISPENSARY, 126, Euston Road, N.W.—Honorary Physician and Honorary surgeon. Applications to the Honorary Secretary, Gordon Street, Gordon Square, W.C., by July 3rd.

SEAMEN'S HOSPITAL SOCIETY.—Physician to Out-patients and Physician to In-patients at the Branch Hospital, Royal Victoria and Albert Docks. Appointments for twelve months, but eligible for re-election. Applications to the Secretary, Seamen's Hospital Society, Greenwich, S.E., by July 10th.

STAFFORDSHIRE GENERAL INFIRMARY, Stafford. (1) House-Surgeon. Salary, £100 per annum. (2) Assistant House-Surgeon. Salary, £50 per annum; board, lodging, and washing provided in each case. Applications for the former to the Secretary by July 5th, and for the latter to the House-Surgeon at once.

STOCKTON-ON-TEES, STOCKTON, AND THORNABY HOSPITAL.—House-Surgeon. Age not to exceed 30 years. Salary, £200 per annum. Applications to the Secretary by June 30th.

TRURO: ROYAL CORNWALL INFIRMARY.—House-Surgeon; unmarried. Salary, £120, with furnished apartments, fire, light, and attendance. Applications to the Secretary before July 5th.

WALSALL AND DISTRICT HOSPITAL.—Resident House-Surgeon. Salary, £100 per annum, with board, lodging, and washing. Applications to Mr. E. J. Brookes, Chairman, Leicester Street, Walsall, by June 28th.

WEST BROMWICH DISTRICT HOSPITAL.—Resident Assistant House-Surgeon. Salary, £50 per annum, with board, lodging, washing, and attendance. Applications to the Secretary.

WEST END HOSPITAL FOR NERVOUS DISEASES, Welbeck Street, W.—Medical Registrar (non-resident). Appointment for six months, but eligible for re-election. Honorarium of not less than twenty-five guineas. Applications to the Secretary by June 27th.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—Assistant House-Surgeon. Appointment for six months. Honorarium at the rate of £50 per annum, with board, lodging, and washing. Applications to the Chairman of the Medical Committee by July 7th.

MEDICAL APPOINTMENTS.

BENNETT, W. E., F.R.C.S.Eng., appointed Honorary Surgeon to the Royal Orthopaedic Spinal Hospital, Birmingham, *vice* C. Warden, M.D.Aberd., F.R.C.S.Eng., appointed Honorary Consulting Surgeon.

BOYER, M. M.B., Ch.B.Édin., appointed Assistant Medical Officer to the Parish of Birmingham Infirmary.

BUCK, A. H., F.R.C.S.Édin., M.R.C.S., L.R.C.P.Eng., appointed Assistant Surgeon to the Sussex County Hospital.

BURDWOOD, J. W., L.F.P.S.G., L.M., M.S.A.Lond., F.R.I.P.H., M.S.I., reappointed Medical Officer of Health for the Bourne Rural Sanitary District.

DASHWOOD, C. E., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer for the Somerby District of the Melton Mowray Union.

DREW, Douglas, M.D., B.S.Lond., F.R.C.S.Eng., appointed Surgeon to the North-Eastern Hospital for Children, Hackney Road, *vice* H. P. Dean, M.S., F.R.C.S., resigned.

GATSBY, G. M.B., Ch.B.Édin., appointed Assistant Medical Officer at the Waterloo Road Workhouse of the Parish of St. Matthew, Bethnal Green.

HESSEY, J. D., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer for the Cottage Homes of the Hastings Union.

HOLLINGS, C. E., L.R.C.P., L.R.C.S.Édin., L.F.P.S.Glas., appointed Medical Officer for the Weaverthorpe District of the Driffield Union.

KNIGHT, Henry Ernest, M.D.Lond., M.R.C.S.Eng., M.R.C.P.Lond., appointed Honorary Surgeon to the Kotherham Hospital and Dispensary.

LANGLEY, A. F., L.R.C.P., L.R.C.S.Édin., appointed Medical Officer for the Fifth District of the Blandford Union, and for the Fourth District of the Wimborne and Cranborne Union.

LAW, J. M.R.C.S., L.R.C.P.Lond., appointed Medical Officer for the Sixth District of the Oldham Union, *vice* J. F. Fawc, M.B., Ch.B.Édin.

LE QUENNE, C. P., M.R.C.S.Eng., L.R.C.P.Lond., appointed Medical Officer to the Southampton Dispensary and Provident Medical Institution, *vice* E. Blacker, M.D. Dubl., resigned.

