

dantly the opinion of Dr. Cullingworth. A female infant, aged 7 weeks, had an abdominal swelling associated with retention of urine, for which the child was brought to me. The tumour in the abdomen had not attracted the attention of the mother, and there had been no difficulty during the birth of the child. The little patient was in a very weak condition, and died a few days later. It was then found on *post-mortem* examination that the abdominal swelling consisted of a greatly distended vagina, surmounting which was the diminutive uterus, itself also somewhat dilated. The vagina measured  $4\frac{1}{2}$  inches in length,  $2\frac{1}{2}$  inches antero-posteriorly, and  $1\frac{1}{2}$  inches from side to side, and contained some 8 ounces of flaky mucus. Both kidneys were hydronephrotic from the pressure that had been exercised by the distended vagina, each of the ureters themselves being much dilated. But the chief interest in the specimen in view of Dr. Cullingworth's case is the fact that the distended vagina had raised the uterus above it, and at the same time had caused an elongation of the urinary bladder, and particularly of the urethra, which latter was some 2 inches in length. (Other instances of similar distensions from occlusion of the vaginal orifice will be found in the following records.)<sup>2</sup>

It would seem from this and other cases, that when the vagina is distended with fluid, the bladder is drawn up out of the pelvis, the uterus also rising on the summit of the vagina, and thus that the natural relationship of the utero-vesical reflection of peritoneum is preserved. It is usual in this class of case for the urethra to be elongated, and for it to be pressed upon between the distended vagina and the pubic bones, and this may cause retention of urine.

In instances of distension of the uterus, apart from the vagina, as in normal pregnancy, the bladder is not raised, and the utero-vesical pouch of the peritoneum therefore becomes considerably stretched and flattened out.

## REFERENCES.

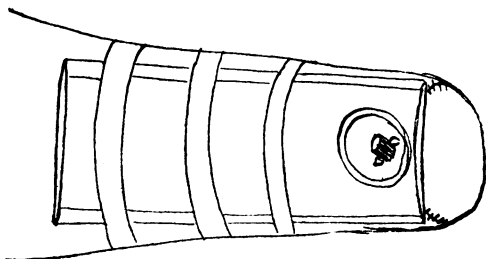
- <sup>1</sup> BRITISH MEDICAL JOURNAL, January 6th, 1900, p. 8. <sup>2</sup> *Trans. Obstet. Soc. of London*, vol. v, p. 284; vol. xix, p. 5.

NOTE ON A SPLINT FOR USE AFTER  
AMPUTATION.

By A. MARMADUKE SHEILD, M.B., F.R.C.S.,

Assistant Surgeon and Lecturer on Practical Surgery, St. George's Hospital.

AFTER amputations, especially of the thigh, it is customary to support and bandage the stump upon a suitable splint. This is removed at each dressing, and the shifting and readjustment causes sometimes pain and annoyance to the patient. The painful quivering so often seen when the support is suddenly withdrawn is familiar to most of us. To meet this inconvenience I have devised a simple plan, which has seemed to me of great utility. The opening for the tube is made through the posterior flap, or in the case of lateral flaps, the tube is brought out posteriorly. In the end of the splint a large circular hole is cut, and the anterior end of the splint round this aperture is thickly padded with soft iodoform gauze. When the flaps have been accurately sutured the splint is applied next to the limb, and secured with adhesive strapping and gauze bandages. The tube appears through the centre of the large circular opening in the splint. Nothing now remains but to apply the usual dressings.



Posterior surface of a thigh stump with splint applied.

The opening in the splint is padded with strips of iodoform gauze and a thick layer of salicylate wool. At the early

dressings this can be constantly renewed. Here alone oozing will take place. The tube can be flushed and slowly withdrawn in the usual manner, without the least disturbance of the splint. In most of the cases I have left the splint in through the whole healing process. If there is any soiling, it can easily be changed, but this only has to be done once. Should the stump suppurate, of course this method is not so applicable. I have now adopted it in a sufficient number of cases to feel sure of its use, and I hope surgeons will give it a trial. It is essential that the splint be broad, of a good length, and that the aperture be large; also the fixing to the stump must be carefully executed.

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

## A CASE OF SODIUM SALICYLATE POISONING.

Miss B., on December 26th, 1899, complained of feeling "bilious," and at night she was feverish and had a slight cough. When I saw her at 9 P.M. her temperature was  $99.2^{\circ}$ , her pulse 88, her tongue was coated, the breath sounds were harsh over the front of the chest, but there were no adventitious sounds. Her head and limbs ached, and she was evidently having "her annual attack of influenza." I gave her some compound ipecacuanha powder, and on drinking some hot liquids she perspired freely. She was restless in the early morning and fancied she saw a face at the window, but had no other mental disturbance.

On December 27th her pulse and temperature were normal, her tongue was cleaner, but the pains in the limbs were more marked and the cough more troublesome. She remained in bed, and was given a mixture containing sodium salicylate in 10-grain doses with carbonate of ammonium, to be taken every four hours. At 3.30 P.M., when she received the medicine, she purposely took a double dose; an hour afterwards she heard people, well known to her, making libellous remarks about her outside the bedroom. She made a complaint, but on investigation it was proved that the remarks were imaginary. She was left alone, and again heard the remarks and whispering; later she imagined she saw people outside creating a disturbance, and opened the window to send them away, but was persuaded to return to bed. Following this, ornaments in the room became distorted and converted into hideous faces; then she imagined she heard people singing, bands playing, bells ringing, and later the whole of the hallucinations were mixed up together without cessation. She had no sleep whatever.

On December 28th, I found her in a very excited state, but apart from the hallucinations she was perfectly sensible. She had got up and was performing her ordinary duties in a perfectly rational manner, and felt bodily well. Her temperature was normal; her pulse 100, full but soft; her eyes were staring, the pupils being normal; her tongue was clean and her urine scanty. She suspected the medicine as the cause of her hallucinations, and had taken none since 6 A.M. When she told me about the double dosage the bottle showed that she had taken about 80 gr. of sodium salicylate in fourteen hours. I stopped the medicine, told her to take plenty of warm drinks, and gave her some potassium bromide with aromatic spirit of ammonia. Her bowels were well moved with sulphate of magnesia; her urine was acid, contained plenty of urates and phosphates, but no albumen or blood, and gave a marked reaction with perchloride of iron. During the day, along with the other visions and noises, she saw rats, dogs, and cats, all more or less distorted and hideous. She heard, and repeated to bystanders, elaborate conversations taking place between two people on the telephone, although she was perfectly cognisant that there was no telephone in the room; people appeared to her and gave her perfectly rational messages which she would have obeyed had she not been prevented, and all this after I had told her what was the matter and she had made up her mind to ignore the "animals" until the drug had been eliminated, which I told her would be in about

two days (twenty-four to forty-eight hours, Farquharson). The night was an exaggeration of the previous one, and she had no sleep.

On December 29th her general condition was good, but the hallucinations were persistent, although not so terrifying. The afternoon urine was loaded with urates and phosphates, but did not contain albumen or give any reaction with perchloride of iron. Judging that the salicylate was now eliminated, I ordered a glass of hot stout at night, to be followed in half an hour by a draught containing chloral gr. x, and potassium bromide gr. xv; she fell asleep ten minutes afterwards, and slept soundly for eighteen hours, with two breaks of a few minutes when roused by someone entering the room.

On December 30th she woke up quite well, and except that on the next day when sitting alone she heard people singing in a low tone, she has been quite well since.

Exactly twelve months ago she took sodium salicylate in 10 gr. doses for the same condition, and although the drug was from the same stock she felt no ill-effects whatever. It would seem that before the treatment was commenced she had been in a feverish condition, with a tendency to delirium, and that this tendency was aggravated by taking over-doses of the drug on a disordered stomach. She had no rash, palpitation, or tendency to violence; and after being assured that the condition was due to the drug and would pass off, she performed her ordinary duties for two days without mistakes.

Bolton.

H. AINSLIE SCOTT, M.B., M.R.C.S., D.P.H.

#### KERNIG'S SYMPTOM IN MENINGITIS.

THE BRITISH MEDICAL JOURNAL recently<sup>1</sup> published a case of mine of cerebro-spinal fever in which I called attention to the very great diagnostic value of Kernig's symptom<sup>2</sup> in cases of meningitis. I have found it a very early symptom in 4 cases of the disease which I have met with in the last few months. I wish now to call attention to what I think must be regarded as the occurrence of the symptom in connection with the upper extremities. In a case admitted to hospital under my care on December 28th, 1899, the patient complained of excessive pain in the forehead and back of the neck; he was partially unconscious. Kernig's symptom was present very distinctly in both legs when the patient sat up; but it was also found that both forearms were held in a position of extreme flexion across the chest, and on attempting to straighten the arms it was found impossible to do so. The tense state of the flexor muscles exactly resembled that of the hamstring muscles in this symptom as usually described. This condition of the arms continued till a late period of the illness, when they became relaxed, whereas the leg symptoms continued to the very last. The appearances found *post mortem* were typical of the disease. I have not been able to find any allusion to this symptom appearing in the arms in any of the numerous writings on this disease that I have been able to come across.

W. J. BUCHANAN, B.A., M.B., Major, I.M.S.

Bhagalpur, Bengal.

