

## MEN AND HORSES PARTIALLY INCAPACITATED BY THE BITES OF SIMULIUM (SAND FLY) IN A HAMPSHIRE WOOD.

By JAMES CANTLIE, M.B., F.R.C.S.,  
Surgeon to the Seamen's Hospital Society, Victoria and Albert Dock  
Hospital.

ON Saturday, April 14th, 1900, whilst some 200 men of the London Scottish Volunteers were engaged in manoeuvres in woods about six miles to the westward of Winchester, about one-third of the force engaged were severely bitten by "flies." The insects attacked the bare knees of the men. Little or no sensation was caused, either when they alighted on the skin or whilst they bit; but on being brushed off a small red spot was observable, around which speedily developed a circumscribed ecchymosis. In many instances only one or two bites occurred, but in the majority there were from twelve to thirty bites on each knee.

On the evening of April 14th—that is, about four hours after being bitten—one of the men of the corps felt cold and shivery and then got very hot, and noticed that the skin of the knees was becoming puffy and painful. Being a medical student he happened to have a thermometer with him, and on taking his temperature he found it 102.5° F. This was but the forerunner of several dozens of cases, for within twenty-four hours a considerable number of those bitten presented the following signs and symptoms: Fever from 100 to 102.5° F.; shivering, and waves of heat and sweating; pain and stiffness round the knees; and oedema extending from half way down the thighs to the ankles. The oedema was excessive, especially over the legs below the garter, and therefore below the exposed and bitten surface. In several, erythema extended from the middle of the thighs to below the knee, and in a few the groin glands were swollen and tender. Even in those who had been bitten by one or two insects only the feeling of feverishness and local pain and oedema were distinct. In most instances hot boracic fomentations allayed the erythema and soothed the pain, and as a rule in thirty-six hours the acute symptoms disappeared; but in a few cases the limbs were so injured that a week passed without the man being able to get about as usual. The horses with the troops also suffered severely, especially along the abdomen and about the genitals. They were very restless during the afternoon of April 14th, and on the following day the parts were swollen considerably and tender to the touch.

The people about Winchester and the ostlers in the stables were totally unacquainted with this pest and could give no explanation of the circumstance. The insect was somewhat smaller than a house fly, presenting a blackish head, thorax, and abdomen on the upper surface, but striped black and white along the under surface of the abdomen. The wings appeared white and transparent. As the condition was so unusual I sent specimens to Professor Nuttall at Cambridge, and he replies as follows:

The flies are a species of *Simulium*, vulgarly called "sandflies," and known to be a great pest at times. Personally I have suffered intensely from a similar species in Canada; such flies are very widely distributed and have been known to actually kill cattle when present in great numbers, as is the case in Hungary, where the *Columbaczermücke* occurs. In the United States the dreaded "southern buffalo gnat" (*Simulium pecuarium* Riley) occurs, and causes much suffering. Protection is afforded against their attacks by means of smoke or tar preparations, which repel the insects through their odour. Unless you wish the specimens returned I shall keep them here.

I have deemed this attack by insects as sufficiently important to be placed permanently on record, and should be glad to hear of similar experiences. There were two medical men present with the volunteers besides myself, and a number of medical students, all of whom can bear testimony to this report, several of them unfortunately from personal experience.

**PRESENTATION.**—At the men's mess room at the New Cross Station of the London, Brighton, and South Coast Railway the members of the ambulance class presented a gold-mounted umbrella to Dr. Carvell bearing the following inscription: "St. J.A.B. Presented to Dr. J. M. Carvell by the members of the New Cross and Willow Walk division." The presentation was made by Mr. E. W. Trangmar, C.E., the superintendent of the division.

## MEMORANDA:

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

### AN OBSTINATE CASE OF NEURASTHENIC INSOMNIA.

In a case of neurasthenia, when we cannot command the Weir-Mitchell treatment in its entirety, and when all probable contributing causes have been removed—or the patient removed from their influence—after constipation, insomnia becomes the next fortress to be attacked.

A perusal of Professor Clifford Allbutt's exquisitely finished picture of neurasthenia, in his *System of Medicine*, vol. viii, suggests that a recent experience in the attack on insomnia may be worthy of record.

The patient is a married woman, aged 26, with two children, aged respectively 3 years and 10 months. Up to the time of her marriage she had been worked very hard as a schoolmistress. She never in her recollection had been a good sleeper, and since the birth of her first child had not averaged more than three or four hours' sleep in twenty-four hours. For the past few months, as her infant was very cross, she had had only "cat's sleep," and when my services were requested she appeared to be on the verge of insanity.

Constipation was an old trouble. 3j of castor oil, with 3j of "terps" added to warm it up, produced no effect, neither did 3ij of Epsom salts, with ext. cascara 3ij, etc., administered in twenty-four hours; 5 grs. of calomel might as well have been sugar, whilst 3 drops of croton oil only acted slightly after an interval of twelve hours. However, the constipation was overcome; the insomnia was still an urgent question.

I shall only mention the maximum doses of each drug given in the endeavour to induce sleep. The patient was kept in semi-darkness during the day, fully fed, and the bromides in combination with cinchona administered continuously. Oatenmeal gruel, hot milk, cocoa, or strong beef, tea were always given either with, or a short time before, the final sleeping "draught."

1. B Butyl croton chloral 3ss, tr. hyos. 3j, tr. lupulin 3j, at bedtime.  
*Result.*—No use; the patient never "lost herself," or from her nurse's description, ceased "to fidget."

2. B Sulphonal gr. 60, thoroughly dissolved, and taken hot.  
*Result.*—"Cat's sleep," "fidgeted all night." Next day intense stupor, but no sleep. As to the dose of sulphonal, note that Dr. Sutcliffe, of Cheadle Royal Asylum, records in the *Journal of Mental Science*, October, 1899, that after 50 grains had been administered to a patient "in a state of great excitement.....without apparent result.....60 grains were given, after which he slept almost continuously for three days." In my case 60 grains gave no sleep.

3. B Chloral hydrate 3j, tr. hyos. 3j, nepoche (Ferris) 3ss.  
*Result.*—This was tried on three occasions, without useful result.

4. B Trional 3j (60 grains) dissolved in hot draught stout.  
*Result.*—The first dose of this strength (50 grains had done nothing) gave 6 hours' easy sleep, the second 8 hours, and the third 9½ hours.

Messrs. Motterhead and Co. inform me that the largest dose of trional they have ever dispensed is 30 grains.

Saddleworth. COLIN CAMPBELL.

### HYPODERMIC ADMINISTRATION OF MERCURY IN SYPHILIS.

WITH reference to Dr. Fosbery's queries *re* treatment of syphilis by intramuscular injections of mercury, in the *BRITISH MEDICAL JOURNAL* of January 13th, page 74, I would like to state that I cannot understand why he has met with such pain and induration in the two cases he has treated. During the year that I was stationed at Colchester I had about 104 men attending for the treatment, and many were cavalry and artillery soldiers. I use Major Lambkin's original prescription. I cannot remember the quantities, but think they are: Mercury, 3j; lanolin, 3j; carbolic oil, 2 per cent., 3ij. Of this I inject deeply into the muscles of the buttock, high up near the iliac crest, 5 minims. I use a syringe which holds 20 minims; four men stand in a row, and the needle is pushed into the first up to the hilt. The piston is pushed down to the required distance, finger removed from the piston, and the needle rapidly withdrawn. It is then wiped on wool soaked in 1 in 20 carbolic, and the process repeated until the syringe is empty. If any of the injection is left in the skin, or if it is injected hypodermically, induration and pain are bound to result.

My patients return to duty and come on the following Sunday. They then receive an injection into the other buttock. As a rule, the gums become touched after the fourth or fifth injection. The men then attend monthly, and get no further injection until the soreness of gums has disappeared. In rare instances as many as 16 injections have been given. I never increase nor diminish the dose. I never give mercury to syphilitic patients in any other way.

