

free outlets and carefully measured supplies. Indeed it is a question whether rheumatic arthritis could long coexist with diarrhoea. A mild cholagogue, diaphoretic, and diuretic action is a recommendation for the salicylates.

Probably the sodium salt of salicylic acid is the best to administer, though the strontium salt is favourably reported upon from America, and should be given in full doses, but in the presence of albuminuria all salicylates should be avoided and salines prescribed.

Whether with or without salicylates I venture to think that alkalies should never be omitted. The potassium salts are preferable, and for reasons stated the citrate may be largely substituted for the bicarbonate. Both the alkaline and salicylate treatment should be continued with diminishing frequency of administration for two or more weeks after the cessation of joint symptoms, and the urine kept alkaline during convalescence partly through the agency of diet. As the salicylate is diminished, quinine, which may be needed from the first is added or increased.

The iodides of potassium and of sodium, of undoubted service in acute rheumatoid arthritis, are likely to be useful in some of the "symmetrical" rheumatic cases included in the subvariety (e) when the skin is sufficiently tolerant. Dr. Caton prescribes them in acute rheumatism with repeated vesication over the chest, for the prevention and cure of endocarditis. They are specially recommended by the influence which they exercise upon the lymphatic system on the one hand, upon the blood on the other. Iodide of potassium has been credited with a power to consolidate aneurysms. In my own cases, after considerable doses taken continuously for many months no clotting was found within the sac. The real tendency of the iodide is, I think to lower the coagulability in spite of the favouring influence of a diseased arterial surface, and I expect good results from it in a disease where the absence of clotting is the great end to be secured.

Both in the rheumatoid cases and in the allied rheumatic cases the sodium salt would probably prove less depressant and more satisfactory in the result. During convalescence iron is not tolerated unless associated with adequate purgation, and alcohol is not needed in average cases.

Acute polyarthritis, with its pain and discomfort, needs attention to the varied requirements of individual cases. The heart being concerned gastric inflation should be guarded against and relieved.

A totally different treatment, so far as I have observed, is called for in the monarthritic acute rheumatic attacks.

THE LOCAL TREATMENT FOR ARTHRITIS AND THE CONSTITUTIONAL TREATMENT FOR RHEUMATISM.

The Treatment of Acute Monarthritides.—When drugs entirely fail the tendency is usually to localisation, and the primary indication is to treat the joint (by splint and bandage, elevation, leeches or blisters, inunctions, and graduated pressure), the next being internal support in the chief line of weakness by quinine, nervetonic, or stomachics. Mild salines are wanted, but salicylates and strong alkalies are worse than useless.

The Treatment of the "Acute Rheumatoid" and of the "Symmetrical Rheumatic" Attacks.—Here again (in Group II) there is localisation, and local treatment is needed, though of a different kind. As I have insisted elsewhere,¹ in harmony with Fuller's teaching, many, though not all, of these inveterate or relapsing pyrexial cases are made worse by continued rest, in spite of salicylates and alkalies, and are curable by movement and by a supporting treatment, after the acute swelling and pain have been subdued by Esmarch's ice applications or ice massage. Surgical treatment has been advocated and practised by Dr. O'Connor, of Buenos Aires, but of this I have no personal experience.

The cases in Group III most need an adjustment between the local and the constitutional treatment. Instead of dealing with an unyielding attack by increasing and oppressive doses of salicylates, we should trust to the milder alkalines or to iodides and blisters to protect the heart, in association with quinine, nerve tonics, or stomachics, as each case will suggest. The local measures may include tentatively leeching, blistering, ice massage, bandages, or splints.

DIET.

An opinion may be ventured that rheumatism is in part a

dietetic disease, and that in its wide range of varieties the "feeding" plan finds application as well as the "starving" plan.

In rheumatic fever the diet at first cannot be too light. Meat and beef-teas have been held detrimental as a source of lactic acid, and milk only prescribed. A milk diet does not agree with all, and I am led to suspect that in some it may keep up the acidity and the rheumatism, for there is evidence that fermentation is set up in the stomach as well as on the tongue, and I regard this as another source of gastric distension in rheumatic fever. A small dose of salt (15 grains to the half pint) with, or added to, the milk, has been tried by me with success in these cases. In adults I now regard salt as an indispensable adjunct in all cases of long-continued exclusive milk diet, and I find the same method successful in those infants who fail to digest, and are supposed to be intolerant of milk. I am glad to find in Dr. Burney Yeo's *Manual of Medical Treatment* that he has recommended a salted alkaline milk drink in acute rheumatism.

It has seemed to me also that a temporary vegetarian diet is as much indicated by the rheumatic state as the avoidance of animal food, and that as the recovery of slow and refractory cases must be dependent upon a supply of suitable food, the administration of soups made of a variety of vegetables, such as I am now prescribing at St. George's Hospital, may furnish the food as well as in part the medicine required. Whilst meat renders urine acid, vegetables render it alkaline, and this is the result at which we aim.

I have reached the end of this cursory sketch of an almost unlimited subject. The points for elucidation are many, but the main questions are: How shall we prevent rheumatism? How shall we put a stop to the rheumatic heart evil?

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¹ Milroy Lectures on the Natural History and Affinities of Rheumatic Fever; a Study in Epidemiology by Arthur Newsholme, M.D. Lond., *Lancet*, March 9th and 16th, 1895. ² A. Newsholme, A Discussion on a National System of Registration of Sickness, before the Society of Medical Officers of Health, *Lancet*, November 30th, 1895; also A National System of Notification and Registration of Sickness, paper read before the Royal Statistical Society, *Lancet*, December 24th, 1895, p. 1560. ³ A. Pribram, Der acute Gelenkrheumatismus (Nothnagel, *Specielle Pathologie und Therapie*), Band v. Theil 1, Wien, 1899, p. 464. ⁴ Pribram, *loc. cit.*, p. 426. ⁵ Pribram, *loc. cit.*, p. 426. ⁶ Pribram, *loc. cit.*, p. 423. ⁷ Occasional Papers on Medical Subjects, 1855-96, London, 1896; also *Med. Chir. Trans.*, vol. xlv. ⁸ *Medical Press and Circular*, 1899.

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

SOME CASES OF BELLADONNA POISONING.

THE following account of some cases of belladonna poisoning, which I am enabled to publish by the kindness of Dr. Roberts, of Twyford, near Winchester, may be interesting:

On February 17th I was called to some racing stables three miles from here to see some of the lads, who I was told had been taking some of the "horse" medicine. The medicine was an electuary, sweet to the taste, containing belladonna and liquorice. I found six lads exhibiting well-marked symptoms of belladonna poisoning. Two of them (K. and N.) were wildly delirious, another (P.), who had taken most of the electuary, but fortunately for himself had been sick shortly afterwards, was in a semi-comatose state. The other three lads were able—one (R.) with difficulty—to answer my queries. They complained of dry throat and tongue, indistinct vision, and giddiness; their pupils were widely dilated. R. maintained his equilibrium with difficulty. Vinum ipecac. \mathfrak{z} iv was administered, followed by copious draughts of mustard and hot water to R., S., and H., and soon they had profuse emesis.

The other three (K., N., and P.), had had larger doses of the electuary. N., aged 17 years, was very amusing; he got down on his hands and knees and tried to take the bystander's boots off, at another time to saddle an imaginary horse, unbuttoning buttons, muttering to himself, reeling about, and talking incoherently. K., aged 19 years, was more violent, impatient of restraint, fighting with the air, picking at things real and imaginary, when not controlled rushing up

and down the yard and then tumbling over. P., aged 15 years, was quieter, unable to stand, muttering to himself and tossing about. He had a very feeble, thready pulse. K., P., and N. gave much trouble in the administration of emetics; they were unable or refused to swallow; the action of the drug on the throat doubtless made swallowing difficult. I had a stomach tube with me, but forgetting in the hurry to bring a gag, it was useless. Still, each in turn were placed on a bed, held down by four lads, and in spite of their violent struggles emetics were given which acted well except in P.'s case.

