

the injection of half an ounce into the rectum produced profuse perspiration followed by a rapid fall of temperature, after which the symptoms cleared up with surprising rapidity. Since then I have frequently given it both in pneumonia and in enteric fever.

The question of feeding typhoid patients has of late attracted considerable attention, and the commonly accepted rule that no solid food should be given until the temperature has been normal for ten days may sometimes be departed from with advantage. In this particular case a high temperature was persistently maintained until some addition was made to the orthodox 3 pints of milk in the twenty-four hours. The selection of an appropriate food with which to commence is one which requires much consideration. White of egg is undoubtedly very useful, but for this purpose I think very highly of plasmon, an albumen preparation made from milk from which the fat has been removed. It is a colourless dry powder, free from odour and taste, and is undoubtedly a valuable nutritive agent. I usually give it in teaspoonful doses in five ounces of water every alternate hour. It is assimilated without difficulty, and produces no rise in temperature even in the early stages of typhoid. Dr. C. Virchow of Berlin finds that it is best prepared by adding one ounce of plasmon and one ounce of sugar to half a pint of boiling milk, and stirring thoroughly for a few minutes. A more complete solution may, however, be obtained by allowing the milk to simmer for a short time in a vessel of boiling water. It forms a useful addition to beef tea, soups, and other articles of dietary.

Another point of interest is the amount of alcoholic stimulant administered in this case. For nearly two months the patient took over three pints of brandy a week, with a very fair allowance of champagne and port. I am convinced that without the alcohol we should never have tided him over his illness. Of the quality of the brandy administered I know nothing, probably it was good of its kind but not the best. In private practice I should have adopted the hint given by Dr. Wm. Murray of Newcastle-on-Tyne in his *Rough Notes on Remedies*, and ordered liqueur brandy made from the finest grape, known as the champagne grape, grown in the Charente (Cognac) district. This old brandy is a most valuable remedy in cases of extreme exhaustion when the patient is sinking, in spite of all the food, medicines, and stimulants which can be given. It has quite a different action to the new coarse spirit commonly sold under the name of brandy. Age is of the utmost importance, and Dr. Murray recommends 40 years old brandy. This, however, is not the best that can be obtained, and I usually prescribe either the 1828 or the 1820 vintages, both of which are still procurable.

## MEMORANDA:

### MEDICAL, SURGICAL, OBSTETRICAL, THERAPEUTICAL, PATHOLOGICAL, ETC.

CASE OF BROMOFORM POISONING: RECOVERY. I THINK it right to record the following case owing to the rarity of its occurrence:

On the morning of April 6th, 1900, I was urgently called to J. H., a girl aged 6 years, who had, at 8.30 A.M., in her mother's temporary absence from the bedroom, swallowed 3 jss of pure bromoform. She had taken a liking for it through having 2 drops on sugar thrice daily for whooping-cough. Immediately after swallowing the drug the child was observed to walk to the parlour for breakfast as if intoxicated, and then suddenly become unconscious. The parents meanwhile, having smelt the bromoform in the breath, very properly administered 3 ij of mustard in half a cup of water, and as this had not the desired effect, 3 j of ipecacuanha wine was given.

When Dr. McCheyne Miller and I arrived shortly afterwards, we found the child extremely collapsed and almost moribund. We could feel no pulse at the wrist, but the heart was beating very irregularly, about 120. The respirations were very shallow, about 8 a minute, and the breath had a strong odour of bromoform. There was a marked lividity of

the face and lips; both pupils were pin-point and did not react to light, and there was no conjunctival reflex.

We at once washed out the stomach by means of a No. 11 rubber catheter with tube and funnel attached. The fluid returned smelt strongly of bromoform, and we continued lavage with warm water and sodium bicarbonate for an hour and a half, until there was no longer any smell of the drug. We then washed out without Condy's fluid, and gave some strong coffee and sal volatile both by the tube and *per rectum*. Sinapisms had also been applied to the precordia.

The pulse gradually improved, and the heart became regular. The pupils appeared now more normal, and even at times dilated, but unless we kept rousing the child they were apt to contract again. At 11 A.M. there were signs of returning consciousness, but there was the greatest tendency to sleep. At 11.30 the child was able to answer questions, the words at first being drawled out very slowly. I was able to leave the child in the parents' charge by 11.45, but she had to be kept from sleeping during the whole day. Her stomach did not retain anything till evening. Next morning she was in her usual health, and able to enjoy her food.

Regarding the amount of the drug taken (3 jss), I can vouch for it myself, as the 3 ij bottle had been renewed the previous evening, and there was only 3 ss remaining in it.

Edinburgh.

T. BROWN DARLING, M.D.

### A CASE OF RIGID OS UTERI TREATED WITH COCAINE.

A MULTIPARA, aged 37, was taken in labour at 11.30 P.M. on December 17th, 1899. She had had seven children. Her previous labours had always been lingering, but there had never been any call for operative interference. The pains were severe, but not frequent, only one or two taking place in the hour. She remained in this condition until December 19th, when at 3.30 A.M. the "waters broke," and a midwife was sent for. The midwife examined and found the os about the size of a shilling, and then left the patient for another case.

At 11 A.M., December 19th, I was called to see her. I found her tired and rather worn out; the pains were severe, and coming every four or five minutes; her pulse was good and regular, and beating at the rate of 90 per minute. I found the os uteri dilated to the size of a half crown; the walls were thin and tense. No bag of membranes presented. The position of the occiput was in front and to the left. I waited for several pains, but finding that the os was very unyielding I decided to apply cocaine (a 10 per cent. solution) on a piece of cotton wool; the head came well down, and easily compressed the pledge of cotton wool between it and the walls of the os. After the occurrence of two pains I again examined the patient, and found the os fully dilated and the walls quite soft. I could easily sweep my finger round the presenting head (which was a small one) and between it and the pelvic walls, but to my surprise the head did not advance with the pains.

I now introduced my hand into the vagina, and found that the neck of the child was securely gripped by the lower part of the body of the uterus; the part below this situation, extending to the external os, was soft and flabby. I tried to pass my finger between the neck of the child and the band, but failed to do so. I now applied forceps (without an anaesthetic), and by steady traction on them for a minute or so overcame the resistance of the band, and the child was quickly delivered. The placenta was removed without any trouble, and the patient made an excellent and uneventful recovery.

I have now used cocaine in a good number of cases of slowly-dilating or of rigid os, and all cases so far have been most successful, this being the first case in which any difficulty arose.

Wotton-under-Edge.

E. F. CLOWES, M.R.C.S., L.R.C.P.

### RESORCIN IN RODENT ULCER AND OPERATIONS FOR CANCER.

AFTER reading the very interesting Lettsomian Lectures of Sir William Banks, I feel induced to record the following short experience, as it bears on the question of local infection of wounds in removing malignant growths.

In the year 1891 a patient presented himself with a typical epithelioma of the lower lip. This was removed in a London hospital in May of that year. In June, 1892, the growth recurred, but I was struck with the fact that it did not origi-

nate in the original linear scar, but about one-eighth of an inch off. This I removed with the usual V incision. In September of the same year there was a second recurrence, but I do not recollect its exact relation to the original scar. This I removed again, and remembering the action of resorcin on rodent ulcer, I put some of the powder into the wound. The result was that there was no immediate union, but delayed healing from a ragged ulcer with a better result than I anticipated. Since that date my patient has had no recurrence, and the cicatrix in the lip causes him no trouble.

There can be no doubt as to the value of resorcin in rodent ulcer. I have lately had a typical case, which was cured in five or six weeks by rubbing in the powder every night after removing the crusted covering and ceasing the application when the reaction was excessive.

Sevenoaks.

JAMES E. BLOMFIELD, M.B.Oxon.

## REPORTS

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

#### STAFFORDSHIRE GENERAL INFIRMARY.

CASE OF JACKSONIAN EPILEPSY TREATED BY OPERATION.  
(Reported by HERBERT MARSON, F.R.C.S.Eng., M.D., B.S.Durh., Surgeon to the Infirmary.)

H.S., aged 10, was admitted to the infirmary on December 5th, 1899, suffering from partial paralysis of the left arm and leg, and frequent epileptiform attacks. It appears that eight years previously he fell from a third-storey window, and was picked up unconscious. He sustained an injury to the right side of the head. It was afterwards noticed the left hand was kept clenched, and that there was considerable weakness of the left arm, and to a less degree of the leg. He was unable to put his hand to his head, and could only walk with difficulty. He continued in this condition until last September, 1899, when he had three fits in quick succession, after the last of which he was unconscious for an hour. The fits began with cramp in the calf of the left leg, and were confined to the left side; during the attack he was unconscious, and after it there was great exhaustion. The fits continued until admission, sometimes several occurring daily.

On admission there was found to be a slight depression of the right side of the skull, somewhat in front of the motor area for the lower limb. I decided to trephine in this position and remove the depressed bone. On removing the cranium, about two drachms of clear fluid escaped; on raising the bone the under-surface was found to be considerably roughened, and a cyst about the size of an olive was present adherent to the cranium. For some days there was a very large amount of discharge, the fluid being free from albumen. The day after the operation he had two slight seizures, each being marked by spasm of the right leg and fixation of the eyeballs; but this and the few subsequent attacks were not followed by unconsciousness or drowsiness. Three days later he had another slight attack, during which the arms and legs of both sides became rigid. The stitches were removed on the tenth day, when the wound was completely healed. The temperature never rose above normal. Previous to leaving the infirmary on January 11th he had one or two slight attacks, and he has only had three in the three months which have since elapsed. He has regained considerable power in the leg and arm, he walks much better, and is now able to put his hand on the top of his head and move the fingers more perfectly.