#### HÆMORRHAGE THROUGH THE LACHRYMAL DUCT AFTER PLUGGING THE NARES.

E. S., aged 23, domestic, suffered from a severe attack of enteric fever. About the 21st day of the illness the temperature suddenly fell from 104° to 98° F. This was accompanied by severe hæmorrhage from both nostrils. Ordinary remedies having failed to arrest the flow, I plugged both anterior and posterior nares on each side. A short time afterwards blood appeared in the left lower eyelid. On sponging this away it could be seen welling up from the lachrymal duct. Next morning the right lower eyelid was found full of blood, and here again it was found flowing from the lachrymal duct. On the third day I had to make the posterior plugs larger, and a very short time afterwards blood appeared in the left ear. As I found afterwards, the drum was perforated from some old mischief, so here I presume the blood travelled up the Eustachian tube. In each case the blood continued to flow during the first four days, after which it ceased, and I was able to dispense with the plugs.

I report this as another case in which continued fever was present, as would seem to have been the case in the case re-

ported by Major Cottell in the BRITISH MEDICAL JOURNAL of December 16th, 1899.

Rochdale.

D. RICHMOND, M.B.

#### COMPLETE ATRESIA VAGINÆ.

THE following case is of interest in connection with Dr. Cullingworth's recent article, and also with the case described by Dr. Lawrence in the BRITISH MEDICAL JOURNAL of January 20th.

The patient, who is 21 years of age, has never menstruated; but for the last year has had pelvic pain and discomfort once a month. She is tall and well developed. The breasts are full sized and firm, the pelvis is capacious, the pubic hair is arranged in the manner usual in female subjects. Mons veneris, labia majora, labia minora, clitoris, fourchette and hymen are all seen to be complete, but there is no opening visible or palpable in the hymen. On rectal examination a firm body could be felt having the position, form, and size of the cervix uteri. Careful bimanual examination failed to reveal the presence of any uterine body, of tubes or of ovaries. The presence of ovaries may, however, be surmised from some of the details mentioned above, and from the fact that the patient is engaged to be married. On passing a sound into the bladder, the finger in the rectum was separated from the sound by a thin layer of tissue. An artificial vagina will be made, should the patient care to undertake the trouble of keeping it open during cicatrisation.

W. E. FOTHERGILL, M.A., B.Sc., M.D.,  
Director Clinical Laboratory, Royal Infirmary, and Assistant  
Physician, Clinical Hospital, Manchester.

## REPORTS

ON

### MEDICAL AND SURGICAL PRACTICE IN THE HOSPITALS AND ASYLUMS OF THE BRITISH EMPIRE.

#### THIRTY-SEVENTH NATIVE FIELD HOSPITAL, KHAR CAMP, MALAKAND FORCE.

##### A CASE OF GUINEA-WORM CAUSING SUPPURATION OF THE KNEE-JOINT.

By Lieutenant H. INNES, M.B.Lond., I.M.S.

A SEPOY, aged 26, was admitted to the hospital on July 18th, 1899, complaining of pain and swelling in the right knee, and giving the following history.

He had just returned from eight months' furlough at Bannu, but had spent most of his service at Hyderabad, Sindh. He had when a boy suffered from a guinea worm in his left leg. The present illness began on July 16th, when the patient noticed itching over the right knee coming on quite suddenly and rapidly followed by pain. His attention being thus attracted to the joint, he noticed for the first time the presence of a guinea-worm just protruding from a small orifice below the knee. He had not been sick and had had no rigors.

On admission the right knee-joint was slightly flexed and attempts to straighten it caused severe pain. The skin over the joint was red, hot, and slightly cedematous; there was fluid in the joint and great tenderness and pain were complained of. From a small orifice on a level with and slightly to the inner side of the tubercle of the right tibia about one inch of a guinea-worm was protruding. The portion of worm visible was flat, devoid of lustre, and looked dead. Douching with water failed to induce it to extrude any embryos. A small quantity of pus could be squeezed out from the aperture of exit, around which the skin was red and cedematous. The temperature was 102°, rising to 103° that night, the pulse was rapid, the tongue foul, and the bowels confined. The limb was placed on a back splint, lead and opium lotion applied to the joint, and antiseptic dressings were placed over the worm. During the next few days the temperature ranged between 99° and 101°, but the condition of the patient showed no improvement, the local symptoms becoming aggravated, the worm was gradually being withdrawn, but pus escaped with it at each dressing and the knee became more swollen and the skin more cedematous. A small abscess formed at the aperture of exit.

On July 23rd the patient was anæsthetised, and the skin having been sterilised, the joint was explored with a hypo-

<sup>1</sup> BRITISH MEDICAL JOURNAL, November 18th, 1899, p. 1412.

<sup>2</sup> Berl. klin. Woch., December 29th, 1884.

and for those who were admitted to his friendship, and the sorrows and anxieties of his patients were as though they were his own.

Dr. Vernon leaves a widow, two daughters, and two sons, both of whom are members of the profession.

The funeral took place on Saturday, January 20th. The service, which was held at Holy Trinity Church, was conducted by the Vicar (Rev. C. S. Hope) and Canon Denton Thompson. The Mayor and Corporation, many members of the medical profession and friends, the borough police, and a large number of the general public were present. The interment took place in Southport cemetery.

DR. ROBERT COLLUM, M.D.Glasg., M.R.C.P.Lond., M.R.C.S. Eng., is another of the veterans of the profession who has fallen a victim to the prevailing epidemic. He died at his residence, Surbiton, on January 12th, in his 84th year, from pneumonia following influenza. He was born at Enniskillen, co. Fermanagh, and obtained his medical education in Dublin. He became M.R.C.S.Eng. in 1836, M.D.Glasg. in 1837. He entered the East India Company's service, Bombay, and was attached to Sir C. Napier's staff during the conquest of Sind. The vessel in which he set out for Sind carried 200 soldiers. Virulent cholera at once appeared, and 64 soldiers died. Dr. Collum not only attended to the sufferers, but also acted as pilot of the vessel. He was mentioned in despatches at the end of the campaign, and acted as interpreter to the forces in Arabic, Hindu, and Persian. After the war he was appointed Surgeon to the Amerees of Sind, and held the post for seven years. He was Superintendent of the Medical Department at Aden, and Assay Master to the Bombay Mint. In 1857 he retired from the service, and went into practice at Surbiton. He was elected Physician to the Western General Dispensary, and was President for seven years of the Society of Members of the Royal College of Surgeons. He was a frequent speaker at the meetings of Fellows and Members of the College. The funeral took place at Kensal Green Cemetery.

THE late Dr. BURGER, who died suddenly at his residence, Finsbury Square, London, of cerebral hæmorrhage, on January 21st, was born at St. Goar on the Rhine in 1839. He studied medicine at the University of Bonn, and took the degree of M.D. in 1863. He then became Assistant to the Professor of Ophthalmology, and later to the Professor of Medicine, and served some time as Resident Physician to the Government Asylum at Siegburg. In 1865 he came to London, and was elected House-Surgeon to the German Hospital, a post which he retained for four years. In 1869 he passed the examination for the M.R.C.S.Eng., and settled in practice in London. In 1870, at the beginning of the Franco-German war, he returned to Germany to serve his country as a surgeon, and was appointed Superintendent of a large military hospital at Treves. Here his skilful use of the newly-introduced Listerian treatment gave excellent results, which he published in 1872 in a paper on the Carbolic Acid Treatment of Wounds after Suppuration has Commenced. Returning to London after the war he was appointed Honorary Surgeon to the German Hospital, and retained the post until 1895, when he resigned. He was also Honorary Medical Officer to the Society of Friends of Foreigners in Distress, and Surgeon to the German Consulate. He was a careful observer, an excellent surgeon, and had many friends in London and elsewhere.

THE death of Surgeon-Major A. C. A. ALEXANDER, of the 1st Coldstream Guards, on January 23rd, has occasioned great regret to his many friends. He was educated at Trinity College, Cambridge, and St. George's Hospital, and became M.R.C.S. and L.S.A. in 1881. He held a commission as Surgeon-Captain in the 3rd Battalion Royal Scots Fusiliers, and afterwards in the 1st Battalion Coldstream Guards, with which regiment he served in the Suakim expedition in 1885. He was promoted Surgeon-Major in 1888, and was appointed Principal Medical Officer to the Royal Military Tournament for three consecutive years. Last year he returned from Gibraltar on sick leave, having had a slight sunstroke, from which, unfortunately, he never entirely recovered. It was a

source of great grief to him that he was unable to accompany his regiment to South Africa, where it is now serving. Surgeon-Major Alexander succeeded to the estate of Boydstone on the death of his father some twelve years ago. He was a Justice of Peace for the counties of Ayr and Lanark, in each of which he owned property. He was a man of splendid physique, and in the prime of life. He was unmarried.

MR. THOMAS STEVENS GIMSON, M.R.C.S.Eng., of Fitzroy Square, W., died suddenly, aged 59, on January 1st, whilst visiting a patient. The deceased gentleman received his medical education at St. Bartholomew's Hospital, and became a Member of the College of Surgeons in 1865.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. W. A. Hammond of New York, formerly Surgeon-General of the United States Army, and a well-known neurologist, aged 72; Dr. Charles Delstanche of Brussels, a distinguished otologist; Dr. Chambard, Medical Superintendent of the Clermont Asylum, and author of numerous writings on mental diseases and the pathology of the nervous system; the Marquis del Busto, Senator of Spain, Professor of Obstetrics and Gynecology in the University of Madrid; and Dr. Stefano Regis, Surgeon-General in the Italian Army, aged 64.