My records are not, of course, available here, but there is no doubt that the admissions for secondary syphilis to the Station Hospital at Colchester were for the months January to October, 1899, greatly lessened. I endeavour to keep the men under treatment for at least one year.

Paardeberg.

F. J. W. PORTER, Captain R.A.M.C.

#### TOLERANCE OF LARGE DOSES OF STRYCHNINE WITHOUT TOXIC SYMPTOMS.

A WOMAN, aged 64, had an inoperable mass of pelvic cancer compressing the rectum, for which I performed transverse colostomy. For some days after the operation her pulse was weak and intermittent once or twice in the minute, and was only steadied by liquor strychninæ in 5 minim doses, given at first hypodermically and afterwards by mouth. During the first 15 days she had 395 minims. In the following 49 days she had 5 minims every 4 hours, or 1,470 minims, making a total of 1,865 minims in 64 days. At the end of this time she returned to her home in the country. During the 9 weeks she also had daily 8 ounces of brandy and  $\frac{1}{4}$  grain of morphine at night. At no time did the strychnine produce toxic symptoms. While she was under my care the cancer grew rapidly and general emaciation was marked, but her appetite and general condition were wonderfully good. As she did so well on 30 minims of liquor strychninæ a day, I did not feel justified in experimentally decreasing the dosage.

That cancer in its growth produces toxins or allied bodies is generally admitted, but whether these bodies are capable of neutralising such a potent drug as strychnine is at present undecided. The other alternative is to say that the patient has an idiosyncrasy, which is tantamount to saying that we know nothing about it. The dosage of strychnine usually employed is often too small, and in cardiac failure I frequently give 20 to 30 minims of the liquor in 24 hours, but until recently have not continued this dosage for any great length of time. Larger doses than this are on record as having been occasionally given, but the fact which I wish to emphasise is that strychnine may often be given with advantage in doses which many consider unorthodox or even dangerous.

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

#### CHLOROFORM POISONING: STOPPAGE OF HEART'S ACTION: INJECTION OF ARTIFICIAL SERUM PER ANUM: RECOVERY.

A YOUNG Spaniard came to consult me for enlargement of the inguinal glands, the result of a soft chancre; every local means had been tried to reduce the glands to their normal size without result, hence I decided to operate. I applied chloroform on a towel, and the patient was very soon under the influence of the anæsthetic. The operation itself did not last more than ten minutes, as I was able to enucleate the glands with my finger. I applied a dressing, and left the case in charge of my assistant, thinking all was right as the patient had regained consciousness, when I was suddenly summoned to his bedside. On trying to feel the pulse I was astounded to find that the heart had apparently stopped beating, the breathing was extremely feeble, considerable intervals intervening between each respiration; the face had an ashy hue, the extremities were cold, in fact I began to consider the case hopeless. However, I straightway began artificial respiration, I applied hot cloths to the precordial region, I injected 20 minims of ether hypodermically, and finally, seeing things were looking very black, I called for artificial serum, a litre of which I injected far up the rectum. The result was all that could be desired, as in about five minutes my patient began to breathe fairly regularly, his pulse at the same time becoming gradually perceptible, and in a very few minutes more he was quite out of danger.

I publish this case in defence of artificial serum, as I am

firmly convinced that if I had not had it at hand, my patient could not possibly have been saved. I may state that the patient's heart was perfectly sound, that, in fact, he was in every way a healthy young man.

HERBERT J. WALKER, M.B. Edin.

Durazno, Central Uruguay, S. America.

## REPORTS

ON

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

#### BIRMINGHAM CITY INFIRMARY.

##### A CASE OF SYRINGOMYELIA.

(By T. SYDNEY SHORT, M.D., M.R.C.P., Physician to the Infirmary, and Assistant Physician to the General Hospital, Birmingham.)

[From notes by Dr. A. O'Dowd, Assistant Medical Officer.]

E. S., aged 41, a single woman, came under my care in July, 1899, complaining of weakness and wasting of the hands with stiffness and pains in the legs. She is a bright and intelligent woman, and gave the following account of her life: Never a robust child, she could nevertheless run about and play games like other children. At 16 years of age she noticed a peculiar numbness which attacked the right side of her body. It began in the right half of the trunk, and passed gradually into the limbs; she thinks the arm and leg were affected simultaneously. At first it was limited to the right side, but after about four weeks she noticed the left side was also going numb, the trunk being first affected, as on the other side. This numb feeling over her body and limbs has never left her, but during the first few months was more intense than it has since been. Eighteen months after she first felt the numbness she suddenly lost the use of both legs when walking in the street. They felt weak, her knees gave way, and she fell. She was taken to a hospital, where she remained for five months. On the second day after admission she could just stand. The power in her legs came back to her very slowly, so that when she left the hospital, at the end of the five months, she could walk a little with assistance, but dragged both feet along the ground, and soon tired. She steadily improved for about two years, and at the age of 20 could walk from two to three miles a day. From 20 to 36 she remained in much the same condition, and earned her living in a warehouse at light work. She then noticed the legs were gradually getting weak again (five years ago). Her hands have been gradually getting weak and wasted for about two years. The wasting began in the muscles of the right thumb, and she thinks it was quite a year before the hollows appeared between the bones of the hand (interossei).

During the time she was in the hospital she suffered from dull aching pains in the legs. These pains have never left her, and have been getting gradually worse during the last five years. Ever since the numbness first attacked her she has noticed a curious loss of appreciation to pain. On several occasions she has burnt her fingers at the bars of the fire and felt no pain. Large blebs and blisters have risen on her hands either from burns or scalds which she did not know she had received. Several times she has found her fingers bleeding from cuts unnoticed at the time. Whilst sewing she has not only stuck pins into her flesh without pain, but has sewn her fingers into her work and not noticed it until she shifted her hand forward; then she used to tear the cotton through the flesh to save herself the trouble of having to resew a cut stitch. The scalp must have suffered from this analgesia for many years, as she remembers on several occasions sore places have resulted from hairpin wounds. She only found out the cause of the wounds by discovering a hairpin struck deeply into the scalp one day. Her own impression is that this failure to appreciate painful impressions has been present for twenty years, and has been more marked during the last six. Ten years after the attack of paraplegia she began to have trouble with her water. It ran from her very easily, and ever since that time she has passed both

I have only to add that I do not propose to apply to the Crown. Such an application would lead to a public trial, and would involve a greater expense than I feel myself justified in incurring.

I append a copy of the circular letter above referred to, and of the rules involved, and of counsel's opinion (so far as material), omitting names throughout. The irregularity with reference to the home referred to in the letter has since been rectified, and the non-retirement of a certain member of the Grand Committee is now admitted to have been improper.—I am, etc.,

Lambeth Palace Road, S.E., April 21st.

WALTER EDMUNDS.

\* \* The documents are too lengthy for reproduction here.

## OBITUARY.

JAMES MACNEE, M.D.,  
Inverness.

THE medical profession and the suffering public of Inverness have sustained a heavy loss in the death of Dr. James Macnee, which took place at his residence in that town on April 16th. Of late years his health was far from robust, but no one expected that the end would have come so suddenly. On the morning of his death he was found kneeling at his bedside, death having evidently resulted from cardiac failure. Some eight years ago he met with a serious carriage accident, and sustained a fracture of the neck of the femur, which laid him aside from the more active duties of his profession ever afterwards.

Dr. Macnee was born in 1838 in Glenlochry, Perthshire, his father being a farmer in that county. He studied medicine in Edinburgh, and took the degree of M.D. in 1861. Shortly after graduation he started practice in Munlochy, in Ross-shire. The seven or eight years he spent there were laborious in the extreme, which was the price he had to pay for his great popularity; but he soon became well known over a wide district. In 1869 he removed to Inverness, the capital of the Highlands, where he found more scope for his energy and usefulness. Here he rapidly rose in the estimation of his medical brethren and the general public, and he soon acquired a large and important practice. He read extensively, and kept himself abreast of the times, not only in his own profession, but also in general literature. For years he was President of the Inverness Medical Society, before which he read several very thoughtful and suggestive papers; and he always took a keen interest and an active part in the Society's debates. As the father of the profession in Inverness and neighbourhood, he was often called in consultation by his younger brethren, and they always felt they could thoroughly rely on his wise and judicious advice. For many years he was on the staff of the Northern Infirmary, and at the time of his death he was Consulting Physician to that institution and also to the Northern District Lunatic Asylum.