FEMALE MEDICAL INSTITUTE IN MOSCOW.—The statutes of the Moscow Society for the establishment in that city of an institute for the education of women for the medical profession have been settled. The Society proposes to collect funds for the establishment and upkeep of the institute by means of voluntary contributions, popular lectures, theatrical representations, concerts, balls, etc.

## REPORTS OF SOCIETIES.

### PATHOLOGICAL SOCIETY OF LONDON.

A. PEARCE GOULD, F.R.C.S., Vice-President, in the Chair.

Tuesday, May 29th, 1900.

#### SPECIMENS.

DR. H. MORLEY FLETCHER exhibited (1) a hypertrophied brain. The specimen was obtained from a boy 10 years of age, whose head was unusually large in infancy, and who was subject to headache and fits. Mentally he was backward. His father's head was large in the frontal region. The actual weight was 73 ounces, which exceeded the heaviest recorded brains from adults. Histologically the enlargement was found due to an increase of neuroglia; the term "hypertrophy" was, therefore, not strictly correct; that of megalencephaly was not open to the same objection. No evidence of rickets was forthcoming. (2) Tumour of the posterior mediastinum. The interest attaching to this was the presence of nerve cells in it. The patient, a female, aged 32, was admitted suffering from pain in the chest and anaemia. The tumour, after death, was found to consist of a large bilobed mass infiltrating the bodies of the vertebrae and encroaching upon the spinal canal. Histologically the growth exhibited non-medullated nerve fibres, with mucous tissue and nerve cells. Its structure indicated an origin in the sympathetic ganglia of the thorax. The malignant element was sarcomatous; there was a metastatic sarcomatous growth in the right lung, but this contained no nervous elements. (3) Two cases of sacrococcygeal tumour. One of these was a cystic innocent tumour, arising probably in connection with the neureneric canal. The other was remarkable in its being malignant. The tumour was removed by operation from a male child, but recurrence ensued in the pelvic lymphatic glands and proved fatal. In structure it might be classed as an adeno-carcinoma. No visceral metastasis took place. The growth arose probably in the postanal gut.

#### CONGENITAL HYDROCEPHALUS.

DR. E. CAUTLEY described a specimen in which the prosencephalon was undeveloped, but in which the medulla, pons, crura, optic thalami and cerebellum were present. The prosencephalon was represented by a membranous bag distended with fluid which had accumulated in and dilated the ventricles. The child lived till the age of four months, and exhibited drowsiness and rigidity of the limbs, with retraction of the neck. There was much craniotubes.

#### THYROID OF PUPPY OF THYROIDLESS BITCH.

MR. W. EDMUNDS recorded a repetition of Halsted's experiment, who found that the thyroid of the newborn pups of dogs whose thyroid had been in part excised underwent hypertrophy; the thyroid glands of such puppies were about twenty times as large as normal, and microscopically showed an entire absence of colloid, and only rarely a trace of vesicles. The author had removed on one side the lobe of the thyroid with the parathyroids, and on the other side nearly the whole of the thyroid lobe, leaving one parathyroid and a small piece of thyroid attached. About four months later the bitch gave birth to a puppy; the thyroid of the latter showed an entire absence of colloid and a smallness of the secreting cells, the changes indicating presumably a compensatory hypertrophy to make up for the maternal defect. It had been said that the health of women suffering from either myxedema or Graves's disease was much improved during pregnancy. These experiments suggested the explanation.

#### A DUCK WITH WEBLESS FEET.

DR. ARTHUR SAUNDERS exhibited the above. The bird was a tame, white duck of a mixed breed of the Aylesbury and Pekin strains, and was bred at Laleham-on-Thames, in Surrey. The deformity was congenital, and had occurred in this member only of the breed. The length and position of the toes were normal. There was, however, some deformity, probably acquired, the ends of the toes having a worn, thickened, and clumsy appearance, while the nails were distorted. The web was represented only by a small fold in the angles between the toes.

what they are like, and we should have some sense of appreciation of their enterprise.

Advertisement in our medical journals is a good way of reaching the profession, but personal calls and samples are also necessary, and even I might say educational.—I am, etc.,

May 22nd.

M.D.

SIR.—In reply to your correspondent, "M.D., M.S.," in reference to chemists' travellers, I would venture to suggest as a remedy exclusive dealing with the Surgical Supply Association, Manchester, which has about six hundred shareholders, and is prepared to meet the requirements of the general practitioner in regard to drugs, sundries, bottles, stationery, etc., without employing the aid of travellers, and with a consequent saving of time and money to the busy practitioner.—I am, etc.,

Manchester, May 19th.

WILLIAM GRAHAM.

SIR.—One cannot help thinking that your correspondent's letter at page 1320 *re* Medical Co-operation supplies the remedy for which "M.D., M.S.," at page 1263, asks.

Apart from the saving in one's drug and instrument bill (to the general practitioner at the present time no trivial matter) the system introduced by this Association makes it quite possible for one to entirely dispense with travellers and touting agents of all sorts. "No travellers need apply" must be our formula, and we must resolutely destroy or return all samples, circulars, and the like. The remedy is in the hands of the profession, if only it chooses to take united action.—I am, etc.,

Whitby, Yorks, May 27th.

A. J. SHARP.

#### NEWSPAPER PARAGRAPHS.

SIR.—My attention has been called to various paragraphs which have appeared in the lay press with reference to the case of a private patient of mine. Will you allow me to say that they have been inserted without my knowledge or consent, and that they have caused me much annoyance?—I am, etc.,

Harley Street, W., May 30th.

G. ANDERSON CRITCHETT.

## OBITUARY.

### LANDON CARTER GRAY, M.D.,

New York.

DR. LANDON CARTER GRAY, who died on May 8th, was the son of a prominent lawyer and was born at New York in 1850. He came of an old Virginian family. He matriculated at Columbia College, but was compelled to abandon his studies on account of progressively failing vision, which had followed an attack of scarlet fever. Upon leaving Columbia he went to Europe, and, his eyesight improving, he entered the University of Heidelberg, where he remained three years. Returning to New York he began the study of medicine, taking his Doctor's degree at Bellevue Medical College in 1873. He began practice in New York, but within a year or two moved to Brooklyn, where he began to give special attention to neurology. At the age of 32 he was filling with distinction the Chair of Neurology in the Long Island Hospital College of Medicine. A few years later he accepted the professorship of mental and nervous diseases at the New York Polyclinic, of which he was one of the founders. He returned to New York in 1886, where he continued actively at work as a consultant in nervous diseases and a medico-legal expert until within two or three months of his death.

Dr. Gray was Visiting Neurologist to St. Mary's Hospital in Brooklyn, Consulting Neurologist to the Hospital for the Ruptured and Crippled, and President of the American Neurological Association, of the New York Neurological Society, of the Neurological Section of the Academy of Medicine, of the Society of Medical Jurisprudence, and of the New York County Medical Society. For nine years he held the position of Chairman of the Executive Committee of the Congress of American Physicians and Surgeons. He was the author of many valuable contributions to neurology and psychiatry. He discovered and demonstrated the value of surface variations

in the temperature of the scalp as a means of diagnosis in certain intracranial affections. He discovered and described a symptomatic entity among the convulsive disorders akin to chorea, to which he gave the name "palpus." He published valuable observations on syphilis of the nervous system, melancholia, and the muscular atrophies. He was the author of a treatise on mental and nervous diseases which has passed through several editions. Dr. Gray's opinion and advice were in constant demand, and as a medico-legal expert he was described by a distinguished judge as the very model of what a medical witness ought to be. In his personal character he was a man of the strictest integrity and the most delicate sense of honour.

LIEUTENANT EDMUND LEONARD MUNN, of the Royal Army Medical Corps, who died at Boshof on May 23rd, of enteric fever, was the son of Mr. David Munn, F.R.S.E., of 12, Danube Street, Edinburgh. He was one of four brothers in the medical profession, one of whom is now a civil surgeon with the army in South Africa. He was only 24 years of age, and was entirely educated in Edinburgh. Throughout his medical course he was a member of the University Artillery Battery. After qualifying he joined the army. He was attached as a mounted field surgeon to the First Division under Lord Methuen, and was in all the engagements of that general. He was much liked by a wide circle of friends in and out of the army.

DR. MATHIAS HIERONYMUS SAXTORPH, Professor of Surgery in the University of Copenhagen, whose death was recently announced in the BRITISH MEDICAL JOURNAL, was the son and the grandson of two famous obstetricians—Johann Sylvester and Mathias Saxtorph. He was born at Copenhagen in 1822, and studied his profession in the University of that city. After graduation, he travelled for some time, noting the methods of work and the practice in use among the professors of the healing art in other countries. On his return to Denmark, he was in 1855 appointed Reader in Surgery in the University of Copenhagen, becoming Ordinary Professor in 1862. From 1866 to 1883 he was Senior Surgeon to the Royal Frederik Hospital and afterwards Professor of Clinical Surgery. In 1884 an honorary degree was conferred upon him by the University of Edinburgh. Professor Saxtorph's most important work is a treatise on clinical surgery, published at Copenhagen in 1877-79, with supplements which appeared respectively in 1883, 1884-85, and 1886. It embodies the fruits of his acute observation and ripe experience.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. Dr. Porfixio Valiente y Delmonte, Chief of the Medical Department of the Cuban Army in the late Revolution, and at the time of his death Alcalde of the city of Santiago de Cuba; Dr. Van Millingen, of Constantinople, a well-known ophthalmologist; Dr. Oliver Payson Hubbard, formerly Professor of Chemistry and Pharmacy in Detroit College, and sometime President of the New York Academy of Sciences, one of the most distinguished geologists in America, aged 80; Dr. Amenille, formerly President of the Société Médico-Chirurgicale; Professor Rudolf Ritter von Limbeck, Physician to the Rudolfsstiftung, Vienna, and author of contributions to medical literature on metabolism, the blood, etc., aged 39; Dr. G. Planchon, Member of the Académie de Médecine and Director of the Ecole Supérieure de Pharmacie, Lyons; Professor Bose, head of the Surgical Clinic of the University of Giessen, aged 60; Dr. Alphonse Milne Edwards, Professor of Zoology in the University of Paris, aged 62; Dr. Reinbold Long, of Berlin, one of the foremost medical jurists in Germany, aged 65; Dr. J. Chéron, former Professor of Zoology at Strassburg, and for the last thirty years Physician to the St. Lazare Infirmary, Paris, author of many contributions to medical literature on electrotherapy, the use of oxygenated water in tuberculosis, etc., and of a work entitled *Lois Générales de l'Hypodermie*, founder and for fifteen years Editor of the *Revue Médico-Chirurgicale des Femmes*, aged 66; Dr. Leopold Grossman, head of the Ophthalmological and Otological Department of the St. Johannes Hospital, Buda-Pesth. He was recognised as the

leading specialist in diseases of the eye and ear in Hungary, and was the author of numerous papers on subjects connected with these specialities; and Dr. Sergius Korssakoff, Professor of Psychiatry in the University of Moscow, aged 46.