MCDONOGALL, A. H., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer for the Third, Fourth, and Fifth Districts of the Parish of Birmingham.

MONTGOMERY, W. P., M.A.Oxon., B.S., and M.B.Lond., F.R.C.S.Eng., appointed Visiting Surgeon to the Manchester Workhouse Infirmary.

MORRISON, J. T. J., M.A., M.B.Cantab., F.R.C.S.Eng., appointed Professor of Forensic Medicine in Mason University College, Birmingham, *vice* R. M. Simon, M.D. Camb.

ORR, Vivian B., M.B., B.S.Melb., appointed Assistant House-Surgeon to the Cancer Hospital, Brompton.

STEWART, C. H., M.R.C.S.Eng., L.R.C.P.Lond., appointed Medical Officer for the Sixth District of the South Molton Union, *vice* E. S. Pollock, M.B., Ch.D.Édin., resigned.

WHITNEY, A. J., M.D., appointed Medical Officer for the Seventh District of the Bradford Union.

WHITEHEAD, A. L., M.B., B.S.Lond., M.R.C.S., L.R.C.P., appointed an Assistant Surgeon to the Eye and Ear Department of the General Infirmary, Leeds.

WILSON, J. H., M.B., appointed Medical Officer of Health for the Wigan Rural District, *vice* R. S. Pearson, M.R.C.S., L.M.C.P., resigned.

DIARY FOR NEXT WEEK.

MONDAY.

West London Post-Graduate Course, West London Hospital, W., 5 P.M.—Dr. J. B. Ball: The Symptoms of Throat and Nose Affections.

TUESDAY.

National Hospital for the Paralyzed and Epileptic, Queen Square, W.C., 3.30 P.M.—Dr. Kissen Russell: Combined Degeneration of the Spinal Cord (Lanteri demonstration).

Hospital for Diseases of the Nervous System, 73, Welbeck Street, W., 4 P.M.—Mr. Cantile: The Surgery of the Nerves.

Royal College of Physicians of London, 5 P.M.—Professor J. B. Bradbury: Some Points connected with Sleep, Sleeplessness, and Hypnotics. Croonian Lecture III.

WEDNESDAY.

St. John's Hospital for Diseases of the Skin, 49, Leicester Square, 4.30 P.M.—Dr. T. D. Savill: Exfoliative Dermatitis.

Dermatological Society of Great Britain and Ireland, 20, Hanover Square, 5 P.M. Informal exhibition of cases at 4.30 P.M.

Hospital for Consumption, Brompton, 4 P.M.—Lecture by Dr. Schorstein.

THURSDAY.

Hospital for Sick Children, Great Ormond Street, W.C., 4 P.M.—Mr. H. Stansfield Collier: Treatment of Intussusception in Young Children.

Central London Throat, Nose, and Ear Hospital, 5 P.M.—Dr. Dundas Grant: Diagnosis and Treatment of Visible Abnormalities of the Auricle and Mentus.

Royal College of Physicians of London, 5 P.M.—Professor J. B. Bradbury: Some Points connected with Sleep, Sleeplessness, and Hypnotics. Croonian Lecture IV.

West London Post-Graduate Course, West London Hospital, W., 5 P.M.—Dr. W. A. Turner: Demonstration of Nervous Diseases.

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.

BIRTHS.

COLLIER.—On June 17th, at Somers, Wimbledon Hill, the wife of S. B. Collier, M.D. of a son.

GEORGE.—On June 15th, at 1, Burton Road, Brondesbury, N.W., the wife of Alfred W. George, M.D.Édin., M.R.C.S.Eng., L.R.C.P.Lond., of a son.

SCUDAMORE.—On June 7th, at 240, Whitehorse Road, Croydon, the wife of C. G. Scudamore, L.R.C.P., L.M.C.S.Édin., of a son.

MARRIAGES.

ATTFIELD-HERKOMER.—On June 14th, at the Parish Church, Bushey, Herts, by the Rev. G. Montague Hall, assisted by the Rev. James Herbert Harvey, M.A., cousin of the bridegroom, Donald Harvey Attfield, M.A., M.B., son of John Attfield, F.R.S., of Watford, Herts, to Eliza Anna Iole Herkomer, elder daughter of Hubert Herkomer, B.A., of Bushey, Herts.

CRAGGS-FONTANNAX.—On June 14th, at Jesmond Baptist Church, by the Rev. T. D. Landels, M.A., Robert Francis Craggs, M.D., B.S., of 22, Osborne Road, Newcastle-on-Tyne, to Anita, daughter of the late Léon Adalbert Fontannax, of Cossonay, Switzerland, and granddaughter of the late Marc Enter, M.D., of Lausanne.