## ROYAL NAVY AND ARMY MEDICAL SERVICES.

### ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty:—HENRY B. BEATTY, Staff-Surgeon, to the *Gladiator*, for medical charge on the passage to Australia, February 15th, and afterwards to the *Royal Arthur*, for the *Katoomba*, and for medical charge at Sydney Reserve Depot, undated; EDWARD R. D. FASKER, Staff-Surgeon, to the *Medusa*, February 1st; JOHN MCLEWEE, Surgeon, to the *Boscawen*, for the *Agincourt*, February 2nd; EDWARD FERGUSON, Fleet-Surgeon, to the *Rodney*, February 20th; JAMES L. SMYTH, Staff-Surgeon, and EDWARD C. SAWDY, Surgeon, to the *Ocean*, February 20th; WILLIAM HACKER, M.D., Surgeon, to the *Pique*, February 15th; THOMAS D. HALAHAN, B.A., M.B., Surgeon, to Plymouth Hospital, February 1st; KENNETH H. JONES, M.B., Surgeon, to the *Pembroke*, January 27th; HENRY E. RAPEL, Surgeon, to the *Repulse*, January 27th; JAMES M. G. SWAINSON, Surgeon, to the *Trafalgar*, January 27th.

### ARMY MEDICAL SERVICE.

THE death is announced of Surgeon-Lieutenant-Colonel WILLIAM CAMERON GRANT, M.B., which event took place on November 5th last at Banagher, Parsonstown, King's County, Ireland. His commissions were thus dated: Assistant-Surgeon, September 30th, 1871; Surgeon, March 1st, 1873; Surgeon-Major, September 30th, 1883; and Surgeon-Lieutenant-Colonel, September 30th, 1891. He quitted the service on retired pay, May 18th, 1892.

### INDIAN MEDICAL RESERVE.

THE reorganisation scheme for the offices of the Principal Medical Officer in India and the Principal Medical Officers Madras and Bombay Commands, have been finally sanctioned by the Government of India. The first-named office will include 17 clerks on pay ranging up to Rs.400 monthly, and the last two, each 7 clerks, ranging in case of Madras up to Rs.200 monthly, and in that of Bombay to Rs.150 monthly.

### ROYAL ARMY MEDICAL CORPS.

CAPTAIN CHARLES DALTON is among those reported as severely wounded in the fighting at Chieveley, Natal, on January 23rd.

### CITY OF LONDON IMPERIAL VOLUNTEERS.

SURGEON-CAPTAIN R. E. SLEMAN, 20th Middlesex Volunteer Rifle Corps, to be Medical Officer, with the temporary rank of Captain, January 9th. Surgeon-Captain ATWOOD THORNE, M.B., and Middlesex Volunteer Artillery, to be Medical Officer to the Field Battery, with the temporary rank of Captain, January 12th.

Surgeon-Captain E. W. ST. V. RYAN, 16th Middlesex Volunteer Rifle Corps, to be Infantry Medical Officer, with the temporary rank of Captain, January 6th.

### THE VOLUNTEERS.

SURGEON-LIEUTENANT W. G. OWEN, M.B., 1st Cheshire and Carnarvonshire Artillery, resigns his commission, January 31st.

The undermentioned gentlemen are appointed Surgeon-Lieutenants in the corps respectively specified, dated January 31st: THOMAS F. DEVANE, 1st Volunteer Battalion the Queen's Royal West Surrey Regiment; WILLIAM J. HESLOP, 3rd Volunteer Battalion the Lancashire Fusiliers; HUBERT WILLIAMS, 1st (Brecknockshire) Volunteer Battalion the South Wales Borderers.

Mr. A. C. ELLIEMAN is appointed Acting Surgeon to the 1st Cadet Battalion the Queen's Royal West Surrey Regiment, January 31st.

Surgeon-Captain J. P. SIMPSON, M.D., 1st Tower Hamlets Rifles, resigns his commission, January 31st.

## THE DEFEAT AND DEATH OF THE KHALIFA.

THE *London Gazette* of January 30th contains a despatch from Sir Reginald Wingate, commanding the troops on the White Nile, describing the defeat and death of the Khalifa on November 24th last. After entering at some detail into the nature and progress of the operations undertaken, Sir R. Wingate singles out the names of officers under him deserving of special mention, and speaks thus of the medical arrangements: "Lieutenant Stallard (Royal Army Medical Corps) was in charge of the medical arrangements, and was ably assisted by Lieutenant Nickerson (Royal Army Medical Corps). These officers did all that was possible, not only to alleviate the sufferings of our wounded, but were also indefatigable in attending to the Dervish wounded, large numbers of whom passed through our hands."

Lord Kitchener, in transmitting the report, "freely endorses Colonel Wingate's remarks on the good services of the officers and men he has mentioned."

## MAJOR MANIFOLD, I.M.S.

WE are glad to be able to state that the last report from India is to the effect that Major Manifold is progressing favourably, and that no bad symptoms have occurred. There was still intense pain in the lacerated hand, but it will be saved, and will probably remain a useful limb. The mahout who was injured at the same time is also recovering.

## MEDICO-LEGAL AND MEDICO-ETHICAL.

*Replies in this column are limited to questions affecting the legal interests and privileges of the medical profession at large. The column is not to be used as a medium for affording legal advice in private or personal matters as to which the applicant ought to consult his own solicitor.*

*From communications which we have received recently it appears to be necessary to repeat that we cannot undertake to express any opinion upon medico-ethical cases submitted to us unless we have before us statements by both parties to the controversy.*

## UNQUALIFIED PRACTICE.

AN inquest (which had been adjourned the previous week for the purposes of a *post-mortem* examination) was resumed at Snydale, near Pontefract, on January 23rd, by Mr. Maitland, one of the West Riding coroners, upon the body of Thomas Leadbeater, a miner.

It appeared that the deceased had been attended by "Dr." Tempest, of Pontefract, who had given a certificate stating that death was due to phthisis primarily, and secondarily pneumonia; but the Registrar had refused to accept it, and an inquest had been ordered.

Dr. Cameron now stated that death was due to phthisis, and that there was no indication of improper feeding or medicine, nor could he say the patient had been neglected by want of proper skilled attention. Dr. Cameron had examined some ointment which it was alleged had been supplied by a man named Wilson, of Castleford, and said it was as harmless as it was useless.

According to the report in the *Leeds Mercury* of January 24th, the coroner said that it appeared clear that the deceased was a phthisical subject, and had died from consumption; but to his mind it was most unwise for people to employ unqualified men, for by doing so they ran a very great risk. Gentlemen of the medical profession spent a good portion of the early part of their lives and a large amount of money in qualifying themselves, and it seemed to him to be unjust and un-English that persons should turn up in various parts of their districts totally unqualified, with a knowledge picked up in a harum-scarum manner, and hold themselves out as qualified men. He should report the case to the Registrar-General, who would take what steps he thought fit.

The coroner added that Mr. Tempest had given a certificate, which was an illegal thing altogether, because it was misleading; and if a registrar were not fully aware of his duties, he might pass such cases over, and a good deal of harm might be done.

## ANTIVACCINATORS AND THE DIVISIONAL COURT.

ON January 26th the Court of Queen's Bench dismissed the appeal of an antivaccinator (Over v. Harwood) against a conviction by a country bench of magistrates for not having his child vaccinated, or otherwise complying with the requirements of the Act. It appears from the report in the *Times* that the appellant had been convicted on the evidence of the vaccination officer that no certificate of the child's successful vaccination had been received, nor any that the child was unfit for or insusceptible to vaccination. For the appellant it was not contended that he had, as a matter of fact, complied with the law, but argued by Mr. Schultess-Young that the evidence given by the respondent was not sufficient proof that the appellant was guilty of the offence charged. The appeal was dismissed. Mr. Justice Channell said that it was the province of the Court to find whether there was any evidence, not as to the weight of that evidence, that was entirely a question of fact for the magistrates. In this case there was no doubt *prima facie* evidence that the law had not been complied with. Mr. Justice Bucknill concurred.

## SALE OF PRACTICE.

COUNTRY DOCTOR.—A correspondent asks what is the usual procedure during the introduction of the buyer after the sale of a practice where half the purchase money has been paid. Does the buyer receive all income and pay all the expenses from the beginning of the introduction?

\*\* Directly the sale of the practice is complete—and no vendor would introduce his patients to a successor till it was completed—all income from it belongs to the buyer, who likewise must pay all expenses

incident to its being carried on. Income of course does not include money paid to discharge debts due to the vendor before sale, which in the absence of agreement to the contrary belong to him. If the whole price of the practice is not paid at the time of the purchase, it is usual for the buyer to pay interest on what is unpaid, but this, as well as what the vendor is to receive while he is introducing the buyer, is usually settled in the agreement for the sale.

## THE SUPPLY OF ALCOHOL ON SUNDAYS.

A. R. M. B., who resides in Scotland, asks whether, if in a case of emergency, he can legally order a certain amount of stimulant on a Sunday; and whether, if he gives an order to that effect the innkeeper can refuse to supply the stimulant.