After-History.—The patients were put to bed. To those able to swallow purgatives were given until free purging resulted. To P. a mixture of ammonium carbonate, and spiritus chloroformi was ordered to be given when he could swallow, as his pulse kept very weak at night. K. and N. were slightly delirious, at times requiring restraint; they took purgatives, and later some food. P. was in a sleepy state, but took the stimulant mixture. The following day they were better, quite sensible, and the pupils less dilated; from that time on they continued to improve.

Amount of Drug Taken.—The strength of the electuary was $\frac{3j}{ij}$ of the extract of belladonna to $\frac{3j}{ij}$ (that is, gr. xv to $\frac{3j}{ij}$). The dose for a horse was $\frac{3j}{ij}$ to $\frac{3j}{ij}$. It was taken by the boys on account of its sweet taste. It is difficult to form a correct idea of the amount taken, for it was taken by dipping a small stick into the electuary, and then licking it, and a good scolding by their master tended to make the boys minimise the quantity. K. and N. admitted having taken at least half a teaspoonful, and P. one teaspoonful, and perhaps more; at any rate, from gr. viij to gr. xv would be within the mark.

The cases are, I think, noteworthy for the large amount of the drug taken without a fatal result; the rapid elimination of the drug; the violent delirium, with its purposeless movements and strange vagaries, and the difficulty of carrying out antidotal treatment on patients in the delirious stage caused by the drug.

GEORGE SCOTT, M.B., B.Ch. R.U.I.

Twyford, near Winchester.

FOREIGN BODY IN MALE URETHRA.

IN THE BRITISH MEDICAL JOURNAL for February 24th, page 442, under the above heading, Mr. Horace Wilson, reported an interesting case of a bonnet pin in the male urethra. As I happen to have had a similar case, it may be interesting to place it on record.

A patient called at my house about 11 P.M., after walking three miles. He complained of a little bleeding from the penis. On questioning him I found he had inserted into his urethra a long bonnet pin about 6 inches long, and in trying to remove it had broken off about an inch and a half. I could feel the glass head at the end, in the perineum, just in front of the anus, and the broken end could be felt in front of the scrotum. I tried with all the forceps I could think of to remove it, but was unable to do so. I advised him to go home and keep his bed, and I would see him in the morning, having arrived at the conclusion that opening the perineum was the only course to pursue.

On visiting him in the morning I found him in bed very comfortable; he had a little hæmorrhage from his urethra, and had passed urine. I again tried to reach the pin with long sinus forceps, but was unable to do so, when the patient himself suggested that I should try his wife's curling tongs. These were the usual tools used by ladies, consisting of two blades, one concave, and one convex (solid), and were fixed in wooden handles.

I passed the blades down the urethra, and caught the broken end of the pin, and gradually pulled, when the pin and large head came away. The patient made a speedy recovery.

I happened to see him again on February 25th, and he told me that he had never felt any inconvenience since the removal.

Coventry.

ARTHUR HAWLEY, M.R.C.S., L.R.C.P.

A MEDICAL DIPLOMATIST.—It is announced that Dr. Kolovitch, a former student of Montpellier, and lately physician to the Alexander Hospital, Sofia, is to be sent to Paris as diplomatic agent for Bulgaria.

REPORTS

ON

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

JAMES MURRAY'S ROYAL ASYLUM, PERTH.

SKIN ERUPTION CONSEQUENT ON ADMINISTRATION OF CROTON OIL.

(Under the care of A. R. URQUHART, M.D., F.R.C.P.E.,
Physician-Superintendent.)

A MIDDLE-AGED man, who had long suffered from recurrent mania with phthisis, was lately readmitted in an excited resistive condition. As on former occasions, his mental state was complicated by constipation of an obstinate character. Two minims of croton oil were given with good effect. On the third day after, a diffuse bright red rash appeared, eventually passing from a papular to a pustular stage. The area chiefly affected was the upper part of the chest and the lower part of the neck, and specially on the right side. On the sixth day after, the patient died somewhat suddenly of exhaustion. The *post-mortem* examination revealed few tubercles in the lungs, but degeneration of liver and kidneys. Seventeen years ago, on his first admission, this patient suffered from a very severe attack of phlegmasia dolens, and on subsequent admissions his condition presented very anomalous symptoms. Once he was received in an apparently dying state, with a large and foul bed sore. The chief point of interest, however, is the rash which persisted after death as yellowish papules with scaly tops. Dr. Lauder Brunton, although no such event had been brought under his personal notice, kindly took an interest in the case, and referred to Lewin¹ having observed an eruption resembling that of scarlet fever after the internal administration of croton oil. Certainly the appearance of the rash in the patient above mentioned had a suspicious resemblance to scarlet fever at the onset, but in its later stages it more closely approached to the irritant effects of the local application of the drug.

REPORTS OF SOCIETIES.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

F. W. PAVY, M.D. F.R.C.P., F.R.S., President, in the Chair.
Tuesday, March 13th, 1900.

'SKIN AFFECTIONS IN BRIGHT'S DISEASE.

DR. HUGH THURSFIELD read a paper on this subject. In 1870, Huet, a Dutch physician, published a complete account of one of the varieties of skin affections with which he had met. Since then many writers on the Continent, especially in France, had treated the subject, but very few in England, and they nearly all within the last ten years. After careful comparison of the greater part of the literature of the subject the following classification was suggested: (1) Those affections which characterised the early stages of the disease: pruritus, urticaria, and eczema; (2) those which occurred in the final stages, and in uræmic conditions: the universal erythematous, bullous, and desquamative eruptions; (3) purpura and other hæmorrhagic conditions; (4) those affections which occurred in patients the subjects of general oedema, and were most probably the result of invasion by pyogenic micro-organisms. This fourth division was not further discussed in the paper; the other three were considered in greater detail. In the first division the skin affections were to be regarded as suggestive indications of the real seat of disease, which occurred earlier than the more usually recognised symptoms, and in exceptional cases as premonitory signs of grave complications, such as uræmic coma. Under the second division was classed the affection described originally by Huet, and later by Le Cronier Lancaster; and, in addition, references were given to several instances of general exfoliative dermatitis, these being now so numerous that this affection should be generally recognised

¹ *Nebenwirkungen der Arzneimittell.*

Society in 1857. The work of his later years was directed to the study of respiration, especially in man. He formed the subject of most of his experiments, and the measurements he made of the various quantities of the gases inspired and expired under various conditions will form, like those of John Hutchinson, standard quantities of reference for the investigators of the future. He carried out this work in the Physiological Laboratory of University College, London; he only relinquished it last year, when his valuable collection of apparatus was dismantled. All workers in this laboratory and all who listened to Dr. Marcet when he related his experiments will recall the almost juvenile enthusiasm he manifested in his work. He would often stay in the laboratory till quite late in the evening, and never seemed tired of his laborious observations and calculations. This work he did chiefly in the winter, but he did not forget it in the summer, for then he was collecting the air of the Swiss mountains, or collecting his own expired air at different elevations, and his stores of collected air would serve to start him in his work the following winter. His good nature was unbounded, and he always gave an encouraging word to the younger workers around him. There can be little doubt that his love of mountaineering determined in great measure the direction of his physiological work, and whether he was among the Swiss hills or on the Peak of Teneriffe, his admiration for fine scenes and the exhilaration of the exercise did not lead him to forget the scientific aspect of the subject. The most complete statement of his life-work will be found in the Croonian Lectures he delivered before the Royal College of Physicians in 1896.

He was elected a Fellow of the Royal College of Physicians of London in 1859, was an examiner eight years later, and subsequently served the office of Councillor. In 1865 Dr. Marcet was requested by the Royal Commission for the investigation of the Cattle Plague to study the chemical pathology of the disease. His researches are recorded in the third report of the Commissioners, and the character of Marcet's work may be gauged from the words of the late Sir Thomas Watson, who remarked "that probably no disease, either of man or of animals, has ever undergone such an investigation in all its details as has the cattle plague." But an enumeration of his medical investigations does not complete the record of Marcet's many-sided nature. He was also an authority on climatology and meteorology. He published several works on the subject of climate, the chief of which was *The Principal Southern and Swiss Health Resorts, their Climate and Medical Aspect* (1883). He was elected President of the Meteorological Society in 1888. Dr. Marcet was a prominent figure in both physiological and meteorological gatherings. He endeared himself to his fellow-workers, and his loss will be a subject of the greatest regret to all.