GONIN-WILLET.—On June 22nd, 1899, at St. Mark's Church, Brighton, by the Rev. Henry Newton, M.A., and the Rev. Alexander Morgan, M.A., Vicar of the parish, Edmund Henri Gonin, M.D., of Towcester, Northamptonshire, eldest son of the late Rev. Pasteur Gonin, and of Mrs. Gonin, of Liverpool Gardens, Worthing, to Mildred Theyre Willett, younger daughter of George Walter Willett, J.P., D.L., of West House, Brighton.

NAIRN-RUSSELL.—On April 8th, 1899, at St. Luke's, Havelock North, New Zealand, by the Rev. Canon S. Hill, Robert Nairn, F.R.C.S., of Hastings, to Mary Cecil, eldest daughter of Captain W. R. Russell, of Flaxmere.

PERSHOUSE-HEDEDEWICK-BROWNE.—On June 19th, at St. Mary Abbots, Kensington, by the Rev. Canon Pennesfather, D.D., Frank Pershouse, M.R.C.S., L.R.C.P., fourth son of Francis Pershouse, of Chelsea Tower, Torquay, to Elsie, only daughter of Mrs. Hedderwick-Browne, of 3, Ladbroke Terrace, Notting Hill Gate.

ROBERTSON-ASTON.—On June 14th, at the Church of the Ascension, Balham, London, by the Rev. S. J. J. Alnutt, Frederick William, M.A., M.B., B.S., son of the late William Alexander Robertson, of Dunard, Downhill, Glasgow, and Sandhills, Monkton, Ayrshire, to Hope, third daughter of Charles James Aston, of 8, Lysias Road, Balham, London, S.W.

ROUGHTON-GODFREY.—On June 12th, at St. Peter's, Bayswater, by the Rev. C. L. Achard and the Rev. H. Ramsey, *vice* the Rev. H. G. Rosedale, vicar, and the Rev. G. Terry, senior curate, Edmund Wilkinson Roughton, B.S., M.D.Lond., F.R.C.S.Eng., of 33, Queen Anne Street, Cavendish Square, son of the late Robert Roughton, R.N., to Ethel Houlton, youngest daughter of Robert Seppings Godfrey, Registrar of the Supreme Court, of 6, Ladbrooke Gardens.

SMITH-DR. VAL.—On April 1st, at Rockhampton, Queensland, by the Rev. A. H. Julius, Edwin Charles Temple Smith, M.B., M.R.C.S.Eng., of Mount Morgan, son of Henry Smith, of Edgbaston, Birmingham, to Lucy (Dolly) daughter of the late Gerald Du Val of Rushmore, Manchester, England.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

- CANCER**, Brompton (Free). *Attendances*.—Daily, 2. *Operations*.—Tu. W. F., 2.
- GENERAL LONDON OPHTHALMIC**. *Attendances*.—Daily, 1. *Operations*.—Daily.
- GENERAL LONDON THROAT, NOSE, AND EAR**. *Attendances*.—M. W. Th. S., 2; Tu. F., 5. *Operations*.—Tu. F., 2.30; O. P., 2.
- CHALKING 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.
- CHURCHILL 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., 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., 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*.—Daily, 2.
- 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., 1.30; Eye, Tu. F., 9; 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., 2.
- 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., 8.
- 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; Orthopaedic, M., 2.30; Dental, Tu. F., 9; Electrical, M. Tu. Th. F., 1.30. *Operations*.—Daily, 1.30; (Ophthalmic), Tu. F., 2; Abdominal Section for Ovariectomy, F., 2.
- ST. GEORGE'S**. *Attendances*.—Medical and Surgical, daily, i.p., 1; o.p., 1.25; 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., 8, 12. *Operations*.—Daily, 1; Ophthalmic, W., 1; Dental, Th., 9.
- ST. MARK'S**. *Attendances*.—Pistula and Diseases of the Rectum, males, S., 2; females, W., 9.30. *Operations*.—Tu., 2.30; Th., 2.
- ST. MARY'S**. *Attendances*.—Medical and Surgical, daily, 1.45; o.p., 12.45; Obstetric, Tu. F., 1.45; o.p., M. Th., 1; 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; 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., 2; Mental Diseases, o.p., Th., 10; Dental, Tu. F., 10. *Operations*.—M. W. Th. S., 2; Tu. F., 3.30; (Ophthalmic), Th., 3; (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; Throat, F., 2; S., 10; Orthopaedic, W., 2; Diseases of Women, W., 2; Obstetric, M., 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 *Articulate, 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 devoted will be found under their respective headings.

