

his face firing, when he felt as if he had been struck two heavy blows simultaneously with a hammer, over the left shoulder blade and the bottom of the back. He was unable to walk, and was carried off the field by the stretcher party. The x rays were used, and the bullet was removed over the sacrum on December 25th. He was admitted to the *Nubia* on January 11th. There was a small cicatrix $\frac{3}{4}$ inch below the spine of the left scapula and $\frac{6}{8}$ inches from the middle line of the back. There was a linear cicatrix $\frac{1}{2}$ inch long over the sacrum, slightly to the left of the middle line. The distance between the cicatrices was 18 inches. On admission, he complained of shooting pains over the whole of his back, but these gradually disappeared, and he resumed his duties at the front on March 7th.

CASE VII. Four Wounds produced by the Same Bullet.—Bugler —, aged 18, of the Dublin Fusiliers, was wounded at Colenso on December 15th. He was advancing to the attack, and was holding his haversack to his side with his left hand, when he was struck by a bullet, which hit his left hand, and then passed through his left thigh. He compares the pain in his hand to being struck with a stick, and felt no pain in his thigh. He went on running for five minutes, but then became faint and fell down, and was removed by the stretcher party. He was admitted to the *Nubia* on January 11th. There was a small cicatrix on the back of the left hand, about $\frac{1}{2}$ inch above the head of the third metacarpal bone, and an irregular cicatrix about the size of a shilling in the centre of the palm. The third metacarpal bone was thickened and had evidently been smashed. In the left thigh there was a small cicatrix $\frac{1}{2}$ inch above the great trochanter of the left femur, and the exit wound was also quite healed, being situated in the left buttock, 2 inches from the anus. The distance between the two cicatrices in the thigh measured 16 inches. This was a good example of one bullet causing four distinct wounds. He resumed his duties at the front on January 7th, having good use in the fingers of his left hand.

CASE VIII. Bullet Wound of Chest: Rapid Recovery.—Lieutenant —, aged 26, of the West Surrey Regiment, was wounded at Fabiana on January 21st. He was leading his company in the advance, when a bullet went through his helmet, and a few minutes afterwards another bullet struck him in the left breast. This was at 9.30 A.M. He compared the pain to that of a heavy blow with a stick. He went on running for twenty yards, but then stopped as he felt his wind go; he lay down and applied his field dressing. He stayed there for six hours, and then crawled down the hill and lay at the foot of it for another three hours, smoking his pipe. He then walked as best he could to the field hospital, arriving there at 9 P.M. He did not cough any blood, and had not been troubled with a cough, nor had he any pain on taking a deep breath. He was admitted to the *Nubia* on January 30th. There was a small black scab 2 inches above the left nipple, and another one $\frac{1}{2}$ inch outside the angle of the left scapula. He was very fit and ate and slept well, and returned to his duties at the front on February 2nd, having only been twelve days on the sick list.

CASE IX. Perforating Bullet Wound of Arm: Rapid Recovery.—Sergeant —, aged 38, of the Inniskilling Fusiliers, was wounded at Colenso on December 15th, 1899. He was lying on his face firing, when he was hit in the right arm. He compared the pain to that of a red-hot poker burn; his arm became numb and useless, but did not bleed much. He walked a quarter of a mile to a stretcher party, who bandaged his arm, and then, as he did not feel weak, walked two miles to the field hospital. He was admitted to the *Nubia* on January 14th. There was a small cicatrix on the anterior surface of the right upper arm at the level of the insertion of the deltoid muscle to the humerus, and another small cicatrix on the inner side of the arm 2 inches distant from the entrance cicatrix. He resumed his duties at the front on January 20th, his arm being quite well.

CASE X. Perforating Bullet Wound of the Thigh.—Lieutenant —, aged 23, of the York and Lancaster Regiment, was wounded at Venterpruit on January 30th. He was lying down on the crest of a hill, when he was hit in the left thigh, at a distance of 700 yards. He compared the pain to that of a blow with a coal hammer. The wound began to bleed, so he applied his field dressing and crawled ten yards to cover, where he lay for two hours. He was then carried to the foot of the hill, as he was unable to walk, his leg being quite useless. He was left there for another five hours, the rain meanwhile descending in torrents, and was then carried to the field hospital. He was admitted to the *Nubia* on February 8th. There was a small cicatrix on the anterior surface of the left thigh, slightly to the outer side, and $\frac{3}{4}$ inches above the upper border of the patella. The exit wound was also represented by a small cicatrix on the posterior surface of the thigh, 4 inches above the centre of the popliteal space. The distance between the cicatrices measured round the outer side of the thigh was 6 inches. He walked very well, never had any constitutional disturbance, and only complained of slight pain when he flexed the knee to the uttermost. He resumed his duties at the front on March 2nd.

CASE XI.—Three Bullet Wounds of Limbs.—Corporal —, aged 22, of the West Yorkshire Regiment, received three wounds at Willow Grange on November 23rd. He had been in action for two hours, and was lying on his face firing, when he was hit in the right leg. It was very painful, and he tried to get up to retire, but was unable to stand on his right leg, so he lay down again and went on firing again for another hour, when he was hit in the left leg. He did not feel this very much, and lay quiet. He was then hit in the left shoulder, and the pain of this he compared to having a red-hot iron applied to the part. The Boer fire was so heavy that his comrades had to retire and leave him, and he was captured by the enemy. He stated that the Boers took him to a farmhouse, which they were using as a field hospital. They dressed his wounds and treated him with the greatest kindness, and sent him back to his own lines the next day. He was admitted to the *Nubia* on January 13th, and was able to walk up the gangway with assistance. (1) There were two small cicatrices on the outside of the left calf, the entrance wound being 2 inches below the head of the fibula, and the exit $\frac{3}{4}$ inches distance from the entrance, lower down and slightly anterior. (2) There was small cicatrix in the middle of the inner surface of the leg over the right tibia, and a linear cicatrix an inch above the ankle-joint, between the tibia and the fibula, where the bullet was removed on December 1st. The middle third of the tibia was greatly thickened and painful on pressure. The bullet was bent, and the cupronickel casing torn, forming a jagged fringe. He stated that his right leg

was on a back splint for three weeks, and then in plaster-of-paris for a fortnight. He could not bear the weight of his body on his right leg, and walked with a crutch. (3) There was a small cicatrix in the posterior part of the left deltoid muscle, 1 inch below the acromion, and another small cicatrix in the middle line of the back, between the spines of the fifth and sixth dorsal vertebrae. He was sent to England on February 2nd, as unfit for further service in the present campaign.

CASE XII. Bullet Wound of Humerus.—Private —, aged 32, of the Dublin Fusiliers, was wounded at Colenso on December 15th. He was lying on his face firing, when he was hit in the right arm. He thought at the time his arm had been knocked off. He dropped his rifle, as his arm was useless. The wounds bled profusely, but when the field dressing had been applied he was strong enough to walk two miles to the field hospital. He was admitted to the *Nubia* on January 13th. The wound of entry was represented by a discharging sinus in the middle of the posterior surface of the right upper arm. Some necrosed bone could be felt on probing, and the middle third of the humerus was greatly thickened and painful. The exit wound, situated in the middle of the anterior surface of the upper arm was quite healed. He refused to submit to having the sequestra removed, and was sent to England on February 2nd.

In the above series of cases the term "small cicatrix" has often been used. I see that Mr. Makins compares the cicatrices left after an uncomplicated Mauser bullet wound to the scars resulting from a large acne pustule, and I know of no better comparison.

MEMORANDA:

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

TWIN PREGNANCY WITH CENTRAL PLACENTA PRÆVIA.

A SHORT time ago I was hastily summoned to attend Mrs. W., aged about 40, who had been suddenly seized with very severe hæmorrhage. As she lived about four miles from my house I did not arrive on the scene until about an hour and a half after the messenger had been sent. I found the patient collapsed, almost bloodless, with very weak pulse, and slight pains coming on at regular intervals. On examination the os was found dilated to about the size of half a crown. The bleeding had been most profuse, and still continued with each pain: the whole cervix, as far as I could feel all round, was occupied by placenta, and I could not reach the membranes at any spot. I therefore proceeded to perforate the placenta with my finger, thus giving exit to the liquor amnii, which came away freely. The hæmorrhage, however, still continued with the pains; I therefore introduced my hand carefully into the vagina, and gradually enlarged the opening in the placenta till it admitted my hand, with which I seized a foot, and bringing it down, speedily delivered the woman of a living boy. I then reintroduced my hand through the torn placenta, and delivered her of another living boy in a similar manner. The placenta was expressed about ten minutes afterwards with complete membranes. It was a very large single placenta, with the two cords attached, and had a large hole almost in the centre, through which the children were born. The children were fully developed, and survived. The mother was very weak for a time from loss of blood, but quickly rallied under treatment, and made an uninterrupted recovery.

The interesting point in this case is that the placenta was single and central in position, the large size making it very difficult, if not almost impossible, to separate it, so as to rupture the membranes and perform version. I would like also to draw attention to the ease and rapidity with which the placenta was perforated and version performed with safety to mother and children; for in cases such as these, time is certainly a most important consideration.

Dunmurry, co. Antrim.

DAVID P. GAUSSEN, M.D., M.R.C.S.

A CASE OF URÆMIA CLOSELY SIMULATING CEREBRAL HÆMORRHAGE.