## ROYAL NAVY AND ARMY MEDICAL SERVICES.

### ROYAL ARMY MEDICAL CORPS EXCHANGE.

The charge for inserting notices respecting Exchanges in the Army Medical Department is 3s. 6d., which should be forwarded in stamps or post office order with the notice, not later than Wednesday morning, in order to ensure insertion in the current issue.

A CAPTAIN R.A.M.C. is willing to exchange. For particulars address No. 2,500, BRITISH MEDICAL JOURNAL Office, 429, Strand, W.C.

### ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty: WILLIAM H. NORMAN, Staff-Surgeon, to the *Cormoran*, for Gibraltar Hospital, undated; NORMAN L. RICHARDS, Surgeon, to the *Cormoran*, for Gibraltar Hospital, Dockyard, and Naval Extension Works, undated.

General Buller reports that Staff-Surgeon F. J. LILLY, of H.M.S. *Forte*, has been discharged from hospital to duty.

### ROYAL ARMY MEDICAL CORPS.

SURGEON-LIEUTENANT-COLONEL HENRY WRIGHT, 1st Volunteer Battalion the Lincolnshire Regiment, is granted the temporary rank of Major whilst serving in South Africa, May 29th.

Sergeant-Major RODERICK R. COWAN is appointed Quartermaster, with honorary rank of Lieutenant, on augmentation, May 30th.

Surgeon-Captains E. J. G. BARKLEY, 4th Volunteer Battalion the Queen's (Royal West Surrey Regiment), and R. PELLOK, M.B., 3rd (the Blythswood) Volunteer Battalion the Highland Light Infantry, are borne as supernumerary whilst serving with the Royal Army Medical Corps in South Africa, May 30th.

Lieutenant-Colonel AYLMER ELLIS HAYES, D.S.O., of Farnborough, died on May 19th at the age of 49. He entered the service as Surgeon, February 4th, 1877; became Surgeon-Major, February 4th, 1880; Surgeon-Lieutenant-Colonel, February 4th, 1897. He accepted retired pay, September 1st, 1897. He served in the Afghan war of 1878-80 (medal); in the operations near Suakin in December, 1888, including the action at Gemaizah (mentioned in despatches, medal with clasp, Third Class of the Order of the Medjidie, and Khedive's bronze star); and on the Soudan frontier in 1889, when he was present in the action at Toshi (mentioned in despatches, D.S.O., and clasp).

Lieutenant EDMUND LEONARD MUNN died of enteric fever at Boshof on May 23rd. His commission was dated July 28th, 1899. He went to South Africa in October last.

Major THOMAS ALFRED PERRY MARSH is also reported to have died from enteric fever at Deelfontein on May 22nd, at the age of 44. He was appointed Surgeon, July 29th, 1882, and Surgeon-Major two years thereafter. He was in the Burmese campaign in 1885-7 in medical charge of a battery of mountain artillery, and was present in several engagements near Ningyan and Yemethen, and in the latter place during its investment in February and March, 1886. He received the Frontier medal with clasp for this campaign. He proceeded to South Africa in October last.

The following officers have been discharged from hospital for duty: Captain R. D. JEPHSON, Captain H. J. PARRY, Captain F. W. BEGIE, Captain N. TYACKE.

Civil Surgeons GOODMAN and A. BALFOUR are reported as dangerously ill in hospital at Estcourt.

### MILITIA MEDICAL STAFF CORPS.

SURGEON-LIEUTENANT A. E. MADGE resigns his commission, May 30th.

### INDIAN MEDICAL SERVICE.

LIEUTENANT-COLONEL C. J. H. WARDEN, Bengal Establishment, is permitted to retire, from June 4th. He entered the service as Assistant-Surgeon, March 31st, 1874, and became Surgeon-Lieutenant-Colonel, March 31st, 1894.

Colonel G. MCB. DAVIS, M.B., C.B., D.S.O., Bengal Establishment, is appointed to officiate as Principal Medical Officer, Punjab Command, with the temporary rank of Surgeon-General, from April 23rd.

Lieutenant-Colonel J. T. B. BOOKEY, Bengal Establishment, is granted the temporary rank of Colonel, from April 22nd, while officiating as Principal Medical Officer, Punjab Frontier Force.

Lieutenant-Colonel H. F. P. F. ESMOND-WHITE, Madras Establishment, is granted the temporary rank of Colonel, from March 29th, while officiating as Principal Medical Officer, Bangalore and Southern Districts.

### THE VOLUNTEERS.

THE Volunteer Officers' Decoration has been conferred upon the following officers: Surgeon-Lieutenant-Colonel SAMUEL JOHNSTON, M.D., 2nd Volunteer Battalion the Prince of Wales's Own (West Yorkshire Regiment); Surgeon-Lieutenant-Colonel ROBERT B. SMITH, 1st Volunteer Battalion the Leicestershire Regiment; Surgeon-Captain JOHN O. WILSON, M.D., 4th (Donside Highland) Volunteer Battalion the Gordon Highlanders; Surgeon-Major DUNCAN W. CURRIE, M.B., 7th (Clackmannan and Kinross) Volunteer Battalion Princess Louise's Argyll and Sutherland Highlanders.

Surgeon-Lieutenant P. MCK. TERRY, and Hampshire Artillery (Southern Division Royal Garrison Artillery), resigns his commission, and is appointed Second Lieutenant, May 30th.

Surgeon-Lieutenants F. A. BROOKS, M.D., 1st Suffolk and Harwich Artillery, and E. C. McCARTHY, M.B., 4th Volunteer Battalion the Cheshire Regiment, are promoted to be Surgeon-Captains, May 10th.

The undermentioned gentlemen are appointed Surgeon-Lieutenants in the corps respectively specified, dated May 30th: JOHN A. MASTERS, M.D., the Electrical Engineers; JAMES G. BAIN, M.B., 2nd Volunteer Battalion the Prince Albert's (Somerset Light Infantry); JOHN S. MCKENDRICK, M.B., 4th Volunteer Battalion the Cameronians (Scottish Rifles).

### VOLUNTEER MEDICAL STAFF CORPS.

QUARTERMASTER AND HONORARY CAPTAIN N. H. NIXON, the London Companies, resigns his commission, retaining his rank and uniform, May 30th.

Mr. ARTHUR T. LAKIN, M.B., is appointed Surgeon-Lieutenant in the Manchester Companies, May 30th.

### THE ROYAL ARMY MEDICAL CORPS STALL AT THE NATIONAL BAZAAR.

Of the Regimental and Corps stalls at the National Bazaar, held in the Royal Palace Hotel, Kensington, from May 24th to 26th, not by any means the least tasteful was the stall of the Royal Army Medical Corps. It was visited on the opening day by the Princess of Wales, who not only made some valuable and handsome contributions to it, but also purchased generously from the exhibits therein. The turnover at the stall during the three days of sale and on the auction day (Monday following) reached a sum not far short of £200.

### THE CRETAN INSURRECTION.

It has been pointed out to us that, in our review of the Army Medical Report for 1898, we did not notice the very admirable services of the army medical officers who repulsed the attack on the Greek hospitals in Crete. This was due to no lack of appreciation of the services rendered on that occasion, but to the fact that they were described in the BRITISH MEDICAL JOURNAL soon after the event. The forethought of Colonel Ryan, the senior medical officer, in arming the patients in hospital, and the bravery of Captain Clarke, and of Lieutenants Addams and Williams, undoubtedly prevented a general massacre. These officers received no due recognition of their services on that occasion.

### AMBULANCE WORK IN WAR.

IN a paper read before the Royal United Service Institution recently by Major A. C. Yate, of the Indian Staff Corps, on The Knights Hospitallers and Ambulance Work in War, Major Yate dealt with the work of the ambulance department of the Order of St. John of Jerusalem in England, and especially dwelt upon the held the Order has been able to send to the front in South Africa. Although an Order of some 800 years' standing the practical and national benefits that it has been able to bestow had, he said, never been more pronounced than at the present moment. Apart from purely philanthropic work the Order was first brought prominently before the public as an educational body, when the late Colonel Duncan, R.A., under the auspices of the St. John Ambulance Association, in 1877-78, introduced the subject of "first aid." Since that date the Association has continued to teach the public how to render "first aid." The example set by the Association in Britain has been followed, not only in the British Colonies, but in every civilised country. The St. John Ambulance Association had organised also a brigade of bearers under the name of the St. John Ambulance Brigade, numbering at the present time 11,000. The bearers wear a distinctive uniform, undergo a careful training in first aid, in stretcher and ambulance carriage work, and had all the organisation of a volunteer military body. The spirit and enthusiasm which prevailed in the Brigade was best shown by the fact that some 900 of the members had gone to South Africa for service in the field and in the military hospitals. At present the St. John Ambulance Association and Brigade were working with the Red Cross Society (National Aid Society), the Army Nursing Reserve and the St. Andrews Ambulance Association (Scotland), under the auspices of the British Central Red Cross Committee, so far as service in South Africa was concerned. The Association, however, did its best work in civil life. No public gathering was held at which the members are not present officially. In the streets, in public assemblies, whether in-doors or out-of-doors, the men and women of the Brigade are seen ready and equipped to help in case of accident. Major Yate's eulogy of the work of the St. John Ambulance Association was well timed and deserved, considering the great help the trained bearers are in relieving suffering at the front in South Africa.