QUERIES.

- A. B. asks to be recommended a private nursing home suitable for a case of subacute rheumatism.
- M.D. BRUX. asks to be recommended a home where a patient can be admitted with chronic eczema. She could pay 20s. to 50s. weekly.
- M.D. will be glad if anyone, who has recently taken the D.P.H. Lond., will advise him as to the course and place of study most suited to the requirements of the examination.
- NEURITIS asks for information as to the treatment for neuritis and rheumatism by iodate of sodium hypodermically; also as to hot air treatment.
- VERAX would be glad to know where he could find a description of the method of using Guyon's instillator for injections into the deep urethra, and what are the results in chronic urethritis of the use of protargol.
- M.D. (Manchester) wishes to know of any means by which the hair on a young lady patient's upper lip can be removed, or at least rendered less noticeable. He would also be glad to know the best method of removing a small nevus on the bridge of the nose, which had a traumatic origin.
- BUNSEN asks for information as to the application of electrolysis to a nevus on the face of an infant aged about 8 months. He says he has a "Bunsen" and also a "Daniel" batteries; the "Bunsen" can be regulated to any strength; he would like to know what strength of current to use, how often, and how?
- E. T. M. asks what clinical significance the presence of penicillium glaucum in the urine possesses. The urine of the patient is acid, has a specific gravity ranging from 1018 to 1029, contains no albumen and no sugar. The patient, a man about 44, suffers from headaches, is depressed, and has had slight dyspepsia. There appears to be no organic disease. For about three months he has been a total abstainer, but before that indulged rather too freely in alcoholic beverages, especially beer.

A CASE FOR DIAGNOSIS.

DR. J. C. WALKER (Mevagissey, Cornwall) writes: A. B., aged 42, a working man, has suffered for ten years from severe cerebral headache over the right parietal region. Latterly these have been more severe. Under treatment applied to the attended constipation with nerve tonics (arsenic, strychnine, etc.) the attacks have become less violent, but recur at least weekly. There is no external tenderness of the scalp. The pain comes on in the forenoon and lasts some hours. It is associated with a sensation of burning heat and throbbing of the temporal artery on the same side. The patient is hardly able to afford a consulting fee. I should be glad of any suggestions as to diagnosis and treatment.

ANATOMICAL ATLAS.

A. R. writes to know of an atlas or work giving clear, separate anatomical plates of muscles, nerves, etc., with descriptions, published at a moderate price.

Since the appearance of Quain's plates no work exactly of this kind has been published in this country. The work we would recommend is the *Anatomischer Atlas* of Dr. Carl Toldt, published by Urban and Schwarzenberg, Vienna and Leipzig. This work is comparatively inexpensive, very complete, and though only a certain number of the figures are of the full natural size, the others are adequate for every purpose, whether scientific or practical.

TWO CASES OF INTRACTABLE UTERINE HÆMORRHAGE.

DR. J. INGLES PARSONS (Mayfair) writes: I should like to ask Dr. Purslow whether he tried the galvanic current before proceeding to do vaginal hysterectomy. I have recently had a case of this kind in my wards. The patient, aged 32, had continuous menorrhagia ever since the birth of her first child five years before. I curetted the uterus in the usual way, but so far from stopping the hæmorrhage, it became more profuse. Having arrested some of the worst cases of menorrhagia from fibromyoma with the constant current I determined to give it a trial in this case. The loss has ceased and she is now quite regular and the amount normal. She was able to go about during the treatment; a severe operation, not without danger, has been avoided, and she still retains her uterus and ovaries instead of undergoing an enforced menopause fifteen years before her natural time.

CORONERS AND LEGAL TRAINING.

M.D., C.M. EDIN., asks what legal qualification can be obtained, without being articulated, suitable for a coronership, as he is informed that it is almost necessary to have some legal status in order to obtain such appointment? He asks, also, whether there is any book on the subject?

The only "legal qualifications" are those of "barrister" and "solicitor." There is no short cut to either. That of barrister can be obtained in about three years, assuming that there is no delay from failure to pass the necessary examinations. Strictly speaking, no legal qualification is necessary, either for a coroner or his deputy; but the possession of one is a great help to a candidate, and the course of study to obtain it most useful in the discharge of the duties of his office. Extensive actual experience of coroner's work, combined with a careful study of the criminal law relating to manslaughter and murder, may be an efficient substitute for a legal training. Attendance at the assizes and at the magistrates' courts when charges of murder and man