W. T., aged 65, was first seen by me on January 29th about 10 A.M. The history given was that about an hour previously he had been found lying unconscious in the road. He had been dragged into the nearest house by two men, where I found him lying back in an armchair in a semicomatose condition. He was pale, with an irregular pulse of high tension and rate about 60 per minute; the arteries were thickened

and tortuous. The apex beat was in the fifth interspace in the left nipple line. The area of cardiac dulness was otherwise normal. There were no cardiac murmurs. He occasionally put his left hand to his head, but he could not move his right arm or leg, which were quite relaxed and flaccid and fell helplessly down on being lifted up. The angle of the mouth was drawn down to the left side when he tried to show his teeth. He became more conscious after a short time and then on being asked questions he became manifestly uneasy, and could only ejaculate "Yes" or "No" now and then. He vomited twice. He remained in this condition until about 3 P.M., when he became somewhat suddenly quite comatose, breathed stertorously and then had some convulsive twitchings on the right side in face, arm and leg—not on the left. The twitchings ceased after a minute or two, but the muscles of the right arm and leg remained contracted and rigid for some time. In about half-an-hour this passed off and he became quite relaxed and remained so for about another half-hour. The respirations continuing stertorous and the right cheek being puffed out with each expiration. Then he quickly regained consciousness, and in about ten minutes could answer any question rationally, and could move all his limbs quite well. It was found that he had bitten his tongue during the convulsions, and had passed his urine under him. He remained dull and heavy for thirty-six hours, and complained of pain on the left side of the head—the parietal region. He slept a good deal, but afterwards he got up, dressed, and went home, a journey of twenty miles by train. He had passed no urine for twenty-four hours after regaining consciousness; then, on the evening of January 30th, the urine contained a large cloud of albumen. On the following morning it contained a slight cloud of albumen, and 3.4 per cent. of urea and abundant water.

This, then, was evidently a case of uræmia. It is interesting as showing how closely uræmia may simulate an ordinary attack of hæmorrhage. Osler points out that cases of uræmic hemiplegia are not uncommon, but I do not think that the attacks often resemble those due to hæmorrhage so closely as in this case. The history of a fit, followed by complete right hemiplegia with aphasia, in a man of advanced age at once suggests the diagnosis of cerebral hæmorrhage on the left side, and the continuance of the condition would make it practically certain. The subsequent convulsive attack, limited to the right side and followed by rigidity, might be explained by a further extension of the hæmorrhage. The prognosis would be consequently very bad. The unconscious micturition and the biting of the tongue in this case during the convulsive twitchings might possibly have helped to a correct diagnosis, as these epileptiform manifestations are so common in uræmia.

I regret that it was impossible to examine the urine when the patient was first seen and find the percentage of urea. This might have afforded valuable information. The case shows how necessary such a proceeding is in cases like this, no matter how clear the diagnosis may seem to be.

Bala, N. Wales. CECIL FIRMIN LILLIE, M.A., M.B. Cantab.

SCLEREMA NEONATORUM.

ON February 17th I was asked to see a male child, 3 days old, who presented the following appearances: The skin of the body was very dry and hard—quite hidebound; the scalp was very thick and encrusted with muddy-looking scales with fissures between. The eyelids were tense and thick, the skin of the face almost immobile, but without crusts or scales. The tongue was thick, dry, and red. The skin was especially thick at the back of the neck. The hands and feet from just above the wrists and ankles were quite black and cold, glistening, and seemed asphyxiated and about to become gangrenous, though no sores had appeared. The general temperature was 97°. No abnormal heart sounds were heard, but the heart's action was slow, 60 a minute.

The child cried, though feebly. It could only with difficulty be fed with a spoon. It was anointed with olive oil. Death occurred on February 19th, from asthenia. A necropsy could not be obtained.

The mother was 30 years of age, had several healthy living children. She had a miscarriage, which she said was brought on by a fall, in the seventh month, previous to the birth of the

patient. She considered the child was only an eight months child, but it had every appearance from size and weight of a nine months child.

Bristol.

JOHN WM. TAYLOR, M.C.R.S., L.R.C.P.

REPORTS

ON

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

ST. BARTHOLOMEW'S HOSPITAL, ROCHESTER.

ARSENICAL POISONING IN A CASE OF CHOREA.

(Reported by PERCY D. BARKER, M.R.C.S., L.R.C.P., Senior House-Surgeon to the Royal Infirmary, Sheffield.)

A DELICATE-LOOKING little girl, aged 10, was brought to the hospital on February 26th, suffering from diarrhoea and vomiting of a week's duration. There was much languor and great discoloration of the skin. Upon questioning the mother, it was elicited that in January the patient had chorea, and in the early part of the month was taken to a hospital, where she was treated as an out-patient for six weeks. About the end of January the mother first noticed that the skin of the child was assuming a dark colour, this coloration being most marked around the knees and in the axillæ, but this was not mentioned at the hospital. Gradually the pigmentation became deeper and extended to other parts of the trunk, and, as the child was leaving the town where she had been under treatment, her mother thought it wise to seek advice with regard to the coloration above mentioned.

On examination it was found that the whole of the chest, abdomen, back, hips, legs, and buttocks were intensely pigmented, the skin assuming the colouring one sees among Arabs, and that of the axillæ and groins being somewhat darker than the rest. The face and neck were quite free from discoloration, as were the hands and feet. The eyes were inflamed and suffused. The knee-jerks were absent, the patient complaining of aching pains in the calves. The bowels were very relaxed and had been so for six or seven days. Vomiting had been present also for a similar period. As it was thought to be a case of arsenical poisoning she was admitted into the hospital. No medicines were given, and she was put upon a milk diet. The urine was examined for traces of arsenic, which were detected by two different methods. She vomited several times after admission; this symptom, however, subsided after twenty-four hours, and the diarrhoea also ceased in about two days.

At the end of a week the eyes had assumed their normal appearance and the little girl was taking her food well. The skin was now slightly less dark than on admission. At the end of three weeks the pigmentation was very much less marked and in places (the legs and chest) the skin was commencing to resume its normal colour. The knee-jerks were still absent and the patient still complained of feeling very weak on her legs. Upon making inquiries at the hospital where she had been previously under treatment, it was ascertained that she had been taking liquor arsenicalis in gradually increasing doses. Commencing with 2 minims and for the last three weeks 7 minims thrice daily.

Remarks.—This case appears to be of interest on account of (1) the extreme discoloration of the skin produced; (2) the short period over which arsenic had been administered to produce such grave effects; (3) the unusual susceptibility of the patient to this drug; (4) the small doses administered to produce toxic effects; (5) the rapid convalescence of the patient after omitting the drug; (6) the entire absence of any signs of chorea when the patient first attended this hospital as an out-patient.

ISOLATION HOSPITALS IN TURKEY.—As the result of a report presented by Dr. von Dühring Pasha, Professor of Dermatology in the Imperial School of Medicine, Constantinople, the Turkish Government has made a grant of £20,000 for erection of several hospitals for infectious diseases in the Castamoni Vilayet. Eight young medical officers of the Ottoman army have been sent there to take charge of the hospitals.

duties cannot in the nature of things be divorced. P.M.O.'s, while they should be able to give professional advice, must also be administrators, and this involves successful office work. If army medical officers are to be in any proper sense military officers, with the secretarial functions pertaining thereto, they must do or superintend the office work.

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.

FEES OF MEDICAL WITNESSES.

RUSTICUS.—Unless the prosecutor agreed to pay the fee asked, it does not appear that more could be obtained than has already been paid.

RESPONSIBILITIES OF A CHIROPODIST.

P. asks whether there is any remedy against a chiropodist holding no surgical qualification, who, after advising a patient to have a soft corn removed, made a circular cut and drew out the corn and the tissues, an operation followed by deep-seated inflammation and lameness; or whether an action would fail, as the patient knew he held no qualification.

*** It appears to be settled law that where a person, whether qualified or not, professes to deal with the life or health of others, he is bound to have and employ competent skill. If, therefore, the chiropodist in this case treated the person negligently or ignorantly, he would be liable in damages.

MIDWIFERY ENGAGEMENTS.

L.—(1) If a patient engages A. for her prospective confinement, but does not call on A. to attend her owing to its having been brought off by the "old women," is A. entitled to his usual fee? (2) If he is called to attend a woman in confinement who only does so because the midwife cannot manage the case, and no previous engagement has been made with A., can A. decline to give his services?

*** (1) Yes; but our correspondent should remember the costliness and uncertainty of legal proceedings before he sets them in motion. (2) Yes; but our correspondent will lay himself open to unpleasant charges of inhumanity, etc., if he refuses.

THE APOTHECARIES' HALL, DUBLIN.

MEDICUS asks: (1) In the case of L.A.H. Dublin 1882, is the licentiate entitled to practise medicine and surgery? (2) In the same case, is he entitled to take charge of medical and surgical wards in a general hospital? (3) While keeping open a druggist's shop is he entitled to practise medicine?

*** (1) Yes. (2) Yes, unless local rules debar him. (3) Yes.

MONTHLY NURSES.

N. sends particulars of a case in which a monthly nurse, after being engaged, threw up the engagement for another case with a larger remuneration, and asks the following questions: (1) Was the nurse justified in cancelling her engagement? (2) Is she legally liable for damages?

*** (1) No. (2) Possibly; but the damages would not be enough to compensate for the expense and trouble of legal proceedings.

QUESTIONS AS TO FEES.

PERPLEXED sends three questions: two refer to cases in which he was summoned to attend the sudden illness of persons who are the patients of other doctors. His third question has reference to a case in which he received late one evening a message from a lady to attend her hysterical servant; the lady asked him to sleep in the house, which he did.

*** With regard to the first two questions we think that our correspondent would be well advised to look upon his visits as having been paid for the practitioners who usually attend the patients in question. With regard to the third question, a reasonable fee would be two guineas; or, if the people are really well-to-do, three guineas.

POISON BOTTLES IN NEW YORK.—It is proposed to introduce into the New York Legislature a Bill providing that any bottle containing poison shall be of a shape making it readily distinguishable in the dark by the touch, the style of such bottle to be determined by a committee of the State Medical Society, acting in conjunction with the State Board of Health.

BELGIUM has established a botanical garden and experimental station at Coquilhatville in the Congo Free State.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF EDINBURGH.

HONORARY DEGREES.—At the spring graduation ceremonial of the University of Edinburgh on Saturday, April 14th, the honorary degree of LL.D. was conferred on

Miss Eleanor A. Ormerod, F.R.Met.Soc., F.E.S., the distinguished entomologist; on Dr. C. D. F. Phillips, London; and on Dr. Anderson Stuart, Professor of Physiology in the University of Sydney.