The distinguishing features in Dr. Macnee's character were his wonderful patience, his tender sympathy, and above all his high moral rectitude. Of him it could truly be said that he ever lived in his "great Taskmaster's eye." No one could for a moment doubt his honesty and sincerity. If, as we believe, "only a good man can be a good doctor," he was certainly both. He took an active interest in moral and religious work, and Inverness loses by his death one of her most important and useful citizens.

Dr. Macnee suffered sore family bereavements. Out of a family of eight only two daughters survive, who, with their mother, mourn his loss. In one day three of his children were buried in one grave. On that occasion he received a very kind and sympathetic letter of condolence from the late Dr. Tait, who was then Archbishop of Canterbury, and who had suffered a similar bereavement in his own family.

MANY members of the profession in Roxburghshire and in South Africa will hear with deep regret the announcement of the sudden and premature death of Dr. WILLIAM BRYDON, on March 11th, while on a voyage from Madras to Durban. Dr. Brydon graduated in Edinburgh in 1881, and after being for a year and a-half Resident Medical Officer in the British Hospital at Paris, joined his father in practice at Hawick, where

his kindness and skill endeared him to his patients, whilst his generous nature and high personal character made him a favourite with his professional brethren. In 1894 he was induced to leave for South Africa, to take up a position in the gold mines, where his devotion to duty won him the respect and affection of a large number of miners of whom he had the care. He remained in the Rand until the Jameson Raid, and after that unfortunate occurrence spent some time in several parts of South Africa. He had gone to Madras from Durban in the service of the Natal Government, and it was during the return voyage that he died, after an illness which only lasted two days.

A REUTER telegram from Beirut, published in the *Times*, states that on April 10th there died there at an advanced age a former physician to the Sultan Abdul Aziz, an Englishman named Temple Bey, who is stated to have been a relative of the Archbishop of Canterbury. Originally a surgeon in the British army, he entered the Turkish service after the Crimean war, and became one of the favourite medical attendants of the Sultan. On the death of Abdul Aziz, Temple Bey was sent into the interior of Asia Minor, and afterwards to Aleppo and Damascus. Finally he came to Beirut, where he died almost unknown. He was supposed by the Turks to be an Ottoman subject, for he took pains to conceal his nationality.

THE death of Mr. ALLAN JOHNSON at Bloemfontein was a cause of sadness to many at Aberdeen. Mr. Johnson began his career at the University of Aberdeen with a scholarship held on condition of his becoming a minister of his church. He renounced that aim, and became in succession a schoolmaster, then a journalist, and finally had almost completed his professional course in medicine, when he accompanied Dr. Gray to South Africa as a member of the Sivewright-ambulance party. The services of the party being refused, Mr. Johnson joined the Cape Medical Staff Corps, and after passing through a time of fatigue and privation, which he has described in the press, fell a victim to enteric fever at Bloemfontein. Mr. Johnson was appreciated by those who were his intimate friends as a thoughtful man of many cultured tastes; he was known by a very large circle for his admirable talent on the amateur stage and as a reciter. His death leaves a real sense of loss in the town.

WE regret to have to record the death of Dr. JOHN UNDERWOOD, of Hastings, which occurred, after a long illness, on April 10th. He was born at Pitsford, in Northamptonshire, on November 16th, 1816, and was consequently in his 84th year when he died. He received the degree of Doctor of Medicine from the University of Edinburgh in 1841, and took the Membership of the Royal College of Surgeons of England in 1842. In the same year he commenced practice in Battle, but in 1855 he removed to Hastings, where he lived for the remainder of his life. At one time he was Assistant Surgeon to the East Sussex Infirmary, and at the time of his death he was the oldest member of the East Sussex Medico-Chirurgical Society. He retired from the active practice of his profession in 1893. Among many good traits of his character a high sense of duty and an absolute devotion to his profession were most conspicuous. He was deservedly held in high esteem both by his patients and by his fellow townsfolk. His funeral was attended by a large number of the medical practitioners of the town and district.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. Pietro Cavallo, who, in conjunction with Salvatore Tommasi, founded in 1857 *Il Morgagni*, the journal which was the pioneer of the renaissance of medical science in Italy; Dr. Maroy, General Secretary of the Société Royale de Médecine Publique et de Topographie Médicale de Belgique; Dr. Stocherbakoff, sometime Professor of Physiological Chemistry in the University of Kasan; Dr. J. B. Léonce Malherbe, formerly Professor of Clinical Medicine at Nantes and Senior Physician of the hospitals of that city, aged 80; Dr. E. Buchheim, of Vienna, author of a work, *Ueber Versicherungsdiagnostik*, one of the first in which the subject of life assurance was handled from the point of view of

medical science, aged 75; and Dr. Eugen von Farkas, Sanitary Inspector of Buda-Pesth, who had won distinction in experimental surgery as well as in sanitary science, aged 35.

## ROYAL NAVY AND ARMY MEDICAL SERVICES.

### ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty: GEORGE R. MACMAHON, B.A., M.B., Surgeon, to the *Sphinx*, April 19th; JAMES G. WATT, Surgeon, to the *Essex*, additional, and for recommissioning, April 23rd; B. CONNOLLY, to be Surgeon and Agent at Bar of Lough and Barrow, April 23rd.

### ROYAL ARMY MEDICAL CORPS.

MAJOR WHAITE, Lieutenant ADAMS-WYLIE, Quartermaster DALLAS, Civil Surgeons STEVENSON, DUNLOP, TYNDALE, and HALBERDS are among those discharged from hospital for duty during the week ended April 8th. Lieutenant-Colonel J. ARMSTRONG, serving in Natal, is also reported as having returned to duty.

Assistant Surgeon JACKSON, 21st Battery Field Artillery, died at Pretoria on April 21st of typhus and dysentery.

### INDIAN MEDICAL SERVICE.

SURGEON-GENERAL C. E. M'VITTIE, Madras Establishment, Honorary Physician to the Queen, and Principal Medical Officer, Madras Command, is permitted to retire from the service, from April 1st. He joined the department as Assistant Surgeon, March 31st, 1866, and became Surgeon-Major-General, April 1st, 1895. He served in the Afghan war in 1879-80 (medal), and with the Burmese expedition in 1886-88 (mentioned in despatches, medal with two clasps). He was granted a reward for distinguished service, May 18th, 1894.

Lieutenant-Colonel C. H. JOUBERT, M.B., Bengal Establishment, is appointed Principal Medical Officer, Lahore District, vice Colonel J. H. Newman, M.D.

It is announced that Captain S. H. BURNETT, M.B., Bombay Establishment, will continue as Personal Assistant to the Surgeon-General with the Government of Bombay.

### THE VOLUNTEERS.

THE undermentioned gentlemen are appointed Surgeon-Lieutenants in the corps respectively specified, dated April 25th: JULIUS H. BEILBY, M.B., Worcestershire Yeomanry (the Queen's Own Worcestershire Hussars); PERCIVAL E. BARBER, 4th West Riding of Yorkshire Artillery (Western Division Royal Garrison Artillery); EDWARD GRAY, 2nd Cheshire (Railway) Engineers; JOHN BRUCE, M.B., 1st Volunteer Battalion the Lincolnshire Regiment; GEORGE P. CHAPPEL, M.D., 1st Volunteer Battalion the Duke of Cambridge's Own (Middlesex Regiment); HENRY B. PERKINS, 15th Middlesex Rifles.