### TEMPORARY COMMISSIONS TO CIVIL PRACTITIONERS.

ANOTHER M.D. writes: I quite agree with your conclusions that a civil practitioner placed in charge of a military hospital is an anomaly, and is, moreover, in a quite illegal position. The question, therefore, ought to be raised, Why civil practitioners placed in charge of military hospitals should not receive acting or temporary commissions? Those employed in South Africa will probably receive medals, etc.; we at home—nothing.

### ALLOWANCES IN CAMP.

ENGLAND asks: To what would a surgeon-lieutenant-colonel (of Volunteers) of 25 years' service be entitled while camping for 14 consecutive days as a mounted officer in command of a bearer company?

\*\* Perhaps some of our readers who have had personal experience of the position defined may be able to answer.

### PAY OF MEDICAL PROBATIONERS.

VISITOR writes: At a time when the Royal Army Medical Corps cannot attract sufficient candidates for commissions, would it not be wise to consider the position of those sent to Netley? The probationer receives £8 a month, of which £6 is absorbed in bare messing, and for the first month, with entrance fee, £8 10s. In addition he has to pay a servant, washing, and other necessaries. In the navy, otherwise, a pro-

expenses he might incur while so afflicted. His Honour, Judge Gwynne James, thought otherwise, and found for the plaintiff for the amount claimed.

#### CORONERS' POWERS IN IRELAND.

X. Y.—(1) and (2) It would be unwise to raise the question. (3) and (4) The coroner has absolute discretion in his own court. The Coroners' Act reads: "Where any coroner shall hold an inquest upon any dead body, and shall deem the attendance of some medical witness to be necessary at such inquest, he shall summon as such witness any legally qualified medical practitioner being at the time in actual practice at or near the place where such death happened."

#### EMPLOYERS' LIABILITY.

J. C. W. writes saying that he was called to attend a Board School caretaker in consequence of an accident which occurred while following his employment under the Board. The patient had compound fracture of both bones of the forearm which necessitated surgical attendance for over three months. A claim for five guineas was made on the Board for this, which was disputed, as the amount claimed was considered to be excessive, though the Board's responsibility was admitted. The fee claimed was ultimately paid without any legal proceedings being instituted. Our correspondent asks our opinion in reference to the amount of the fee he claimed.

\*.\* We do not hesitate to say that we regard the charge of five guineas made for this attendance as being a proper one, and we consider the Board showed good judgment in paying this amount and not allowing the case to go for trial by a county court.

#### THE COURTESY CALL.

MEMBER.—Undoubtedly the new-comer has a right to expect that his calls should be returned, but he should make allowances for busy men, and if he is received otherwise in a friendly manner he should not stand strictly upon a point of etiquette.

#### NEW-COMERS AND OLD PATIENTS.

LLEWELYN.—A correspondent puts the following case: A. is a new-comer, B. a rival practitioner who has been resident some years. In the event of a patient of B.'s calling at A.'s surgery for advice, does etiquette demand that A. should notify B. of the fact that he has attended his patient? In the further event, should the patient happen to be a member of the club of which B. is the medical officer, does this further fact make it more incumbent upon A. to notify the fact of his attendance to B.?

\*.\* We cannot say that an obligation lies upon a practitioner to whom a person applies for medical or surgical advice to find out the name of the patient's former medical attendant and communicate with him.

## UNIVERSITIES AND COLLEGES.

#### UNIVERSITY OF CAMBRIDGE.

Examiners.—Mr. F. G. Parsons, of St. Thomas's Hospital, has been appointed an additional Examiner in Anatomy for the Second M.B. Examination.

Honorary Degrees.—Among the recipients of Honorary Degrees on June 12th are the following Fellows of the Royal Society: Lord Rosse, astronomer; Sir Benjamin Baker, engineer; Sir W. L. Buller, zoologist. The list also includes Professor S. P. Langley, Secretary of the Smithsonian Institution, and Professor Poincaré, of Paris, mathematician.

Summer School.—The arrangements for the summer school for qualified practitioners are nearly contemplated, and a provisional programme has been issued.

Degrees.—The following Medical Degrees were conferred on May 24th:

M.D.—C. P. White, M.A., Sidney, Sussex.  
M.B.—W. M. Fletcher, M.A., Trinity; H. M. Harwood, M.A., Trinity; W. H. Maxwell, B.A., Trinity; D. P. Watson, B.A., Trinity; N. G. Bennett, B.A., St. John's; B. J. Collingwood, B.A., Caius; J. C. A. Rigby, B.A., Caius; A. Killick, B.A., Downing.  
B.C.—O. F. F. Grunbaum, B.A., Trinity; W. Norbury, B.A., Trinity; G. R. Slade, B.A., Trinity; J. C. Matthews, B.A., St. John's; A. E. Bodington, B.A., Caius; B. J. Collingwood, B.A., Caius; J. C. A. Rigby, B.A., Caius; A. Whitmore, B.A., Caius; A. Killick, B.A., Downing.

#### UNIVERSITY OF LONDON.

M.B. PASS EXAMINATION.—The following candidates have satisfied the Examiners:

First Division.—H. C. Barlow, Westminster Hospital; J. T. Dunston, Guy's Hospital; A. G. Ede, St. Bartholomew's Hospital; A. T. Pridham, St. Bartholomew's Hospital.

Second Division.—Cornelia Bonté Sheldon Amos, London School of Medicine and Royal Free Hospital; T. Anstey-Chave, St. Bartholomew's Hospital; A. J. V. Betts, Westminster Hospital; Isobel Sarah Bryson, Royal Free Hospital; L. Cook, Westminster Hospital; D. L. Davie, University College; A. Fraser, Guy's Hospital; C. S. Frost, St. Bartholomew's Hospital; G. R. Harcourt, St. Thomas's Hospital; F. J. Hasslacher, King's College; E. W. Holyoak, St. Mary's Hospital; J. W. Hunt, St. Mary's Hospital; W. S. Inman, University College, Sheffield; D. T. C. Jones, University College; C. V. Knight, St. Bartholomew's Hospital; C. J. I. Krumholz, University College; W. H. Lowman, King's College; M. T. Male, University College; E. A. Miller, B.Sc., Guy's Hospital; F. M. Morris, London Hospital; R. R. Mowll, King's College; H. R. Nutt,

St. Mary's Hospital; G. C. Owaley, Guy's Hospital; W. P. Panchridge, Middlesex Hospital; T. Perrin, St. Thomas's Hospital; G. E. J. A. Robinson, University of Dublin and Royal College of Surgeons of Ireland; H. H. Scott, St. Thomas's Hospital; N. F. Stallard, University College; W. S. V. Stock, University College, Bristol; R. T. Thomas, University College; R. L. Thornley, St. Bartholomew's Hospital; S. G. Tippett, Westminster Hospital; F. D. Turner, Guy's Hospital; L. A. Walker, St. Bartholomew's Hospital.

#### ROYAL COLLEGE OF SURGEONS IN IRELAND.

FELLOWSHIP EXAMINATION.—The following candidates, having passed the necessary examination, have been admitted Fellows of the College: Mr. J. H. Conway, Mr. F. C. Crawley, Miss S. Gray, Mr. K. L. G. Gunn, Mr. S. H. Law, Mr. M. J. Madden, Mr. J. F. Mannix, Mr. L. R. More-O'Ferrall, Mr. M. O'Sullivan, and Mr. W. G. T. Posnett.

## PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

#### HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 6,230 births and 4,098 deaths were registered during the week ending Saturday last, May 26th. The annual rate of mortality in these towns, which had been 17.8 and 18.2 per 1,000 in the two preceding weeks, further rose to 18.4 last week. The rates in the several towns ranged from 12.2 in Croydon, 12.6 in Cardiff, 13.4 in West Ham and in Birkenhead, and 15.8 in Swansea, to 23.5 in Oldham, 23.8 in Salford, 25.5 in Manchester, and 27.4 in Liverpool. In the thirty-two provincial towns the mean death-rate was 19.7 per 1,000, and exceeded by 3.3 the rate recorded in London, which was 16.4. The zymotic death-rate in the thirty-three towns averaged 2.0 per 1,000; in London this death-rate was equal to 1.8, while it averaged 2.1 in the thirty-two provincial towns, among which the highest zymotic death-rates were 3.4 in Derby and in Blackburn, 3.5 in Salford, and 3.7 in Oldham and in Sheffield. Measles caused a death-rate of 1.1 in Cardiff, 1.2 in Leeds, 1.5 in Plymouth and in Huddersfield, and 2.9 in Derby; scarlet fever of 1.1 in Blackburn; and whooping-cough of 1.2 in Manchester and in Salford, 1.4 in Oldham, and 1.5 in Liverpool. The mortality from "fever" showed no marked excess in any of the large towns. The 81 deaths from diphtheria in the thirty-three towns included 29 in London, 9 in Leicester, 9 in Sheffield, 5 in Brighton, and 4 in Leeds. Two fatal cases of small-pox were registered last week in Liverpool, but not one in any other of the thirty-three large towns. There were 5 small-pox patients under treatment in the Metropolitan Asylums Hospitals on Saturday last, May 26th; and 3 new cases were admitted during the week. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had risen from 1,647 to 1,732 at the end of the four preceding weeks, had further risen to 1,784 on Saturday last; 216 new cases were admitted during the week, against 176, 203, and 221 in the three preceding weeks.

#### HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, May 26th, 807 births and 606 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 17.7 and 19.5 per 1,000 in the two preceding weeks, further rose last week to 19.6, and was 1.2 per 1,000 above the mean rate during the same period in the thirty-three large English towns. Among these Scotch towns the death-rates ranged from 10.6 in Leith and 14.9 in Dundee, to 20.5 in Edinburgh and 21.4 in Glasgow. The zymotic death-rate in these towns averaged 2.5 per 1,000, the highest rates being recorded in Glasgow and Aberdeen. The 366 deaths registered in Glasgow included 1 from small-pox, 6 from measles, 2 from scarlet fever, 2 from diphtheria, 28 from whooping-cough, and 9 from diarrhoea. Two fatal cases of measles and 3 of diarrhoea were recorded in Edinburgh; 3 deaths from diarrhoea occurred in Dundee, 6 from whooping-cough and 3 from diarrhoea in Aberdeen, and 1 from measles in Leith.

#### THE MANAGEMENT OF FEVER HOSPITALS.

THE Ross-shire Press gives prominence to a dispute which has arisen between Dr. Bruce, Medical Officer of Health for Ross-shire, and Dr. Adam, of Dingwall, with reference to the admission of fever patients into the Ross Memorial Hospital, Dingwall. This hospital apparently has attached to it a small fever hospital, into which fever patients from the burgh and county are admitted, the local authorities being responsible for the cost of treatment, and the patients being attended by the Dingwall medical men who admit them. At a recent meeting of the Managers it was agreed that in future no patients should be admitted except through Dr. Bruce. This is objected to by Dr. Adam and by some of the managers, one of whom has resigned.

The dispute entered another phase when Dr. Bruce, who is also Medical Officer of Health for the Burgh of Dingwall, in his annual report stated that "a case that has recently occurred will best illustrate the present unsatisfactory manner of dealing with infection. Two members of a family of the name of Rodgers, residing in Blackwell Street, were taken ill—one, I understand, in the course of the third week in January. They were both sent (and, I believe, properly sent) to hospital on January 22nd. On the 30th I received the notification that they were labouring under diphtheria and proper cases for hospital treatment more than a week after their removal to that institution. It is true the notification was dated the 26th, but even if it had been handed to me on that day the children had already been four days in hospital. Apart from my being kept in ignorance, and not having any voice in their being fit subjects for hospital treatment, nothing had meantime been done to stop the spread of infection—in any official and decisive way."

Dr. Adam, who is a member of the Board, and was present when this report was submitted, controverted Dr. Bruce's statement and said, "Dr.

## MEDICAL NEWS.

THE annual general meeting of the British Dental Association will be held at the Yorkshire College, Leeds, on Saturday, June 2nd; Monday, June 4th; and Tuesday, June 5th.

PROFESSOR PORRO, Senator of the Kingdom of Italy, as to whose state of health very grave reports recently appeared in the Italian press, has now completely recovered. This announcement will, we are sure, be received with satisfaction by the professional brethren of the distinguished gynaecologist throughout the world.

MEDICO-PSYCHOLOGICAL ASSOCIATION.—Dr. Crochley Clapham, The Grange, near Rotherham, Honorary Secretary of the Northern and Midland Division of the Medico-Psychological Association, has issued an appeal inviting those assistant medical officers of asylums who have not yet done so to join the Association, and pointing out that assistant medical officers are represented on the council.

PAN-AMERICAN MEDICAL CONGRESS.—The first meeting of the Pan-American Medical Congress was held at Washington in 1893; the second at Mexico in 1896. It was there decided that the third should be held at Caracas in the Venezuelan Republic in 1898. The disturbed state of the political atmosphere in that region, however, made it necessary to postpone the Congress from one year to another, and now it has been officially intimated that it will be impossible to hold the meeting in December of the present year, as had been provisionally arranged. It is now proposed that the third meeting of the Congress shall be held at Havana in December, 1900.

BELGIAN ANTITUBERCULOSIS LEAGUE.—The National Antituberculosis League recently founded in Belgium is already receiving a gratifying measure of public support. Among those who have contributed to its funds are M. Lejeune, one of the Ministers of State; Baron Lambert de Rothschild; M. Mesdach de ter Kiele, Procurator-General of the Court of Appeal; and P. Janson, Member of the Senate. M. R. Warocqué has put down his name for an annual subscription of 100 francs, and has promised to the Hainaut branch of the League a fine site and the money required to build a sanatorium for the poor of that province.

THE YARROW CONVALESCENT HOME.—We have received the fourth annual report of the Yarrow Home for Convalescent Children of the Better Classes at Broadstairs. People of education and refinement who are not themselves wealthy may be assured that in this seaside home their children will receive sympathetic attention and meet other well-conditioned children. Of 938 admitted during the past year 684 returned to their friends thoroughly recovered, and most of the others very much benefited. In winter, when there is less demand for entrance, a few children are taken who need active treatment, and for those recovering from illness it is an ideal seaside home for that season. Particulars regarding admission may be obtained from the Secretary at the London office, 73A, Queen Victoria Street, E.C.

WOMEN DOCTORS UNDER THE POOR LAW.—The West Ham Board of Guardians are advertising for a female assistant medical officer for their workhouse and schools. This is said to be the first time that a lady has been advertised for in this capacity. Other Boards have merely signified that women were eligible. The new departure may be taken as proving that in the other Poor-law appointments which women have held they have done well. The first such appointment was that of Miss Agatha Porter, L.R.C.P.&S., at the Chorlton Union Hospital, Manchester, followed by that of Miss Christie, M.D., at Greenwich in 1896, of Miss Cruikshank, M.D., at Camberwell, succeeded by Miss Vaughan, M.D., Miss Meakin, M.B., and then Miss Garrett Anderson, M.B., and more recently Miss Stevenson, M.B., at the St. Pancras Workhouse.

ACCOMMODATION FOR HOLDING INQUESTS.—The London County Council has dealt vigorously with the powers under the Public Health Act for providing proper accommodation for the holding of inquests, the reception of dead bodies awaiting interment, and the provision of *post-mortem* rooms. The question of providing a central morgue was discussed some years ago, and postponed pending the consideration by

a joint Committee of the County Council of the question how far the improvement of local provision of mortuary accommodation by local authorities would render such central morgue necessary or otherwise. The Committee in question, under the chairmanship of Sir George Harris, has done a large amount of useful work, and it was able recently to report the following striking figures to the Council. In 1896 no fewer than 583 inquests in London were held amid the desecrating surroundings of the public-house; in 1897 only 28 were held in licensed houses; in 1898 only 9; while last year not a single inquest in London was held in a public-house.

BIRMINGHAM MEDICAL BENEVOLENT SOCIETY.—At the annual meeting of this Society Mr. D. C. Lloyd Owen presided, and it was reported that 16 annuitants had been on the books of the Society at the beginning of the year, 1 had withdrawn owing to improved circumstances, and 1 had died. The annual value of the grants ranged from £15 to £40, and the sum distributed during the year was £554 10s. The invested funds amounted to £15,347. Twenty-four members had joined during the year, 11 had retired, and 3 had died, making the total membership 395. On the proposition of Mr. Lloyd Owen, seconded by Dr. Rickards, Sir James Sawyer was elected President, and took the chair. Dr. Haynes (Leamington) was chosen president-elect; Mr. F. W. Underhill (Moseley) and Dr. F. S. Goulder (Dudley) were chosen vice-presidents, Dr. Savage and Mr. T. F. Chavasse were reappointed treasurers, Mr. W. F. Haslam hon. secretary, Dr. Stacey Wilson hon. auditor, and Dr. Agar, Mr. Bennett May, and Dr. Simon directors.

## MEDICAL VACANCIES.

The following vacancies are announced:

BILKENHEAD BOROUGH HOSPITAL.—Resident Junior House-Surgeon. Salary, £75 per annum, and sum of about £25 is usually obtained by police and notification fees. Applications to the Chairman of the Weekly Board.

BILKENHEAD AND WIRRAL CHILDREN'S HOSPITAL.—House-Surgeon. Salary, £100 per annum, with board, residence, and laundry. Applications to the Honorary Secretary, 52, Grosvenor Road, Birkenhead, by June 25th.

BIRMINGHAM CITY (FEVEE) HOSPITAL.—Assistant Medical Officer. Salary, £120 per annum, with board, residence, etc. Applications to the Medical Superintendent.

BIRMINGHAM AND MIDLAND EYE HOSPITAL.—Assistant House-Surgeon. Salary, £60 per annum, with apartments and board. Applications to the Chairman of the Medical Board by June 4th.

BIRMINGHAM AND MIDLAND HOSPITAL FOR SKIN AND URINARY DISEASES, John Bright Street.—Clinical Assistant. Applications to the Secretary of the Medical Committee by June 4th.

BIRMINGHAM: QUEEN'S HOSPITAL.—(1) Resident Physician. (2) House-Physician. (3) House-Surgeon. Appointments for one year. Salaries, £50, with board, lodgings, and washing. Applications to the Secretary by June 20th.

BRECON INFIRMARY.—Resident House-Surgeon; unmarried. Salary, £90 per annum, with fully furnished apartments, board, etc. Applications to the Secretary, 6, Broad Street, Brecon, by June 1st.

BRENTWOOD, ESSEX COUNTY ASYLUM.—Locum Tenens, not over 30 years of age. Terms, £35 per week, with board and residence. Applications to the Medical Superintendent.

BRISTOL ROYAL HOSPITAL FOR SICK CHILDREN AND WOMEN.—House-Surgeon. Salary, £120 per annum, with rooms and attendance. Applications, endorsed "House-Surgeon," by June 13th.