In presenting Dr. Phillips for the degree, the Dean of the Faculty of Law (Sir Ludovic Grant) said: While it is fitting that all departments of learning should be represented at our graduation ceremonial, there is no department which has a stronger claim upon this University than medical science, and in Dr. Phillips we are proud to recognise one who is peculiarly worthy to be regarded as a representative of medicine. Dr. Phillips not only enjoys an enviable reputation as a practitioner, but he has also, by teaching and writing, won himself a foremost place among living scientific pharmacologists. For many years he acted with great acceptance as Lecturer on Therapeutics in the Westminster Hospital, London, and he has held the office of Examiner in this subject both in this University and the University of Glasgow. He has prosecuted important researches on the physiological and therapeutical action of many organic and inorganic substances, of which perhaps the most noteworthy are those relating to the influence of certain drugs upon the circulation and upon renal secretions; and the results of his investigations have been embodied in articles and books which are universally recognised of the highest value to students and teachers of materia medica. He has been appointed to many of the high offices which are the prerogative of those who have risen to eminence in medical science, and now the University of Edinburgh most gladly follows the example of his own Alma Mater, Aberdeen, by conferring upon him her highest, academic distinction.

Of Professor Anderson Stuart he spoke in these terms: A distinguished student and graduate of our own, Professor Anderson Stuart is now bringing fresh lustre to the University of Edinburgh as a school of medicine by the admirable work which he is achieving in a distant land. He has not only shown himself in his capacity as Professor of Physiology in the University of Sydney to be a very able and successful teacher, but he has also given proof of high administrative abilities and of a genius for organisation. It is, indeed, mainly due to his influence that the University of Sydney now possesses a fully-developed medical school—many of the Chairs in which are held by graduates of this University—and that the hospitals in the city have been brought into the service of the University, and have been so organised as to fit them for the highest purposes of medical instruction. It is now more than a year since the Senate offered this degree to Professor Anderson Stuart, and as there seems no likelihood of his being able to return to this country in the immediate future, they have resolved that the bestowal of this honour should no longer be delayed, though they greatly regret that he is not here to receive it in person.

The following is the official list of candidates who have passed the various professional examinations for degrees in Medicine and Surgery at the recent sittings of the Examining Board.

First Professional Examination.—Farhat Ali, M. Ashkenazie, Agnes Balfour, C. M. Begg, A. R. Berrie, J. M. Beyers, A. S. L. Biggart, F. H. Borthwick, F. S. Brennan, J. Brennan, A. Buchanan, R. B. Calwell, M. C. Cowper, R. W. Craig, C. S. Crichton, G. Cunningham, W. H. Davison, J. R. Dobbin, T. H. Easton, C. G. Edmondston, J. J. H. Ferguson, F. S. B. Fletcher, N. C. Forsyth, R. H. Fothergill, H. M. Gillespie, J. A. Glover, L. C. V. Hardwicke, G. Harrison, E. Henderson, M. A.; G. S. Husband, R. J. Irving, S. A. Johnston, I. C. Keir, J. Kirk, E. A. Klein, W. E. Knight, C. A. Lawrence, C. D. Lochrane, J. B. Lockerbie, A. P. G. Lorimer, J. M'Donald, R. J. Mackessack, M.A.; Elspeth M. Macmillan, D. P. Marais, J. B. Mears, C. R. P. Mitchell, Helen Morrison, T. B. Mouat, C. F. A. Oberlander, A. Oliver, F. O'Neill, E. H. Price, L. Ram, W. Readman, A. E. C. Rees, D. G. Reid, A. O. P. Reynolds, W. H. Robertson, L. C. Robinson, J. Saffey, S. W. Smith, W. A. W. Smith, H. A. Stewart, H. J. Stewart, A. C. Strain, Annie F. Theobalds, T. T. Thomson, E. A. Turpin, D. C. Welsh, L. West, R. M. M. White, D. P. D. Wilkie.

Second Professional Examination.—A. K. Baxler, H. Beveridge, B.A.; B. Blacklock, C. H. Bösenber, J. R. Bosman, E. A. Braine, G. B. Brand, R. D. Brown, A. Brownlie, D. F. Callender, M.A.; C. M. Campbell, M.A.; D. G. Carmichael, T. D. Cavanagh, A. M. Caverhill, J. H. Connolly, P. D. Cremona, T. M. Cuthbert, F. I. Dawson, J. Dommissie, H. J. Dunbar, J. F. Duncan, J. Dunlop, S. A. Ellerbele (with distinction), S. C. Ellison, A. N. Fell, A. P. R. Fennell, S. Gilford, A. Gillespie, A. M. Gloag, D. P. Goll (with distinction), W. Goodchild, A. Grant, J. P. Grant, J. A. Gray, J. F. Haegert, T. B. Hamilton (with distinction), H. Harding, A. W. M. Harvey, H. Herd, M.A.; W. Holmes, C. H. Houghton, R. C. Irvine, J. M. Johnstone, H. Kerr, J. Kirkwood, H. A. Knight, W. S. Laidlaw, Norah Lenwood, W. Lillico, J. C. London, R. C. Low, J. G. McCaughey, D. R. MacGregor, B.Sc.; I. N. McKeand, V. C. M'Laren, E. Macmillan, R. P. M'Neill, C. E. Marshall, W. E. Marshall, J. B. Mason, J. K. Matheson, P. Mathews (with distinction), R. J. Mayberry, T. Mill, W. S. Milne, A. Moll, J. H. Montgomery, S. A. Moore, R. Morrison, R. Murray, C. Nelson, W. Newlands, E. G. O. Nixon, T. H. Osler, J. Politachi, A. B. dos Remedios, H. H. Roberts, A. B. Ross, T. W. E. Ross, A. J. Rowan, A. L. Roxburgh, J. Scobie, J. S. Sewell, A. M. Sharp, M.A.; E. S. Sharpe, C. J. Shaw, W. F. Smeall, J. M. Smith, M. S. Sodhi, D. L. Wall, B. P. Watson (with distinction), J. Wier, S. A. K. Wilson.

Second Professional Examination (Old Regulations).—M. N. Bose, M. G. I. Cadell, S. Dawood (with distinction), J. H. Meikle, M.A., B.Sc.; A. C. Peterson, D. R. Rees, W. H. Swaffield.

Third Professional Examination.—May Agnew, J. F. Allan, C. M. Anderson, R. T. Baillie, A. C. Begg, R. A. Bellios, V. C. de Boinville, R. J. Bradley, A. J. Brock, J. Brockett, E. E. Brown, G. M. Brown, W. Brown, J. Brownlee, L. Bruce, R. W. Buchanan, H. Buist, G. C. Bur-

gess, E. P. Calder, K. Chapel, C. C. Choyce, P. T. Copeland, W. J. Crow, B. M. Cunningham, J. Daigliesh (with distinction), W. S. Dickson, W. E. C. Dickson, B.Sc.; T. G. B. Dodds, H. Dodgson, C. Douglas, J. L. Duncan, W. A. Duncan, J. M. Dupont, J. R. Edwards, W. Eggeling, J. W. Falconer, S. Garvin, E. M. Glanville, R. A. Glegg, T. Graham, R. M. Grant, A. L. Gurney, A. R. Hallam, J. Halliday, A. M. Hamilton, W. Hamilton, N. C. R. Hansen, R. A. J. Harper, E. R. Henderson, D. C. Henry, C. W. Howe, A. Hunter, M.A., B.Sc.; A. E. Hunter, A. R. Johnston, E. Jones, A. C. Keay, J. P. Kennedy, P. V. Langmore, A. R. K. Laudie, W. Lee, J. G. M'Bride, J. B. M'Cutcheon, W. MacDougall, P. F. M'Farlan, G. M'Farlan, F. D. S. MacKenzie, J. M'Kessie, K. D. C. MacRae, W. Mair, A. M. Malcolmson, A. F. G. Masson, E. C. C. Maunsell, G. R. Mill, W. Miller, M. C. Morgan, J. Morrisson, D. Munro, J. G. Munro, G. S. Murray, P. Murray, D. A. Ogilvie, J. F. Orr, J. L. Palmer, W. S. Patton, S. G. Peill, G. Pereira, H. G. Pesel, L. W. Pole, W. H. Prentice, M.A.; H. St. J. Randell, H. M. Roberts, G. C. I. Robertson, M. W. Robertson, W. A. Robinson, L. Rundall, C. W. Saleeby, T. B. Shaw, M. M. Smith, T. A. Smyth, Kate Southon, H. L. Shark, A. J. de Spiganovicz, M. M. Stevenson, D. A. Stewart, T. L. Thomson, E. A. Walker, A. R. Wallis, E. Wells, T. S. B. Williams, F. E. Wilson, J. Woods, D. Young, R. T. Young.

CONJOINT BOARD IN SCOTLAND.

The quarterly examinations of the above Board in Edinburgh were concluded on April 10th, with the following results:

First Examination, Five Years' Course.—W. H. Woodger, Lillian Mary Grandin, W. B. Hendry, L. F. Bianchi, J. Stark, V. St. J. Croley, J. St. A. Maughan, W. J. Purves, and C. E. F. Gaitskell.

There were 24 candidates; 3 passed in Physics, 6 in Elementary Biology, and 2 in Chemistry.

Second Examination, Four Years' Course.—S. G. Kinloch, P. J. Kerwin, J. Levack, and R. E. Turner.

There were 5 candidates.

Second Examination, Five Years' Course.—C. R. Martin, J. O'Regan, W. S. R. Dick, R. H. Brierley (with distinction), J. Dick, H. F. Walker, H. Watson, W. J. Shorten, W. V. Sutton, W. J. Gray, H. Carlaw (with distinction), J. H. Stewart (with distinction), R. W. J. Pearson, and H. S. Christoffels.

There were 20 candidates.

Third Examination, Five Years' Course.—H. F. Wilkin (with distinction), A. B. Timms, A. T. Hoskins, G. C. Ghose, H. E. J. Batty, T. Huston, W. H. E. Brand, R. Thompson, Helen Mary Serjeant, K. C. Edwards, W. C. Brown, B. Gowing, A. L. White, J. W. Wood, J. T. O'Connor, and G. Kee.