The undermentioned Surgeon-Lieutenants are promoted to be Surgeon-Captains, dated April 25th:—L. W. POCKETT, 1st Lincolnshire Artillery (Western Division Royal Garrison Artillery); J. C. WRIGHT, M.B., 2nd West Riding of Yorkshire Artillery (Western Division Royal Garrison Artillery); R. EMMETT, 1st Hampshire Engineers.

Mr. REDMOND ROCHE is appointed Acting Surgeon in the 1st Cadet Battalion the King's Royal Rifle Corps, April 25th.

### VOLUNTEER MEDICAL STAFF CORPS.

MR. JOSEPH COLLIER, M.B., is appointed Surgeon-Lieutenant in the Manchester Companies, April 25th.

### NEW COLLAPSIBLE FIELD STRETCHER DHOOOLIE.

THE Committee which assembled at Jutogh on October 28th, 1899, by order of His Excellency the Commander-in-Chief, for examining and reporting on various articles of ambulance equipment, have expressed the following opinion of Major Kay's collapsible field stretcher dhoolie: "They consider it very valuable for the following reasons: It is easily packed and carried, its basis is the Mark IV stretcher, which should be universally adopted, and its component parts are each available for the carriage of wounded, so that in case of necessity four men could be carried by making use of the one dhoolie." They have, we understand, recommended that six dhoolies and six additional seats be made under the personal supervision of the inventor, for trial on active service and at next hill manoeuvres. Should the invention stand the trial test, Major Kay is to be congratulated, as it should prove a great boon, especially for wounded in hill warfare, and in all climates. The seats or end pieces only weigh 6 lbs., and are very handy and easily carried. The total weight of the whole dhoolie is 60 lbs., or 20 lbs. less than the one at present in use.

### THE EXPENSES OF THE ARMY MEDICAL DEPARTMENT IN THE PHILIPPINES.

THE cost of the war in the Philippines has been given officially in a statement of expenditures by the United States War Department covering the military operations in the Philippine Islands, and including outstanding liabilities, so far as can be determined, for the period from May 1st, 1898, to November 1st, 1899. The information was sent to Congress in response to a resolution passed January 30th, 1900. The total amount reported is, in round numbers, 49,000,000 dollars (\$49,000,000), and of this sum the charge against the medical department is 1,206,137 dollars (\$1,241,227). The American Army and Navy Register (quoted in the *Journal of the American Medical Association*) compliments Surgeon-General Sternberg on this report in the following terms: "The expenditure under the medical department is another surprise. It is entirely to the credit of the Surgeon-General of the Army that his admirable administration of his well-organised and efficient department in the Philippines has been conducted at no greater cost. This economy does not in any sense

approach parsimony, and there is no evidence that the health of the troops has suffered or the wants of the sick and injured have been ignored on account of any false harbouring of public funds under the medical department."

## 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.*

### THE CONJOINT BOARD.

CURIOUS.—We have never heard that the Conjoint Board of London has framed any by-laws for the regulation of the conduct of its diplomates. Questions of conduct are considered by the Councils of the College of Physicians and College of Surgeons if referred to them. We think our correspondent might very properly address his inquiry to the Registrar of the Royal College of Physicians.

### COURTESY ATTENDANCE.

A. D. D.—We think the answer previously sent is sufficiently explicit. There can be no doubt that the words in the Code "legitimate practitioners" must be taken to mean legally qualified practitioners whether in practice or not. The words to which we direct our correspondent's attention, and which are italicised, are that such persons are only entitled by professional courtesy to receive medical assistance gratis. Our correspondent is perfectly at liberty to make a charge if he wishes to do so. We pointed out to another correspondent some time ago who, being a retired practitioner, complained that he was charged, that he had no right to expect medical services without payment, and that he ought to have tendered a fee.

### MEDICAL CERTIFICATES IN CONNECTION WITH EMPLOYERS' LIABILITY INSURANCE.

A. HAD a patient who met with an accident. Some days subsequently the local agent of an Employers' Liability Assurance Company sent to A. a claim form bearing the name of the patient's employer, and a medical certificate to be filled up in connection therewith. A. is given to understand that the fee for this certificate payable by the assured will be sent through the agent, but, after filling up the certificate, is told to apply direct to the employer for payment of his fee. The employer when applied to denies liability, evidently believing that his premium will cover any medical or other fees. Our correspondent inquires who is liable to pay his fee under the circumstances.

\*.\* So far as can be gathered from the facts, the employer appears to be under no direct liability to our correspondent. He was engaged by the assurance company to give the certificate and not by the employer, and he should apply to the former for his fee.

### PROFESSIONAL ETIQUETTE.

B. R.—We have no hesitation in expressing the opinion that it is improper conduct for a medical practitioner to attempt to displace a colleague from a public appointment, but we cannot say that the newspaper cutting sent affords any evidence that such an offence has been committed.

### ADVERTISING.

J.—Our correspondent complains of the action of a medical man living in a provincial town who, in addition to the plate upon his own door, has fixed two brass plates upon houses within ten minutes' walk, giving his name, and stating that messages may be left there for him. Our correspondent further states that these houses are not places at which a branch practice is carried on, nor does any medical man reside at either of them.

\*.\* We agree with our correspondent that under the circumstances described by him brass plates are unnecessary, and would appear to have been placed where they are for the purpose of advertisement. Our correspondent seems to be under the impression that the General Medical Council has made a pronouncement on the subject of advertising by medical practitioners. Unfortunately up to the present time it has not done so, although it has warned medical aid societies against seeking to obtain practice by such means.

### THE LAW OF TRESPASS IN SCOTLAND.

INKPOT understands that gaugers, in their business as searchers, etc., are legally entitled to enter lands and buildings, and wishes to know if Scottish law gives any similar right to medical men to take the nearest way to their patients, even if it be through private policies or over farm lands, and asks for a reference to any statute or case bearing on the point.

\*.\* We are advised that the only Act that confers any right on excisemen to enter lands is the Gun Act. By this Act they are entitled to enter any lands and challenge any person carrying firearms. For purposes of search it is necessary for them to obtain a warrant. If they have no

warrant they are in the same position as any member of the community. According to Green's *Encyclopædia*, by the law of Scotland a proprietor is entitled to prevent any stranger intruding on his lands. Such intrusion is termed "trespass"—a word borrowed from English jurisprudence. Apart from some culpable purpose, such as poaching or malicious mischief, trespassing is not a criminal offence. There is a popular superstition to the contrary, and the country abounds with placards threatening trespassers that they will be prosecuted with the utmost rigour of the law. These are idle threats. The only remedy competent against the trespasser is an action of interdict against his return on a subsequent occasion. It is a valid answer to such an action that the alleged trespass was for an urgent purpose, such as the suppression of fire, or the prevention of crime, and this might reasonably include an urgent visit by a medical practitioner. The Trespass Act (1865) renders certain kinds of trespass criminal. It states: "Any person who lodges on any premises or occupies or encamps on any land being private property, without the consent and permission of the owner or legal occupier of such premises or lands, and every person who encamps or lights a fire on or near any private road or any enclosed or cultivated land, or, in or near a plantation, or on or near any turnpike road or other highway, shall be guilty of an offence punishable, the penalty being 20s. or fourteen days for the first offence."

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF OXFORD.

**EXAMINATION IN PREVENTIVE MEDICINE AND PUBLIC HEALTH.**—An examination for the diploma in Public Health will be held in the Michaelmas term commencing November 22nd, 1900. The names of the candidates must be transmitted to the Secretary to the Boards of Faculties, Clarendon Building, Broad Street, Oxford, not later than Thursday, November 8th. The fee, which must be paid at the time of entry, is for each of the two divisions of the examination 4s.

**EXAMINATIONS FOR THE M.B.**—The first and second examinations for the degree of Bachelor of Medicine will commence on Wednesday, June 20th, 1900. The names of the candidates must be received by the Secretary to the Boards of Faculties not later than Wednesday, June 6th.

**EXAMINATION FOR THE M.S.**—The examination for the degree of Master in Surgery will commence on Thursday, June 28th, 1900, and notice must be given to the Secretary to the Board of Faculties not later than Monday, June 17th.