DR. THOMAS P. MASON died at his residence, 45, Harcourt Street, Dublin, on March 11th, at the age of 83. His mother was of German extraction, and his father was descended from an English officer who served in the Army of William III. Dr. Mason was born in Dublin, and received his medical education at the school which was afterwards known as the Ledwich, in which he became a Demonstrator of Anatomy in 1842. In the same year he obtained the Licence of the Royal College of Surgeons in Ireland, of which he became a Fellow in 1852. In 1846 he graduated Bachelor of Medicine of the London University, a qualification of which he was always extremely proud. For over forty years Dr. Mason was Lecturer on Anatomy, and a principal proprietor of the Ledwich School of Medicine, and during those years he acquired a great reputation for his ability in teaching. In his early professional career he was Assistant Master of the Combe Lying-in Hospital, where his eldest son—the late Dr. S. R. Mason—subsequently gained distinction as Master for seven years. Dr. Mason was for some time Physician to the Cork Street Fever Hospital, but it was in his position as Physician for many years to Mercer's Hospital that his reputation as an able diagnostician and a lucid clinical teacher was made. His numerous pupils, scattered widely in many lands, can look back with thankfulness to the wise principles which Dr. Mason inculcated at the bedside, and only the burden of advancing years compelled him of late to exchange the active work of

physician for that of consultant to the institution. His three sons followed the profession of their father, and the unexpected and untimely death of his eldest—Dr. S. R. Mason—occurring, as it did, only a few weeks ago, must have been a severe blow to the frail and aged physician.

DR. GEORGE MITCHINSON, Coroner for Lincolnshire, who died recently, was born at Carrington, near Boston, on October 21st, 1829. He received his medical education at St. Bartholomew's Hospital, and obtained the diplomas of M.R.C.S. Eng. and L.S.A. Lond. in 1851. In 1852 he became House-Surgeon to the Lincoln County Hospital, and seven years later he commenced practice in Lincoln. He held for thirty years the appointment of Physician to the County Hospital. He was also Physician to the County Prison and Magistrate for the City of Lincoln. Alike in the private practice and in his public relations with his fellow townsmen he was a trusted adviser and faithful friend. He was a member of the British Medical Association and of its Midland Branch.

MR. J. W. ORR, of Wollaston, Northamptonshire, who died recently of influenza, received his medical education at St. George's Hospital, where he held the posts of Assistant House-Physician and Assistant Registrar. From St. George's he went to the Brompton Consumption Hospital as House-Physician. At the time of his death, at the age of 47, Mr. Orr had been in practice at Wollaston for twenty years. He was Medical Officer and Public Vaccinator for the district, and held other public appointments. Mr. Orr was a keen sportsman and a member of the Oakley Hunt. A careful and painstaking practitioner, his loss is deeply felt throughout the district, where his genial disposition and kindly sympathy had won him many friends.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Professor Lorenzo Bruno, Senator of the Kingdom of Italy and formerly Physician to King Victor Emanuel, Director of the Surgical Clinic of the University of Turin, and Dean of the Royal Academy of Medicine of that city, aged 80; Dr. Adolfo Murillo, Dean of the Medical Faculty of Santiago de Chile and President of the Scientific Society of Chile; Dr. Tito Ambroni of Milan, described as "patriot, veteran, and explorer," aged 90; Dr. Anton Tschurtschenthaler von Helmheim, Professor of Pathology and Pharmacology in the University of Innsbruck, aged 83; Dr. Gombault, of Paris, for many years a collaborator of Charcot's, aged 59; and Dr. Ernest Brewster-Sangree, late Professor of Bacteriology and Pathology in the Department of Medicine of Vanderbilt University, Nashville, Tennessee, aged 36. Dr. Leslie E. Keeley, whose name was prominently before the public some years ago in connection with the "gold cure" of inebriety, died of heart disease at Los Angeles, California, on February 21st. He was about 68 years of age. He took his degree at Rush Medical College, Chicago, in 1864, entered the American Army as Assistant Surgeon, and served till the close of the Civil War. He afterwards practised medicine on ordinary lines at Dwight, Illinois, for many years. Then came his great discovery of a "cure" for inebriety in the form of bichloride of gold, by which he is said to have made more than a million dollars (£200,000) while the boom lasted.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

Scholarships.—By an arrangement with the Oxford Colleges the examinations for entrance scholarships at Cambridge will in 1900 and 1901 take place after the first Monday in December. This arrangement establishes the principle of making the Michaelmas Term a "close time" for such examinations; it has been urged as a desirable reform by the headmasters of schools, but Oxford has hitherto stood in the way of its accomplishment.

Honorary Degree.—Mr. Charles Hose, of Sarawak, whose contributions to anthropology and to various other branches of natural history have been numerous and important, is to receive the honorary degree of Doctor of Science.

Examiners.—Professor E. Ward, of Leeds, and Mr. G. E. Wherry, Lecturer in Surgery, have been appointed Examiners in Surgery in the place of Professor Watson Cheyne, of King's College, and Professor Chiene, of Edinburgh, whose services have been called for in South Africa.

Degrees.—At the Congregation on March 10th, the following degrees were conferred:

M.B.—R. F. C. Ward, St. John's; C. L. Hawkins, Emmanuel; S. W. Curl, and A. E. Martin, Downing.
B.C.—R. F. C. Ward; W. B. Winton, Clare; C. L. Hawkins; S. W. Curl; and A. E. Martin.

UNIVERSITY OF LONDON.

THE NEW STATUTES AND REGULATIONS.

The Commissioners under the University of London Act have issued a report to accompany the statutes and regulations which were ordered to be printed by Parliament on February 16th and March 1st respectively. These documents can be obtained through any bookseller, price: the report, 2d.; the statutes, 2½d.; and the regulations, 3d.

The Report

The report, which is signed by all the Commissioners, is not a voluminous document. It recapitulates briefly the circumstances under which the Commission was appointed, and sets out at some length the regret with which the Commissioners have arrived at the conclusion that it is at present impossible to establish a Faculty of Laws, understanding by that "a body of persons charged with the teaching of a group of subjects in the University."

The Commissioners call attention to Section LXXX of the statutes, which is as follows:

"With a view to greater efficiency and economy, the Senate may make arrangements with the governing bodies of any schools of the University to provide common courses of instruction for matriculating students in such schools in one or more subjects by appointed or recognised teachers, and to enable such schools to interchange their matriculated students for the purpose of instruction, and in particular the Senate shall use its best endeavours whenever practicable to secure such common courses of instruction for internal medical students in the preliminary and intermediate portion of their studies under appointed or recognised teachers at one or more centres."

The Commissioners explain the reasons which have moved them to make this recommendation, which are briefly as follows: (1) That the teaching of the sciences in question entails heavy expense for the provision of properly equipped laboratories, such provision growing every year more elaborate and more costly. (2) That such subjects should be taught by men who propose to devote themselves to a career in the sciences which they teach, and that adequate salaries cannot be provided without concentration. (3) That by such concentration laboratories and teaching power would be set free for clinical laboratories, which ought to be provided at every properly-equipped hospital. The subjects to which concentration might in the opinion of the Commissioners be applied are:

1. *Preliminary Studies*, namely, Physics, Chemistry, and General Biology.
2. *Intermediate Studies*, namely, Anatomy and Physiology.
3. *Second Intermediate Studies*, namely, Pathology, that is to say General Pathology, including certain departments of Bacteriology and Pharmacology.
4. *Hygiene* and all studies relating to public health.

The Statutes.

The general scope of the statutes has already been indicated in the article published in the *BRITISH MEDICAL JOURNAL* of February 24th, p. 463.