There were 25 candidates; 2 passed in Materia Medica.

Final Examination.—Fanny Wood, J. H. Bennett, W. Daley, R. O. Jones, G. C. Hobbs, G. Day, C. H. Farquharson, W. Pattsells, R. McLaren, R. F. M. Fawcett, Elizabeth Morton Johnston, Jessie Jane Graham, A. Graham, W. P. Warburton, W. T. Finlayson, F. W. Harlin, G. Potts, D. McD. Robertson, V. A. Hart, C. G. Thomson, T. M. R. Leonard, W. A. Benson, Edith Anna Wynne-Edwards, H. F. Stilwell, J. Robertson, J. H. Moag, A. A. Bearne, A. E. Salkeld, E. Bennett, and V. St. J. Croley.

There were 59 candidates; 2 passed in Medicine and Therapeutics, 1 in Surgery and Surgical Anatomy, 2 in Midwifery, and 4 in Medical Jurisprudence.

UNIVERSITY OF DURHAM.

SECOND EXAMINATION FOR THE DEGREE OF BACHELOR IN MEDICINE.—The following candidates have satisfied the examiners in the subject undernoted:

Anatomy, Physiology, and Materia Medica.—C. H. Crass, College of Medicine, Newcastle-upon-Tyne; T. B. Glendenning, Guy's Hospital; T. C. W. M. Hope, College of Medicine, Newcastle-upon-Tyne; T. C. Fisher, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital; T. E. Spurgin, College of Medicine, Newcastle-upon-Tyne; T. E. Pemberton, Mason College, Birmingham; T. E. Amyot, College of Medicine, Newcastle-upon-Tyne; S. T. Cochrane, Queen's College, Belfast; J. Cooper, B.Sc., F.C.S., College of Medicine, Newcastle-upon-Tyne; C. H. Cox, Mason College, Birmingham; Martha Georgina Isabella Cadell, L.R.C.P. and S. Edin., L.F.P.S. Glasg., Edinburgh University; J. F. Dover, College of Medicine, Newcastle-upon-Tyne; W. R. L. Drawbridge, St. Bartholomew's Hospital; E. J. Evatt, Royal College of Surgeons, Ireland; G. B. Gill, College of Medicine, Newcastle-upon-Tyne; J. H. McDowall, College of Medicine, Newcastle-upon-Tyne; Flora Murray, London School of Medicine for Women; F. O'Neill, College of Medicine, Newcastle-upon-Tyne; R. R. Pirrie, College of Medicine, Newcastle-upon-Tyne; P. M. Rivaz, St. Bartholomew's Hospital; A. Reid, Guy's Hospital; T. Rowell, College of Medicine, Newcastle-upon-Tyne; B. S. Robson, College of Medicine, Newcastle-upon-Tyne; A. Smith, College of Medicine, Newcastle-upon-Tyne; G. W. Smith, Guy's Hospital; J. M. Shaw, College of Medicine, Newcastle-upon-Tyne; C. R. Stewart, St. George's Hospital; H. C. Sturdy, M.R.C.S., L.R.C.P., Guy's Hospital; O. B. Travers, Guy's Hospital; R. Younger, College of Medicine, Newcastle-upon-Tyne.

* First Class Honours.

† Second Class Honours.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

A MEETING of this College will be held on Tuesday, May 1st, to elect the following examiners: Two Examiners in Anatomy; two Examiners in Surgery; two Examiners in Physiology and Histology; one Examiner in Biology; two Examiners in Ophthalmology; one Examiner in Pathology and Bacteriology; one Examiner in Pathology; one Examiner in Midwifery and Gynecology; one Examiner in Sanitary Law and Vital Statistics; one Examiner in Engineering and Architecture; two Examiners in Chemistry and Physics; two Examiners in Dental Surgery and Pathology; two Examiners in Mechanical Dentistry; one Examiner in Languages; one Examiner in Mathematics, Physics, Dictation, and English Essay.

ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

ON Friday, April 6th, Sir James Reid, Bart., K.C.B., Honorary Physician to the Queen, was admitted to the Honorary Fellowship, and Dr. A. C. O'Sullivan and Dr. G. J. Peacocke to the Ordinary Fellowship of the College.

CONJOINT BOARD IN IRELAND.

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

In all Subjects.—Honours (in order of merit): Miss I. C. Hargrave, M. Lochrin, P. Maher. Pass (alphabetically): T. C. Leslie, K. P. Neary, I. Parker, I. Quirke.

Completed Examination.—J. M. J. Carolan, T. C. Fitzgerald, L. Kelly, I. Kelly, P. Kinsella, J. J. A. McKenna, R. E. I. Sheridan, L. P. Stokes.

Anatomy.—I. M. G. Foley, W. F. B. Loughnan, D. de C. O'Grady.

Biology.—C. I. R. Clarke, W. I. Delany, I. M. G. Foley, W. F. B. Loughnan, T. Moran, E. C. MacDermott, V. H. MacSweeney, C. P. Shaw.

Chemistry and Physics.—W. I. Delany, I. M. Moriarty, E. C. MacDermott, D. de C. O'Grady.

Pharmacy.—W. S. Carter, C. I. R. Clarke, W. F. B. Loughnan, E. C. MacDermott, C. P. Shaw.

ST. THOMAS'S HOSPITAL MEDICAL SCHOOL.

At the recent examinations held at the end of the winter session, the following medals and prizes were awarded: The Mead Medal to Mr. R. B. Kinloch; the Cheselden Medal to Mr. T. H. Edwards; a prize of £10 to each of the following: Mr. F. C. Eve (Medicine), Mr. W. H. O. Woods (Surgery), Mr. T. S. Taylor (Midwifery and Diseases of Women), Mr. J. E. H. Sawyer (Pathology), Mr. J. L. Lock (Pharmacology), Mr. R. B. Kinloch (Forensic Medicine and Insanity), Mr. W. B. Fry (Public Health). The Peacock Scholarship (£38 ros.) and a College Prize of £20 were divided between Mr. H. S. Bennett and Mr. F. W. W. Smith (second year). The William Tite Scholarship (£27 ros.) to Mr. K. Takaki (first year).

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

THE HEALTH OF EDINBURGH.

POPULATION AND DEATH-RATE.

THE annual report of Sir Henry Littlejohn, as Medical Officer of Health for Edinburgh, has just been issued. The population of the city, including Portobello, at the middle of the year 1899 was 293,927, or an increase of 3,299 over the year 1898. The number of births during the year was 8,218, which gives a birth-rate of 27.49 per 1,000, or slightly above that of 1898. The number of deaths was 5,858, a death-rate of 19.2 per 1,000 of the estimated population; of these deaths, however, 462 were those of persons who came from various parts of the country for treatment in the public institutions, or who died during a temporary residence in the city; so that if these deaths be deducted, we have a total of 5,396 deaths of citizens, giving a death-rate of 18.05 per 1,000. In 1898 the mortality was 5,320, and the death-rate 17.9, so that the year 1899 shows an increase of 70 deaths, which is simply accounted for by the greater mortality from whooping-cough. The highest mortality in 1899 occurred in February, when for two weeks in succession the deaths amounted to 143, equal to a death-rate of 25.7 per 1,000. Much of this high mortality was due to deaths from zymotic diseases, mainly measles and whooping-cough. The lowest weekly death-rate occurred in the last week of July, the deaths amounting to 79, equal to a death-rate of 13.7 per 1,000. From a table giving the population, deaths, death-rate, births, and birth-rate of various years from 1861 to 1899 we extract the following:

	Death-rate per 1,000.	Birth-rate per 1,000.
1861	23.15	33.40
1871	27.86	34.89
1881	18.86	32.23
1891	20.06	28.17
1896	15.46	27.52
1899	18.05	27.49

Note that 1891 in its later part had the great influenza epidemic.

The death-rate under 5 years was 62.41 per 1,000 of the population, as compared with 62.02 in the year 1898. The death-rate amongst males for the year was 19.4 per 1,000 living, as compared with a death-rate of 16.8 for females.

CAUSES OF DEATH.

The number of deaths from zymotic diseases was high during the first quarter of the year, while during the other three quarters a remarkable freedom from zymotic mortality existed. During the first week of December, 1899, no deaths

resident in his district, which children he has regularly visited quarterly, and received as. 6d. for each visit.

* * If our correspondent will refer to the contract he has with the guardians, he will probably find that he has undertaken to give medical attendance to all paupers resident in his district when requested to do so by any proper authority, but even if he has not specially contracted for this, we are advised that he cannot claim any extra fee.

HOSPITAL AND DISPENSARY MANAGEMENT.

ROYAL PORTSMOUTH HOSPITAL.

A MEETING of the Committee of the Royal Portsmouth Hospital was held on April 6th, under the presidency of Sir William King, for the election of three honorary assistant physicians and three honorary assistant surgeons. These appointments are new, it having been found necessary to increase the existing staff. There were nineteen applicants for the vacancies, and the following were elected, the voting being by ballot: Honorary Assistant Physicians: Dr. John Phillips, Dr. C. C. Claremont, and Dr. W. F. McEldowney. Honorary Assistant Surgeons: Mr. C. P. Childe, Mr. T. A. M. Forde. Mr. A. B. Wright, who stood third, did not receive in the ballot the votes of a majority of those present; his name was then proposed and seconded, and he was declared duly elected.

EDINBURGH ROYAL INFIRMARY.

THE following appointments are announced: Messrs. W. Morrison Milne, M.A., M.B., C.M., and H. Douglas Wilson, M.B., Ch.B., appointed Clinical Assistants to Dr. Alexander Bruce at the Medical Waiting-room, and to Dr. C. W. Macgillivray respectively. Mr. W. J. Barclay, M.B., Ch.B., re-appointed Resident Physician to Professor Simpson for the ensuing six months.

MEDICAL NEWS.

DR. A. KINSEY-MORGAN has been elected Coroner for the County Borough of Bournemouth.

DR. JOHN RUTHERFORD SKINNER was elected Mayor of the ancient borough of Winchelsea on April 16th.