\* \* The Public House Act Amendment (Scotland) Act, 1862, is the Act under which the innkeeper holds his licence. Under this Act he is allowed to supply drink to no one on Sunday, "with the exception of refreshments to travellers or to persons requiring to lodge in said house or premises." Thus evidently the innkeeper was within his legal rights in refusing to supply stimulant. We are informed, however, that it is the common practice, dictated by ordinary rules of humanity, for innkeepers to supply a limited amount of stimulant to persons who bring a certificate from a doctor that it is required for medical purposes. Not infrequently this note is taken first to a police officer, who accompanies the applicant to the inn. A justice would not be likely to convict an innkeeper of a breach of his licence for doing so.

R. W. D.—We are of opinion that the whole of the circular beyond the intimation of the change of address is open to objection.

MR. O'HEA.—The circular appears to be of the nature of an advertisement, and as the person in question is a member of the Association, we will, unless our correspondent objects, refer the matter to the Ethical Committee of the Council.

F. E. W.—C. is not justified in giving any information to B., but if called as a witness under subpoena he will be compelled to answer such questions as the Court may direct.

## UNIVERSITIES AND COLLEGES.

## UNIVERSITY OF CAMBRIDGE.

*Chair of Pathology.*—Lord Lister has been appointed a member of the Board of Electors to this professorship, in the room of the late Sir James Paget.

*Allen Studentship.*—This term an appointment will be made to the Allen Studentship (£250 for one year) for research in some branch of science, including medicine. The studentship is open to graduates of the University who are not more than 28 years of age. Application must be made to the Vice-Chancellor by February 20th.

*University College, Cardiff.*—The Faculty of Medicine of this College has been included in the list of schools recognised by the University for the purposes of medical study.

## UNIVERSITY OF LONDON.

M.D. EXAMINATION.—The following candidates have passed this examination in the subjects noted:

*Medicine.*—\* C. W. Alford, Middlesex Hospital; Frances Armitage, B.S., London School of Medicine for Women; R. H. Ashwin, Guy's Hospital; C. Banting, B.S., University College; C. H. Benham, University College; E. B. Bostock, B.S., Mason University College and General Hospital, Birmingham; S. L. Box, St. Bartholomew's Hospital; H. W. Bruce, B.S., Guy's Hospital; C. W. Buckley, St. Mary's Hospital; A. Burn, St. Mary's Hospital; A. J. Cleveland, Guy's Hospital; S. Cornish, B.S., St. Bartholomew's Hospital; J. M. S. Coutts, University College; T. V. Cunliffe, B.S., Owens College and Manchester Royal Infirmary; J. Currie, St. Bartholomew's Hospital; F. J. Fielder, B.S., King's College; E. G. L. Goffe, B.S., University College; F. R. Greenwood, Mason University College; A. G. Gullan, University College, Liverpool; C. P. Harris, London Hospital; J. C. Hibbert, University College; C. R. Hodgson, B.S., Guy's Hospital; T. J. Horder, B.S., St. Bartholomew's Hospital; W. E. L. Horner, B.S., University College; E. H. Houghton, Yorkshire College; S. P. Huggins, St. Bartholomew's Hospital; J. D. Jenkins, B.S., London Hospital; J. T. Leon, B.Sc., St. Mary's Hospital; J. L. Maxwell, B.S., St. Bartholomew's Hospital; R. W. Mayston, Guy's Hospital; D. N. Nabarro, B.Sc. (gold medal), University College; R. H. Norman, B.S., Westminster Hospital; S. H. Perry, Mason University College; J. W. Pugh, London and St. Bartholomew's Hospitals; F. W. Robertson, B.S., St. Bartholomew's Hospital; G. N. O. Slater, St. Bartholomew's Hospital; H. J. Starling, Guy's Hospital; Florence Ada Stoney, B.S., Royal Free Hospital; P. G. S. Williams, B.S., University College.

*State Medicine.*—R. C. Gully, M.D., St. Bartholomew's Hospital; H. W. Jackson, University College; A. N. Weir, B.Sc., St. Bartholomew's Hospital.

\* Obtained the number of marks qualifying for the gold medal.

## ROYAL COLLEGE OF PHYSICIANS.

At the ordinary Comitia held on Thursday, January 24th, the President, Dr. W. S. Church, in the chair:

## MEMBERSHIP.

The following gentlemen having passed the required examination, were admitted as Members: E. Bramwell, M.B. Edin.; W. L. Brown, M.A., M.B. Camb.; A. Duncan, M.D. Lond.; C. O. Hawthorne, M.D. Glasg.; R. Jones, M.D. Lond., L.R.C.P.; J. McL. H. Macleod, M.A. St. And., M.D. Aberd.; C. Riviere, M.B. Lond., L.R.C.P.; A. E. Russell, M.D. Lond., L.R.C.P.; A. E. Sikes, M.D. Lond., L.R.C.P.; L. A. Smith, M.B. Lond., L.R.C.P.; R. H. Vincent, M.B. Durh., L.R.C.P.

## LICENCES.

One hundred and twelve gentlemen having conformed to the by-laws and regulations and passed the required examinations, had licences to practise physic granted to them at this meeting.

## DIPLOMAS IN PUBLIC HEALTH.

Diplomas in public health were granted (jointly with the Royal College of Surgeons), to the following:—J. Allison, M.D., M.S. Edin., F.R.C.S. Edin.; A. D. Cowburn, L.R.C.P., M.R.C.S., M.D. Brux.; H. E. Finch, M.B., B.C.L. Oxon.; H. P. Foulerton, L.R.C.P., M.R.C.S.; S. B. Gadgil, L.M. & S. Bombay; H. W. Henshaw, L.R.C.P., M.R.C.S.; J. N. Martin, L.R.C.P., M.R.C.S.; W. D. Murray, M.B., M.S. Glasg.; E. J. Smyth, L.R.C.P., M.R.C.S., M.D., B.S. Lond.; A. Spitteler, M.B., C.M. Madras; D. J. Thomas, L.R.C.P., M.R.C.S.; R. E. G. Tilleke, L.R.C.P. & S. Edin., L.F.P. & S. Glasg., M.D. Brux.; F. H. White, L.R.C.P., M.R.C.S., L.S.A.

## APPOINTMENT OF LECTURERS.

The President announced that the annual Harveyan Oration would be delivered by Dr. T. Clifford Allbutt, Regius Professor of Physic in the University of Cambridge, that Dr. Archibald Garrod had been appointed Bradshaw Lecturer, and Dr. John Sykes, M.O.H. St. Pancras, Milroy Lecturer for the ensuing year (1901).

## COUNCIL.

Upon the nomination of the Council, Dr. Frank, Sir Wm. R. Gowers, Dr. Barlow, Dr. Coupland were elected Councillors in the room of Dr. Sansom, Dr. Mitchell Bruce, Dr. Allchin, and Dr. Frederick Taylor, retiring by rotation.

## LABORATORIES COMMITTEE.

Dr. Sidney Martin, F.R.S., was elected a member of the Laboratories Committee in the place of Dr. Payne, who has resigned.

## COMMUNICATIONS.

Communications were received from the Secretary of the Royal College of Surgeons reporting certain proceedings of their council on November 2nd, 1899, and January 11th, 1900; from the General Medical Council (November 30th), recommending the Royal Colleges to join with the Society of Apothecaries to hold qualifying examinations; from Mr. J. N. Davies-Colley, resigning on account of illness his appointment as Examiner in Surgery; and from a Committee of the Local Government Board (December 27th), asking the College to appoint two representatives to give evidence on the question how far certain preservatives and colouring matters added to food are injurious to health. Sir T. Lauder Brunton, M.D., F.R.S., and Dr. Vivian Poore were appointed.

## SUSPENSION OF PRIVILEGES.

In pursuance of a recommendation of the Censors Board, July 25th, to provide for the suspension as well as the final revocation of a diploma under By-law 188, it was moved for the second time, and resolved:

That the following words, approved by counsel, be substituted for those in the by-law commencing "may declare such Fellow" to the end, namely: "may declare such Fellow not to be a Fellow or a Member of the College, or such Member not to be a Member of the College, or such Licentiate not to be a Licentiate, for a limited period of time or altogether as the College shall determine; and such Fellow, Member or Licentiate shall forfeit all the rights and privileges which he does or may enjoy as a Fellow or as a Member or as a Licentiate as the case may be, either for such limited period of time or altogether as the College shall determine; and his name shall be expunged from the list of Fellows or from the list of Members or from the list of Licentiates, as the case may be, either for such limited time or altogether as the College shall determine."

## NOMENCLATURE OF DIARRHŒA.

*Reports.*—A report, dated November 20th, 1899, from the Committee on the Nomenclature of Diarrhœa, appointed July 27th, 1899, was received. After some discussion, in which Dr. Hunter, Dr. D. MacAlister, Dr. Norman Moore, Dr. Tatham, and Dr. Payne took part, the report was adopted by the College. (See p. 269).

## REPORT OF COMMITTEE OF MANAGEMENT.

A report, dated December 11th, 1899, from the Committee of Management, was received and adopted.

*D.P.H. Examination.*—The Committee recommended that a revised syllabus for the examination for the Diploma in Public Health as now assented to by the examiners, should be adopted and come into force on July 1st next.