The Regulations.

The Commissioners explained that by regulations they mean provisions recommended by them for carrying the statutes into effect, and open to repeal or alteration hereafter by the Senate.

I. *Boards of Studies.*—The Commissioners direct thirty-two Boards of Studies to be appointed. Among these are:

- A Board of Preliminary Medical Studies.
- " " Intermediate Medical Studies.
- " " Advanced
- " " Dentistry.
- " " Pharmacy.
- " " Hygiene and Public Health.
- " " Physiology and Experimental Psychology.

II. *Science Degrees.*—The conditions under which a candidate for the degree of B.Sc. may present the results of a research as qualifying him to receive the degree are defined.

III. *Recognised Teachers.*—The Commissioners enumerate the members of the teaching staffs of public educational institutions within the appointed radius recognised as teachers of the University, and specify the subjects in which they are so recognised. Among those thus recognised are the teachers in the medical faculties of University College and King's College, and of the medical schools of the following hospitals—St. Bartholomew's, the London, Guy's, St. Thomas's, St. George's, Middlesex, St. Mary's, Charing Cross, and Westminster. The teachers of the London School of Medicine for Women and the teachers of the medical classes at the Royal London Ophthalmic Hospital, the National Hospital for the Paralysed and Epileptic, the Hospital for Consumption and Diseases of the Chest, Brompton; the Hospital for Sick Children, Great Ormond Street; the London School of Tropical Medicine, the London School of Dental Surgery, the College of the National Dental Hospital, the Institute of Dental Technology, the School of Pharmacy of the Pharmaceutical Society. Teachers in anatomy and physiology at all the medical schools, and teachers in chemistry, biology, and physics at all the medical schools, except University and King's Colleges and the Middlesex Hospital, are placed in a separate list, and recognised provisionally under the provisions of Section LXXX of the statutes quoted above.

IV. *Faculties.*—The Commissioners give a list of recognised teachers of the University appointed members of the respective faculties. The faculties are Theology, Arts, Music, Medicine, Science, Engineering, Economics, and Political Science. The members of the Faculty of Medicine number 162.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

The ordinary Council was held on March 8th, when the chair was taken by Mr. H. G. Howse, Vice-President.

Court of Examiners.—Mr. W. H. A. Jacobson made the prescribed declaration, and was admitted a member of the Court.

Board of Examiners in Dental Surgery.—The Chairman of the Board of Examiners in Dental Surgery reported that, at a meeting on February 21st, the Board, with the object of carrying out the decision arrived at by the Council on February 8th, adopted the following resolution, namely: "That time spent in the capacity of assistant to a dental surgeon in one of the hospitals attached to the army in South Africa, not exceeding a period of six months, be allowed to count in lieu of the completion of any courses of dental or general professional study which such students were undergoing during this present winter session, and in lieu of any dental or general courses which such students would ordinarily be required to attend during the ordinary summer session, on the understanding that allowance will only be made for the number of months, not exceeding six, during which such students shall be in the service of the hospital, and for which a satisfactory certificate from the dental surgeon can be produced."

College By-laws.—The Committee on By-laws submitted a proposal to the Council for alterations in certain sections of the by-laws. The most important of these relate to Sections xiv and xx. These changes were prepared with the object of carrying out the determination of the Council to admit candidates with qualifications specially recognised by the Council to the Fellowship Examination without requiring them to pass the examinations of the Conjoint Examining Board.

Walker Prize.—The Council appointed a Committee to adjudicate on the Walker Prize. This prize, which is open to investigators of all nationalities given for the best work in advancing the knowledge and therapeutics of cancer during the past five years ending December 31st, 1900, and amounts to the sum of £500.

Quarterly Meeting of Council.—The date of the next meeting was changed from the second Thursday of April to the first, namely, April 5th.

LONDON SCHOOL OF MEDICINE FOR WOMEN.

New Museum.—During the last few years the Royal Free Hospital has undergone considerable alterations and improvements. The latest of these is the new museum, which was opened recently by Lady Reay. The old museum has been converted into a pathological and bacteriological laboratory for the students of the London School of Medicine for Women. It is well fitted up with water, gas, and electric light, and the teak benches afford accommodation for twenty students. Skylights have been added to the post-mortem room to improve the light. A new floor has been added, containing a laboratory for the use of the curator and the medical staff, with an assistant's room for the preparation of specimens, and a large, well-lighted museum with room for 6,000 specimens. The walls are provided with the usual rows of shelves, but much additional space is gained by the use of fifteen jutting partitions also consisting of rows of shelves. The Curator, Miss Vaughan, M.D., B.S., has arranged a central case of specimens prepared with formalin, and giving excellent results, especially as regards the preservation of the natural colour; these were recently exhibited by her at a meeting of the East Anglian Branch of the British Medical Association. The museum and laboratories have been erected by the relatives and friends of the late Curator, Miss Mabel Webb, M.B., whose sudden death in October, 1893, prevented her from carrying out personally the scheme she had thought out for the improvement of the pathological department. A bronze tablet is to be put up in the museum testifying to Miss Webb's "devotion to duty and pursuit of high ideals of work and conduct," and bearing witness to the universal esteem and affection in which she was held. Such an inscription is, we think, sufficient answer to the objection so often urged in the old days, that women who enter a man's profession must lose their womanliness. A more suitable beatitude could not have been found for this memorial tablet than that chosen, "Beati mundo corde; quoniam ipsi Deum videbunt."

ROYAL NAVY AND ARMY MEDICAL SERVICES.

LAST EMBARKED MEDICAL UNITS.

WE hear that the last medical units embarked for South Africa had very few trained men of the Royal Army Medical Corps, but were chiefly composed of men of the militia and Volunteer Medical Staff Corps, and of the St. John Ambulance Brigade. It thus appears that the men, active or reserve, of the Royal Army Medical Corps are equally and entirely used up, as are the officers. The employment of these different bodies hastily thrown together cannot, of course, be conducive to the highest efficiency.

ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty: WILLIAM H. PATTERSON, Fleet-Surgeon, and CHARLES J. E. COCK, Surgeon, to the *Victorious*, on recommissioning, undated; DAVID W. HEWITT, M.B., Surgeon, to the *Goliath*, March 27th; JOHN STODDART, M.B., Surgeon, to the *Vernon*, for dental duties, March 27th; HENRY B. HALL, M.B., Surgeon, to the *Vernon*, March 27th; REGINALD ST. G. A. BOND, M.B., Surgeon, lent to Yarmouth Hospital, for survey on stores, from March 12th to 31st inclusive; ALAN G. EASTMENT, Surgeon, to the *Cossack*, March 29th, his appointment to Yarmouth Hospital being cancelled; WILLIAM E. HOME, M.D., Staff-Surgeon, to the *Boscawen* for the *Minotaur*, March 9th; LANCELOT KILROY, Surgeon, to the *Hibernia*, March 9th; LOUIS J. DALY, Surgeon, to the *Ganges*, March 10th.

MEDICAL NEWS.

RUGBY UNION HOSPITALS CUP.—After a keen game St. Mary's beat London at Richmond in the final tie of the Hospitals Cup competition by two tries to one. St. Mary's Hospital has never previously won the cup.

A PATHOLOGICAL LABORATORY ON THE CONGO.—The Baroness von Hirsch-Gerenth, who died recently, has bequeathed 50,000 francs for the establishment of a physiological and pathological laboratory on the Congo. Leopoldville, the terminus of the Congo railway, has been chosen as the place where the laboratory is to be established.

THE METRIC SYSTEM IN THE UNITED STATES.—A Bill for the general adoption of the metric system in the United States is now before Congress. The Bill provides for the adoption of the system after January 1st, 1901, in all departments of the Government except in the completion of the survey of public lands, and that after January 1st, 1902, the metric system shall be the legal standard of the United States.