THE German Otological Society will hold its ninth annual meeting this year at Heidelberg on June 1st and 2nd.

VENEREAL DISEASES IN JERUSALEM.—The erection of a hospital for venereal diseases in Jerusalem is said to be in contemplation. The hospital will be situated at Ghaza, and will provide accommodation for 90 patients.

A CONGRESS of Polish medical men and scientists will be held at Cracow in July. In connection therewith will be a medical and scientific exhibition limited to Polish firms and such foreign firms as produce articles which are not made in Poland.

MEDICAL MAGISTRATES. — Mr. S. Stretton, M.R.C.S., of Northcliff, Kidderminster, has been appointed a Justice of the Peace of the County of Worcester. Lieutenant-Colonel S. J. Thomson, C.I.E., I.M.S., of Chatham, has received a similar appointment for the county of Kent.

VACCINATION COMPULSORY IN CONSTANTINOPLE.—Vaccination, it is announced in the *Archives Orientales de Médecine et de Chirurgie*, has been made compulsory in Constantinople. Parents neglecting to have their children vaccinated are punishable by a fine of 150 piastres.

BATHS IN NEW YORK SCHOOLS.—In all the new school buildings of New York space has been provided for the installation of a system of shower baths. Baths are now ready in two or three of the schools on the east side, where bathing facilities are most needed. Children are required to supply their own towels and soap.

THE NEW MEDICAL FACULTY OF ODESSA.—Dr. Podwysotszki, Professor of Pathology in the University of Kieff, will be the Dean of the new Faculty of Medicine of Odessa, which is to be opened in the course of the present year. The election of professors will take place in May.

A SANATORIUM AT TURIN.—The Turin Savings Bank is promoting the establishment of a sanatorium for the tuberculous poor belonging to the Commune and Province of Turin. It has assigned 150,000 lire (£6,000) towards the erection of such a sanatorium, which it is intended to build when funds sufficient to maintain 40 beds are available.

UNIVERSITY OF PADUA.—The University of Padua, which was closed not long ago on account of riotous behaviour on the part of the students, has been reopened by order of the Minister of Public Instruction. The Rector of the University has made an appeal to the students to refrain from disorderly manifestations which might lead the Government to take strong measures for their repression.

THE PREVALENCE OF VENEREAL DISEASES IN PRUSSIA.—With the object of obtaining accurate information as to the prevalence of venereal diseases in Prussia the Cultus-Minister, with the co-operation of the Medical Councils, has sent a circular to all medical practitioners asking them to state the number of patients coming to them for treatment between April 1st and 30th for gonorrhoea and its sequels, for soft sores, and for syphilis, primary, secondary, or tertiary.

THE MEDICAL CORPS OF THE UNITED STATES NAVY.—The Secretary of the United States Navy has prepared a Bill intended to attract men to the Medical Corps, in which, as in the case of our own Army Medical Corps in recent years, there are more vacancies than candidates. It is proposed to raise the rank of Assistant Surgeon to that of Junior Lieutenant instead of Ensign, as it has been ever since the Civil War. This, it is hoped, will remove the objection arising from the inferior rank which medical officers at present hold on entering the service.

A STATE SANATORIUM FOR CONSUMPTIVES IN ILLINOIS.—The Illinois State Board of Health has recommended the establishment of a State sanatorium for consumptives. The matter has been investigated by a Committee appointed by the Governor. The Illinois Society for the Prevention of Tuberculosis has also been urging plans of its own, and it is said that the Legislature is likely to appropriate 50,000 dollars (£10,000) to the purchase of land and the erection of buildings.

THE Bristol Hospital Sunday Fund has, like many other charitable collections, suffered from the war, for in spite of a larger number of churches and places of worship taking part this year, a smaller sum has been received. In 1899 there were 182 collections; this year the number has increased to 220, but this augmentation is chiefly from churches or chapels in poor districts or in neighbouring villages. The amount collected up to the present is £1,374 17s. 2d., being less by about £100 than the collection of last year. The falling off is general, but the long list which was published in the local daily papers speaks well for the universal character of the Fund.

SEASIDE CAMP FOR LONDON WORKING BOYS.—This branch of the work of the London Diocesan Council for the welfare of lads commends itself to those who have at heart the physical as well as moral welfare of the youthful denizens of this great metropolis. Much has lately been urged, on patriotic grounds, as to the desirability of military drill for schoolboys, but even more may be said from the social and sanitary points of view as to the combined good effects of discipline and fresh air in saving from "Hooliganism" the London lad, who, without resource at holiday times, is too apt to become a loafer. The Secretary of the Seaside Camp Fund is Mr. Abel Bloxam, Northumberland Chambers, Charing Cross.

BRISTOL CONVALESCENT HOME.—At a meeting of the Governors of the Jubilee Convalescent Home held on April 4th, an interesting and well-merited presentation was made by the Chairman, Mr. J. Storrs Fry, to the Honorary Secretaries, the Rev. G. Glover, D.D., and Mr. J. N. C. Pope. The former of these gentlemen was one of the prime movers in the starting of the Home in memory of Her Majesty's Jubilee, and was selected to read the address at the opening ceremony to the Queen. It may be of interest to mention that Dr. Glover is a brother of Dr. Glover, one of the direct representatives on the General Medical Council. To him was presented a cheque for £500 to make him a Life Governor of the Home, and a silver tray of antique design and engraved with a suitable inscription; while to Mr. Pope was given a silver cup. The meeting was marked by eulogistic speeches from the chairman and several gentlemen.]

THE NEW YORK STATE LEGISLATURE AND TUBERCULOSIS.—Among the Bills now before the New York State Legislature is one relating to the establishment of hospitals for pulmonary tuberculosis. This is a section of the general city law, and changes the law by inserting "cities of the first class" instead of "a municipal corporation" having the right to establish such hospitals without the corporate limits. The Legislature has also before it a Bill by which it is proposed "to establish a State hospital in the Adirondacks or in some other suitable locality for the treatment of pulmonary tuberculosis." The Bill proposes to appropriate 200,000 dollars for the purpose.

PRESENTATION.—On April 5th, under the chairmanship of Mr. William Phillips, Chief Constable of the County, a testimonial, consisting of an address, a brougham, and a purse of gold amounting to £120, contributed by his numerous friends and patients, was presented to Surgeon-Captain William Howell Lloyd, M.R.C.S.Eng., L.S.A.Lond., of Llandilo, Medical Officer of Health and Deputy Coroner for the Eastern Division of the county of Carmarthen, in commemoration of his silver wedding. The presentation was made by the Hon. Gwenllian Rice, the youngest daughter of Lord Dynevor. In the evening a complimentary dinner, to which a goodly number sat down, followed, presided over by the Vicar, the Rev. Lewis Price. Numerous speeches were delivered during the course of the presentation and after the dinner, all bearing testimony to the high appreciation of Dr. and Mrs. Lloyd, and Dr. Lloyd made suitable replies.

AN ITALIAN PHYSICIAN'S CHARITABLE LEGACIES.—The late Professor Lorenzo Bruno, whose death was recently announced in the *BRITISH MEDICAL JOURNAL*, has bequeathed more than 160,000 lire (£6,400) for medical charities of one kind or another in Italy. Forty thousand lire are to be employed in the foundation of two Alpine colonies; the hospital of St. John, Turin, gets a like sum, together with the Professor's surgical instruments. Twenty thousand lire are bequeathed to the Mutual Society of Piedmontese Physicians and Surgeons; 20,000 for the benefit of poor members of the profession in Perugia; 20,000 to the Piedmontese Marine Hospital, with several smaller legacies to other medical associations and institutions. To the Academy of Medicine of Turin Professor Bruno leaves his library, and 2,000 lire for its arrangement.

THE ADIRONDACKS COTTAGE SANITARIUM.—This well-known sanitarium has recently issued its fifteenth annual report. During the year, 254 patients were treated, 46 entirely free of cost. The free cases are provided for by a free bed fund and by charitable individuals, and the paying patients are able to enjoy the benefits of the institution at comparatively little personal expense, through the liberality of contributors to the sanitarium. Not only have the running expenses of the institution been fully met by the contributions of its friends, but repairs and improvements have been carried out and paid for. A new stone cottage will be erected and equipped by the liberality of one lady, and a small skating rink has been opened for the patients. The increase of applicants makes the establishment of a reception hospital in Saranac Lake village a necessity. As invalids in an advanced stage of consumption, and often without funds, come to the village in the hope of obtaining admission to the sanitarium, it is satisfactory to hear that the usefulness of the Adirondacks Sanitarium is in no danger of diminution from want of support. Dr. Trudeau, who is the President and physician in charge, is to be congratulated on another year of prosperity for the institution with which his name is so intimately associated.

SOCIETY FOR RELIEF OF WIDOWS AND ORPHANS OF MEDICAL MEN.—A quarterly Court of the directors of this Society was held on Wednesday, April 11th, Dr. Church, treasurer, in the chair. Three new members were elected, and the deaths of six reported. Applications for grants were read from 48 widows, 8 orphans, and 6 recipients from the Copeland Fund, and it was resolved to distribute £1,173 10s. among them at the next Court. A first application for a grant was made from a widow, and a grant at the rate of £50 per annum was given her. A special grant of 50 guineas was made to a widow under By-law 70. Grants were made to two orphans of £25 each towards their self-maintenance. The report of 1899 was read. The following gentlemen were nominated for election

at the annual general meeting to fill the vacancies among the officers of the Society:—**President:** Mr. Christopher Heath. **Vice-Presidents:** Mr. W. H. Bennett and Mr. Manley Sims. **Directors:** Mr. Borlase Hicks, Mr. Simmonds, Mr. L. Read, Mr. Willis, Mr. Milburn, Dr. Buzzard, and Dr. Morison. It was decided to hold the annual general meeting on Wednesday, May 30th, at 5 P.M.

MEDICAL VACANCIES.