*Cooke's School.*—The Committee further reported that they had considered an application for the renewal of the recognition of Cooke's School of Anatomy as a place of instruction in Anatomy and Physiology for candidates referred at the Second Examination, and had decided to recognise the school on the same conditions as heretofore for the ensuing year, and to recommend that the course of Operative Surgery at Cooke's School be recognised for the ensuing year.

*Cornell University.*—The Committee recommend that Cornell University be added to the list of institutions recognised by the Board at which the whole curriculum of professional study may be completed, and whose graduates in medicine are admissible to the Final Examination.

A report, dated December 8th, 1899, from the Laboratories Committee was also received and adopted:

*Work of the Bacteriological Department.*—The Superintendent of the Bacteriological Department reports that there has been a large demand for diphtheria antitoxin for the hospitals of the Metropolitan Asylums Board. During the past quarter 774 doses of antitoxin each containing 4,000 units, and 7,211 doses each containing 3,000 units, have been sup-

plied, making a total of 24,729,000 units. Under the grant from the Goldsmiths' Company 50 doses of antitoxin containing 4,000 units, 124 doses of 3,000 units, and 250 doses of 2,000 units have been supplied to the general and children's hospitals in or near London since the 5th of October last. The Committee have under consideration certain further researches which it is intended to commence with help from this fund. During the quarter further batches of antitoxin supplied by Messrs. Parke, Davis and Co. have been tested in the laboratory, and a certificate granted showing its strength, sterility, and freedom from excess of antiseptic.

A list of books and other publications presented to the Library during the past quarter was presented by the Librarian, and the thanks of the College accorded to the donors.

Such gifts have during the present quarter been unusually numerous and valuable: The Governors of the Bedford General Infirmary have presented 23 volumes of old medical works belonging to the 17th and 18th centuries; Dr. Coates of Bath, a fine copy of Cowper's *Anatomy*, splendidly bound; Dr. Vivian Poore, an interesting medical MS. of the 17th century, entitled *Remedies for the Universall Parts of the Body*; Dr. Stevenson, three medical books of the 17th century; Dr. Osler, Sir T. Browne's *Christian Morals*; Dr. Davidson of Liverpool, *The Life of Dr. Walker*; Mr. Arthur Denman, Boyle's *Philosophical Works*, in three volumes.

Several new publications by Fellows of the College and others, have also been received.

## CONJOINT BOARD IN SCOTLAND.

The quarterly examinations for the Triple Qualification in Edinburgh were concluded on January 27th with the following results:

*First Examination, Four Years' Course.*—E. H. Smyth, D. C. Williams, Honorary Forbes, J. Levack, E. A. J. Ersser, B. C. Trull.

One candidate passed in the division of Chemistry.

*First Examination, Five Years' Course.*—A. B. H. Pearce, A. W. Hall, W. Fleming, W. S. Batten, L. P. M. Alexis, S. J. Graham, M. T. Nicholson.

Two candidates passed in Elementary Biology and 1 in Chemistry.

*Second Examination, Four Years' Course.*—A. C. Campbell, W. D. Lawton, H. E. Blackwood, D. C. Williams, J. A. Campbell (with distinction), T. J. Evans, J. M. Campbell, W. E. MacManus, T. Dow.

*Second Examination, Five Years' Course.*—J. J. Adrien, T. W. McGubbin, Mary Lytle Lynes, W. Bates, J. Boyd, R. P. H. Blackstock, D. G. Dingwall, T. Gibbons, S. L. G. D. Madaine, R. L. Williams, S. J. Mathewson, J. MacLean, H. Doig (with distinction), and J. W. Cross.

Five candidates passed in Anatomy.

*Third Examination, Five Years' Course.*—J. S. Colquhoun, J. Cotter (with distinction), D. McIntyre, A. J. Hewitt, J. D. J. Bruce, J. Flanagan, A. B. Laidlaw, W. H. Ferguson, J. Crawford, W. Deery, R. G. Campbell, C. H. Farquharson, W. Turner, O. F. McCarthy, H. O. Pomme di Mirimonde, P. Carroll, A. H. Wilson, Jeane Newton, J. Stewart, C. H. Nash, and Sarah Harper Smith.

Two candidates passed in Anatomy and 3 in Materia Medica.

*Final Examination.*—Winifred Hill, E. Burr, J. W. Dow, W. Aston, T. Duff, J. McElroy, G. F. Beacher, F. Jeeves, Isabella Anne Watson, M. A. Alabone, A. J. Hewitt, W. Cunliffe, Hilda Maud McFarlane, T. S. Logan, S. W. Morton, A. J. Morkill, R. Girdwood, A. E. Whitehead, T. Holmes, F. A. Georgeson, M. A. G. F. Stoney, F. P. Maitland, Matilda Coutinho, K. Eapen, C. K. Pillai, J. T. K. Thomson, C. A. Vogwell, J. B. Thorburn, G. H. F. Graves, W. B. Heagerty, M. Sullivan, D. Jeaffreson, J. A. Maclardy, W. H. A. Raffel, J. G. Gray, C. C. B. Beling, A. Bryans, T. Harrison, J. E. Boon, C. F. Brears, G. H. L. Hammerton, C. Bharadwaja, T. F. H. Blake, W. E. Cuthbertson, R. W. Perry, and H. O. Pomme di Mirimonde.

Seven candidates passed in the division of Medicine and Therapeutics, 3 in the division of Surgery and Surgical Anatomy, 11 in the division of Midwifery, 10 in the division of Medical Jurisprudence.

## CONJOINT BOARD IN IRELAND.

FINAL EXAMINATION.—Candidates have passed this examination as undernoted:

*In all Subjects.*—F. G. FitzGerald, H. W. Spaight.

*Completed the Examination.*—R. J. Cane, R. J. Franklin, R. H. Moffit, T. D. Sullivan.

*In Medicine.*—W. J. Anglim, C. C. Meeke, P. J. McGinn.

*In Surgery.*—L. A. Hare, C. C. Meeke, J. H. O'Connell.

*In Mental Disease.*—W. J. Anglim, W. S. D. Bird, C. C. Meeke, P. J. McGinn, J. H. O'Connell.

*In Midwifery.*—W. J. Anglim, W. S. D. Bird, M. M. Goldfoot, N. P. Kirby,

C. C. Meeke, P. J. McGinn, J. H. O'Connell, D. Power.

*In Ophthalmology.*—W. J. Anglim, N. P. Kirby, J. H. O'Connell, D. Power.

*In Forensic Medicine, etc.*—C. J. D. Odevaine, D. Power.

**A MEDICAL CLUB IN PARIS.**—A medical club has recently been founded in Paris. Its objects are to form a professional centre for Parisian practitioners, and to offer hospitality to provincial and foreign doctors when they visit the French capital. A Special Committee has been formed to arrange for the provision of lodgings at suitable prices for members of the profession visiting Paris during the forthcoming Exhibition, and to supply them with information as to the various medical and scientific congresses to be held in connection therewith, and as to lectures, hospitals, clinics, etc. The President of the club is Dr. Pozzi, the General Secretary Dr. Doléris. Among the members of the Committee are MM. de Ranse, Desnos, Brissaud, Huchard, Maygrier, and Richelot. Communications should be addressed to Dr. Doléris, 5, Avenue de l'Opéra, where the club is housed.



## THE STRAITS SETTLEMENTS.

## MEDICAL REPORT FOR 1898.

THE Straits Settlements, comprising Singapore, Penang, Province Wellesley, and Malacca, present the very curious condition of a growing population associated with a low birth-rate and a high death-rate. The explanation is that immigration largely exceeds emigration, and, the immigrants being mostly adult males, the birth-rate remains low. The figures for 1898 were 21.57 and 30.43 per 1,000.

The year was on the whole a healthy one and free from epidemic disease. There were 48 deaths from cholera, and small-pox was rather prevalent in Singapore and Malacca. There were 25,345 admissions into the hospitals of these Settlements, with 4,139 deaths, or 16.33 per cent.; they include 1,329 admissions from beri-beri, with 420 deaths, or 31.6 per cent. This disease constitutes a very prominent feature in the pathology of these places, and a large proportion of the deaths which took place in the Singapore lunatic asylum and gaol was due to it. Dr. Leask gives a detailed report of a severe outbreak which took place in the latter institution. Venereal diseases are very rife, and apparently on the increase. There were 2,594 admissions and 121 deaths, indicating great severity, and the numbers of admissions entered under the terms "phagedæna," "anæmia," and "debility" evidence a low state of public health; 14,416 vaccinations were performed during the year, and Dr. Max F. Simon, Principal Medical Officer, Straits Settlements, considers that the population is fairly well protected against small-pox.

## MEDICAL NEWS.

A LEAGUE against Tuberculosis has been founded at Rio de Janeiro, on the initiative of Dr. Cypriano de Freitas.

WE regret to learn that Mr. Brodhurst, formerly Surgeon and Lecturer on Orthopædic Surgery at St. George's Hospital, died at the age of 77 on January 30th.

Dr. J. Wright Grant, Woodfield, Woburn Sands, has received for the third time in succession the Government grant for efficient vaccination.

THE Director of the new Antirabic Institute at Lyons is Professor Arloing, who is assisted by Dr. Jules Courmont, Dr. Nicolas, M. Lesieur, and M. Arloing, jun.