SOW'S MILK FOR NURSINGS.—The French Superior Council of Hygiene will shortly, it is said, be invited to consider the suitability of sow's milk as a substitute for that of the cow in the feeding of children brought up by hand. The proposal emanates from an ingenious lady of Finisterre, who has managed to enlist in its favour the sympathies of some members of the medical profession. If the matter comes to the proof, the results of the experiment will doubtless be watched with interest by those philosophers who think that the key to the human character is to be found in the nature of the food.

THE PREVENTION OF MALARIA IN SPAIN.—The Spanish Government has issued a decree ordering the Royal Academy of Medicine to prepare within the next two years a report as detailed as possible as to the foci and sources of malaria in Spain, the injury which it causes, and the best means of combating the scourge. All local sanitary authorities and all medical practitioners are enjoined to give every assistance in their power to the Academy in its inquiry. When the report is presented it will first be referred to the Royal Council of Health, and afterwards the Government will submit to the Legislature a scheme for the extinction of malaria in Spain.

BRITISH DENTAL ASSOCIATION.—The annual dinner of the Metropolitan Branch of the British Dental Association was held at the Hotel Cecil on March 3rd, Mr. Ashley W. Barrett in the chair. Among the guests were Dr. Glover and Mr. George Brown. Replying to the toast of "The Visitors," Dr. Glover said the dental surgeons had always been a source of strength and support to the direct representatives on the General Medical Council. Dental surgery had attained a very high professional standard, and the general culture enjoined on candidates for membership had raised that branch of the medical profession to a very high level.

THE PARIS MEDICAL FACULTY.—The last annual report of the University of Paris shows that the number of students in the Faculty of Medicine in the academic year 1898-1899 was 4,315. Of these 570 were foreigners, including 21 Swiss, 26 German, 25 Greeks, 79 Roumanians, 180 Russians, 12 South Americans, and 24 West Indians. The number of female students was 129, of whom 91 were Russians, 5 Roumanians, 2 Germans, 1 Swiss, and 1 British. The degree of Doctor of Medicine was conferred on 671 persons. Of these degrees, 79 were of the ornamental kind granted to foreigners, which does not give the right to practise medicine in France. In addition to the 592 degrees conferred in the ordinary way on French students, 13 licences as *officier de santé* were given to candidates who had begun their studies before the date of the degree abolishing that qualification. The total number of new members, therefore, added to the medical profession of France in the year in question was 605. The average number of degrees conferred by the provincial medical faculties each year is 500, making the total annual output of new practitioners about 1,100.

THE STATE AND THE PREVENTION OF TUBERCULOSIS.—At the ninety-fourth annual meeting of the Medical Society of the State of New York held at Albany on January 30th, the

Committee on Hygiene presented a report in which the establishment of State sanatoria for the treatment of cases of incipient consumption was strongly urged. It was pointed out that sanatoria for the treatment of consumptives are now in successful operation in almost every civilised country of the world. In the United States there are 33, distributed as follows:—Alabama, 2; Colorado, 3; Illinois, 3; Maryland, 1; Massachusetts, 4; New Mexico, 4; New York, 10; North Carolina, 2; and Pennsylvania, 4. With the exception of one in Massachusetts these are all private institutions. Last year the Society unanimously adopted resolutions calling on the Legislature of New York State to take speedy action for the establishment of a State sanatorium.

MEDICAL SOCIETY OF LONDON.—Under the genial presidency of Dr. Frederick T. Roberts, F.R.C.P., the Medical Society of London held a dinner in the Whitehall Rooms on March 8th to celebrate its 127th anniversary. It is not customary at these functions to hear anything but the ordinary loyal sentiments expressed in the toasts of "The Queen" and "The Royal Family," and Dr. Roberts must be complimented on the excellent speeches which he delivered. In proposing the toast "The Medical Society of London," the President gave an interesting sketch of the history of the growth and importance of the Society. In the course of his remarks he referred in graceful and complimentary terms to the services to the Society of Dr. Stocker, the Master of the Apothecaries' Society, and Dr. W. Smiles. The toast of "The Visitors," proposed by Mr. Thomas Bryant, was replied to by Sir Richard Douglas Powell, Bart., President of the Clinical Society, and by Surgeon-General J. Jameson, C.B., Director-General of the Army Medical Service, who took the opportunity to relate some facts concerning the arrangements for dealing with wounded men in action. In his opinion cases of abdominal wounds under certain circumstances do better if not immediately subjected to operation in field hospitals. He also pointed out that there was a danger of septic infection occurring in the course of long conveyance of wounded by railway. The toast of "The President," having been proposed and acknowledged, the President took the occasion to propose the toast of "The Council, the Honorary Secretaries, and Mr. Hall, the Registrar," to which, in a few words, the Senior Honorary Secretary, Dr. Calvert, suitably replied.

MEDICAL VACANCIES.

The following vacancies are announced:

- ARGYL AND BUTE ASYLUM, Lochgilphead.**—Assistant Medical Officer, unmarried. Salary, £100 per annum, with furnished apartments, board, etc. Applications to the Medical Superintendent by April 7th.
- BIRKENHEAD BOROUGH HOSPITAL.**—Visiting House-Surgeon. Salary, £75 per annum, with board, lodging, and washing. Applications to the Chairman of the Board, by March 19th.
- BIRMINGHAM GENERAL HOSPITAL.**—(1) House-Surgeon. (2) Assistant House-Surgeon. Appointments for six months. No salary, but board, residence, and washing provided. Applications to the House Governor by March 31st.
- BIRMINGHAM AND MIDLAND EAR AND THROAT HOSPITAL, Edmund Street, Birmingham.**—House-Surgeon. Appointment tenable till October 31st, but eligible for re-election. Salary at the rate of £80 per annum, with board, lodging, and washing. Applications to the Secretary by March 21st.
- BRADFORD ROYAL INFIRMARY.**—House-Surgeon, unmarried. Salary, £110 per annum, with board and residence. Applications, endorsed "House-Surgeon," to be sent to the Secretary by March 20th.
- BURY INFIRMARY.**—Junior House-Surgeon. Salary, £80 per annum, with board, residence, and attendance. Applications to the Honorary Secretary, Dispensary, Knowsley Street, Bury.
- CHORLEY DISPENSARY AND COTTAGE HOSPITAL.**—House-Surgeon. Salary, £38 per annum, with board and lodging. Applications to the Honorary Secretary by June 11th.
- CUMBERLAND AND WESTMORELAND ASYLUM, Garlands, Carlisle.**—Junior Assistant Medical Officer; unmarried. Salary, £100 a year, with board and residence. Applications to the Medical Superintendent.
- DEVONPORT ROYAL ALBERT HOSPITAL.**—Assistant House Surgeon, for six months. Salary at the rate of £40 per annum, with board, lodging, and washing. Applications to the Chairman of the Medical Committee by March 22nd.
- DOWN COUNTY ASYLUM, Downpatrick.**—Assistant Medical Officer, not exceeding 32 years of age, unmarried. Salary, £100 per annum, with furnished apartments, board, washing, and attendance. Applications to the Resident Medical Superintendent by April 15th.
- DURHAM COUNTY ASYLUM.**—Assistant Medical Officer. Salary £140 per annum, rising to £180, with board, lodging, washing, etc. Applications to the Medical Superintendent, Winterton, Ferryhill, by April 3rd.
- EAST LONDON HOSPITAL FOR CHILDREN, Shadwell.**—Medical Officer for the Casualty Department. Salary at the rate of £100 per annum, with luncheon. Appointment for six months. Applications to the Secretary by March 24th.
- EDINBURGH UNIVERSITY.**—Professor of Medicine. Applications to the Secretary, 68, Princes Street, Edinburgh, by April 14th.
- GLASGOW EYE INFIRMARY.**—Resident Assistant House-Surgeon. Salary £50, with apartments and board. Application to the Secretary, 88, West Regent Street, Glasgow, by March 28th.
- GREAT NORTHERN HOSPITAL, Holloway Road, N.**—Junior House-Surgeon. Appointment for six months. Salary at the rate of £30 per annum, with board, lodging and washing. Applications to the Secretary by March 19th.
- HALIFAX ROYAL INFIRMARY.**—Third House-Surgeon, unmarried. Salary, £50 per annum, with residence, board, and washing. Applications to the Secretary by March 28th.
- HANTS COUNTY ASYLUM, Fareham.**—Third Assistant Medical Officer, unmarried, and not exceeding 30 years of age. Salary, £125 per annum, increasing to £150, with

furnished apartments, board, etc. Applications endorsed "Application for appointment of Medical Officers" to the Committee of Visitors, by March 21st.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton.—(1) Assistant Physician, (2) Resident House Physicians. Appointments for six months. Honorarium, £25. Applications to the Secretary for the first by March 21st, and for the latter by April 3rd.