The following vacancies are announced:

- BATH ROYAL UNITED HOSPITAL.**—Resident Medical Officer. Salary, £100 per annum, with board, lodging, and washing. Applications to the Secretary by April 24th.
- BIRKENHEAD AND WIRRAL CHILDREN'S HOSPITAL,** Woodchurch Road, Birkenhead.—House-Surgeon. Salary, £75 per annum, with board, residence, and laundry. Applications to the Honorary Secretary by April 25th.
- BIRMINGHAM GENERAL DISPENSARY.**—Resident Surgeon, unmarried. Salary, £150 per annum, with allowance of £30 per annum for cab hire and furnished rooms, etc. Applications to the Secretary by April 23rd.
- BIRMINGHAM GENERAL HOSPITAL.**—Assistant House-Physician. Appointment for six months. No salary, but residence, board, and washing provided. Applications to the House Governor by April 28th.
- BIRMINGHAM AND MIDLAND EAR AND THROAT HOSPITAL,** Edmund Street.—House-Surgeon. Salary at the rate of £60 per annum, with board, lodging, and washing. Applications to the Secretary by April 25th.
- BIRMINGHAM WORKHOUSE INFIRMARY.**—Assistant Resident Medical Officer. Salary, £100 per annum, with furnished apartments, etc. Applications on forms provided to be sent to the Clerk to the Guardians, Parish Offices, Edmund Street, Birmingham, by April 23rd.
- BOLTON INFIRMARY AND DISPENSARY.**—Junior House-Surgeon. Salary, £80 per annum, with apartments, board, and attendance. Applications to Mr. Peter Kevan, Honorary Secretary, 12, Acrefield, Bolton, by April 24th.
- CAMBERWELL: PARISH OF ST. GILES.**—Assistant Medical Officer for the Workhouse, between 21 and 30 years of age. Salary, £120 per annum, with furnished apartments and allowance. Applications on forms provided to be sent to the Clerk to the Guardians, 29, Peckham Road, S.E.
- CORWEN UNION.**—Medical Officer and Public Vaccinator for the Western District. Salary, £20 per annum, with fees. Knowledge of Welsh necessary. Applications to the Clerk, Union Offices, Corwen, by April 26th.
- CUMBERLAND AND WESTMORLAND ASYLUM,** Garlands, Carlisle.—Junior Assistant Medical Officer. Salary, £100 per annum, with board and residence. Applications to the Medical Superintendent.
- DENBIGHSHIRE INFIRMARY.**—House-Surgeon. Salary to commence, £80 per annum, with board, residence, and washing. Applications to the Secretary, by May 10th.
- DENTAL HOSPITAL OF LONDON AND LONDON SCHOOL OF DENTAL SURGERY,** Leicester Square.—Demonstrator at the Hospital. Honorarium, £50 per annum. Applications to the Dean by April 23rd.
- DEWSBURY AND DISTRICT GENERAL INFIRMARY.**—House-Surgeon. Salary commencing at £80 per annum, with board and residence. Applications, endorsed "House-Surgeon," to the Secretary by May 1st.
- DUNDEE COMBINATION: EAST POORHOUSE AND HOSPITAL.**—Resident Medical Officer. Salary, £80 per annum, with board and furnished apartments. Applications to the Clerk of the Council, Parish Council Chambers, Dundee, by April 23rd.
- EXETER: ROYAL DEVON AND EXETER HOSPITAL.**—(1) Assistant House-Surgeon. Salary, £40 per annum. (2) Junior Assistant House-Surgeon: appointment for six months, but eligible for election as Senior should vacancy occur; no salary. Board, lodging, and washing provided in each case. Applications to the House-Surgeon.
- FARRINGTON GENERAL DISPENSARY,** 17, Bartlett's Buildings, E.C.—Resident Medical Officer. Salary, £120 per annum, with apartments, coals, and gas. Applications to the Honorary Secretary.
- GLAMORGAN COUNTY ASYLUM,** Bridgend.—Junior Assistant Medical Officer, unmarried, and Applications to the Medical Superintendent by May 3rd.
- GLASGOW SAMARITAN HOSPITAL FOR WOMEN.**—House-Surgeon (female). Applications to the Honorary Secretary, 89, West Regent Street, Glasgow, by April 25th.
- GLASGOW UNIVERSITY.**—Examiner for Degrees in Medicine, with special qualifications to examine in Practice of Medicine (Systematic and Clinical). Salary, £50 per annum. Applications to the Secretary of the Glasgow University Court, 91, West Regent Street, Glasgow, by May 25th.
- GREAT YARMOUTH HOSPITAL.**—House-Surgeon. Salary, £90 per annum, with board, lodging, and washing, and £10 for lectures to probationers. Applications to Mr. R. F. E. Ferrier, Honorary Secretary, 33, Hall Plain, Great Yarmouth, by April 25th.
- GUILDFORD: ROYAL SURREY COUNTY HOSPITAL.**—Assistant House-Surgeon. Salary, £50 per annum, with board, residence, and laundry. Applications to the Honorary Secretary.
- HALIFAX ROYAL INFIRMARY.**—Third House-Surgeon, unmarried. Salary, £50 per annum, with residence, board, and washing. Applications to the Secretary by April 25th.
- HALIFAX UNION WORKHOUSE,** St. Luke's Hospital.—Assistant Medical Officer for the Hospital and Workhouse, unmarried, not over 35 years of age. Salary, £160 per annum, with midday meal provided. Applications on forms provided, and endorsed "Assistant Medical Officer," to the Clerk to the Guardians, Union Offices, Halifax, by April 30th.
- HOSPITAL FOR WOMEN,** Soho Square, W.—House-Physician. Appointment for six months. Salary, £30. Applications to the Secretary by April 30th.
- INFIRMARY FOR CONSUMPTION,** Margaret Street, W.—Pathologist. No salary. Applications to the Secretary by April 23rd.
- KIDDERMINSTER INFIRMARY AND CHILDREN'S HOSPITAL.**—House-Surgeon, unmarried. Salary, £140, increasing to £170 per annum, with rooms and attendance. Applications to the Secretary before April 23rd.
- KING'S COLLEGE,** London.—(1) Professorship of Materia Medica and Pharmacology. (2) Obstetric Registrar and Tutor at King's College Hospital. Applications to the Secretary by April 23rd.
- LANARK COUNTY ASYLUM,** Hartwood, Glasgow.—Third Assistant Medical Officer. Salary, £120, with fees, board, washing, and residence. Applications to the Medical Superintendent.
- LEEDS: GENERAL INFIRMARY.**—(1) Resident Medical Officer. Salary, £100 per annum. (2) Two House-Surgeons: appointments for twelve months. (3) Two House-Physicians: appointments for six months. Board, lodging, and washing provided in each case. Applications to the Secretary to the Faculty for the first by April 23rd, and for the four latter by April 25th.
- LEEDS PUBLIC DISPENSARY.**—Junior Resident Medical Officer. Salary, £35 per annum. Applications to the Secretary of the Faculty.
- LIVERPOOL, CITY OF.**—Assistant Resident Medical Officer at the Infectious Diseases Hospital, unmarried, and not exceeding 26 years of age. Salary, £80 per annum. Applications, endorsed "Assistant Resident Medical Officer," to be addressed to the Chairman of the Port and Sanitary and Hospitals Committee, and sent under cover to the Town Clerk, Municipal Offices, Liverpool, by April 23rd.
- LIVERPOOL DISPENSARIES.**—Assistant Surgeon, unmarried. Salary, £100 per annum, with board and apartments. Applications to the Secretary, 34, Woodfields, Liverpool.
- LIVERPOOL: ROYAL SOUTHERN HOSPITAL.**—Junior House-Surgeon. Salary, 60 guineas. Applications to the Chairman of the Medical Board before April 25th.

LIVERPOOL STANLEY HOSPITAL.—Junior House-Surgeon. Salary, £70 per annum, with board, lodging, and washing. Applications, endorsed "House-Surgeon," to be sent to the Honorary Secretary of the Medical Board by April 27th.

LONDON COUNTY ASYLUM, Horton.—Medical Superintendent, not over 40 years of age. Salary, £1,000 per annum, with unfurnished house, etc. Applications, on forms provided, to be sent to the Clerk of the Asylums Committee, 66, Waterloo Place, London, S.W., by May 1st.

LONDON THROAT HOSPITAL, 204, Great Portland Street, W.—(1) Surgeon. (2) Assistant Surgeon. Applications to the Honorary Secretary of the Medical Committee by April 30th.

MANCHESTER CORPORATION.—Junior Assistant to the Medical Officer of Health. Salary, £200 per annum. Applications, endorsed "Appointment of Medical Assistant," to be sent to the Chairman of the Sanitary Committee by April 21st.

MILLER HOSPITAL AND ROYAL KENT DISPENSARY, Greenwich Road, S.E.—Junior Resident Medical Officer. Appointment for six months, with prospect of re-election as Senior. Salary, £40 per annum, with board, attendance, and washing. Applications to the Secretary by April 28th.

NATION HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Two Assistant Physicians. Applications to the Secretary by April 30th.

NORTHAMPTON GENERAL INFIRMARY.—Assistant to the House-Surgeon. Appointment for six months. Board, lodging, and washing provided, and honorarium of £25. Applications to the Secretary.

PADDINGTON GREEN CHILDREN'S HOSPITAL, W.—House-Surgeon. Appointment for six months. Salary at the rate of 50 guineas per annum, with board and residence. Applications to the Secretary by April 23rd.

PADDINGTON INFIRMARY.—Resident Clinical Assistant and Second Assistant to the Medical Superintendent. Appointment for six months. Board, washing, and residence provided, and honorarium at the rate of £50 per annum. Applications to Dr. M. F. Squire at the Infirmary, 285, Harrow Road, W., by April 23rd.

PAISLEY INFECTIOUS DISEASES HOSPITAL.—Resident Physician. Salary, £50 per annum, with board, washing, and attendance. Applications to the Clerk to the Local Authority, Municipal Buildings, Paisley, by April 30th.

POPLAR HOSPITAL FOR ACCIDENTS, E.—Assistant House-Surgeon. Appointment for six months, but eligible for re-election. Salary at the rate of £65 per annum, with board and residence. Applications to the House-Governor by May 12th.