BUXTON: DEVONSHIRE HOSPITAL.—(1) House-Surgeon. Salary, £100 per annum. (2) Assistant House-Surgeon. Salary, £50 per annum. Furnished apartments, board, and washing provided in both cases. Applications to the Secretary.

CARDIFF INFIRMARY.—Assistant House-Physician. Appointment for six months, but renewable. Salary at the rate of £50 per annum, with board, washing, and apartments. Applications to the Secretary.

CARLISLE DISPENSARY.—House-Surgeon. Salary, £150 per annum, with apartments not board. Applications to the Honorary Secretary, 23, Lowther Street, Carlisle.

CARMARTHEN UNION.—Medical Officer and Public Vaccinator for the County District. Salary, £60 and fees. Applications, marked "County Medical Officer," to the Clerk, 7, Hafod Street, Carmarthen, by June 21st.

CHELSEA HOSPITAL FOR WOMEN.—Pathologist. Applications to the Secretary by June 11th.

CHORLEY DISPENSARY AND COTTAGE HOSPITAL.—House-Surgeon. Salary commencing at £30 per annum, with board and lodgings. Applications to the Honorary Secretary.

CUMBERLAND AND WESTMORLAND ASYLUM, Carlisle.—Locum Tenens. Terms, £35s. per week, with board and residence. Applications to the Medical Superintendent.

DENBIGHSHIRE INFIRMARY.—House-Surgeon. Salary to commence, £80, with board, residence, and washing. Applications to the Secretary.

DENTAL HOSPITAL OF LONDON, Leicester Square, W.C.—Two Assistant Dental Surgeons. Applications to the Secretary by June 11th.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell.—House-Physician. Board, residence, etc., provided, and honorarium of £25 on completion of six months' approved service. Applications to the Secretary by June 9th.

EDINBURGH: CRAIGLEATH POLEHOUSE AND HOSPITAL.—Resident Medical Officer. Salary at the rate of £100 per annum, with board and apartments. Applications to the Clerk of the Parish Council, Castle Street, Edinburgh, by June 11th.

EXETER: ROYAL DEVON AND EXETER HOSPITAL.—Junior Assistant House-Surgeon. Appointment for six months. Salary at the rate of £60 per annum, with board, lodgings, and washing. Applications to the House-Surgeon.

FULHAM PARISH.—Second Assistant Medical Officer at the Infirmary, Fulham Palace. Board. Appointment for six months. Salary at the rate of £60 per annum, with board, furnished apartments, and washing. Applications to the Medical Superintendent by June 4th.

GATESHEAD DISPENSARY.—Assistant Medical Officer. Salary, £130 per annum, rising to £160. Applications to the Secretary by June 9th.

GLoucester: COUNTY ASYLUM.—Locum Tenens. Salary £3 a week and all found. Applications to the Medical Superintendent.

GREAT NORTHERN CENTRAL HOSPITAL.—(1) House-Physician. (2) Junior House-Physician. Appointments for six months. Salaries at the rate of £60 and £30 per annum respectively with board, lodgings, and washing. Applications to the Secretary by June 18th.

HALIFAX ROYAL INFIRMARY.—Third House-Surgeon; unmarried. Salary, £50 per annum, with residence, board, and washing. Applications to the Secretary.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—(1) House-Surgeon. (2) House-Physician. Appointments for six months. Salaries, £20, with board and residence. Must be unmarried. Applications, on forms provided, to be sent to the Secretary.

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 STANLEY HOSPITAL.—Junior House-Surgeon. Salary, £70 per annum, with board, lodging, and washing. Applications, endorsed "House-Surgeon," to the Chairman, Medical Board, by June 8th.

LONDON COUNTY ASYLUM, Banstead.—Junior Assistant Medical Officer, between 23 and 30 years of age. Salary, £150 per annum, with board, furnished apartments, and washing. Applications, on forms provided, to the Clerk of the Asylums Committee, 6, Addison Place, S.W., by June 8th.

LOYDON SCHOOL, BORLINGTON.—Medical Practitioners, to give lectures on First Aid and Home Nursing, at Evening Continuation Schools, Nos. 6 guitars, for 6 lectures. Applications, on forms provided, to the Clerk of the Evening Continuation Schools Committee, School Board for London, Victoria Embankment, W.C., by June 9th.

MANCHESTER: ANCOATS HOSPITAL.—Junior House-Surgeon. Salary, £50, with board and washing. Applications to the Secretary.

MANCHESTER ROYAL INFIRMARY.—Temporary Honorary Assistant Surgeon. Applications to the Secretary by June 9th.

MILLER HOSPITAL AND ROYAL KENT DISPENSARY, Greenwich Road, S.E.—Junior Medical Officer. Salary, £60 per annum, with board, attendance, and washing. Appointment for six months, with prospect of re-election as Senior at £90 per annum. Applications to the Secretary by June 7th.

MONSALL FEVER HOSPITAL (Manchester Corporation).—Third Medical Assistant. Salary, £100 per annum, with board and lodging. Applications, endorsed "Appointment of Medical Assistant," to be sent to the Chairman, Sanitary Committee, Town Hall, Manchester, by June 9th.

NEW HOSPITAL FOR WOMEN, Euston Road, N.W.—Resident Obstetric Assistant; must be fully-qualified medical woman. Applications to the Secretary by June 11th.

NORTHAMPTON GENERAL INFIRMARY.—(1) House-Surgeon, unmarried, and not under 23 years of age. Salary, £125, with furnished apartments, board, etc. Assistant House-Surgeon is candidate, and if appointed his office will be vacant at salary £100. (2) Qualified Assistant to the House-Surgeon. Appointment for six months. Board, lodging, and washing provided, and honorarium of £25. Applications to the Secretary.

NORTH EASTERN HOSPITAL FOR CHILDREN, Hackney Road, N.E.—(1) House-Physician. (2) House-Surgeon. Appointments for six months. Salaries at the rate of £80 per annum, with board, residence, and laundry allowance. Applications to the Secretary, City Office, 27, Clements Lane, Lombard Street, E.C., by June 18th.

NORWICH: NORFOLK AND NORWICH HOSPITAL.—Assistant House-Surgeon. Appointment for six months. Board, lodging, and washing provided, and honorarium £20. Applications to the Secretary by June 12th.

NOTTINGHAM GENERAL DISPENSARY.—Assistant Resident Surgeon. Unmarried. Salary, £140 per annum, with all found except board. Applications to the Secretary.

OLD BIRMINGHAM INFIRMARY.—Senior House-Surgeon. Salary, £85 per annum, with board, residence, and washing. Candidates to state whether they would be willing to accept the junior post at £70 per annum. Applications to the Honorary Secretary by June 4th.

PONTEFRACT DISPENSARY AND INFIRMARY.—Resident Medical Officer. Salary commencing £150 per annum, with furnished rooms, etc. Applications to the Secretary by June 9th.

QUEEN CHARLOTTE'S LYING-IN HOSPITAL, Marylebone Road, N.W.—Assistant Resident Medical Officer. Appointment for four months. Salary at the rate of £50 per annum, with board, residence, and washing. Applications to the Secretary by June 5th.

READING: ROYAL BERKS HOSPITAL.—(1) House-Surgeon. Salary, £60 per annum. (2) Assistant House-Surgeon. Salary, £50 per annum. Board, lodging, and washing provided in each case. Applications to the Secretary by June 4th.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—(1) Two Examiners in Dental Surgery. (2) Hunterian Professors. (3) Erasmus Wilson Lecturer. (4) Arms and Gale Lecturer. Applications to the Secretary by June 4th.

SALISBURY: FISHERTON ASYLUM.—Assistant Medical Officer. Salary, £150 per annum, with board, lodging, and washing. Applications to Dr. Finch.

SCARBOROUGH HOSPITAL AND DISPENSARY.—Junior House-Surgeon. Appointment for six months, but eligible for re-election. Salary at the rate of £50 per annum, with board, residence, and washing. Applications to the Honorary Secretary by June 9th.

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

SOUTHPORT INFIRMARY.—Resident Junior House and Visiting Surgeon. Appointment for six months, but renewable. Honorarium at the rate of £50 per annum, with residence, board, and washing. Applications to the Secretary, 24, King Street, Southport, by June 9th.

WEST DERRY UNION.—Resident Assistant Medical Officer for the Workhouse. Salary, £100 per annum, with first-class rations, apartments, etc. Applications to the Clerk, 1, Broughton Terrace, West Derby Road, Liverpool, by June 13th.

WEST HAM HOSPITAL, Stratford.—Junior House-Surgeon. Salary, £75 per annum, with board, residence, etc. Appointment for one year, but eligible as Senior at £100. Applications, marked "Junior House-Surgeon," to be sent to the Secretary by June 6th.

WEST LONDON HOSPITAL, Hammersmith Road, W.—(1) House-Physician; (2) House-Surgeon; (3) Assistant Physician. Must be F. or M.R.C.P.Lond. Applications to the Secretary-Superintendent for (1) and (2) by June 20th, and for (3) by June 6th.

WESTMINSTER HOSPITAL, S.W.—Assistant House-Surgeon. Appointment for three months, followed by six months as House-Surgeon. Applications to the Secretary.

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.

WOOLWICH UNION.—Resident Assistant Medical Officer for the Infirmary at Plumstead. Unmarried, and not more than 30 years old. Salary, £100 per annum, rising to £130, with apartments, rations, and washing. Applications on forms provided to be sent to the Clerk by June 6th.

### MEDICAL APPOINTMENTS.

ANDERTON, W. B., M.B., M.R.C.S., appointed Resident Assistant Medical Officer to the Crumpsall Workhouse, Manchester, vice A. T. Sissons, M.B., B.Ch. Vict.