INVERNESS: NORTHERN INFIRMARY.—House-Surgeon and Dispenser. Salary, £70 per annum, with board, etc. Applications to the Secretary, 15, High Street, Inverness, by March 26th.

KENT AND CANTERBURY HOSPITAL.—Assistant House-Surgeon, unmarried. Salary, £80 per annum, with board and lodging. Applications to the Secretary by March 26th.

LINCOLN COUNTY HOSPITAL.—Assistant House-Surgeon. Appointment for six months, but eligible for re-election. Honorarium, £10, with board, residence, and washing. Applications to the Secretary by April 14th.

LINCOLN HOSPITAL FOR INSANE.—Assistant Medical Officer. Salary, £100 per annum. Applications to the Medical Superintendent.

LIVERPOOL DISPENSARIES.—Assistant House-Surgeon, unmarried. £100 per annum, with board and apartments. Applications to the Secretary, 31, Moorfields, Liverpool, by March 26th.

LONDON TEMPERANCE HOSPITAL, Hampstead Road, N.W.—Physician to Out-patients; must be F.R.C.S. or M.R.C.P. Lond. Honorarium, 50 guineas per annum. Applications to the Secretary by April 5th.

LOUGHBOROUGH AND DISTRICT GENERAL HOSPITAL AND DISPENSARY.—Resident House Surgeon. Salary, £100 per annum, with furnished rooms, attendance, and board. Applications to the Secretary.

MACCLESFIELD GENERAL INFIRMARY.—Junior House-Surgeon. Salary, £70 per annum, with board and residence. Applications to the Chairman of the House Committee by March 29th.

MANCHESTER: ST. MARY'S HOSPITAL, Quay Street.—Medical Officer. Appointment for six months, but eligible for re-election. Salary, £65 per annum, with board and residence. Applications to the Chairman of the Board of Management by March 29th.

METROPOLITAN HOSPITAL, Kingsland Road, N.E.—(1) House-Physician, (2) House-Surgeon, (3) Assistant House-Physician, (4) Assistant House-Surgeon. Appointments for six months. Salary for the first two at the rate of £40 per annum, and for the latter two at the rate of £20 per annum. Applications to the Secretary by March 19th.

MIDDLESBROUGH-ON-TEES: NORTH RIDING INFIRMARY.—Assistant House-Surgeon. Salary, £75 per annum, with lodging, board, and washing. Applications marked "Application for post of Assistant House-Surgeon" to the Secretary by March 27th.

MARGATE: ROYAL SEA BATHING HOSPITAL.—Assistant Resident Surgeon. Salary, £52 per annum, with board and residence. Applications to the Secretary at the offices, 30, Charing Cross, London, S.W.

MILE END.—Assistant Medical Officer at the Workhouse Infirmary and the Workhouse and School Infirmary, and not exceeding 30 years of age. Salary, £120 per annum, with board, lodging, and allowances. Applications on forms provided to the Clerk to the Guardians, Bancroft Road, E.

NEWPORT AND MONMOUTHSHIRE HOSPITAL, Newport.—House-Surgeon. Salary, £100 per annum, with board and residence. Applications to the Secretary by March 22nd.

PLAISTOW: ST. MARY'S CHILDREN'S HOSPITAL.—(1) Ophthalmic Surgeon, (2) Assistant Resident Medical Officer, unmarried. Appointment for six months. Salary at the rate of £80 per annum, with board, residence, laundry, etc. Applications to the Secretary by March 28th.

PLYMOUTH: SOUTH DEVON AND EAST CORNWALL HOSPITAL.—Assistant House-Surgeon. Appointment for six months, but renewable. Salary at the rate of £50 per annum. Applications to the Honorary Secretary by March 22nd.

PRESTON ROYAL INFIRMARY.—Senior House-Surgeon. Salary, £100 per annum, with board, lodging, and washing. Applications to the Secretary, 5, Winckley Street, Preston, by March 31st.

RAMSGATE AND ST. LAWRENCE ROYAL DISPENSARY.—Resident Medical Officer, unmarried. Salary, £100 per annum, with furnished apartments, board, and attendance. Applications to the Secretary by March 31st.

ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.—Senior Resident Medical Officer. Salary, £100 per annum, with board, residence, and washing. Applications to the Secretary by April 23rd.

ROYAL HOSPITAL FOR CHILDREN AND WOMEN, Waterloo Bridge Road, S.E.—Resident Medical Officer. Salary, £70 per annum, with full rates and laundry. Applications to the Secretary by March 24th.

ST. MARY'S HOSPITAL, SCHOOL.—Demonstrator of Physiology. Salary, £100 to £150. Applications to the Dean by March 24th.

STAFFORDSHIRE GENERAL INFIRMARY, Stafford.—House-Surgeon. Salary, £100 per annum, with board, lodging, and washing. Applications to the Secretary by March 27th.

STAMFORD, RUTLAND AND GENERAL INFIRMARY.—House-Surgeon, unmarried. Salary, £100 per annum, with board, lodging, and washing. Applications to the Secretary by March 30th.

STOCKPORT INFIRMARY.—Assistant House and Visiting Surgeon. Salary, £70 per annum, with residence, board, and washing. Applications to the Secretary by March 26th.

STROUD RURAL DISTRICT COUNCIL.—Medical Officer of Health. Salary, £130 per annum. Applications to the Clerk, Union Offices, Stroud, Gloucestershire, by March 21st.

SUNDERLAND INFIRMARY.—House-Surgeon. Salary, £30 per annum, rising to £100, with board and residence. Applications to the Chairman of the Medical Board by March 26th.

SUNDERLAND: MONKWEARMOUTH AND SOUTHWICK HOSPITAL.—House-Surgeon, unmarried. Salary, £80 per annum, with board, residence, and washing. Applications to the Honorary Secretary by March 26th.

VENTNOR: ROYAL NATIONAL HOSPITAL FOR CONSUMPTION.—Clinical Assistant. No salary. Board residence, and laundry provided. Applications to Dr. Parry, Resident Medical Officer.

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

WESTON-SUPER-MARE HOSPITAL.—House-Surgeon, unmarried. Salary, £80 per annum, with board and residence. Applications to the Honorary Secretary by March 27th.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—Assistant House-Physician. 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 March 26th.

MEDICAL APPOINTMENTS.

BALCK, J. A., M.B., Ch.B., appointed House-Physician to the Royal Hants County Hospital, Winchester.

BENNETT, William Edward, F.R.C.S. Eng., appointed a Demonstrator of Anatomy in Mason University College, Birmingham.

BERRY, H. P., M.B. Lond., M.R.C.S. Eng., reappointed Medical Officer to the Grantham Town Council.

BLAIR, Charles S., M.D. Durh., F.R.C.S. Eng., appointed Assistant Surgeon to the Western Ophthalmic Hospital, London.

CAMPBELL, E. Kenneth, M.B., F.R.C.S., late Senior Assistant Surgeon, appointed Surgeon to the Western Ophthalmic Hospital.

CHRISTMAS, R. W. S., L.R.C.P. Lond., M.R.C.S., appointed Public Vaccinator to the Streatham No. 2 Division of the Wandsworth and Clapham Union.

CLARKE, A. C., L.R.C.P., L.R.C.S., appointed Medical Officer for the Tenth District of the Hexham Union, vice W. C. Steele, M.D. Brux., M.R.C.P. Edin. M.R.C.S., resigned.