RIPON DISPENSARY AND COTTAGE HOSPITAL.—Resident House-Surgeon and Dispenser, unmarried. Salary for first year £70, with board and lodging. Applications to the Honorary Secretary.

ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.—(1) Senior Resident Medical Officer. Salary, £101 per annum, with board, residence, and washing. (2) House-Physician. (3) Resident Medical Officer. (4) Casualty House-Surgeon. Appointments for six months, no salary, but board, etc., provided for the three latter. Applications to the Secretary by April 23rd.

ROYAL HOSPITAL FOR CHILDREN AND WOMEN, Waterloo Bridge Road, S.E.—Two Assistant Physicians, must be F.R.C.S. Eng. Applications to the Secretary by April 23rd.

ROYAL LONDON OPHTHALMIC HOSPITAL, City Road, E.C.—Three Assistant Surgeons, must be F.R.C.S. Eng. Applications to the Secretary by April 30th.

SOARBOROUGH HOSPITAL AND DISPENSARY.—Senior House-Surgeon. Salary, £80 per annum, with residence, board, and washing. Applications to the Honorary Secretary by April 24th.

SHOREDITCH: PARISH OF ST. LEONARDS.—Second Assistant Medical Officer for the Infirmary. Appointment for six months. Salary, £80 per annum, with rations, washing, and furnished apartments. Applications, upon forms provided, to be sent to the Clerk to the Guardians, 213, Kingsland Road, N.E., by April 23rd.

SHEWSEBURY: COUNTY ASYLUM.—Junior Assistant Medical Officer. Salary to commence at £130 per annum, rising to £150, with board, lodging, and washing. Applications to the Medical Superintendent by April 28th.

SHEWSEBURY: SALOP INFIRMARY.—Assistant House-Surgeon. Appointment for six months, but capable of renewal. Salary at the rate of £40 per annum, with board and washing. Applications to the Secretary.

STAFFORDSHIRE GENERAL INFIRMARY, Stafford.—(1) House-Surgeon. Salary, £120 per annum. (2) Assistant House-Surgeon. Salary, £80 per annum. Board, lodging, and washing provided in each case. Applications to the Secretary by May 3rd.

SUNDELAND INFIRMARY.—House-Surgeon. Salary, £80 per annum, increasing to £100, with board and residence. Applications to the Chairman of the Medical Board by April 28th.

SWANSEA GENERAL AND EYE HOSPITAL.—House-Surgeon. Salary, £50 per annum, with board, apartments, washing, and attendance. Applications to the Secretary by April 30th.

TAUNTON AND SOMERSET HOSPITAL.—Assistant House-Surgeon. Appointment for six months, with board, attendance, and laundry. Applications to the Hon. Secretary, Bank Buildings, Taunton.

TEIGNMOUTH HOSPITAL.—House-Surgeon. Salary, £50 per annum, with board, lodging, washing, and allowance. Applications to the House Committee by April 23rd.

UNIVERSITY COLLEGE, London.—(1) Professorship of Medical Jurisprudence. (2) Surgical Registrar in the Hospital. (3) Resident Medical Officer in the Hospital. Applications to the Secretary for the first by May 14th, and for the two latter by May 7th.

WOLVOLE RURAL DISTRICT COUNCIL.—Medical Officer of Health. Salary, £20 per annum. Applications to the Clerk of the Council, Union Offices, Corwen, by April 26th.

WESTERN DISPENSARY, Rochester Row, S.W.—Resident Medical Officer. Salary, 100 guineas per annum, with residence, coals, gas, and attendance. Applications to the Secretary.

WEST HAM.—Superintendent of the Borough Asylum. Salary, £800 per annum, with unfurnished house, light, washing, and garden produce. Applications, on forms provided, to be sent to the Clerk, Town Hall, West Ham, E., by April 28th.

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.

YORK LUNATIC ASYLUM.—Assistant Resident Medical Officer. Salary, £110 per annum, with board, washing, and attendance. Applications to be addressed to the Committee and sent under cover to the Secretary by April 24th.

MEDICAL APPOINTMENTS.

ANDERSON, John, M.D., appointed Health Officer for the Shire of Heytesbury, Victoria.

YRES, W. M.D., appointed Medical Officer for the Second Kingswinford District of the Stourbridge Union, vice A. Conway, M.R.C.S., L.R.C.P., resigned.

BRAND, G. H., L.R.C.P., L.M. (Irel.), L.S.A. (Lond.), appointed Honorary Medical Officer to the Northampton County Association for the Blind.

DARBY, W. J., L.R.C.S.I., appointed Surgeon of H.M. Prison, Auckland, New Zealand.

EMERY, W. D.E., M.D., B.Sc. (Lond.), M.R.C.S., appointed Lecturer on Hygiene to the Birmingham and Midland Institute.

FERRIER, David, M.B., Ch.B. (Edin.), appointed Resident Physician to the Edinburgh Royal Infirmary.

FISHER, T. Carson, M.D., appointed Government Medical Officer and Vaccinator at Bowral, New South Wales.

FOSTER, M. B., M.R.C.S., L.R.C.P. (Lond.), appointed Medical Officer for the First District of the Ware Union, vice H. F. Land, L.R.C.P., L.R.C.S. (Edin.), resigned.

GOW, W. B., M.D., appointed Medical Superintendent of the Lunatic Asylum, Wellington, N.Z.

HAYES, A. Herbert, M.R.C.S., L.R.C.P., appointed Medical Officer to the Casualty Department at the East London Hospital for Children, Shadwell, E., vice C. Frank Steele, M.R.C.S., L.R.C.P., resigned.

HOLDEN, H. C., L.S.A., appointed Assistant Medical Officer to the Woolwich Union Infirmary, vice W. Cowie, M.B. (Aberd.), resigned.

KINGSTON, H. P., M.B. (Dub.), appointed Medical Officer for the Alsager and Odd Rode District of the Congleton Union.

KINSLEY-MORGAN, Augustus, M.D. (Durh.), M.R.C.S. Eng., appointed Coroner for the County Borough of Bournemouth.

KNIGHT, H., M.R.C.S., L.R.C.P. (Lond.), appointed Medical Officer for the Third District of the South Stoneham Union, vice G. H. Weston, M.B. (Camb.), D.P.H., resigned.

LORD, S. T., M.R.C.S., L.R.C.P., appointed Medical Officer of Health to the Castleton Urban District Council, vice W. H. Sharpley, L.R.C.P. (Lond.), M.R.C.S. Eng.

MACMILLAN, J. G., M.B., appointed Health Officer for the Shire of Wimmera, Victoria.

MARTIN, J. Middleton, M.B., D.P.H. (Camb.), appointed Medical Officer of Health to the Stroud Rural District Council, vice Thomas Partridge, M.R.C.S., resigned.

PEARSON, Sydney Vere, B.A., B.C. (Camb.), appointed House-Surgeon to the East London Hospital for Children, Shadwell, E., vice A. Herbert Hayes, M.R.C.S., L.R.C.P.

PHILLIPS, James, M.R.C.S. Eng., L.R.C.P. (Lond.), appointed Senior House-Surgeon to the Bradford Royal Infirmary.

SCHLINK, R. H., M.D., appointed Health Officer for the Shire of Wodonga, Victoria.

SILLS, C. H., M.R.C.S., L.R.C.P., appointed Medical Officer for the First District of the East Ashford Union, vice A. M. Watts, M.R.C.S., L.R.C.P., resigned.

SIMONS, C. N., L.R.C.S.I., L.S.A., appointed Government Medical Officer and Vaccinator at Campbelltown, New South Wales.

TITLEY, F. L., M.R.C.S., L.R.C.P., appointed Medical Officer for the Swinefleet District of the Goole Union, vice G. Anderson, M.B., resigned.

WATVE, Gopal G., M.D., appointed Assistant Darbar Surgeon to the Albert Edward Hospital, Kolhapur.

WASSILL, Joseph, M.B., appointed Assistant Health Officer at Brisbane.

WOLFHAGEN, J. R., M.B., C.M. (Edin.), appointed Honorary Medical Officer to the Hobart General Hospital.

DIARY FOR NEXT WEEK.

MONDAY.

Medical Graduates' College and Polyclinic, 22, Chenies Street, W.C. 8.30 P.M.—Mr. T. Bryant: The Relative Frequency of Cysts of the Breast: their Diagnosis and Treatment. Dr. Campbell Pope: Twenty-three Years' Death Certificates in General Practice.

Medical Society of London.

TUESDAY.

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

WEDNESDAY.

Medical Graduates' College and Polyclinic, 22, Chenies Street, W.C. 5 P.M.—Professor J. Dreschfeld: Clinical Lecture.

THURSDAY.

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

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

FRIDAY.

Clinical Society of London. 8.30 P.M.—Clinical evening. The following cases will be shown:—Dr. Norman Dalton: A case of Aortic Regurgitant Murmur heard in the Pulmonary Area. Dr. Habershon: A case of Tuberculous Gland in the Anterior Mediastinum, with a Radiograph. Dr. Percy Kidd: A case of Lymphatic Leucocythemia. Dr. Harry Campbell: A case allied to Beck-linghausen's Disease. Mr. Charles Symonds: A Patient after complete removal of the Clavicle. Sir Hugh Beevor: A case of Diffuse Lipomata of the Limbs. Dr. Norman Dalton: A Boy with (apparently) Tuberculous Mediastinal Glands pressing on the right lung. Mr. Lunn: A case of Osseous Tumour of the Arm, with a skiagraph. Dr. Thomas D. Savill: A case of Macular Leprosy improving under chaulmoogra oil. Patients will be in attendance at 8 P.M.

Medical Graduates' College and Polyclinic, 22, Chenies Street, W.C. 4 P.M.—Dr. Dundas Grant: Consultation. (Ear and Throat.)

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.

KERR.—On April 17th, at London Road, Sheffield, the wife of W. S. Kerr, M.B., of a son.

LOBBAIN-SMITH.—On April 11th, at Westbourne, Windsor Avenue, Belfast, the wife of J. Lorrain-Smith, M.D., of a daughter.

MARRIAGES.