### UNIVERSITY OF CAMBRIDGE.

**ADDENBROOKE'S HOSPITAL.**—Under the new agreement with the University, Dr. Porter, Dr. D. MacAlister, Mr. Clay, Mr. Laylor, and Mr. Finch have been elected members of the Advisory Council of the hospital; and Professor Clifford Allbutt has been elected an honorary physician.

**DELEGATES.**—Professor Adams, M.D., of Montreal, will represent the University at the Centennial of the New Brunswick University, which will be celebrated next month. Mr. G. Cunningham will represent the University at the International Dental Conference to be held in connection with the Paris Exhibition next August.

**EXAMINATION IN SANITARY SCIENCE.**—The following candidates have satisfied the Examiners in both parts of the Examination:

H. T. Burv, J. S. de Silva, J. M. Gardiner, L. Gilbert, S. G. V. Harris, W. McCallum, B. MacCarthy, W. McG. Montgomery, A. K. Mudali, D. Munro, H. B. G. Newham, J. V. R. Roberts, R. F. Seervai, S. D. Thomson, G. L. Travis, M. Watson, Mary Frances Williams, B. M. Young, H. W. F. Young.

### UNIVERSITY OF GLASGOW

#### GRADUATION CEREMONY.

THE spring graduation of Glasgow University took place in the Bute Hall on April 17th. There was a very large attendance of students and friends of the graduates, and the proceedings passed off with but little interruption. The Principal was accompanied by Emeritus Professor Lord Kelvin, the members of the University staff, and representatives of the Glasgow Corporation and other public bodies in the city. Amongst the degrees conferred were:

**Doctors of Medicine (M.D.).**—John Guy, M.B., C.M. (Thesis: Studies on Lobar Pneumonia); Andrew John Laird, M.B., C.M. (thesis: Perforative Peritonitis in Enteric Fever, with special reference to early diagnosis); William Lawson, M.B., C.M. (thesis: The Diseases of Exposure; their frequency and distribution in relation to the seasons.)

**Bachelor of Medicine and Bachelor of Surgery (M.B., Ch.B.).**—Lucy Buckley, B.Sc.

**Doctor of Science (D.Sc.).**—William Henry Lang, B.Sc., M.B., C.M.

### ROYAL COLLEGE OF SURGEONS IN IRELAND.

THE following is the Winter Session Prize List.—**Descriptive Anatomy:** Junior—J. S. Shiell, 1st prize (43) and medal; J. J. Connolly, and prize (41) and certificate. Senior—J. Cockburn, 1st prize (43) and medal; R. W. Burkitt, and prize (41) and certificate. **Practical Anatomy:** First year—Miss J. C. Hargrave, 1st prize (43) and medal; A. N. Crawford, and prize (41) and certificate. Second year—E. C. Byrne, 1st prize (43) and medal; R. G. Allen, and prize (41) and certificate. Third year—A. Charles and T. A. Dillon (equal), 1st prize (43) and medal; C. W. Ewing, and prize (41) and certificate. **Practice of Medicine:** A. Charles, 1st prize (43) and medal; J. F. Peart, and prize (41) and certificate. **Surgery:** C. W. Ewing, 1st prize (43) and medal; J. F. Peart, 2nd prize (41) and certificate. **Midwifery:** W.

R. Meredith and J. F. Peart (equal), 1st prize (43) and medal; Miss M. J. Shire, 2nd prize (41) and certificate. **Physiology:** J. P. Ziervogel, 1st prize (43) and medal; K. W. Burkitt, and prize (41) and certificate. **Chemistry:** B. H. Peters, 1st prize (43) and medal; F. O'D. Fawcett, and prize (41) and certificate. **Pathology:** J. M. S. Lewis, 1st prize (43) and medal; T. J. Tallon, and prize (41) and certificate. **Physics:** Miss J. C. Hargrave, 1st prize (43) and medal; M. Lochrin, and prize (41) and certificate.

**Primary Fellowship Examination.**—In recognition of the Royal visit, the Council has resolved to grant this examination to all students of the College who pass the Second Professional Examination on or before July 31st, 1900, on fulfilling the other necessary conditions. This resolution applies to licentiates, whether under or over ten years' standing, and to all students who pass the Second Professional Examination for the conjoint diploma of the two Royal Colleges. The Second Professional Examination and the Examination in Physiology must be completed. All persons wishing to obtain the benefit of this resolution must claim the benefit before July 31st, 1900. All applications are to be addressed to the Registrar of the College.

### CONJOINT BOARD IN IRELAND.

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

**In all Subjects.**—F. G. McCaughey, W. I. O'Doherty, C. Robinson, F. C. Yorke.

**Completed the Examination.**—W. H. Anderson, J. E. Brereton, C. H. Bryan, H. M. Clarke, M. T. Donovan, C. D. Downing, W. I. Greehy, I. P. Falls, T. Farrell, I. F. Fitzmaurice, A. H. B. Harford, R. E. Humphrey, T. E. Johnston, I. B. Logan, I. Murphy, I. Murray, R. P. McDonnell, M. A. A. O'Brien, I. P. Ryan, W. Scott, C. I. Waters.

**In Anatomy.**—A. H. R. Duncan, J. Dwyer, R. T. Gordon, T. Keogh, P. McDermott, J. P. Ziervogel.

**In Physiology.**—J. J. Gibney, T. Keogh, J. J. McInerney, M. C. Sage, P. M. Sheridan, J. P. Ziervogel.

**In Materia Medica.**—R. M. Alkin, B. D. Gibson, E. O'Grady, P. M. Sheridan, S. H. Kaverly.

**In Histology.**—J. Dwyer, H. B. Evans, B. D. Gibson, R. T. Gordon, T. Keogh, P. McDermott, E. O'Grady, J. P. Ziervogel.

In the Pass List of the First Professional Examination published in the BRITISH MEDICAL JOURNAL of April 1st, the name of Mr. J. M. G. Foley should have been included in the 1st list of those who had completed the examination and that of Mr. D. de C. O'Grady in the list of those who had passed in Pharmacy.

### SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, April, 1900.—The following candidates passed in:

**Surgery.**—A. St. J. Bateman (Section I), King's College Hospital; W. A. C. Cox (Section I), St. Mary's Hospital; H. S. A. Davies (Section I), Michigan; R. F. Ellery (Section I and II), St. Bartholomew's Hospital; F. E. Feilden, St. Bartholomew's Hospital; R. T. Forster (Sections I and II), Leeds; J. E. Howroyd (Section I), Leeds; D. T. C. Jones (Section II), University College Hospital; O. E. Lemlin (Section II), London Hospital; J. C. S. Rashleigh (Section I) St. George's Hospital; G. E. Seville, Manchester.

**Medicine.**—F. R. Featherstone (Section I), Guy's Hospital; R. T. Foster (Section II), Leeds; W. D. French (Section II), University College Hospital; J. S. Goodall (Section I), Middlesex Hospital; T. E. Holman, Guy's Hospital; J. E. Howroyd (Section I), Leeds; C. Johnson (Section I), Durham, and London Hospital; O. E. Lemlin (Section II), London Hospital; G. M. Smith, St. Thomas's Hospital; C. E. Williams, Royal College of Physicians and Surgeons, Kingston, Ontario.

**Forensic Medicine.**—A. St. J. Bateman, King's College Hospital; F. R. Featherstone, Guy's Hospital; J. S. Goodall, Middlesex Hospital; T. E. Holman, Guy's Hospital; J. E. Howroyd, Leeds; C. Johnson, Durham, and London Hospital; R. O. Jones, Guy's Hospital; W. Miles, Middlesex Hospital; G. M. Smith, St. Thomas's Hospital; C. E. Williams, Royal College of Physicians and Surgeons, Kingston, Ontario.

**Midwifery.**—P. D'E. Burrell, St. George's Hospital; W. T. Harris, St. Thomas's Hospital; W. T. Meagher, Cork; D. V. Muller, Charing Cross Hospital; R. C. Rumbelow, Middlesex Hospital; H. Smith, Birmingham.