BENNETT, W. F. Cockayne, L.R.C.P., L.R.C.S. Edin., L.F.P. and S.G., L.S.A. Lond., appointed House-Surgeon to the Staffordshire General Infirmary, vice F. W. Bonis, M.D., F.R.C.S.

BRADFORD, P. P., L.R.C.P. Lond., M.R.C.S. Eng., appointed Certifying Factory Surgeon for the Bracknell District.

COOPER, W. H., M.R.C.S., L.R.C.P. Lond., appointed Medical Officer for the Abbey Homes of the Kendal Union.

DICKINSON, Thor. Vincent, M.D., M.R.C.P., appointed as Honorary Assistant Physician to the Italian Hospital, Queen Square.

EVANS, T. J., L.R.C.P. Lond., M.R.C.S. Eng., appointed Medical Officer for the Third District of the Llanover Union.

FAIRFAX, E. W., M.B., Ch.M. Sydney, appointed Clinical Assistant to the Chelsea Hospital for Women.

FOSTER, M. B., M.R.C.S. Eng., L.R.C.P. Lond., appointed Medical Officer for the Braughing District of the Bishops Stortford Union, vice H. F. Ealand, L.R.C.P., L.R.C.S. Edin., resigned.

GOMES, Sidney, L.R.C.P., L.R.C.S. Edin., L.F.P., and L.F.S.G., appointed District Surgeon, British Borneo Government Service.

GORDON, J. J., L.R.C.P., L.R.C.S. Edin., appointed Medical Officer to the Sidney Road Homes of the Hackney Union.

HARRIS, J. H., M.R.C.S. Eng., D.P.H. Camb., appointed Certifying Factory Surgeon for the Dartmouth District.

JONES, F. Silva, M.B., B.S. Durh., appointed Medical Officer, for the Prittlewell District of the Rochford Union.

LUNT, D. C. M., B.A. Camb., L.R.C.P. Lond., M.R.C.S. Eng., appointed Certifying Factory Surgeon for the Lymn District.

LYS, G., L.R.C.P. Lond., M.R.C.S. Eng., appointed Medical Officer for the No. 4 District of the Blandford Union, vice F. D. Lys, M.R.C.S. Eng., resigned.

MESISTER, A. F., M.R.C.S., L.R.C.P. Lond., appointed Medical Officer for the Epsom District of the Thorne Union, vice H. W. Pullan, M.R.C.S. Eng., L.F.P.S. Glasg., resigned.

MORTON, S. Ernest, M.R.C.S., L.R.C.P., appointed Assistant Honorary Medical Officer to the Sheffield Children's Hospital.

NOLAN, H. F., L.R.C.P., L.R.C.S. Irel., appointed Certifying Factory Surgeon to the Charing District.

PALMER, J., L.R.C.P. Lond., M.R.C.S. Eng., appointed Certifying Factory Surgeon for the Sandland District.

PRESTON, C. H., M.D. Lond., F.R.C.S. Eng., L.D.S. Lond., appointed Lecturer in Dental Anatomy and Physiology at Owens College, Manchester.

PRING, H. R., M.R.C.S., L.R.C.P., L.D.S. Eng., appointed House-Surgeon and Appliance House-Surgeon to the Dental Hospital of London.

PURSLOW, C. E., M.D. Lond., M.R.C.P. Lond., appointed Ingleby Examiner in the University of Birmingham for the current year.

RODDIS, T. E. E., M.B., C.M. Edin., appointed Medical Officer for the Snettisham District of the Docking Union, vice J. W. Hopkins, L.R.C.P., L.R.C.S. Edin., resigned.

SHEEN, A. W., M.D., M.S. Lond., appointed Honorary Surgeon to the Cardiff Infirmary, vice Alfred Sheen, M.D. St. And., appointed Consulting Surgeon.

STEWART, A. H., M.R.C.S., appointed Medical Officer for the Eighth District of the North Bierley Union, vice C. Yeoman, M.B. Camb., M.R.C.S. Eng., resigned.

THORNTON, R. G. C., M.B., B.Ch. & U.I., appointed Medical Officer for the Second District of the Wellington (Salop) Union, vice G. Hollies, M.D. Dub., resigned.

WISE, T. F., L.R.C.P., L.R.C.S. Irel., appointed Certifying Factory Surgeon for the East Ilsey District.

LEEDS GENERAL INFIRMARY.—The following appointments have been made:

CURTIS, W. S., M.R.C.S., L.R.C.P., appointed Resident Medical Officer at Ida Hospital.

FORSTER, R., L.S.A., appointed one of the House-Physicians.

LUCKHOF, J. M. B. Edin., appointed one of the House-Physicians.

MORRISON, W. H., M.B., Ch.B. Vict., appointed one of the House-Surgeons.

SELLING, W. Maxwell, M.B., B.S. Lond., appointed Resident Medical Officer.

### DIARY FOR NEXT WEEK.

#### TUESDAY.

**Medical Graduates' College and Polyclinic**, 22, Chenies Street, W.C. 4 P.M.—Dr. W. Rose: Clinical Lecture (Skin). 6 P.M.—Dr. J. E. Squire: Class. Applied Anatomy. Demonstration 7.

**Royal Medical and Surgical Society**, 8.30 P.M.—Mr. Rickman Godlee: On Some of the Medical and Surgical Complications of Pyorrhoea Alveolaris.

**National Hospital for the Paralysed and Epileptic**, Queen Square, Bloomsbury, W.C. 3.30 P.M.—Dr. Ferrier: Disseminated Sclerosis.

#### WEDNESDAY.

**Medical Graduates' College and Polyclinic**, 22, Chenies Street, W.C. 5 P.M.—Mr. J. Rose: Clinical Lecture (Skin). 6 P.M.—Dr. E. S. Abbott: On Acute Intestinal Obstruction in Children. 7 P.M.—Dr. F. C. Abbott: On Acute Intestinal Obstruction in Children. 8 P.M.—Obstetrical Society of London. Specimens will be shown.

**Hospital for Consumption and Diseases of the Chest**, Brompton, S.W. 4 P.M.—Dr. Maguire: The Dynamics of the Circulation in Disease.

#### THURSDAY.

**Medical Graduates' College and Polyclinic**, 22, Chenies Street, W.C. 4 P.M.—Mr. J. Hutchinson: Consultation (Surgical). 5 P.M.—Dr. J. Hutchinson: Consultation (Surgical). 6 P.M.—West London Post-Graduate Course: West London Hospital, Grosvenor Road, W. 5 P.M.—Mr. Percy Duff: External Diseases of the Eye. 7 P.M.—Dr. Percy Duff: External Diseases of the Eye. 8 P.M.—Roentgen Society: St. Bartholomew's Hospital, 8 P.M.—Dr. Percy Jones will show an Influenza Machine of American Design. Mr. J. Wimshurst, F.R.S., will give a short statement of his work in the Design and the Perfecting of the several forms of his Influenza Machine. 9 P.M.—Dr. J. Wimshurst, F.R.S., will show a new Localising Apparatus.

**Charlton Cross Hospital, Post-Graduate Course**, 4 P.M.—Dr. Murray Medical Cases.

#### FRIDAY.

**Medical Graduates' College and Polyclinic**, 22, Chenies Street, W.C. 4 P.M.—Mr. Lake: Consultation (Ear.)

### 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.

EWING-HUNTER.—At Duncairn, Helensburgh, on May 25th, the wife of J. Ewing-Hunter, M.B., C.M., of a daughter. Both well.

FOULDS.—On May 27th, at Ashlea, Droylsden, the wife of Francis H. Foulds, of a daughter.

LATHAM.—On May 23rd, at 2, Hemingford Road, Barnsbury, the wife of Denyer W. F. Latham, M.R.C.S. Eng., L.R.C.P. Lond., of a daughter.

TINLEY.—At Thorngrip, Whitby, the wife of W. E. F. Tinley, M.D., of a son, on May 22nd.

#### DEATHS.

CLAREMONT.—On May 27th, at his residence at Bognor, from influenza and subsequent complications, in his 78th year, Claude Clarke Claremont, formerly of Millbrook House, Hampstead Road, London, surgeon.

CLEGG.—May 24th, 1900, at 8, Sea View Villas, Upper Parkstone, Dorset, William Wheelwright Clegg, late of Hornsey, aged 43 years. Interred at Glasgow, May 29th, 1900.

DAVIS.—On May 21st, at Capetown, while on active service, Dr. David Davis, of the 77th Manchester Imperial Yeomanry, late of Bulth and Southport.

ROBERTSON.—At Benview, Dumbarton, on May 23rd, Elizabeth McLean, wife of John Robertson, M.D., J.P. The only intimation.

TROUTON.—May 27th, at Glenskeagh, Rotherfield, Sussex, Charles Gardiner, only son of Gardiner Trouton, M.D., of bronchitis, aged 2 months.