DECK, E. J., M.R.C.S. Eng., L.R.C.P., appointed Medical Officer for the Second District of the Hastings Union, vice C. A. Brodribb, M.R.C.S. Eng., resigned.

DOVAGAN, A. E. B.A., L.D.S., appointed Lecturer on Dental Mechanics in Mason University College, Birmingham.

EVANS, J. Jameson, M.B. C.M., F.R.C.S., appointed a Demonstrator of Anatomy in Mason University College, Birmingham.

FELCE, Stamford G., M.A., M.D., B.C. Cantab., appointed Medical Officer to the Willenden Parish Infirmary.

GILES, A. E., M.D., M.R.C.P. Lond., F.R.C.S. Edin., appointed Honorary Gynaecologist to Out-patients at the Tottenham Hospital.

GILK, M. B., Ch.B. Edin., appointed Assistant House-Surgeon to the Northern Hospital, Liverpool.

HAYS, A. G., L.R.C.P., L.R.C.S. Edin., L.F.P.S. Glasg., appointed Medical Officer for the Third District of the Brackley Union, vice H. R. Jacobs, L.R.C.P. Edin., M.R.C.S. Eng., resigned.

HEDLEY, A. S., M.B., B.S. Durh., appointed Medical Officer for the Rothley District of the Rothbury Union, vice W. Sutherland, L.R.C.P. Edin., L.F.P.S. Glasg., resigned.

HENDER, Henry, jun., M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Surgeon to the Royal Hants County Hospital, Winchester.

HEBBERT, B. H., M.R.C.S. Eng., reappointed Medical Officer in the Uttoxeter District Council.

LESLIE, R. Murray, M.B. Edin., L.R.C.P. Lond., appointed Senior Medical Registrar and Medical Tutor, King's College Hospital, and Honorary Physician to In-patients at the Tottenham Hospital.

NEVINS, J. E., M.B. Lond., M.R.C.S. Eng., appointed Medical Officer for the Brownlow Hill Workhouse of the Parish of Liverpool.

ROWLANDS, W. H., M.R.C.S., L.R.C.P., appointed Medical Officer to the Brims Grove Union Workhouse, vice C. Kidd, M.B., resigned.

THOMPSON, George, W., M.B., C.M. Edin., appointed Assistant Surgeon to the Western Ophthalmic Hospital.

WEAVER, John J., M.R.C.S. Eng., L.S.A., appointed Medical Officer of Health for Southport.

WRIGHT, William, M.B., Ch.B., M.R.C.S., L.R.C.P., appointed Lecturer on Osteology and Senior Demonstrator of Anatomy in Mason University College, Birmingham.

DIARY FOR NEXT WEEK.

MONDAY.

Royal College of Surgeons of England, 4 P.M.—Professor C. Stewart: On the Protection and Nourishment of the Young in Plants and Animals. Lecture IV.

Medical Graduates' College and Hill Workhouse of the Parish of Liverpool, 4 P.M.—Dr. Galloway: Consultation. (Skin).

TUESDAY.

Royal College of Physicians of London, 5 P.M.—Dr. P. Horton-Smith on the Typhoid Bacillus and Typhoid Fever. Goulstonian Lecture I.

Chelsea Clinician's Society, Holy Trinity Parish Hall, Pavillion Road, Sloane Square, S.W., 8.30 P.M.—Resumption of the Debate on the Treatment of Rheumatism, with Special Reference to Prophylaxis, and Cardiac Complications in which Dr. Pye-Smith, Dr. R. Caton (Liverpool), Dr. Burney Yeo, and Dr. Leamard Owen will take part, and Sir Richard Douglas Powell, Bart., will give a closing address.

Medical Graduates' College and Polyclinic, 22, Chancery Street, W.C., 4 P.M.—Sir W. H. Broadbent, Bart.: Consultation. (Medical).

Royal Statistical Society, 9, Adelphi Terrace, Strand, W.C., 5 P.M.—Miss Rosa M. Barrett: The Treatment of Juvenile Offenders, together with Statistics of their Numbers.

Pathological Society of London, 20, Hanover Square, W., 8.30 P.M.—Adjourned discussion on Professor Halliburton's Paper on the Forms and Significance of the Proteids met with in the Urine, to be resumed by Dr. Brodie.

WEDNESDAY.

Royal College of Surgeons of England, 4 P.M.—Professor C. Stewart: On the Protection and Nourishment of the Young in Plants and Animals. Lecture V.

Hospital for Consumption and Diseases of the Chest, Brompton, S.W., 4 P.M.—Dr. Schorstein on Emphysema.

Royal Microscopical Society, 20, Hanover Square, W., 7.30 P.M.

Royal Meteorological Society, 25, Great George Street, Westminster, 7.30 P.M.

Medical Graduates' College and Polyclinic, 22, Chancery Street, W.C., 4 P.M.—Dr. C. O. Hawthorne: Consultation. (Medical). 5-7 P.M.—Dr. St. Clair Thomson, Class. Practical Ophthalmology. Demonstration III.

THURSDAY.

Hospital for Sick Children, Great Ormond Street, W.C., 4 P.M.—Still: Some Functional Neuroses of Childhood.

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

Royal College of Physicians of London, 5 P.M.—Dr. P. Horton-Smith on the Typhoid Bacillus and Typhoid Fever. Goulstonian Lecture II.

FRIDAY.

Royal College of Surgeons of England, 4 P.M.—Professor C. Stewart: On the Protection and Nourishment of the Young in Plants and Animals. Lecture VI.

Medical Graduates' College and Polyclinic, 22, Chancery Street, W.C., 4 P.M.—Dr. St. Clair Thomson: Consultation. (Eye, Ear, Nose and Throat). Demonstration III.

Clinical Society of London, 8.30 P.M.—Dr. Hale White and Mr. Frigg: A case in which the attempt was made to Remove a Dermoid Tumour, which, growing in the Spinal Cord, pressed upon the Spinal Cord.—Mr. Robert Jones and Mr. Tubby: Further Experience of Cases of Spinal Rectification.

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.

FIELD.—On March 11th, at "Greta," Wyke, near Bradford, the wife of A. Holmes Field, L.R.C.P., L.R.C.S., etc., of a son.

WILLIS.—On March 12th, at Littleport, Cambridgeshire, the wife of E. Ernest Willis, L.R.C.S., L.R.C.P., L.F.P.S., of a son.

DEATHS.

CUMMING.—At Findhorn, N.B., on March 14th, Dr. Walter J. Haldane Cumming, L.R.C.P. and L.R.C.S. Edin., late of Lochgelly.

KIDDLER.—On February 9th, at Mongkawk, Burma, murdered by frontier tribes, Major Walter Kiddler, B.A.M.C., M.D., L.K.Q.C.P.I., etc., second son of the late Captain W. W. Kiddler, R.N., and of Mrs. Kiddler, 14, Hardwick Road, Eastbourne.

WILLIAMS.—At Brynmor, Pen-y-groes, Carnarvonshire, on March 12th, John Cadwaladr Williams, M.B., C.M. Edin., M.R.C.S. Eng., L.R.C.P. Lond., of Grange Road West, Middlesbrough-on-Teess, aged 31 years.