The diploma of the Society was granted to P. D'E. Burrell, R. F. Ellery, F. E. Feilden, R. T. Forster, T. E. Holman, D. T. C. Jones, O. E. Lemlin, and G. E. Seville.

## PUBLIC HEALTH

AND

## POOR-LAW MEDICAL SERVICES.

### HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 6,523 births and 4,747 deaths were registered during the week ending Saturday last, April 21st. The annual rate of mortality in these towns, which had been 23.0 and 22.4 per 1,000 in the two preceding weeks, further declined to 21.3 last week. The rates in the several towns ranged from 12.9 in Birkenhead, 13.0 in Burnley, 13.8 in Swansea, and 15.5 in Brighton, to 26.9 in Liverpool, 27.2 in Oldham, 28.8 in Manchester, and 30.6 in Plymouth. In the thirty-two provincial towns the mean death-rate was 21.8 per 1,000, and exceeded by 0.8 the rate recorded in London, which was 20.6 per 1,000. The zymotic death-rate in the thirty-three towns last week averaged 1.9 per 1,000; in London the death-rate was 1.6 while it averaged 2.2 in the thirty-two provincial towns, among which the highest zymotic death-rates were 3.8 in Cardiff, 4.1 in Oldham, 5.1 in Plymouth, and 5.3 in Blackburn. Measles caused a death-rate of 2.3 in Wolverhampton, 2.4 in Cardiff, 2.6 in Bristol, and 4.6 in Ply-



## MEDICAL NEWS.

**THE ABERDEEN UNIVERSITY CLUB.**—The annual meeting and May dinner of this club will be held at the Trocadero Restaurant on Wednesday, May 16th, at 7 P.M., Sir James Westland, K.C.S.I., LL.D., in the chair. Further information can be obtained from Dr. James Galloway, 54, Harley Street, W., one of the Honorary Secretaries.

**RIBERI PRIZE.**—The tenth award of the Riberi prize of 20,000 lire (£800) will be made by the Royal Academy of Medicine of Turin on December 31st, 1901, for the best printed or manuscript work, or the most important discovery, during the quinquennium 1897-1901 in the domain of experimental pathology, hygiene, or forensic medicine.

**THE TYPHOID BACILLUS IN THE URINE.**—The New York City Board of Health has issued a bulletin calling attention to the frequent presence of the typhoid bacillus in the urine of persons suffering from that disease, and urging upon practitioners and those in attendance on the sick the importance of disinfecting the urine in such cases.

**AN ANATOMICAL CONGRESS AT PAVIA.**—The Anatomical Society held its annual meeting this year at Pavia from April 8th to the 21st, under the presidency of Professor Gustav Retzius of Stockholm. Among those who contributed papers were Professors Waldeyer, His, von Kolliker, Giacomini, and other well-known anatomists.

**A MEDICAL VETERAN.**—Dr. Rudolf Amandus Philippi of Santiago, Chile, who recently celebrated the seventieth anniversary of his graduation as Doctor of Medicine, was born at Charlottenburg, Prussia, 92 years ago. He devoted himself to natural history, and acquired such a reputation by his writings on that subject that he was appointed Professor in the Industrial High School of Cassel. In 1850 he accepted an invitation to occupy a chair in the University of Santiago. Dr. Philippi's name is well known in connection with ethnological and anthropological researches.

## MEDICAL VACANCIES.

The following vacancies are announced:

- BETHNAL GREEN: PARISH OF ST. MATTHEW.**—Assistant and Second Assistant Medical Officers for the New Infirmary; unmarried. Salary, £150 and £120 per annum respectively, with board, lodging, and washing. Applications, on forms provided, to be sent to the Medical Superintendent by May 9th and 10th respectively.
- BIRMINGHAM: CITY ASYLUM.**—Resident Clinical Assistant. Applications to the Medical Superintendent.
- BIRMINGHAM AND MIDLAND FREE HOSPITAL FOR SICK CHILDREN.**—Resident Medical Officer and Resident Surgical Officer. Salaries, £60 per annum each, with board, washing, and attendance. Applications to the Secretary, Steelhouse Lane, Birmingham, by May 9th.
- BRISTOL ROYAL INFIRMARY.**—Casualty Officer until August 31st. Apartments, board, and washing provided, and honorarium of £10. Applications to the Secretary by May 7th.
- CARLISLE DISPENSARY.**—House-Surgeon. Salary, £130 per annum, with apartments. Applications to the Honorary Secretary, Mr. G. A. Lightfoot, 23, Lowther Street, Carlisle, by May 9th.
- CHELSEA HOSPITAL FOR WOMEN.**—Fulham Road, S.W.—Clinical Assistant. Applications to the Secretary.
- DENBIGHSHIRE INFIRMARY.**—House-Surgeon. Salary to commence, £80 per annum, with board, residence, and washing. Applications to the Secretary by May 10th.
- 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.
- FARBRINGTON 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 not over 35 years of age. Salary, £150 per annum, with board, apartments, etc. Applications to the Medical Superintendent by May 3rd.
- 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 23rd.
- HALIFAX UNION WORKHOUSE.** St. Luke's Hospital.—Assistant Medical Officer for the hospital and Workhouse, unmarried, not over 35 years of age. Salary, £180 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.
- ITALIAN HOSPITAL.** Queen's Square, W.C.—Honorary Assistant Physician to the Out-patient Department. Applications to the Secretary by May 1st.
- JERUSALEM: BRITISH OPHTHALMIC HOSPITAL.**—Surgeon. Appointment for eight months. Honorarium £100, with travelling expenses and maintenance. Applications to Mr. Brudenell Carter, 31, Harley Street, London, W.
- LEEDS PUBLIC DISPENSARY.**—Junior resident Medical Officer. Salary, £35 per annum. Applications to the Secretary of the Faculty.
- LINCOLN HOSPITAL FOR THE INSANE.**—Assistant Medical Officer. Salary, £100 per annum. Applications to the Medical Superintendent, The Lawn, Lincoln.
- LIVERPOOL EYE AND EAR INFIRMARY.**—House-Surgeon. Salary, £80 per annum, with residence and maintenance. Applications to the Secretary, Knowsley Buildings, by May 5th.
- 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 TEMPERANCE HOSPITAL.** Hampstead Road, N.W.—Assistant Resident Medical Officer. Appointment for six months. Honorarium at the rate of 50 guineas per annum, with residence, board, and washing. Applications to the Secretary by May 17th.
- LONDON THROAT HOSPITAL.** 204, Great Portland Street, W.—(1) Surgeon. (2) Assistant Surgeon. Applications to the Honorary Secretary of the Medical Committee by May 15th.
- NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC.** Queen's Square, W.C.—Two Assistant Physicians. Applications to the Secretary by April 30th.
- NORTHAMPTON UNION.**—District Medical Officer. Salary, £70 per annum. Applications, on forms provided, to be sent to Mr. W. Fawkes, Clerk to the Guardians, 14, Guildhall Road, Northampton, by May 7th.
- NORTH-WEST LONDON HOSPITAL.** Kenish Town Road.—Resident Medical Officer and Assistant Resident Medical Officer. Appointments for six months; the Junior is eligible for election to the Senior post. Salary at the rate of £50 per annum attached to each. Candidates to attend meeting of the Medical Committee on May 21st.
- NOTTINGHAM CITY ASYLUM.**—Second Assistant Medical Officer, unmarried. Salary, £150 per annum, with board, apartments, and washing. Applications to the Medical Superintendent by May 10th.
- 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.
- PLAISTOW: ST. MARY'S CHILDREN HOSPITAL.**—Assistant Resident Medical Officer. Appointment for six months. Salary at the rate of £80 per annum, with board, residence, laundry, etc. Applications to the Secretary by May 1st.
- 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 May 5th.
- POPE'S HOSPITAL FOR ACCIDENTS.** E.—Assistant House-Surgeon. Appointment for six months, but eligible for re-election. Salary at the rate of £35 per annum, with board and residence. Applications to the House-Governor by May 12th.
- RAINHILL: COUNTY ASYLUM.**—Assistant Medical Officer for about four months. Salary, £3 3s. per week, with furnished apartments and board. Applications to the Medical Superintendent.
- RIPON DISPENSARY AND COTTAGE HOSPITAL.**—Resident House-Surgeon and Dispenser, unmarried. Salary, £70 for first year, with board and lodging. Applications to the Honorary Secretary.
- 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.
- ST. THOMAS'S HOSPITAL.**—Resident Assistant Physician. Applications to the Treasurer's Clerk by April 28th.
- SHEWSEBURY: SALOP INFIRMARY.**—Assistant House-Surgeon. Appointment for six months, with board, washing, and attendance. Salary at the rate of £40 per annum, with board and washing. Applications to the Secretary.
- SOUTH SHIELDS: INGHAM INFIRMARY AND SOUTH SHIELDS AND WESTON DISPENSARY.**—Junior House-Surgeon. Salary, £50 per annum, with board and residence. Applications to the Secretary, 74, King Street, South Shields.
- 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.
- STOCKPORT INFIRMARY.**—(1) House-Surgeon. Salary, £100 per annum. (2) Assistant House-Surgeon and Visiting Surgeon. Residence, board, and washing provided with each appointment. Applications to the Secretary by May 1st.
- SWANSEA GENERAL AND EYE HOSPITAL.**—House-Surgeon. Salary, £50 per annum, with board, apartments, washing, and attendance. Applications to the Secretary by April 30th.
- TEIGNMOUTH HOSPITAL.**—House-Surgeon. Salary, £50 a year, with board, lodging, and washing. Applications to the House Committee.
- 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.
- VICTORIA HOSPITAL FOR CHILDREN.** Queen's Road, S.W.—(1) Assistant Physician to the Out-patients. (2) Resident Medical Officer. Appointment for six months. Honorarium £25, with board and lodging. Applications to the Secretary by May 12th.
- WESTERN DISPENSARY.** Rochester Row, S.W.—Resident Medical Officer. Salary, 100 guineas per annum, with residence, coals, gas, and attendance. Applications to the Secretary.
- WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.**—(1) House-Physician. Salary, £100 per annum. (2) Assistant House-Physician. Appointment for six months. Honorarium at the rate of £50 per annum. Board, lodging, and washing provided in each case. Applications to the Chairman of the Medical Committee.
- YORK LUNATIC ASYLUM.**—Assistant Resident Medical Officer. Salary, £110 a year, with board, washing, and attendance. Applications to the Committee by May 21st.