BENHAM-ROUSSIN.—On April 14th, at Christ Church, New Road, Brighton, by the Rev. T. A. Gorton, Charles Henry Benham, M.D., of 96, Sackville Road, Hove, eldest son of Henry James Benham, M.D., of 40, Rue Boileau, Autenil, Paris, to Alexandra, eldest daughter of the late Louis Roussin, of Ledbrooke Grove, London.

BEVANT-FRY.—On April 18th, at St. Luke's, West Norwood, by the Rev. B. S. Lloyd, Vicar of St. Martin's, Lower Edmonton, assisted by the Rev. H. T. Hughes, Vicar of St. Luke's, West Norwood, John Henry Bryant, M.D., B.S., M.R.C.P. (Lond.), Assistant Physician to Guy's Hospital, eldest son of the late William Mead Bryant, of Ilminster, Somerset, to Stella Beatrice, sixth daughter of Richard Henry Fry, Gregyn Villa, Baulah Hill, Norwood.

JAGO-AITKEN.—At Paul Parish Church, on April 18th, by the Rev. E. W. Aitken, assisted by the Rev. E. J. Martyn, Rector of St. Buryan, Ashby Tilsed Jago, M.R.C.S. Eng., L.R.C.P. (Lond.), youngest son of Edwin Jago, Paymaster-in-Chief, R.N., to Mabel Georgina, the third daughter of the Rev. E. W. Aitken, Vicar of Paul.

WOODHEAD-WILLIAMS.—On Wednesday, April 11th, at Milton Congregational Church, Huddersfield, by the Rev. C. Silvester Horne, M.A., cousin of the bride, assisted by the Rev. Carey Bonner and the Rev. J. S. Drummond, Herbert Miall Woodhead, M.B., of Sale, Cheshire, third son of Joseph Woodhead, Longdenholme, Huddersfield, to Mabel Cecilia, eldest daughter of J. E. Williams, Rose Hill, Huddersfield.

DEATHS.

LAWTON.—On April 1st, at 18, Hamilton Square, Birkenhead, aged 80 years, Ruth, dearly beloved wife of William Lawton, M.B.

RYAN.—On April 15th, Marion Weston, wife of P. H. Ryan, M.A., M.D., 1, Lynvale Villas, Lyncombe, Bath, daughter of J. Murray Lindsay, M.D., F.R.C.P. (Edin.).

UNDERWOOD.—On April 10th, at 24, Wellington Square, Hastings, John Underwood, M.D. (Edin. 1841), M.R.C.S. Eng. (1842), L.S.A. (1841), in his 84th 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.
CHAMBER CROSS. *Attendances.*—Medical and Surgical, daily, 1; Women, W., 1; S. 9.30; Skin, M. Th., 1; Tu., 8.45; Throat and Ear, F., 2. *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.
CITY ORTHOPEDIC. *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. Tu., 2.30; Throat and Ear, Tu. F., 2.30; Skin, W., 2.30; Dental, W., 2.30. *Operations.*—M. W. Th. F., 2.
GUY'S. *Attendances.*—Medical, I-p., M. Tu. Th. F., 1.30; o.p., M. W. Th. F., 12; Surgical, I-p., daily, 1.30; o.p., M. W. Th. S., 12; Obstetric, I-p., M. Tu. Th. F., 1.30; o.p., Th. S., 12; Eye, I-p., M. Tu. Th. F., 1.30; o.p., M. Tu. F., 12; o.p., Ear, Tu., 12; Skin, Tu., 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. Tu., 2; Th., 9.30.
KING'S COLLEGE. *Attendances.*—Medical and Surgical, daily, 2; Obstetric, daily, 2; o.p., daily, 1.30; Eye, M. W. Th., 1.30; Ear, Tu., 2.30; Throat, M., 1.30; F., 2; Dental, M. Th., 10; Skin, M., 10. *Operations.*—W. Th. F., 2.
LONDON. *Attendances.*—Medical, daily, 2; o.p., 1.30; Surgical, daily, 1.30 and 2; Obstetric, M. Tu. Th. F., 2; Th., 3; S., 3; Eye, Tu. S., 9; Ear, W., 9; Skin, Th., 9; Dental, M. Tu. F., 9. *Operations.*—I-p., 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., 1.30; o.p., M., 9; W., 1.30; Eye, Tu. F., 9; Ear and Throat, Tu. F., 9; Skin, Tu., 4; Th., 9.30; Dental, M. F., 9.30; W., 9. *Operations.*—Daily, 1.30.
NATIONAL ORTHOPEDIC. *Attendances.*—M. Tu. Th. F., 2. *Operations.*—W., 10.
NEW HOSPITAL FOR WOMEN. *Attendances.*—Daily, 2; Ophthalmic, W. S., 9.30. *Operations.*—Tu. F., 9; Th., 2.
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.*—Th., 2.30.
ROYAL EAR, Frith Street. *Attendances.*—M. S., 3; Tu. F., 9; W., 2.30; Th., 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., 9.30; Throat, Nose, and Ear, W., 9.30. *Operations.*—W. S., 2; (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., W. S., 9; Eye, M. Tu. W. Th. F., 2; o.p., M. Th., 9; S., 2.30; Ear, 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 Ovariotomy, 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. 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., F., 1.45; o.p., M. Th., 1; Ear, Th., 9; Throat, Th., 8; Skin, M. Th., 9; Dental, W. S., 9. *Electro-Therapeutics.*—W. S., 10; Children's Medical, M. Th., 9. *Operations.*—M., 2.40; 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.*—I-p., Medical and Surgical, M. Tu. Th. F., 2; o.p., daily, 1.30; Obstetric, Tu., 1.30; Th., 2; W. S., 9; Eye, M., 2; Th., 2; Throat, M., 2; Skin, W., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu., 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, ex. 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, 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, delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 422, 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, 422, 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 *Asiaticity, 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.]

FIBROID would be grateful for any information as to the present position in gynaecology of the electrical treatment of fibromyoma of the uterus, and also for reference to literature on the subject.

M.D. wishes to know, from those having experience, the best way to proceed in transferring one practice and taking on another, in order to save an intermediate residence, where an introduction of six months is entertained.

DR. J. GUEST GORNALL (Letchford, Warrington) asks what measures have been found to be of use in poisoning by potassium cyanide or hydrocyanic acid. He is informed that subcutaneous injections of hydroxyl (2 per cent.) have been used with a view to oxidizing it into cyanate. He wishes to know what quantity of such a solution can be safely used, or to be referred to any authorities on the subject.

FEES PAID TO DISTRICT SURGEON.

A CORRESPONDENT desires to know what are the usual fees paid to the district surgeon by the Hearts of Oak Friendly Society.

. They seldom, if ever, exceed 4s. a member per annum.

SALICYL COMPOUNDS IN RHEUMATISM.

C. J. T. writes: In Osler's *Principles and Practice of Medicine*, second edition, p. 299, referring to salicyl compounds in acute rheumatism, occurs the following: "R. P. Howard's elaborate analysis shows that they do not influence the duration of the disease." Can anyone say where the account of Howard's work is recorded?

PROPOSED ANNUAL CONTRACT.

"MEMBER" asks if it is legal to attend a patient for a fixed charge each year and what this charge ought to be.

. There can be no question as to its legality. In order to recover the charge in a court of law the arrangement would have to be in the form of a contract between the patient and doctor, which must fulfil the conditions required by the law relating to contract, that is, in some cases it might require to be in writing. As to the particular charge to be made to a patient for an annual contract to attend him, this must depend entirely on the social position of the patient and the labour likely to be thrown on the doctor.

TREATMENT AND PREVENTION OF FLAT-FOOT.

M.R.C.S. writes: My daughter, a delicate girl of 12 years, has somewhat suddenly developed complete collapse of both arches, following the use of high heels and pointed toes, worn without my knowledge for a few months.

I have now ordered her heelless shoes with Jenner's patent spring to support the arch, and square toes. I should like to know if support of this kind is desirable or not. Should the child be allowed to walk? What exercises, if any, should she practise? Is the deformity likely to persist for life? Should she be allowed to walk down a steep hill near her home? I fear the effect will be the same as a high heel.

I should be much obliged if any experienced reader would advise me on these points, particularly as to amount of walking exercise.

ATLAS OF ANATOMY.

D. desires to be recommended an atlas of human anatomy of moderate price, to assist one who is unable to attend a dissecting room or museum in reading up anatomy.

. Good atlases are never very cheap. The following may be mentioned: *An Atlas of Human Anatomy*, by R. J. Godlee, 1880, £4 14s. 6d.; *Atlas of Human Anatomy and Physiology*, by W. Turner and W. Goodsir, 1890, £1 5s.; *Dissections Illustrated*, by C. G. Brodie, in 4 parts (London: Whittaker and Co. 1892-5, £1 18s. 6d.); *Anatomischer Atlas*, by Dr. C. Toldt (Vienna and Leipzig: Urban and Schwarzenberg). The last-named work is comparatively inexpensive, and though only a certain number of the figures are of the full natural size, the others are adequate.

INCOME TAX.

W.H.R. writes: (1) When the Government in paying, say, a civil surgeon's salary, deducts income tax off it, and the civil surgeon's total income for the twelve months (April to April) is not over £160, is it customary to apply for repayment of the amount charged?

(2) Has a person's income to be £160 or over for three years before he is liable to the tax?

(3) Would anything in the way of board or lodging, or partial board or lodging, have to be reckoned as salary or income when the engagement requires you to be on the spot (indoor)?

. These questions have been referred to the Income Tax Repayment Agency, 6, Chichester Road, Paddington, W., and the following replies have been received: (1) W.H.R. is certainly entitled to a refund of the whole income tax deducted, and the agency is prepared to assist him in obtaining it. (2) A person is liable to tax if his first year's income is over £160, or if the average of his first two or three years' income is over £160. With a second or third year's income over £160 he would not be liable if 'his average did not exceed £160.' With a public appointment, as average is not taken into account, a person becomes liable as soon as his income exceeds £160. (3) Nothing in the way of board and lodging is to be reckoned as salary or income, although money allowance in lieu thereof is assessable.