THE report made to the sixth annual meeting of the Massachusetts Cremation Society showed that the number of cremations had increased from 167 in 1898 to 230 in 1899.

THE subject for discussion at the annual clinical debate, which will be held at the Chelsea Clinical Society on March 13th and 20th, is the Treatment of Rheumatism with special reference to Prophylaxis and Cardiac Complications.

THE Rev. John Filmer Anstey has made a donation of £200 to the funds of the Middlesex Hospital out of funds at his disposal as sole executor to the will of the late Rev. Charles J. Morgan, of Hove.

THE Turin Academy of Sciences has awarded the Bressa Prize of 10,000 lire (£400) for the best scientific work published during the past four years to Professor Ernst Haeckel, of Jena.

THE New York Academy of Medicine, which not very long ago moved into a fine new building which cost nearly a quarter of a million dollars, has now paid off the whole of the debt on the building.

ARRANGEMENTS are being made for army medical officers to address personally all men of the Militia, Yeomanry, and Volunteers going to South Africa on the importance and advisability of submitting to inoculation against typhoid before embarking.

THE INSTITUTE OF CHEMISTRY.—At the examination held this month 10 candidates passed the Intermediate Examination, 3 the A.I.C. Examination (old regulations), 8 the Final A.I.C. Examination, and 2 Branch E of this examina-

tion (Analysis of Food and Drugs, including an examination in therapeutics, pharmacology, and microscopy).

LEPROSY IN CRETE.—At the invitation of Prince George of Greece, the Governor-General of Crete, Dr. E. Ehlers, of Copenhagen, and Dr. O. Cahnheim, of Dresden, will proceed to Crete next month to study the incidence of leprosy in that island. The inquiry is expected to last three months, and will, it is hoped, result in the adoption of regulations for the prevention of the disease.

CONGRESSES AT NAPLES.—The Queen of Italy, at the instigation of Professor Baccelli, has consented to be the Patroness of the Tuberculosis Congress which is to be held at Naples in April. Congresses of the Italian Medical Association, of the Medical Officers of Health of Italy, of the Sanitary Press Association, and others on Physical Training, etc., will be held at the same time.

TUBERCULOSIS IN GREECE.—The Queen of Greece has expressed her intention of founding a hospital for sufferers from tuberculosis. For that purpose she has acquired the Petraki convent, which is situated in a healthy region outside Athens. The institution is intended for the tuberculous patients who have hitherto been received into the general hospitals of Athens, and for tuberculous inmates of State prisons.

MEDICAL CLUB IN BIRMINGHAM.—We are asked to state that a social club has been started in connection with the Birmingham and District General Medical Practitioners' Union. A room has been taken at the Colonnade Hotel, and is being refurnished and decorated, and will shortly be ready for use. Membership in the social club is limited to those who have joined the Union. An inaugural dinner was held at the Colonnade Hotel on January 26th, and was well attended. Some fifty members of the Union have already joined the social club.

THE YARROW CONVALESCENT HOME.—We are asked to state that during the winter months accommodation is provided in the Yarrow Home for Convalescent Children, at Broadstairs, for a limited number of children requiring active treatment, and a lengthened stay is granted when there is a prospect of a permanent benefit. The trustees of the Home have placed at the disposal of the Officers' Families Fund thirty beds for the reception of the convalescent children of officers who have been killed or wounded in the war in South Africa. The London offices of the Home are at 73A, Queen Victoria Street, S.W.

DECREASE OF MEDICAL STUDENTS IN HUNGARY.—While elsewhere the rush of young men into the medical profession cannot be checked, in Hungary it appears to be necessary to attract students by the offer of free education. The Hungarian Minister of Education, in view of the yearly decreasing numbers of students entering the medical faculty of the University of Buda-Pesth, has ordered that the fees for lectures and classes be remitted on a more liberal scale than has hitherto been the case. The Senate of the University has accordingly recommended a considerable number of students for exemption in the second semester of the present academic year. If this measure fails to accomplish the desired object, it looks as though the Hungarian Government may be driven to offer a bounty to induce men to enter the profession.

LIMITING THE OUTPUT OF DOCTORS IN RUSSIA.—The Russian Government has grappled with the question of the overproduction of medical practitioners in a drastic manner peculiarly its own. By a recent decree of the Minister of Education the admission of first-year students by the several medical faculties throughout the empire is restricted to a fixed number. The University of Moscow is limited to 250, Kieff to 200, Charkow to 175, Dorpat to 150, Warsaw to 100, Tomsk to 120, and Kasan to 100. The total number of first-year medical students in the dominions of the Czar must therefore not exceed 1,095. This number does not include the students of the St. Petersburg Medico-Military Academy, which is allowed to admit 250 first-year students.

CANCER RESEARCH.—The sum of 98,000 dollars left by Mrs. C. B. Croft for the furtherance of the systematic study of cancer has now been paid to the Harvard University, and will be administered by the Department of Surgery of the Medical

School of that University. We learn from the *Boston Medical and Surgical Journal* that Dr. E. H. Nichols has been appointed to an office under the trust, and will shortly visit English and Continental laboratories for the purpose of investigating the work now being done in them.

**CATS AND INFLUENZA.**—The cat has no doubt many sins to answer for, but there is no good ground for the last charge brought against this necessary animal, which is that it is a disseminator of influenza. It is possible that a cat, if slobbered over by a person suffering from the catarrhal form of influenza, might carry the infection in its coat; and the habit of kissing animals—whether cats, dogs, or horses—is not free from danger of various kinds, and is certainly disagreeable to the witnesses, if not to the animals who have to endure it. We are advised, however, by an eminent veterinary authority that there is no foundation for the belief that the cat is ever the subject of influenza if left to itself.

**COMPULSORY NOTIFICATION OF PLAGUE IN BELGIUM.**—A Royal Decree has been issued which renders the immediate notification to the burgomaster of any case of plague, or suspected plague, obligatory upon the physician attending the case, and upon the householder, or, failing him, the nearest relatives of the sick person. If the case occurs on board ship the obligation is laid upon the captain. The burgomaster is required to transmit the notification as rapidly as possible to the President of the Medical Commission of the district. Further the medical man in attendance is required to send an immediate notification by telegram to the director of one of certain bacteriological institutes or laboratories which are enumerated in the decree; these laboratories are those of the Universities of Ghent, Louvain, and Liège; the bacteriological institutes of Brussels and Mons, and the laboratory of the Hospital Commission of Antwerp. Upon receiving such notification the director of the laboratory is required at once himself, or by some person under his direction, to obtain materials for making a bacteriological diagnosis, and to communicate the results of his inquiry to the Government and to the physician treating the case. Materials for such bacteriological examinations must not be forwarded by post or by railway; they must be collected by the director himself, or by a person nominated by him.

**NEW WING OF THE WARNEFORD HOSPITAL, LEAMINGTON.**—The new wing of the Warneford Hospital at Leamington Spa, which has been erected as a memorial of Her Majesty's Diamond Jubilee, was opened on January 17th by Princess Christian. The Princess first paid a brief visit to Lady Warwick's Home for Cripples at Emscote, and then proceeded to the Warneford Hospital, where she was received by the Chairman and Committee of the hospital, the medical staff, and others. After the new wing had been inspected, the two wards which it contains were named "Victoria" and "Helena" respectively. It is hoped that this addition, whilst rendering the accommodation of the hospital equal to present demands upon it, will enable several rooms in the old building to be used for administrative purposes. The hospital was founded in 1832 by the Rev. Dr. Samuel Warneford, who contributed £3,000 to the building fund, and on his death bequeathed a further sum of £10,000 for its maintenance. Since that time more than £30,000 has been expended on improvements and enlargements. A commodious out-patient department, separate from the main building, was erected in 1879, and about the same time a nurses' home was built. In 1884 the Herbert Beaumont Cottage Hospital, containing eight beds for cases requiring isolation, was established in connection with the Warneford Hospital, and several new wards and a well-equipped operating theatre were added in 1891. The hospital is also provided with an excellent pathological laboratory, the gift of a Warwickshire gentleman, and known as the Gibbin's laboratory.

#### MEDICAL VACANCIES.

The following vacancies are announced:

- ALDERSHOT URBAN DISTRICT COUNCIL.**—Medical Officer of Health. Salary, £200 per annum. Applications, marked "Medical Officer," to the Clerk to the Council by February 14th.
- BATH GENERAL OR ROYAL MINERAL WATER HOSPITAL.**—Resident Medical Officer; unmarried. Salary, £100 per annum, with board and apartments. Applications to the Secretary by February 5th.
- BIRMINGHAM AND MIDLAND EYE HOSPITAL.**—Assistant House-Surgeon. Salary, £60 per annum, with apartments and board. Applications to the Chairman of the Medical Board by February 10th.

- BOLTON INFIRMARY AND DISPENSARY.**—Junior House-Surgeon. Salary, £80 per annum, with furnished apartments, board, and attendance. Applications to Mr. Peter Kevan, Honorary Secretary, 12, Acresfield, Bolton, by February 7th.
- BRIGHTON: SUSSEX COUNTY HOSPITAL.**—Fourth Resident Medical Officer; unmarried, and under 30 years of age. Salary, £30 per annum, with board, washing, and residence. Applications to the Secretary by February 28th.
- BRISTOL ROYAL INFIRMARY.**—Resident Officer. Salary, £40 per annum, with board, lodging, and washing. Applications to the Secretary by February 8th.
- BRIXTON DISPENSARY.**—Resident Medical Officer; unmarried. Salary, £150, with furnished apartments, etc. Applications to the Secretary at the Dispensary, Water Lane, Brixton, S.W., by February 6th.
- CANCER HOSPITAL (FREE).** Fulham Road, S.W.—Assistant House-Surgeon. Salary at the rate of £50 per annum, with board and residence. Applications to the Secretary by February 12th.
- CARDIFF INFIRMARY.**—(1) Assistant House-Surgeon; (2) Assistant House-Physician. Appointment for six months, subject to re-election. Salaries at the rate of £50 per annum, with board, washing, and apartments. Applications to the Secretary by February 6th.
- CENTRAL LONDON OPHTHALMIC HOSPITAL,** Gray's Inn Road.—House-Surgeon. Salary, at the rate of £50 per annum, with board and residence. Applications to the Secretary by February 6th.
- DUBLIN: NATIONAL MATERNITY HOSPITAL.**—Resident Surgeon. Salary £100 per annum. Applications to the Secretary by February 6th.
- EASTERN DISPENSARY.**—Physician. Honorarium, £50 a year. Applications to the Secretary at the Dispensary, Leman Street, Whitechapel, E., by February 7th.
- EVELINA HOSPITAL FOR SICK CHILDREN,** Southwark, S.E.—Surgeon to Out-patients. Applications to the Committee of Management by February 16th.
- FRENCH HOSPITAL AND DISPENSARY,** Shaftesbury Avenue, W.C.—Resident Medical Officer. Salary, £80 per annum, with full board. Applications to the Secretary.
- GLOUCESTER: GENERAL INFIRMARY.**—House-Surgeon. Salary, £100 per annum, with board, residence, and washing. Applications to the Secretary by February 13th.
- GRAVESEND HOSPITAL.**—House-Surgeon. Salary, £80 per annum, with board and residence. Applications to the Honorary Secretary by February 9th.
- HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST,** Brompton.—Assistant Physician. Application to the Secretary by February 14th.
- HULL ROYAL INFIRMARY.**—Honorary Surgeon. Applications to the Chairman, Committee of Management, by February 7th.
- HULME DISPENSARY.**—House-Surgeon. Salary, £130 per annum, with apartment and attendance. Applications to the Honorary Secretary, Medical Committee, by February 6th.
- LEEDS GENERAL INFIRMARY.**—Resident Ophthalmic Officer. Salary, £50 per annum, with board and lodging. Applications to the Secretary to the Faculty by February 7th.
- LIVERPOOL.**—Assistant to the Medical Officer of Health. Must not exceed 35 years of age. Salary, £350 per annum. Applications, endorsed "Assistant to the Medical Officer," to be sent to the Town Clerk, Municipal Offices, Liverpool, by February 14th.
- MARLBOROUGH: ROYAL SEA BATHING HOSPITAL.**—Resident Surgeon. Salary, £100, with board and residence. Applications to the Secretary, 30, Charing Cross, S.W., by February 20th.
- METROPOLITAN HOSPITAL,** Kingsland Road, N.—(1) Assistant Physician and Pathologist; must be F. or M.R.C.P. Lond. (2) Surgeon for Diseases of Women. (3) Assistant Surgeon; must be F.R.C.S. Eng. Applications to the Secretary by February 15th.
- MILBURN HOSPITAL AND ROYAL KENT DISPENSARY,** Greenwich Road, S.E.—Junior Resident Medical Officer. Salary, £40 per annum, with board, attendance, and washing. Appointment for six months, with prospect of re-election as Senior. Salary, £60. Applications to the Secretary by February 6th.
- POPULAR HOSPITAL FOR ACCIDENTS.**—Senior House-Surgeon. Salary, £120 per annum, with board and residence. Applications to the House-Governor by February 16th.
- SALFORD UNION.**—Assistant Resident Medical Officer at the Infirmary, Hope, near Eccles. Salary, £130 per annum, with furnished apartments and attendance. Applications, endorsed "Assistant Medical Officer," to the Clerk to the Guardians, Union Offices, Eccles New Road, Salford, by February 6th.
- SEAMEN'S HOSPITAL SOCIETY: BRANCH HOSPITAL,** Royal Victoria and Albert Docks, E.—(1) Senior House-Surgeon. Salary, £75 per annum, with board and residence, and additional £25 per annum if certain clinical work is performed satisfactorily. (2) House-Surgeon. Salary, £50 per annum, with board and residence. Applications to the Secretary by February 19th.
- SHEFFIELD ROYAL INFIRMARY.**—House-Surgeon. Salary, £120 per annum, with board, lodging, and washing. Applications to the Medical Staff, care of the Secretary, by February 19th.
- SOUTHAMPTON: ROYAL SOUTH HANTS INFIRMARY.**—Assistant House-Surgeon. Appointment for six months. Salary at the rate of £50 per annum, with rooms, board, and washing. Applications to the Secretary by February 10th.
- SOUTHPORT BOROUGH.**—Medical Officer of Health. Salary, £500 per annum. Applications, endorsed "Medical Officer," to be sent to the Town Clerk, Town Hall, Southport, by February 10th.
- STOCKPORT INFIRMARY.**—Junior Assistant House-Surgeon. Salary, £2 per mensem, with board, washing, and residence. Appointment tenable for six months. Applications to the Secretary by February 6th.
- TUNBRIDGE WELLS: EYE AND EAR HOSPITAL.**—House-Surgeon. Appointment for one year, vice F. W. Skrimshire, M.R.C.S., with board and residence. Applications to the Honorary Secretary by February 10th.
- VENTNOR ROYAL NATIONAL HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST.**—Assistant Resident Medical Officer. Salary, £100 per annum, with board and residence. Application to Dr. Parry, R.M.O.
- WEST LONDON HOSPITAL,** Hammersmith Road, W.—Acting Assistant Surgeon. Applications to the Secretary-Superintendent by February 7th.
- WORKSOP DISPENSARY.**—Resident Surgeon. Salary, £120 per annum, etc. Applications to Mr. Charles A. Whall, Worksop.

#### MEDICAL APPOINTMENTS.

- ARBuckle, M.D.** Aberd., D.P.H. Camb., reappointed Medical Officer for the Stainforth District of the Thorne Union.
- BUNCE, F. M., M.B. Edin.** appointed Medical Officer for the Second District of the Morwell Union, vice F. W. Skrimshire, M.R.C.S.
- DUKE, Edgar, M.D. Durh.** M.R.C.S., appointed Honorary Physician to the Police Convalescent Home, Hove, vice F. J. Waring, deceased.
- FORREST, J. S., L.R.C.P. Edin., L.F.P.S. Glas.**, appointed Medical Officer for the Amble District of the Alnwick Union.
- GOLDIE, W. H., M.D., C.M.**, appointed Clinical Assistant to the Chelsea Hospital for Women.
- HARRIS, H. G., M.B., B.S. Durh., M.R.C.S., L.R.C.P.**, appointed Assistant House-Surgeon to the Derbyshire Royal Infirmary.
- HAWTHORNE, C. O., M.D., M.R.C.P.** appointed Examiner in Materia Medica and Therapeutics in the University of Edinburgh.
- JONES, P. T., M.R.C.S., L.R.C.P.** appointed Medical Officer for the Coleford District of the Frome Union, vice T. C. Lawson, M.R.C.S., resigned.
- MESSTER, A. F., M.R.C.S., L.R.C.P.** reappointed Medical Officer for the Belton District of the Thorne Union.
- MILLS, H. H., M.B. Lond.**, appointed a Clinical Assistant to the Chelsea Hospital for Women.
- MORLEY, G. F., M.R.C.S. Eng., L.R.C.P. Lond.**, appointed Medical Officer for the Portsmouth District of the Portsea Island Union, vice F. Morley, M.R.C.S. Eng., resigned.
- PALMER, C. S., M.R.C.S., L.R.C.P. Lond.** appointed Medical Officer for the First District and the Workhouse of the Reigate Union, vice A. Kelsey, M.R.C.S. Eng., resigned.

**RIDLEY, Walter, M.B., M.S. Dunelm, F.R.C.S. Eng.**, appointed Surgeon to the Royal Infirmary, Newcastle-on-Tyne, *vice* Professor Page, retired.

**RIBSDALE, A. E., M.R.C.S., L.R.C.P.**, appointed Medical Officer for the First District of the Newhaven Union, *vice* F. Dalton, M.R.C.S., L.R.C.P., resigned.

**ROBSON, F. W. H., M.B., O.M. Edin.**, appointed Medical Officer for the Burscough District of the Ormskirk Union, *vice* A. J. Partridge, M.B. Vict., resigned.

**SAVAGE, Smallwood, M.A., M.B. Oxon., F.R.C.S.**, appointed Surgeon to the Wolverhampton Hospital for Women.

**SUTTON, C. R. A., M.D. Camb.**, appointed Medical Officer for the Seventh District of the Bromley Union, *vice* F. Shapley, M.R.C.S. Eng.

**SCOTT, W. J., L.R.C.P., L.R.C.S. Edin.**, appointed Medical Officer for the Windsor District of the Windsor Union, *vice* S. Wyborn, M.R.C.S. Eng., resigned.