## MEDICAL APPOINTMENTS.

- ANDERSON, Norman Wm., M.B., C.M. Aberd.,** appointed Certifying Factory Surgeon for the Civil Parish of Strathmiglo, co. Fife.
- BIRD, G. W. Harvey, M.A., M.B., B.C. Cantab., M.R.C.S., L.R.C.P.,** appointed Surgeon to the Bridgewater Infirmary.
- BOX, Charles Richard, M.D., B.S., B.Sc. Lond., M.R.C.P., F.R.C.S.,** appointed Assistant Physician to St. Thomas's Hospital.
- BROWN, A., M.R.C.S.,** appointed Medical Officer for the Masham District of the Bedale Union, vice R. W. T. Ewart, M.B., C.M. Edin., resigned.
- CAIE, W. J., M.A., M.B., Ch.B.,** appointed Resident Physician and Surgeon to the Aberdeen Royal Infirmary.
- CHAVEN, R., M.B.,** appointed Medical Officer for the Chipping District of the Clitheroe Union, vice R. Patchett, L.R.C.S. Edin., resigned.
- HEARDE, Thomas S. M.B., C.M. Edin.,** appointed Certifying Factory Surgeon for the Urban District of Ilkley and the Townships of Newfield-with-Langbath, Middleton, Denton, Askwith, Great Tumble, Little Tumble, Blubberhouses, and Fawcett.
- HOLLINGS, C. E., L.R.C.P., L.R.C.S. Edin.,** appointed Medical Officer of Health for the Driffield Rural District, vice Richard Wood, M.D. St. And., resigned.
- JONES, Williams D., L.R.C.P., L.R.C.S.E., L.S.A. Lond.,** appointed Medical Officer and Public Vaccinator to the Botherham No. 1 District, vice Dr. Branson, resigned.
- MACPHERSON, J. F., M.B., C.M. Edin.,** appointed Medical Officer for the First District of the Basingstoke Urban Sanitary District, vice G. F. W. Webb, M.D. Durh., resigned.
- MASSEY, David, L.R.C.P., L.R.C.S.I.,** appointed Medical Officer for the Berriew District of the Forden Union.
- PETERKIN, H. M.B., Ch.B.,** appointed Resident Physician and Surgeon to the Aberdeen Royal Infirmary.
- SHARP, H., M.B.,** appointed Medical Officer of Health to the Corporation of Truro.
- SPON, H. J., M.R.C.S. Eng., D.P.H. Camb.,** appointed Visiting Medical Officer to the City Dispensary, College Street, E.C.
- SPOONER, A. E., L.R.C.P., L.R.C.S.I.,** reappointed Medical Officer of Health for the Withernsea Urban District.
- WALKER, J. D., M.B.,** appointed Medical Officer for the Pontmell District of the Shaftesbury Union, vice H. A. Bryant, M.R.C.S., L.R.C.P., resigned.
- WILLIAMS, Lionel H., M.R.C.S. Eng.,** appointed Certifying Factory Surgeon for the Civil Parishes of Thornbury, Oldbury-upon-Severn, Littlebury-upon-Severn, Rockhampton, Fairfield, Tortworth, Charlfield, Cromhall Abbot's and Cromhall Lygon, Rangeworthy and Northington in the Thornbury Rural District.
- W. O. James Miller Swanson, M.B., Ch.B.,** appointed Assistant Medical Officer at James Murray's Royal Asylum, Perth.

## DIARY FOR NEXT WEEK.

## MONDAY.

**Medical Graduates' College and Polytechnic**, 22, Chancery Street, W.C., 4 P.M.—Mr. W. Anderson: Consultation. (Skin.)

## TUESDAY.

**Medical Graduates' College and Polytechnic**, 22, Chancery Street, W.C., 4 P.M.—Dr. J. F. Payne: Consultation. (Medical.)  
**Pathological Society of London**, 20, Hanover Square, W., 8.30 P.M.—

## WEDNESDAY.

**Medical Graduates' College and Polytechnic**, 22, Chancery Street, W.C., 4 P.M.—Mr. James Cantlie: Surgical Consultation.  
**Obstetrical Society of London**, 8 P.M.—Specimens will be shown by Dr. Tate and others. Papers—Dr. Thomas Wilson: The Relations of

## THURSDAY.

**Ophthalmological Society of the United Kingdom**.—Cases and Specimens at 8 P.M. Chair at 8.30 P.M. Papers: Mr. Nettleship. Note on Opaque Nerve Fibres of the Retina. Mr. Crichton: Optical Irregularities for Lamellar Cataracts. Mr. F. M. Ogilvie: Eye Changes in a case of Bullet Wound of Head. Mr. Reginald Bickerton: Case of Protrusion of Eyeball on Stopping. Mr. W. T. Lister: Affection of Choroid. Mr. Juler: (1) Emile Berger's Binocular and Stereoscopic Lens. (2) Proptosis with Ophthalmoplegia Externa. Mr. Treacher Collins: Case with a Congenital Notch in the Margin of each Lower Lid. Messrs. Higgins and Ormond: Specimen of Sarcoma of Choroid.