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. Th., 1; Roentgen, W., 9.45; Orthopaedic, Th., 1. *Operations*.—W. Th. F., 3, 5, 7, 9.
 CHURCHILL HOSPITAL FOR WOMEN. *Attendances*.—Daily, 1.30. *Operations*.—M. Th. F., 2.
 CITY OPHTHEDIC. *Attendances*.—O-p., M. Tu. Th. F., 2. *Operations*.—M., 4.
 EAST LONDON HOSPITAL FOR CHILDREN. *Operations*.—M. Tu. 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., 2.30. *Operations*.—M. W. Th. F.
 GUY'S. *Attendances*.—Medical, I-p., M. Tu. Th. F. S., 1.30; o.p., M. W. Th. F., 12; Surgical, I-p., daily, 1.30; o.p., M. W. Th. F., 12; Obstetric, I-p., M. Tu. Th. F., 1.30; o.p., Tu. W., 12; Eye, Tu. Th. F., 1.30; o.p., M. Tu. F., 12; o.p., Ear, Tu. Th., 12; Skin, Tu. Th., 12; Throat, F., 12; Dental, daily, 9.30. *Operations*.—Tu. F., 1.30; (Ophthalmic), M., 1.30; Th., 2.
 HOSPITAL FOR WOMEN, Soho. *Attendances*.—O-p., M., 9; Tu. W., 12; Th., 9; F. S., 12. *Operations*.—M. Th., 2; Th. S., 9.30.
 KING'S COLLEGE. *Attendances*.—Medical and Surgical, daily, 2; Obstetric, daily, 2; o.p., daily, 1.30; Eye, M. W. Th. F., 1.30; 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, M. Tu. Th. F., 9. *Operations*.—Daily, 2.
 LONDON TEMPERANCE. *Attendances*.—Medical, I-p., M., 2.30; Tu. F., 3.30; Th., 2.0; O-p., M. Tu. W. F., 1; Surgical, I-p., M., 2; Th., 3; O-p., M. Th., 1.30. *Operations*.—Th., 4.
 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, M., 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. Th., 9; Ear and Throat, Tu. F., 9; Skin, Tu., 4; Th., 9.30; Dental, M. F., 9.30; W. S., 9.30. *Operations*.—Daily, 1.30.
 NATIONAL ORTHOPEDIC. *Attendances*.—M. Tu. Th. F., 2. *Operations*.—W., 10.
 NEW HOSPITAL FOR WOMEN. *Attendances*.—Daily, 2; Ophthalmic, W. S., 9.30. *Operations*.—Tu. F., 9; Th., 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. S., 3; Tu. F., 9; W., 2.30; Th., 7.30. *Operations*.—Th., 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., 9.30; Throat, Nose, and Ear, W., 9.30. *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*.—O-p., M., 2; I-p., Tu. Th., 2.30.
 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., M. Tu. W. Th. F. S., 2; o.p., M. Th., 9; W., 2; Tu. F., 2; Skin, Tu., 9; Larynx, M. Th., 2; Orthopaedic, Tu., 1.30; Dental, Tu. F., 9; Electrical, M. Tu. Th. F., 1.30. *Operations*.—Daily, 1.30; (Ophthalmic), Tu. F., 2; Abdominal Section for Ovariectomy, W., 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, M., 2; Skin, W., 2.45; Throat, F., 2; Dental, M., 2; 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. 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, W. S., 10; Children's Medical, M. Th., 9. *Operations*.—M., 2.30; Tu. 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*.—I-p., 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, W., 10.30; Electro-Therapeutics, Th., 2; Mental Diseases, Th., 10; Dental, Tu. F., 10; X-Rays, Tu. F., 2; Vaccination, W., 11.30. *Operations*.—Daily, 2; (Ophthalmic), Th., 2; (Gynaecological), Th., 2; (Throat), M., 9.30; (Ear), Th., 9.30.
 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, M. Th., 2; Ear, Tu. F., 2; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electric, M. Th., 3.15; Skin, Tu. F., 2; Throat and Nose, Tu. F., 2; S., 10. *Operations*.—Daily, about 2.30; F., 10.
 WESTMINSTER. *Attendances*.—Medical and Surgical, daily, 2; Obstetric, M. Tu. F., 2; Eye, Tu. F., 9.30; Ear, Tu., 2; Skin, W., 2; 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 same address, 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.

INTERROGATOR would like to hear of a home (private) where a mentally deficient girl, aged 19, could be received, and not only educated, but taught an occupation.

STUDENT will be grateful if any reader can tell him from recent personal experience if any good post-graduate class in practical gynaecology of about a month's duration, such as that formerly given by Martin, can be had in Berlin about the month of April, and, if so, to whom and where application should be addressed for admission, and the fee charged.

TREATMENT OF VAGINAL DISCHARGE.

LYMPH would be glad to hear some suggestions as to treatment of the following case. A patient, since a miscarriage two years ago, has had a yellow discharge, distinctly vaginal. The husband, now deceased, had gonorrhoea. The discharge has not yielded to ordinary astringents, nor to swabbing out the vagina with silver nitrate solution followed by a plug of bismuth and glycerine.

MERCANTILE MARINE.

DR. STANLEY HAYNES (Malvern) writes to know of practical medical and surgical handbooks suitable for navigating officers in the mercantile marine. The works should contain some account of and treatment of tropical diseases, and be such as would be useful in emergencies on board colonial "tramp" steamers unprovided with a surgeon.

**The following works may be recommended: *Medical and Surgical Help for Shipmasters and Officers of the Merchant Navy*, by W. Johnson Smith, F.R.C.S. (London: C. Griffin and Co. 1895. 6s.); *Health in Africa*, by Dr. Kerr Cross (London: J. Nisbet and Co. 1897. 3s. 6d.). It would probably be desirable to take both books.

VENEREAL DISEASES ABROAD.

A CORRESPONDENT wishes to know where he could find statistics relating to the prevalence of venereal diseases for the last few years in the French, German, Italian, Russian, and Japanese armies. Also if Contagious Diseases Acts are in force in those countries? The facts he more particularly wishes to ascertain are: (1) Admissions per 1,000 from all diseases; (2) from venereal diseases, subdivided if possible into (a) primary syphilis, (b) secondary later, (c) soft chancre (chancroid), (d) gonorrhoea; (3) number constantly sick per 1,000 from all diseases; (4) ditto from venereal diseases; (5) total yearly admissions from all diseases; (6) total yearly admissions from venereal diseases; (7) total constantly sick from all diseases; (8) total constantly sick from venereal diseases. Perhaps some of our readers may be able to give the requisite details.

THE SWEATING SICKNESS.

ZEPHYR asks for information as to the malady which Bacon alludes to in his *Essays* in narrating the history of the reign of Henry VII (p. 313, Bohn's edition).

"About this time, in autumn, towards the end of September, there began and reigned in the City and other parts of the kingdom a disease then new, which by the accidents and manner thereof they called the sweating sickness. This disease had a swift course, both in the sick body and in the time and period of the lasting thereof, for they that were taken with it, upon four and twenty hours escaping were thought almost assured. It was a pestilential fever, but as it seemeth not seated in the veins or humours, for that there followed no carbuncle, no purple or livid spots, or the like, the mass of the body being not tainted, only a malign vapour flows to send it forth by an extremesweat. But infinite persons died suddenly of it, before the manner of the cure and attendance was known. It was conceived not to be an epidemic disease, but to proceed from a malignity in the constitution of the air, gathered by the predispositions of seasons, and the speedy cessation declared as much."

This clearly refers to the sweating sickness which first visited England after the battle of Bosworth (August 22nd, 1485), spreading in a few weeks from the distant mountains of Wales to the metropolis, which it reached on September 21st. John Caius or Kaye, sometime Professor of Greek at Padua, the refounder of Caius College, Cambridge, and the celebrated President of the Royal College of Physicians from 1555 to 1560, wrote a *Boke or Counsell against the disease commonly called the Sweate, or Sweating Sickness*. There is an excellent and interesting account of the disease in Hecker's *Epidemics of the Middle Ages*, published by the Old Sydenham Society in 1844.

ANSWERS.

SECRETARY.—The rule is well established and generally recognised by hospital administrators.

MEMBER of twenty-five years' standing has not authenticated his communication by his name.

TERTIAN.—One of the mosquito family (*Culex*) is still present, in some years in great numbers, in the Fen district, and in many marshy places in the Eastern Counties of England. Whether *Culex* is ever the extracorporeal host of the malarial parasite is a point not yet settled. *Anopheles*, which is known to carry the parasite in other countries is not, so far as we are aware, known to exist in this country, but probably it has not been looked for very carefully.

ANXIOUS FRIENDS.

B.—We have no doubt the poor lady was anxious to try to inform herself in order to be more capable of rendering assistance to her husband