**SOUTHWELL, C. E., L.R.C.P., L.R.C.S. Edin., L.F.P.S. Glas.**, appointed Medical Officer of Health for the Stoke-upon-Trent District of the Stoke-upon-Trent Union, *vice* S. Johnson, M.D.

**VALENTINE, William, L.R.C.P., L.R.C.S. Edin.**, appointed Medical Officer and Public Vaccinator to the No. 4 District of the Warrington Union, *vice* Dr. J. W. Watkins, resigned.

**WIGGINS, H., M.R.C.S., L.R.C.P. Lond.**, appointed Medical Officer for the Second (B.) Worthing District of the Preston Union, *vice* B. H. Lees, M.B., resigned.

## DIARY FOR NEXT WEEK.

## MONDAY.

**London Throat Hospital, 204, Great Portland Street, W., 4.30 P.M.**—Mr. Claud Woakes. Examination of Nose.

**Otolological Society of the United Kingdom, 11, Chandos Street, Cavendish Square, W., 4.30 P.M.**—Introductory Address by the President. Professor Urban Pritchard: On Antisepsis in Aural Surgery. Cases and specimens will be shown by Dr. Milligan, Professor Urban Pritchard, Dr. Dundas Grant, Dr. Tilley, Dr. St. Clair Thomson, Dr. Richard Lake, Mr. L. A. Lawrence, Dr. Johnson Horne, Mr. Arthur Cheate, and Mr. Ernest Waggett.

## TUESDAY.

**National Hospital for the Paralysed and Epileptic, Queen Square, W.C., 3.30 P.M.**—Mr. Victor Horsley: Surgery of the Nervous System.

**Medical Graduates' College and Polyclinic, 22, Chancery Street, W.C., 4 P.M.**—Dr. C. T. Williams: Consultation (Medical).

**Pathological Society of London, Pathological Laboratory, University College, Gower Street, 8.30 P.M.**—Dr. Nuttall: Recent Investigations on Malaria with microscopic demonstration.

## WEDNESDAY.

**Obstetrical Society of London, 8 P.M.**—Specimens will be shown by Drs. Amand Mouth, Griffith, and others. Annual meeting. The President (Mr. Alban Doran) will deliver the Annual Address.

**Hospital for Consumption and Diseases of the Chest, Brompton, 4 P.M.**—Dr. J. K. Fowler: The Symptoms and Treatment of Cardiac Failure in Mitral Stenosis and Mitral Regurgitation.

## THURSDAY.

**Medical Graduates' College and Polyclinic, 22, Chancery Street, W.C., 4 P.M.**—Mr. J. Hutchinson: Consultation (Surgical).

**Hospital for Sick Children, Great Ormond Street, W.C., 4 P.M.**—Dr. Voelcker: Treatment of Whooping-cough.

**West London Post-Graduate Course, West London Hospital, Bammersmith Road, W., 5 P.M.**—Mr. Dunn: Glaucoma.

**Hospital for Diseases of the Skin, 5 P.M.**—Clinical Demonstrations. Dr. T.

## FRIDAY.

**Medical Graduates' College and Polyclinic, 22, Chancery Street, W.C., 5 P.M.**—Professor McCall Anderson: Clinical Lecture.

**Clinical Society of London, 8.30 P.M.**—Dr. Rolleston: A case of Fatal Hæmopneumothorax of Unexplained Origin. Mr. Robert Jones and Mr. Tubby: Further Experience of Cases of Spinal Rectification. Dr. J. J. Perkins and Mr. C. S. Wallace: A Case of Perforated Duodenal Ulcer: Operation: Recovery.

## 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 ensure insertion in the current issue.

## BIRTHS.

**CARTER**—On January 24th, at Elm House, Chapel Allerton, Leeds, the wife of Eustace G. Carter, M.R.C.S., of a daughter.

**HOWDEN**—At 24, Burdon Terrace, Newcastle-upon-Tyne, on January 29th, the wife of Professor Robert Howden, of a son.

## MARRIAGES.

**BENNETTS-GOWING**—On January 24th, at Bolsterstone Church, Yorkshire, by the Rev. Canon Wilson, assisted by the Rev. G. K. Cassels, F. Bennetts, M.R.C.S., L.R.C.P., of London, to Maggie, youngest daughter of B. C. Gowing, M.R.C.S., of Stockbridge, Yorkshire.

**MCGEAGH-RYDER**—On January 31st, at St. Mary's, Crumpsall, Manchester, by the Rev. J. Falconer, Vicar of Tunstead, Stockstead, and the Rev. E. Catterall, Rector of the Parish, William McGeagh, M.D., Liverpol, to Eliza Jane, only daughter of the late W. B. Ryder, J.P., of Gransden Hall, Hunts.

## DEATH.

**BRODTHURST**—On January 30th at 21, Portland Place, W. (Bernard Edward Brodthurst, F.R.C.S., in his 78th year.

## HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

**CANCER, Brompton (Free). Attendances**—Daily, 2. Operations—Tu. W. F., 2.

**CENTRAL LONDON OPHTHALMIC. Attendances**—Daily, 1. Operations—Daily.

**CENTRAL LONDON THROAT, NOSE, AND EAR. Attendances**—M. W. Th. S., 2; Tu. F., 5. Operations—i.p., Tu. 2.30; o.p., F., 2.

**CHARING CROSS. Attendances**—Medical and Surgical, daily, 1; Women, W., 1; S. 9.30; Skin, M. Th. 1; Dental, M. Th. 8.45; Throat and Ear, F., 9.30; Electro-Therapeutics, Tu. Th. 9.30; Children, Tu. F., 1; Roentgen, W., 9.45; Orthopaedic, Th., 1. Operations—W. Th. F., 3; S., 2.

**CHELSEA HOSPITAL FOR WOMEN. Attendances**—Daily, 1.30. Operations—M. Th. F., 2.

**EAST LONDON HOSPITAL FOR CHILDREN. Attendances**—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, Tu., 2. Operations—M. W. Th. F.

**GUY'S. Attendances**—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu., 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**—M., 9; Tu. W., 12; Th., 9; F. S., 12. Operations—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, M., 10. 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, 9.30.

**METROPOLITAN. Attendances**—Medical and Surgical, daily, 2; S., 9; Obstetric, W., 2; Eye, W., 2; Throat and Ear, Th., 2; Dental, Tu. Th. S., 9. Operations—Tu. W., 2.30; Th., 4.

**MIDDLESEX. Attendances**—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th., 1.30; o.p., M., 9; W., 1.30; 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 OPHTHALMIC. Attendances**—M. Tu. Th. F., 2. Operations—W., 18.

**NEW HOSPITAL FOR WOMEN. Attendances**—Daily, 2; Ophthalmic, W. S., 9.30. Operations—Tu. F., 9.

**NORTH-WEST LONDON. Attendances**—Medical, daily, ex. S., 2; S., 10; Surgical, daily, ex. W., 2; W., 10; Obstetric, W., 2; Eye, W., 9; Skin, F., 2; Dental, F., 9. Operations—Tu., 2.30.

**ROYAL EAR, Frith Street. Attendances**—M. W. F., 3; Tu. F., 9.30 and 7.30. Operations—Tu., 3.

**ROYAL EYE, Southwark. Attendances**—Daily, 2. Operations—Daily.

**ROYAL FREE. Attendances**—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Skin, Th., 9; Throat, Nose, and Ear, W., 9. Operations—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 2.

**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 Section for Ovariectomy, F., 2.

**ST. GEORGE'S. Attendances**—Medical and Surgical, daily; i.p., 1; o.p., 12; Obstetric, i.p., Tu. F., 1.45; o.p., M. Tu., 2.30; Eye, W. S., 1.30; Ear, Tu., 3; Skin, W., 2.45; Throat, F., 2; Orthopaedic, F., 12; Dental, M. Tu. F., S., 12. Operations—Daily, 1; Ophthalmic, W., 1; Dental, Th., 9.

**ST. MARK'S. Attendances**—Fistula 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., 9; Eye, M. Th., 1; Eye, Tu. F., 9; Ear, M. Th., 9; Throat, Tu. F., 8; 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., 9; Eye, Tu. F., 2; o.p., exc. S., 1.30; Ear, Tu., 1.30; Skin, Tu., 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., 2; (Gynaecological), Th., 2.

**SAMARITAN FREE FOR WOMEN AND CHILDREN. Attendances**—Daily, 1.30. Operations—Gynaecological, M., 2; W., 2.30.

**TREBOAT, 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. Th., 1.30; Ear, M. Th., 9; Skin, Tu. F., 2; Throat, M. Th., 9; Dental, Tu. F., 9.30. Operations—Tu. W. Th., 2.

**WEST LONDON. Attendances**—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, Tu. Th., 2; Ear, Tu., 2; S., 10; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electro-Therapeutics, M. Th., 2; Skin, M. F., 2; Throat and Nose, Tu., 2; S., 10. Operations—Daily, about 2.30; F., 10.

**WESTMINSTER. Attendances**—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, Tu. F., 9.30; Ear, Tu., 1.30; Skin, W., 1.30; Dental, W. S., 9.15. Operations—M. Tu. W., 2.

## LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

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

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

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

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

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

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

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

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