## FRIDAY.

**Medical Graduates' College and Polytechnic**, 22, Chancery Street, W.C., 4 P.M.—Mr. Treacher Collins: Consultation. (Eye).  
**West Kent Medico-Chirurgical Society**, Royal Kent Dispensary, Greenwich Road, S.E. 10. Mr. Charles J. Parke will deliver his Presidential address on What shall we do with our Inebriates? to be followed by a smoking concert.  
**Laryngological Society of London**, 20, Hanover Square, W., 5 P.M.—Cases will be shown by Drs. Watson Williams, Logan Turner, Lambert Lack, Tilley, Brommer, and Jobson Horne, and Messrs. Charters Symonds, Paget, and Waggett.  
**West London Medico-Chirurgical Society**, West London Hospital, Hammersmith Road, W., 8.30 P.M.—Pathological Specimens—Mr. Bidwell: A Series of Gall Stones. Papers—Dr. Barry Blacket: Treatment by Ultraviolet Rays. Dr. Seymour Taylor: Notes on two cases of Membranous Colitis. Dr. L. Dobson: Notes on (1) a case of Foreign Bodies in the Mammary Gland; (2) a case of Impacted Fracture of the Femur complicated by Infantile Paralysis.  
**Society of Anaesthetists**, 20, Hanover Square, W., 8.30 P.M.—Casual communications. The ordinary meeting will be followed by the annual meeting for the election of officers, etc.

## BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 2s. 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.

**BARTON**.—On April 17th, at 17, Redcliffe Gardens, South Kensington, S.W., the wife of Charles N. Barton, L.R.C.P. Lond., M.B.C.S. Eng., of a son.  
**BENSON**.—On April 6th, at 801, Fulwood Road, Sheffield, the wife of H. Mitchel Benson, M.B., C.M. Edin., of a daughter.  
**FLEMING**.—At 10, Grosvenor Street, Edinburgh, on the 18th instant, the wife of Robert A. Fleming, M.D., F.R.C.P.E., of a daughter.  
**HOPKINS**.—On April 12th, at 5, Cotham Grove, Bristol, the wife of F. G. Hopkins, M.B., Colonial Medical Service, of a son.  
**PARRY**.—On St. George's Day, at the Turret House, Youlgreave, Derbyshire, the wife of T. Wilson Parry, M.A., M.B., B.C. Cantab., L.R.C.P. Lond., M.B.C.S. Eng., of a son.  
**SCOTT**.—On March 29th, at Southdown House, Silverdale Road, Eastbourne, the wife of H. Scott, M.D., C.M., etc. (late of Westminster), of a son.

## MARRIAGES.

**DWYER-BROWN**.—On the 18th instant, at All Saints, Fulham, by the Rev. Thomas Calvert Brown, brother, and the Rev. C. P. Calvert, uncle of the bride, assisted by the Rev. M. H. Bowden, Hubert de Burgh Dwyer, M.R.C.S., L.R.C.P., of Blackfriars, S.E., youngest son of the late Henry Dwyer, of Grosvenor Gardens, St. Leonards-on-Sea, to Lydia Ann, younger daughter of Thomas Brown, Esq., Guion Road, Fulham S.W., and granddaughter of the late Rev. Thomas Calvert, M.A., F.S.A., Sandysike, Cumberland.  
**ELKINS-PEACH**.—On the 19th instant, at All Saints, Leavesden, Herts, by the Rev. J. R. E. Watson, Chaplain of Leavesden Asylum, assisted by the Rev. Arthur Wilson, M.A., Vicar of the P.C.P., Frank Atley by Elkins, M.D., Medical Superintendent Metropolitan Asylum, Leavesden, eldest son of Joseph Elkins, Stanford Mear, Yelvertoft, Northants, to Caroline (Lena), fourth daughter of the late William Henry Peach, Waingroves Hall, Derbyshire.  
**EMERY-NOWELL (PERRY)**.—April 15th, at Old Market Street Chapel, Bristol, by the Rev. Wilfrid J. Moulton, B.A., Vicar of St. Peter, Emery, M.D., B.Sc. Lond., M.R.C.S., of Birmingham, to Edith Mary Nowell ("Ditha Perry"), of the Wilderness, Redland, Bristol, daughter of the late William Nowell.  
**LYALL-NORRISH**.—On April 19th, at the Church of the Holy Cross, Crediton, by the Rev. A. F. de Gex, Rector of Messing and Orescombe, assisted by the Rev. Prebendary C. Felton Smith (Vicar), David William Knuyvet Lyall, M.B., C.M. Edin., of Shepton Mallet, Somerset, eldest son of D. E. Lyall, Esq., Guion Road, Fulham S.W., younger daughter of D. M. Norrish, Esq., of Fordton House, Crediton, Devon.  
**WILKINSON-FISHER**.—On April 21st, at Holy Trinity Church, Anerley, S.E., Robert Wilkinson, M.D. Brux., M.R.C.S. Eng., L.R.C.P. Lond., of Branksome House, Hamlet Road, Norwood, son of James Wilkinson, Esq., of Vernon Place, Uckfield, to Beatrice Mary, daughter of Robert Fisher, Esq., of Beverley Road, Anerley.

## DEATHS.

**AINLEY**.—On April 24th, at Bournemouth, Daniel Ainsley, M.R.C.S., M.O.H. County Borough, Halifax, aged 65 years.  
**ARCHDALL**.—In London, on Friday, April 20th, 1900, Henry Stewart Archdall, aged 32, M.R.C.S., L.R.C.P., late Surgeon, N.  
**HODGSON**.—April 22nd, at his residence, 64, Fishergate, Preston, James Birkett Hodgson, M.D. St. Andrews, aged 64 years.  
**JEFFREYS**.—April 21st, 1900, suddenly at Brighton, Richard Parker Jeffreys, M.R.C.S. (late of Chesterfield), aged 59 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.  
**CHEARING 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. 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., 2.  
**CITY ORTHOPÆDIC**. *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., 2.  
**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. 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, SCHO**. *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., 1.30; Ear, Th., 2.30; Throat, M., 1.30; F., 2; Dental, M. Th., 10; Skin, M., 10. *Operations*.—W. Th. F., 2.  
**LONDON**. *Attendances*.—Medical, daily, I.p., 2; o.p., 1.30; Surgical, daily, 1.30 and 2; Obstetric, M. Tu. Th. F., 2; o.p., W. S., 1.30; Eye, Tu. S., 9; Ear, W., 9; Skin, Th., 9; Dental, M. Tu. F., 9.30; W., 9. *Operations*.—Daily, 1.30.  
**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. 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 ORTHOPÆDIC**. *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*.—Tu., 3.  
**ROYAL EYE, SOUTHARK**. *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., 2.  
**ROYAL LONDON OPHTHALMIC**. *Attendances*.—Daily, 9. *Operations*.—Daily, 10.  
**ROYAL ORTHOPÆDIC**. *Attendances*.—Daily, 2. *Operations*.—O.p., M., 2; I.p., Tu. Th., 2.30.  
**ROYAL WESTMINSTER OPHTHALMIC**. *Attendances*.—Daily, 1. *Operations*.—Daily, 9.  
**ST. BARTHOLOMEW'S**. *Attendances*.—Medical and Surgical, daily, 1.30; Obstetric, M. W. F., 2; o.p., W. S., 9; Eye, M. Tu. Th. F., S., 2; o.p., M. Th., 9; W. S., 2.30; Ear, Tu. F., 2; Skin, Tu., 9. *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. Th., 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; Eye, Tu. F., 9; Ear, M., 2; Skin, Tu., 9.30; Throat, Tu. F., 9.30; Electro-Therapeutics, W. S., 10; Children's Medical, M. Th., 9. *Operations*.—M., 2.30; Tu. W. F., 2; Th., 2.30; S., 10; (Ophthalmic), F., 10.  
**ST. PETER'S**. *Attendances*.—M., 2 and 5; Tu., 2; W., 5; Th., 2; F. (Women and Children), 2; S., 4. *Operations*.—W. F., 2.  
**ST. THOMAS'S**. *Attendances*.—I.p., 1. 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., 2.30; Skin, F., 1.30; Throat, W., 10.30; Electro-Therapeutics, Th., 11.30; 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. 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., 2; S., 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, and delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, Strand, W.C., London.

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

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