## 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, 5. *Operations*.—1.p., Tu., 2.30; o.p., F., 2. CHARING CROSS. *Attendances*.—Medical and Surgical, daily, 1; Women, W., 1; S. 9.30; Skin, M. Th., 1; Dental, M. Th., 8.45; Throat and Ear, F., 9.30; Electro-Therapeutic, 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 OPHTHALMIC. *Attendances*.—O.p., M. Tu., Th. F., 2. *Operations*.—M. Th. F., 2.30; Obstetric, W., 2.30; Eye, M. Th., 2.30; Throat and Ear, Tu. F., 2.30; Skin, W., 2.30; Dental, W., 2.30. *Operations*.—M. W. Th. F. GUY'S. *Attendances*.—Medical, i.p., M. Tu., Th. F., 1.30; O.p., M. W. Th. F., 1.30; Surgical, i.p., daily, 1.30; o.p., M. Tu., Th. F., 1.30; Obstetric, i.p., M. Tu., Th. F., 1.30; o.p., Th. F., 1.30; Eye, i.p., M. Tu., Th. F., 1.30; o.p., Ear, Tu. F., 1.30; Skin, M. Th., 10; Skin, Tu., 12; Throat, F., 12; Dental, daily, 9.30. *Operations*.—F. Th., 1.30; (Ophthalmic), M., 1.30; Th., 2. HOSPITAL FOR WOMEN, Soho. *Attendances*.—O.p., M., 9; Tu. W., 12; Th., 9; F. S., 12. *Operations*.—M. Th., 2; Th. S., 9.30. KING'S COLLEGE. *Attendances*.—Medical and Surgical, daily, 2; Obstetric, daily, 2; o.p., daily, 1.30; Eye, M. W. Th., 1.30; Ear, Th., 2.30; Throat, M., 1.30 F., 3; Dental, M. Th., 10; Skin, M., 10. *Operations*.—W. Th. F., 2. LONDON. *Attendances*.—Medical, daily, i.p., 2; o.p., 1.30; Surgical, daily, 1.30 and 2; Obstetric, M. Tu., Th. F., 2; o.p., W. S., 1.30; Eye, Tu. S., 9; Ear, W., 9; Skin, Th., 9; Dental, M. Tu., Th. F., 9. *Operations*.—Daily, 2. LONDON TEMPERANCE. *Attendances*.—Medical, i.p., M., 2.30; Tu. F., 3.30; Th., 2.30; 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; Eye, Tu. F., 9; Ear and Throat, Tu. F., 9; Skin, Tu., 4; Th., 9.30; Dental, M. F., 9.30; W., 9. *Operations*.—Daily, 1.30. NATIONAL OPHTHALMIC. *Attendances*.—M. Tu. Th. F., 2. *Operations*.—W., 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 EYE, 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, 3; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Skin, Th., 9.30; Throat, Nose, and Ear, W., 9.30. *Operations*.—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9. ROYAL LONDON OPHTHALMIC. *Attendances*.—Daily, 9. *Operations*.—Daily, 10. ROYAL OPHTHALMIC. *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; W. 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 Ovariectomy, W., 2. ST. GEORGE'S. *Attendances*.—Medical and Surgical, daily, i.p., 1; o.p., 12; Obstetric, i.p., Tu. F., 1.45; o.p., M. Tu., 2.30; Eye, W. S., 1.30; Ear, M., 2; Skin, W., 2.45; Throat, F., 2; Dental, M. Tu. F., S., 12. *Operations*.—Daily, 1; (Ophthalmic), W., 1; Dental, Th., 9. ST. MARK'S. *Attendances*.—Flu 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., 2; o.p., W. S., 9; Eye, Tu. F., 9; Ear, M. Th., 9; Throat, F., 3; Skin, M. Th., 9. *Operations*.—M., 2.50; Tu. W. F., 2. Th., 2.30; S., 10; (Ophthalmic), F., 10. ST. PETER'S. *Attendances*.—M. and 2 and 5; Tu., 2; W., 5; Th., 2; F. (Women and Children) 2. S., 4. *Operations*.—W. F., 2. ST. THOMAS'S. *Attendances*.—i.p., Medical and Surgical, M. Tu. Th. F., 2; o.p., daily, 1.30; Obstetric, Tu. F., 2; o.p., W. S., 1.30; Eye, Tu. F., 2; o.p., daily, exc. S., 1.30; Ear, M. Th., 1.30; Skin, F., 1.30; Throat, Th., 1.30; Children, W., 10.30; Electro-therapeutic, Tu., 2; Mental Diseases, Th., 10; Dental, Tu. F., 10; X-Rays, Tu. F., 2; Vaccination, W., 11.30. *Operations*.—Daily, 2; (Ophthalmic), Th., 2; (Gynaecological), Th., 2; (Throat), M., 9.30; (Ear), Th., 9.30. SAMARITAN FREE FOR WOMEN AND CHILDREN. *Attendances*.—Daily, 1.30. *Operations*.—Gynaecological, M., 2; W., 2.30. THROAT, Golden Square. *Attendances*.—Daily, 1.30; Tu. F., 6.30. *Operations*.—Daily, exc. M., 10. UNIVERSITY COLLEGE. *Attendances*.—Medical and Surgical, daily, 1.30; Obstetrics, M. F., 1.30; Eye, M. W., 1.30; Ear, M. Th., 9; Skin, Tu. F., 2; Throat, M. Th., 9; Dental, Tu. F., 9.30. *Operations*.—Tu. W. Th., 2. WEST LONDON. *Attendances*.—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, M. Th., 2; Ear, Tu. F., 2; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electric, M. Th., 3.15; Skin, Tu. F., 2; Throat and Nose, Tu. F., 2; S., 10. *Operations*.—Daily, about 2.30; F., 10. WESTMINSTER. *Attendances*.—Medical and Surgical, daily, 2; Obstetric, M. Tu. F., 2; Eye, Tu. F., 9.30; Ear, Tu., 2; Skin, W., 2; Dental, W. S., 9.15. *Operations*.—

## LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

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

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

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

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

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

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

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

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is *Aetiolog*, 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.

R. H. W. asks where a lady can learn ordinary medical man's dispensing cheaply and in short time.

L.R.C.P. wishes to know of some simple appliance to prevent a child 2½ years of age from turning in its feet (pin-toed) when walking.

## MOSQUITOS AND MALARIA.

DR. G. PARKER (14, Pembroke Road, Clifton, Bristol) desires to know whether the search for the *Anopheles* in this country suggested some time ago has been made and with what result.

## ICHTHYOL POISONING.

MR. ARTHUR LOXTON, F.R.C.S. (Birmingham) asks to be referred to any literature concerning the poisonous symptoms which may be caused by the internal administration of ichthylol. If other causes can be rigidly excluded, is it fair to assume that loss of weight, sudden albuminuria, and tachycardia (120 beats a minute), with tendency to tremor of head and hands, are due to the ingestion of 3-gr. doses of ichthylol three times a day?

## TREATMENT OF INFANTILE SUMMER DIARRHOEA.

QUERENT writes:—I should like, before the return of the season for infantile diarrhoea, to elicit views on some points of treatment. Authors are agreed as to the necessity for suspension of the use of milk, and substituting either carbohydrates, as barley water and whey, or albuminous food, as animal broths and solution of egg albumen. But they give no hint as to the indications which point to one or other of these classes of foods. Of the animal broths veal or chicken is recommended, but beef never. Why is this? Veal is often difficult to procure, and chicken is beyond the means of the poor, while beef can always be had. Valentine's meat juice is of much repute, but it is very expensive. I should be glad to hear of any experience with the cheaper meat extracts, as Bovril, also of the solution of egg albumen I have no experience. I should be most interested to hear from those who have used it. It is perhaps the most convenient and easily procurable of all the foods. It has also this advantage that by the addition of cream and lactose we may gradually return to a food having much the same composition as human milk, except that there is albumen instead of casein. It is, indeed, in this attempted return to a milk diet that the difficulty often lies. Most cases, in my experience, improve temporarily from the mere suspension of the milk. But however cautiously we attempt the return to a milk diet, the sickness or purging returns, and first one change is made and then another, the little patient becoming meanwhile more and more exhausted. With regard to drugs, I see that Goodhart in his last edition depends almost entirely on sodium salicylate. I should be glad to hear of any experience of this drug in infantile diarrhoea.

## ANSWERS.

F. W. P.—It is of course quite absurd.

N. Y. L.—A good woollen fabric of the kind called stockinette would probably be most suitable.

T. C.—The Obstetrical Society of London publishes *Rules for the General Management of Infants*, which can be obtained from Messrs. Longmans, Green, and Co., 39, Paternoster Row, E.C., or at the Society's Library, 20, Hanover Square, W., price 1d. each, or by post 1½d.

## THE NITRO-PROPRIOL TEST FOR SUGAR IN URINE.

MR. BRYCE GORDON (Lee, S.E.) writes to say that he has experimented with the nitro-propriol test for glycosuria and considers it a good test, for if the reaction is obtained it is almost sure that it is due to sugar (one far-fetched exception only—aldehyde), whereas with Fehling's test the reduction may be due to many other things besides diabetic urine.

## THE PREVENTION OF LACERATION OF THE PERINEUM.

A VETERAN PRACTITIONER writes in answer to "Querist's" letter in the BRITISH MEDICAL JOURNAL, May 10th, p. 1271: I think if he would leave the perineum alone he would get on better; but I have found benefit from free lubrication of the parts where there is rigidity. I have no doubt that young practitioners are frequently the victims of this accident from too early application of the forceps. When the head arrives at the perineum there is often a temporary lull in the pains, and this being interpreted by the patient's friends as a sign of the woman being "worn out," our youthful practitioner is tempted to apply forceps, with the result that the perineum not being sufficiently dilated, away it goes. I believe a great deal of unnecessary fuss is made about this accident. I live in a district where quite three-fourths of the confinements are attended by midwives, and in twenty years I have never once been called in to see a case of laceration, either at the time or afterwards; and although of course these must have occurred, it shows that they heal without trouble, and that the practitioner who possesses his soul in patience takes a leaf out of the midwife's book and is not so liable to have this accident befall him.

T. H. recommends the following method to prevent laceration of perineum: Wring a big towel out of boiling water, roll it into a ball, and dip it into a saucer of oil. Apply and keep in position with the hand; its action is pleasant. Do not touch the perineum with the hand.

## VARICOSE ULCERS OF LEG.

DR. J. MCGOWAN (Grangemouth) writes to recommend "L.S.A." to try the following treatment: Put the patient in bed and insist on his or her remaining there until the ulcer is healed; wash the ulcer daily with a solution of hydrarg. perchlor. (1 in 1,000), and then dust on the following: