

plication; also the premonitory vomiting. Thirdly, the subsidence of the parotitis with the development of the pancreatic affection. Fourthly, the absence of any apparent after-effects up to the present.

MEMORANDA:

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

GENERAL EMPHYSEMA COMPLICATING FRACTURED RIBS.

On January 22nd, at 11 P.M., I was sent for to see a man, aged 80, whom I found in bed, suffering general discomfort, pain on the right side, and slight difficulty of breathing. His appearance was remarkable, the skin of the face, neck, and thorax being distended like a sausage. I was informed that the previous day (about thirty hours before my visit) he fell heavily against the corner of a table, and since then had been in much pain. The distension, however, which chiefly alarmed his friends, had attained its present dimensions only a few hours before my arrival.

I found a circular bruise, 4 inches in diameter, in the mid-axillary line, about the level of the sixth and seventh ribs, at which spot, apart from emphysematous crackling, I had no difficulty in detecting crepitus from fractured ribs; he had cough and slight difficulty of breathing, the respirations being shallow and quickened. There was no hæmoptysis nor pneumothorax. The pulse was 100 and the temperature normal. With the exception of the forehead and legs, emphysematous crackling and percussion resonance were everywhere present, the fingers sinking $\frac{3}{4}$ inch into the skin, and causing pain on pressure. The swelling was limited above by the superior occipital ridge and temporal fascia posteriorly and laterally, in front, by the brows, the forehead being free; below, it was bounded anteriorly by Poupart's ligament, and posteriorly extended to the sacrum; it was least marked on the abdominal walls and back, and most apparent on the face, neck, and thorax.

The ribs were treated in the usual manner by strapping, and morphine gr. $\frac{1}{4}$ was given hypodermically to relieve pain. I saw him daily, and with the exception of a slight rise of temperature (100° F.) and a few moist râles about the fourth day, there was no lung complication, and in ten days the emphysema had entirely disappeared. He made a good recovery from the immediate effects of his injury, but some weeks subsequently sank from general debility.

I regret that I was unable to take a photograph, but the limited dimensions of his room and the position of the bed prevented my doing so.

The infrequency of similar cases, together with the absence of some of the more prominent symptoms usually associated with perforation of lung by fractured ribs seems sufficient reason for noting the case. A somewhat similar case under the care of Mr. Bryant was reported in the BRITISH MEDICAL JOURNAL of January 26th, 1884, in which he punctured the skin in several places to relieve urgent symptoms, dyspnoea, etc., with success. This procedure, however, in the present case was uncalled-for.

Two points of interest about the present case are the absence of hæmoptysis and of pneumothorax. The former I am unable to account for, but as regards the pneumothorax it is possible its absence may be accounted for by the presence of pleuritic adhesions, as I had on two previous occasions attended him during attacks of broncho-pneumonia.

J. F. HEISE ELLERTON, M.D.Brux., M.R.C.S.Eng.
Leamington.

THE SO-CALLED "STAVE OF THUMB" OR BENNETT'S FRACTURE.

I was much interested in Dr. Beatson's paper on Stave of Thumb, or Bennett's Fracture, as he calls it, in compliment to the surgeon who first drew attention to it. I met with a similar accident to my left thumb just a year ago by a fall from a bicycle. It so happened that I had some time previously had the same hand radiographed for amusement, and a comparison of the two prints clearly shows the displacement of the



Fig. 1.—Uninjured.



Fig. 2.—Fractured.

shaft of the bone. At first I did not diagnose it, on account of the swelling and the absence of crepitus, but the latter could be detected about a fortnight after the accident. As in the case of Mr. Beatson's patient, my chief inconvenience lay in the fact that I could not oppose the thumb to the other digits, but, as it was my left hand, I did not suffer so many discomforts. The power to oppose the thumb and fingers did not return for upwards of three months. Professor Bennett states that the injury in the large majority of the cases is to the right, and that it is rare on the left side. In my case the injury was practically untreated, and now that union has taken place in a faulty position, a characteristic deformity remains, that is, the proximal end of the shaft of the bone is drawn upwards and slightly forwards by its extensor tendon, and appears as a swelling in the space between that tendon and the tendon of the extensor secundi internodii, thus obliterating the hollow which was formerly, and perhaps is still, known as "the students' snuffbox."

Redland Road, Bristol.

JAS. E. PRICHARD, M.B.

REPORTS

ON

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

LIVERPOOL ROYAL INFIRMARY.

CASE OF HARE-LIP AND UNUSUAL TUMOUR OF PROLABIUM, ETC.¹

(Under the care of Mr. RUSHTON PARKER.)

On July 5th, 1899, Dr. G. C. Walker brought to me to hospital a male child, 12 days old, having double hare-lip and an unusual state of the parts involved in that defect.

In place of the appendage composed of prolabium and premaxilla usually found attached to the nose in cases of double hare-lip, there was a globular tumour in the same situation, covered with white skin, and in size about half the width of the mouth. The nose was pushed up and flattened, with the nostrile spread widely apart by the deep attachment of the tumour (Fig. 1).



Fig. 1.—Deformity at age of 12 days.

In order to repair the hare-lip the skin and mucous coverings of the growth were preserved, while the tumour itself was removed. Its composition was purely fatty, firm, and granular, and after its removal there was a small triangular

Read at the meeting of the North Wales Branch of the British Medical Association, April 20th.

gap between the two bones of the upper jaw in front. In other respects the palate was complete.

The right cleft alone was closed on this occasion, and the child was photographed (Fig. 2) and taken home. A day or

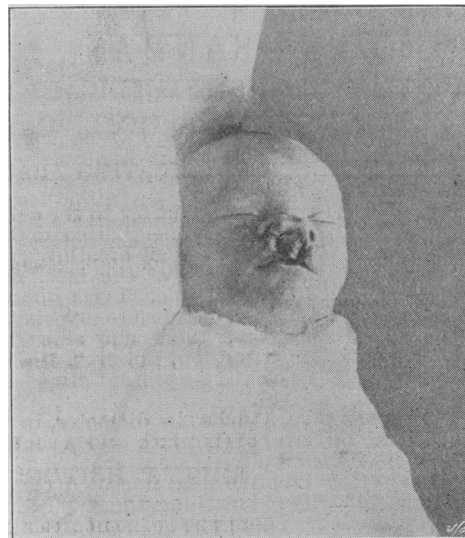


Fig. 2.—Same day after first operation.

two later it became very ill, and nearly died, but got quite well after the bursting of an abscess at the side of the nose.

Nothing further was done till September 13th, when the child was nearly 12 weeks old and quite strong and well. Though its appearance was most unsatisfactory it had become less so than on completion of the first operation, and so the left lip cleft was closed. But the result was hideous and there appeared no prospect of acceptable improvement, as the prolabium was so bound down to the gap in the upper jaw. So eight days later, at the age of 12½ weeks, the whole prolabium was cut away and the outer edge of each original cleft refreshed with a suitable tail of red lip projecting to allow for contraction. Each side of the lip was widely freed from the upper jawbones and the excessive nasal frenum narrowed. Good healing took place and the infant's face became presentable, though still having far too much width of nose and separation of nostrils. A photograph taken a month later shows the condition exactly (Fig. 3). The child continued in

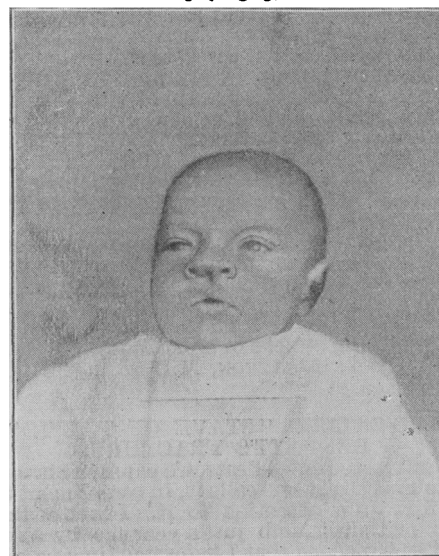


Fig. 3.—Result at 4 months, a month after third operation. excellent health all the winter and manifested an intelligent

the hope that the relieving officer would take up the case. In cross-examination, he said that he believed in hypnotism to a small extent, and admitted that in writing the letter to the officer he should have excepted Mrs. Conolly, who had not noticed anything wrong with the plaintiff.

Mr. Farrer, who was next called, spoke as to the plaintiff's strange conduct upon a number of occasions when she was his pupil.

Miss Ashby, the Superintendent of the Society of the Holy Cross, stated that when the plaintiff first came to the home her conduct was good. She had never hypnotised the plaintiff. While the plaintiff was at the home her (the plaintiff's) sister was removed to a convalescent home suffering from acute mania.

In cross examination, witness admitted that while the plaintiff was an inmate of the home a "Planchette" machine was sent there, and that she (the witness) was more successful in using it than the other nurses.

Dr. MacLeod was next called. He expressed the view that the plaintiff at the time (November, 1898) was not exactly of unsound mind, but that she had behaved in an extraordinary manner. He did not feel safe in her presence.

Dr. Forbes Winslow stated that in his opinion the plaintiff was of unsound mind within the Lunacy Acts.

Counsel on both sides having addressed the jury at considerable length.

Justice Darling summed up to the jury. In the course of his address he said : It is perfectly clear that the words used by the defendant and addressed by him to the relieving officer are capable of a libellous meaning. The defendant, in answer, says (1) that they are true, (2) that they were said without malice, and it will be for you to say, having considered all the circumstances, whether they were said maliciously or not, for although the occasion is privileged, a person has no right to make use of a privileged occasion to make a thing dishonest. Therefore I shall have to ask you, When the defendant wrote this, was he seeking for some indirect motive to injure the plaintiff? This is not a case of a doctor signing a certificate of lunacy. The relieving officer cannot always get information with regard to all the lunatics in his district himself; he must trust to information being sent by other persons. Mr. Dodds happened to furnish this information, as he was entitled to do, but the plaintiff could not have been placed in a lunatic asylum on the strength of it. Upon receiving this information, the relieving officer, acting as I think improperly, although he knew that Miss Dowling had assaulted Mr. Farrer, took no further step. You have to consider whether Mr. Dodds was justified in making these allegations against Miss Dowling. She stated, and has admitted in the box, that "Miss Ashby is in league with the devil." You have seen Miss Ashby, and can say whether that was hallucination or no. The plaintiff accused Miss Ashby of creating a "thought body" to follow her in the streets. Are these sentiments and opinions which we expect to find expressed by a sane person at the present day? Such things were regarded as evidences of witchcraft in the reign of James I, and in the year 1665 two witches were tried before and sentenced to be executed by Sir Mathew Hale at Bury St. Edmunds for entertaining opinions of this kind. [By a juror: I hope your lordship will not ask us to decide whether Miss Dowling is a witch.] Continuing, his lordship said: You must remember that Dr. M'Leod speaks as to the plaintiff's extraordinary behaviour upon several occasions, and that her sister was in an asylum suffering from acute mania. The fact that Mr. Dodds is only a licentiate of the Society of Apothecaries has no possible bearing upon this case. The issue whether this lady was of unsound mind then must be laid before you. It does not follow that she is still of unsound mind, but the main question for you to decide will be—Was the defendant guilty of malice in acting as he did?

His lordship left the following questions to the jury:

1. Did the defendant write what he wrote to the relieving officer without any malice, and in the honest belief that what he stated was true?

2. Were the words written by the defendant to the relieving officer true?

3. In what he did, did the defendant act in good faith and with reasonable care, and in order to bring the plaintiff's condition to the knowledge of the relieving officer?

4. What damages (if any) is the plaintiff entitled to?

The Jury answered questions (1) and (3) in the negative, and awarded the plaintiff \$100 damages. With regard to the second question, they were at first unable to agree, but ultimately answered it thus: We find that the document was untrue in the following particulars: in stating that to the best of the defendant's knowledge and ability the plaintiff was of unsound mind; that the plaintiff had sent threatening letters to various people, some of whom went in terror of their lives; that she stated that she was bewitched; that in her present state of mind the possibility of her obtaining a situation as dispenser was a great danger to the community; and that the defendant had interviewed several people, who all agreed as to her insanity, and were afraid of her. The following statements were true: That she committed an assault upon Mr. Farrer; that she had hallucinations; that she stated that she was hypnotised, and wrote to that effect; and that she had lately passed an examination as dispenser.

Mr. Dickens, Q.C., applied for a stay of execution, which was refused.

THE CONDUCT OF CONSULTANTS

T. H. G.—With reference to our former reply in the BRITISH MEDICAL JOURNAL of June 6th under this heading, we desire to point out that the expression of opinion in paragraph 1 referred only to the case of a patient seeking an appointment at the consultant's own house. It would be in our opinion most improper for a consultant to visit at the patient's house without communicating with the usual medical attendant so as to secure his presence. As to the second point, it is not suggested that the consultant should exercise his discretion upon all points in connection with consultations, but only upon the single point whether he should inquire the name of the previous medical attendant and communicate with him about the case. This should of course be done in all serious cases, but exceptional circumstances may conceivable justify a departure from the rule in particular instances.

MEDICAL COUNTY COUNCILLORS IN IRELAND.

X. Y.—We are unable to find anything in the Statutes of the Orders in Council which would prevent a medical practitioner who is a county councillor from being legally paid or receiving fees from a coroner for giving professional evidence at inquests. This view would seem to be in accordance with the general principles relating to questions of this kind. A county councillor by receiving fees for giving evidence at an inquest which he is bound to attend, cannot, we think, be held to be disqualified. It is not like holding office for profit under the county council.

CLUB CERTIFICATES AND UNREGISTERED PRACTITIONERS.

A. L. F., a surgeon to a friendly society, has been asked by a member who had placed himself under a bonesetter, to furnish the usual certificate to entitle him to sick benefit. He wishes to know whether he can visit this member, and give him the certificate, while the latter continues under the care of the bonesetter, without rendering himself liable to a charge of "covering" an unqualified practitioner.

**** No registered medical practitioner would be justified in giving a certificate under such circumstances. If he did he might lay himself open to a charge of covering.**

ARRANGEMENTS WITH CHEMISTS.

E.D.K.—The question is not quite clear. There can be no objection to a doctor enjoying the usual advantage in price accorded to persons "taking a quantity" on condition that the articles are supplied to himself, but it would not be right that he should have an arrangement with a chemist whereby he received favourable terms on condition that he recommended the chemist to his patients.

DEATH CERTIFICATES FOR INSURANCE COMPANIES.

INSURANCE.—(1) No practitioner should fill up a death certificate for an insurance company without getting permission in writing from the representatives of the deceased, or he may find himself the defendant in an action for damages. (2) Having obtained this permission he should give the facts known to him without reserve, but he should abstain from expressing opinions about which there may be doubt.

THE CIRCULATION OF TESTIMONIALS.

ETIQUETTE.—We do not think it legitimate or consistent with the dignity of the profession for a medical man who has been in practice six months to send copies of his testimonials either to the persons he has attended during the last six months, or to the patients of his predecessor from whom he acquired the practice.

FEES AT INQUESTS.

OMENTUM inquires if house surgeons are entitled to receive fees for giving evidence at inquests and making *post-mortem* examinations; and, if he refuses, what would happen?

***The medical officers of hospitals, infirmaries, and all public medical institutions are not entitled to receive fees at the coroner's court in cases of inquests held upon deceased persons who have died in such institutions. Should our correspondent decline to obey the order of the coroner, without any reasonable excuse, he will subject himself to a fine or imprisonment for contempt of court, at the discretion of the coroner.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

Natural Science Tripos.—This is now the largest Honours Examination in the University. Forty men and 3 women have gained first classes in Part I, and 14 men and no women appear in the first class of Part II. St. John's has 9, Sidney Sussex 8, and Trinity 7 firsts in Part I; Trinity has 4, and Clare 3 firsts in Part II.

Degrees.—At the Congregation on June 14th the following medical and surgical degrees were conferred:

M. D.—J. W. Cornwall, Trinity; W. E. Alston, Clare.

M.B.—E. W. Hedley, King's; R. S. Trevor, Clare.

M.B. and B.C.—W. S. Darby, Trinity; J. H. Tollent, St. John's; G. F. Lobb, Caius; S. P. Pollard, Caius; J. W. Malim, Christ's; T. Burfield, Emmanuel; D. G. Hall, Emmanuel.

B.C.—L. J. Paton, Caius.

FIRST EXAMINATION FOR MEDICAL AND SURGICAL DEGREES.—The following candidates have satisfied the Examiners:

ing candidates have satisfied the Examiners.

Part II. Elementary Biology.—W. A. Alexander, Cai.; E. E. Atkin, Cai.; J. B. Banister, Jes.; E. Beaton, Cai.; H. Beckton, M.A., Cai.; A. E. Bellars, Magd.; T. E. H. Blake, Pemb.; C. W. Bowle, Trin.; W. T. Briscoe, H. Selw.; G. G. Butler, Emm.; A. F. Comyn, Pemb.; A. I. Cooke, Cai.; H. B. Corry, Cai.; D. V. Cow, Trin.; E. A. Crossley, Cai.; R. Davies-Colley, Emm.; E. F. de Clermont, King's; A. N. Dickson, Down.; J. N. F. Fergusson, Joh.; A. C. D. Firih, Trin.; R. L. Gamlen, Cai.; L. H. Goh, Emm.; G. W. Goodhart, Trin.; H. P. B. Gough, Sid. Suss.; W. B. Gourlay, Trin.; W. B. Grandage, Cai.; H. T. Gray, Trin.; G. F. Greenwood, Sid. Suss.; J. M. P. Grell, H. Selw.; H. S. Hall, Pemb.; E. F. Harrison, Trin.; G. S. Haynes, King's; A. W. Hayward, Joh.; R. A. P. Hill, Cai.; R. B. Hoisington, Christ's; C. W. Hutt, Trin.; R. S. Jenkins, Joh.; T. A. Jones, Cai.; W. D. Keyworth, H. Selw.; B. T. Lang, Trin.; H. M. J. F. de P. P. Leite, Cai.; C. Lillingston, Pemb.; J. W. Linnell, Joh.; F. P. Luard, Down.; S. G. MacDonald, Joh.; J. McIntyre, King's; A. W. Moore, Emm.; A. R. Moore, B.A., Cai.; H. F. G. Noyes, Cai.; G. G. Packe, Trin.; F. W. M. Palmer, B.A., Jes.; W. O. Pitt, Emm.; H. W. Pocock, Cai.; S. B. Preston, Joh.; E. S. Purkis, H. Selw.; A. C. H. Rothera, Emm.; D. W.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

Roy, Sid. Suss.; F. S. Scruby, H. Selw.; R. B. S. Sewell, Christ's; P. H. Smith, Pemb.; P. L. Stallard, Cal.; C. Strickland, Cal.; A. C. H. Suhr, Cal.; D. W. Tacey, B.A., Christ's; R. S. Taylor, Down.; H. A. R. E. Unwin, H. Selw.; B. Wallis, Trin.; G. H. H. Waylen, King's; G. L. Webb, Cal.; H. B. Weir, Trin.; W. P. Williams, Down.; W. de L. Winter, Trin.; J. L. Wood, Trin.; L. Worrall, B.A., Christ's; H. N. Wyman, Cal.

Part I.—Chemistry and Physics.—W. A. Alexander, Cal.; E. E. Atkin, Cal.; R. L. Barwick, Christ's; H. Beckton, M.A., Cla.; A. E. Bellars, Magd.; P. Black, Cal.; C. W. Bowle, Trin.; R. Burgess, Cal.; G. G. Butler, Emm.; D. V. Cow, Trin.; F. C. Crew, Emm.; J. N. F. Fergusson, Joh.; A. C. D. Firth, Trin.; R. L. Gamlen, Cal.; H. P. B. Gough, Sid. Suss.; G. F. Greenwood, Sid. Suss.; J. M. P. Grell, H. Selw.; H. S. Hall, Pemb.; G. S. Haynes, King's; A. W. Hayward, Joh.; R. A. P. Hill, Cal.; W. H. Hodgson, Christ's; K. Hoisington, Christ's; C. W. Hutt, Trin.; T. A. Jones, Cal.; W. D. Keyworth, H. Selw.; F. P. Luard, Down.; A. Morris, Cal.; A. H. Owen, Cal.; M. Phillips, Cal.; W. O. Pitt, Emm.; S. B. Preston, Joh.; A. C. H. Rothera, Emm.; C. E. F. Salt, Pemb.; F. S. Scruby, H. Selw.; E. F. Skinner, Corp. Chr.; P. H. Smith, Pemb.; P. L. Stallard, Cal.; B. S. Taylor, M.A., Cla.; R. S. Taylor, Down.; H. A. R. E. Unwin, H. Selw.; J. A. Venning, Trin.; G. L. Webb, Cal.; C. W. H. Weekes, Trin.; H. B. Weir, Trin.; W. de L. Winter, Trin.; H. N. Wyman, Cal.

SECOND EXAMINATION FOR MEDICAL AND SURGICAL DEGREES.—The following candidates have satisfied the Examiners:—

Part I. Pharmaceutical Chemistry.—L. J. Austin, Sid. Suss.; A. L. Baly, Emm.; A. S. B. Bankart, Trin.; J. D. Barris, Cal.; E. Bell, Cla.; G. L. Cox, Christ's; L. G. Davies, Trin.; T. Drysdale, Jes.; N. C. Fletcher, B.A., Queens'; R. E. French, King's; F. M. Gardner-Medwin, B.A., Trin.; T. R. Glynn, Cla.; R. E. G. Gray, Pemb.; S. A. Henry, Trin.; R. F. V. Hodge, Emm.; W. G. Howarth, King's; E. C. Hughes, Cla.; C. L. Isaac, B.A., Joh.; C. King, Trin.; H. E. Kitchen, B.A., Sid. Suss.; R. Leslie, B.A., Pemb.; S. M. Mackenzie, Trin.; E. H. Mayhew, Emm.; J. B. Mennell, Pemb.; S. H. Nixon, Emm.; W. H. Rayner, Trin.; W. H. Robinson, Down.; F. F. Shout, Cal.; G. C. E. Simpson, Joh.; P. S. Stephens, Trin.; W. H. E. Stewart, Cal.; F. P. Young, Christ's.

Part II. Human Anatomy and Physiology.—H. Ackroyd, B.A., Cal.; A. E. Barclay, B.A., Christ's; H. N. Burroughs, B.A., Trin.; H. J. Cardew, B.A., Cla.; R. A. Clapham, B.A., Emm.; J. G. Cooper, Trin.; J. S. Cooper, B.A., Jes.; W. B. Crowfoot, B.A., Emm.; C. W. Cunningham, B.A., Non-Coll.; W. F. L. Day, B.A., Cal.; J. H. Donnell, B.A., Cal.; T. R. Elliott, Trin.; R. B. Etherington-Smith, B.A., Trin.; J. E. Frere, B.A., Pemb.; F. Gayner, B.A., King's; H. U. Gould, B.A., Trin.; G. W. Greene, B.A., Down.; C. F. Hardie, B.A., Queens'; P. Hardy, B.A., Trin.; E. T. Harris, B.A., Christ's; N. G. Harry, B.A., Jes.; A. W. Harvey, B.A., Joh.; H. G. L. Haynes, Down.; W. H. Hills, B.A., Pemb.; B. Hudson, B.A., Cla.; J. Lambert, B.A., Down.; P. W. Leathart, B.A., Cla.; W. E. Lee, B.A., Trin.; R. C. Mott, B.A., Trin.; C. M. Murray, B.A., Pemb.; P. K. Muspratt, B.A., Christ's; G. B. Norman, Joh.; P. N. Pantan, B.A., Trin.; O. V. Payne, Joh.; J. S. Pearson, B.A., Trin.; H. I. Pinches, B.A., Sid. Suss.; C. A. W. Pope, B.A., Trin.; G. R. Rickett, B.A., King's; R. H. Robbins, B.A., Trin.; J. N. Robins, B.A., Christ's; T. Sanders, B.A., Christ's; H. C. Sidgwick, B.A., Cla.; J. G. Slade, B.A., Cla.; T. D. Smith, B.A., Jes.; L. E. Wigram, B.A., Trin.; S. L. O. Young, B.A., Christ's.

UNIVERSITY OF BIRMINGHAM.

FIRST MEETING OF THE UNIVERSITY COUNCIL.

Appointment of Professors and Teachers.—At the first meeting of the University Council held last week all the existing professors and teachers on the staff of the Mason University College were appointed to identical positions in the University until the first day of October, when, under the Birmingham University Act, they all *ipso facto* come into possession of these positions.

Ordinances for Degrees.—The ordinances for degrees in Medicine, Surgery, Public Health, and Dentistry were passed. The degrees in Medicine and Surgery will be M.B., B.Ch., and M.D., M.Ch. In Public Health a B.Sc. and D.Sc. will be obtainable. Dental students of the University will, after taking a diploma from some qualifying body, be able to take the degrees of Bachelor and subsequently Master in Dental Surgery after an extended course of study.

Ingleby Lectureship.—Dr. W. J. Smyly, ex-Master of the Rotunda Hospital, Dublin, has been appointed to deliver the Ingleby Lecture in the year 1901.

Lecturer on Bacteriology.—W. D'Este Emery, M.D., Lond., has been appointed to this position.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

Appointment of Examiners.—At the Ordinary Council on June 14th, 1900, Sir William MacCormac, Bart., K.C.V.O., President, in the chair, the following were approved by the Council for the ensuing year, as representing the College of Surgeons on the Conjoint Board:—**Elementary Biology:** P. T. Beale, F. G. Parsons, T. W. Shore, T. G. Stevens. **Anatomy (Membership):** S. Boyd, W. B. Clarke, A. Robinson, A. Thomson. **Physiology (Membership):** J. R. Bradford, G. A. Buckmaster, L. E. Hill. **Anatomy (Fellowship):** J. E. Lane, B. G. A. Moynihan, F. G. Parsons, A. H. Young. **Physiology (Fellowship):** T. G. Brodie, W. D. Halliburton, D'A. Power, W. H. Thompson. **Midwifery:** W. R. Dakin, W. S. A. Griffith, A. H. N. Lewers, H. T. Spencer. **Public Health:** Part I: C. Childs; Part II: S. A. M. Copeman.

THE LONDON SCHOOL OF MEDICINE FOR WOMEN.

The Helen Pridaux Memorial Scholarship of £50 will be awarded next month to a registered medical woman of not more than three years' standing, formerly a student of the London School of Medicine for Women. An essay must be submitted on or before July 15th. Further particulars can be obtained from the Secretary of the School.

HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 7,006 births and 4,004 deaths were registered during the week ending Saturday last, June 16th. The annual rate of mortality in these towns, which had been 18.4, 17.7, and 16.8 per 1,000 in the three preceding weeks, rose to 18.0 last week. The rates in the several towns ranged from 9.4 in Cardiff, 11.3 in Norwich, 12.0 in Nottingham, and 12.7 in Croydon to 22.0 in Huddersfield, 22.9 in Sheffield, 23.7 in Liverpool, 24.8 in Salford, and 25.2 in Manchester. In the thirty-two provincial towns the mean death-rate was 18.4 per 1,000, and exceeded by 1.0 the rate recorded in London, which was 17.4 per 1,000. The zymotic death-rate in the thirty-three towns averaged 1.9 per 1,000; in London and in the thirty-two provincial towns this death-rate was also equal to 1.9 per 1,000; among the towns the highest zymotic death-rates were 2.5 in Huddersfield, 2.8 in Hull, 3.1 in Salford, 3.2 in Manchester, 4.3 in Derby, and 4.9 in Blackburn. Measles caused a death-rate of 1.1 in Leeds, 1.4 in Sunderland, and 1.5 in Huddersfield and in Hull; scarlet fever of 2.3 in Blackburn; whooping-cough of 1.0 in Oldham, 1.2 in Croydon and in Liverpool, and 2.3 in Wolverhampton; and diarrhoea of 1.0 in Huddersfield, and 1.3 in Burnley and Birkenhead. The mortality from "fever" showed no marked excess in any of the large towns. The 63 deaths from diphtheria in the thirty-three towns last week included 28 in London, 9 in Sheffield, 4 in Manchester, and 4 in Leeds. No fatal case of small-pox was registered either in London or in any of the thirty-two provincial towns. There were 15 small-pox patients under treatment in the Metropolitan Asylums Hospitals on Saturday last, June 16th, against 5, 7, and 11 at the end of the three preceding weeks; 8 new cases were admitted during the week, against 4 in each of the two preceding weeks. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had been 1,784, 1,760, and 1,754 at the end of the three preceding weeks, had risen again to 1,766 on Saturday last; 210 new cases were admitted during the week, against 216, 194, and 203 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, June 16th, 1,014 births and 616 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 19.6, 18.6, and 18.3 per 1,000 in the three preceding weeks, rose again last week to 19.9, and was 1.9 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 17.2 in Greenock and 17.9 in Leith, to 21.0 in Aberdeen and 27.0 in Perth. The zymotic death-rate in these towns averaged 2.5 per 1,000, the highest rates being recorded in Glasgow and Greenock. The 286 deaths registered in Glasgow included 14 from measles, 17 from whooping-cough, 2 from "fever," and 12 from diarrhoea. Four fatal cases of measles, 2 scarlet fever, 2 of whooping-cough, and 2 of diarrhoea were recorded in Edinburgh.

NEW WORKHOUSE INFIRMARY AT WARRINGTON.

It is always a cause of satisfaction to chronicle the opening of a new infirmary under the Poor Law, and that at Warrington would appear to reflect credit on its promoters. It is built in pavilions, that in the middle being for administration, those on either side being for male and female patients respectively. The plan provides for the addition of more blocks to meet further requirements, and we are glad to note that accommodation for the full staff can be found in the administration block when necessary. The total number of beds is 320, of which 184 are already provided. Electricity generated on the premises is used for lighting; the wards are heated by open fires supplemented by radiation and pipes. Each block has a lift for the patients, and the wards have bath rooms, lavatories, kitchens, and linen rooms. Covered corridors connect the administration block with the ward blocks. The infirmary is entirely separate from the workhouse and under different control; there is to be a resident medical officer and a lady superintendent.

THE BRIGG RURAL DISTRICT.

At the last meeting of the Brigg (Lincolnshire) Rural District Council it was unanimously resolved, on the motion of the Chairman, to reappoint Dr. Godfrey Goodland, M.O.H., for a further period of two years, and to raise the annual salary from £80 to £100 on account of the increase of the work and the satisfactory manner in which he had performed his duties, especially in connection with the recent outbreak of small-pox at New Holland and Foxhill.

SMALL INFECTIOUS HOSPITALS.

G. writes: As medical officer of health I have been asked to make arrangements for nursing and caretaking in a newly-erected isolation hospital, which has accommodation for 4 male and 4 female patients. The hospital is situated in a rural district. It is possible that it may be without a patient for eight or even ten months in the year. The nurse's accommodation consists of one bedroom, one sitting room, and a kitchen. (1) Would it be advisable to endeavour to engage a suitable married couple to undertake the nursing and caretaking? (2) If not, what would be a suitable arrangement? (3) Should a medical man who lives close to the hospital be appointed at a yearly salary to attend all the patients in the hospital? (4) If so, taking the above particulars into consideration, what would be considered a suitable salary? The difficulty with regard to each medical man attending his own patients in the hospital is that one of the three villages for which the hospital is intended gets a great part of its medical attendance from a large town outside the rural district, five miles from this village and eight from the isolation hospital.

excess of the two preceding years. This is attributed to the severity of the cases treated. The number of operations performed was large, and among them obstetric operations are conspicuous. The work done in the Government Maternity Hospital is of a high class, and the report submitted by Lieut.-Colonel A. J. Sturmer elaborate and able. The Government pays a well-deserved tribute to the long and excellent service rendered by Colonel A. M. Branfoot, C.I.E., in the charge of this institution, which is also a school for the training of midwives and nurses. The General and Mudellias Lying-in Hospitals assist in the work. Lieutenant-Colonel W. A. Lee, in charge of the Leper Hospitals, contributes a valuable note on recent observations regarding the causation, pathology, and treatment of leprosy. The financial condition of these institutions is satisfactory, Government contributing about three-fourths of their income.

BOMBAY.

The administration and progress report for the year 1898 submitted by Surgeon General G. Bainbridge, M.D., displays the transactions of the important hospitals which minister to the needs of the destitute sick and ailing of the city of Bombay in minute detail. The report in its present form is somewhat confused and exceedingly arithmetical and dreary. It might be made more interesting and readable by rearrangement and the infusion of life and interest into its statistical pages. In a record of medical relief during a trying and pestilential year, it seems reasonable to expect some information regarding the state of public health and the conditions in and around Bombay which have influenced sickness and mortality. It appears that 51,967 deaths occurred in 1898, and that, of these, 18,185 (out of 19,863 attacks) were due to plague; but excepting an arithmetical statement of the seasonal and local distribution of these totals as compared with the preceding year, the report is silent even as regards the relation of the facts so crudely stated to populations. Of the sufficiency of the provision of means of medical and surgical relief in ordinary times, there is no indication. Mention is made of special plague hospitals, but no details are given regarding their number, location, and work. Only 359 cases were treated in the general hospitals. The total number of patients treated in these eleven institutions was 8,519, an increase on 1897, but a considerable decrease on 1896. The death-rate among indoor patients was 12.5 per cent. The number of operations performed was 18,504, many of them of an important character and with a creditable ratio of success. Three-fourths of the cost of maintaining these hospitals is borne by Government. The review recorded by the administration on this report consists of a table of the cost of diets and a few remarks thereon.

THE WEST INDIAN ISLANDS.

WEST INDIAN MEDICAL OFFICERS AND THEIR APPOINTMENTS.—We have received a copy of an article from the *Saint Christopher Gazette* of April 23rd, 1900, in which we are taken to task for having cast the blame for some of the hardships which have been involved by the reduction of the medical service of the West Indies upon the local administrations, whereas the *Saint Christopher Gazette* considers the Colonial Office solely responsible. When we wrote of the action of local administrations we had in our mind a particular case in Jamaica in which the Colonial Secretary had interfered to protect the medical profession from the local administration, and we are unable to adopt the point of view of our contemporary, who is disposed to blame Mr. Chamberlain because he regards the reduction of the medical establishments as absolutely necessary. The Colonial Secretary pointed out that the financial condition of the island is such that they are already depending upon grants in aid—in other words, upon the British taxpayer—for a considerable portion of their expenditure. Under these circumstances it was considered necessary that there should be a reduction in the medical establishments of the West Indian Colonies, which were regarded as somewhat inflated. We believe the Colonial Secretary has done his best to mitigate the results of the financial crisis through which these colonies are passing, and which inevitably entails a certain amount of suffering upon all classes. We have the fullest sympathy for the troubles of our West Indian colleagues, and are extremely anxious to see prosperity restored to these Colonies; but Mr. Chamberlain cannot be expected to maintain the Colonial medical establishments upon their former scale at the expense of the British taxpayer.

NEW SOUTH WALES.

Vaccination.—From a reprint of an address read before the Australasian Association for the Advancement of Science by Dr. Frank Tidswell we learn that New South Wales is "the only province of the Australian group in which an enactment for compulsory vaccination does not exist, although strong representations in favour of such legislation have not been wanting. The Colony thus constitutes a danger and a menace to the other Colonies, of which the latter have just cause to complain." The vaccinations of children are steadily falling off: in the year 1895 the vaccinations (by Government vaccinators) were only 56 per cent. of the registered births, and in 1896 they were under 5 per cent. This is a lamentable state of affairs, partly due, it appears, to "the misguided reliance which is placed on our system of maritime quarantine." The Quarantine Act dates from the year 1822 and is still enforced. Both Victoria and New Zealand have established vaccine institutions, and the sooner New South Wales follows their example, at the same time making vaccination compulsory, the better it will be for the future of that Colony.

HOSPITAL AND DISPENSARY MANAGEMENT.

NATIONAL SANATORIUM FOR CONSUMPTION, BOURNEMOUTH. THE report presented to the annual general meeting of governors of this institution showed that there was a debt of £655 for the building of a new sanitary wing at a cost of £1,000, and that the ordinary annual expenses had been increased to the extent of about £200, due mainly to the expenditure requisite for efficiently carrying on the open-air treatment, and that this further sum would be required to meet the expenses of the present year.

MEDICAL NEWS.

THE subject for the essays for the Howard Medal of the Royal Statistical Society, to be awarded in 1901, with £20 as heretofore, is the History and Statistics of Tropical Diseases, with especial reference to the bubonic plague. The essays should be sent in by June 16th, 1901.

PRESENTATION.—At a meeting of the members of the Ware Ambulance Association, the Chairman, Mr. A. G. Sandeman, presented Dr. A. J. Boyd with a pair of silver candlesticks and a penholder, and Mr. T. Barker with an easy chair, as an expression of the goodwill of the ambulance classes in connection with which they had successfully worked.

At a meeting of the Council of Epsom College held on Saturday last the Elocution Prize was awarded to Colin Gifford, the senior prefect of the school. Subsequently the Wakley Prize of £20 was awarded to the same boy by the votes of his fellows of the Upper and Middle Schools. This prize has been given for some years for the best all-round boy in the estimation of his fellows, and is given from the proceeds of a fund raised to the memory of the late Thomas Wakley the editor of the *Lancet*.

EXEMPTION OF HOSPITALS FROM RATES.—The Select Committee of the House of Commons on the Exemption of Hospitals from Rates has commenced its inquiry under the presidency of Mr. T. W. Russell. Mr. A. D. Adrian, legal adviser to the Local Government Board, in stating the present position of the law, pointed out that the local authorities were bound to assess hospitals in substantial sums, although parks, churches, chapels, and voluntary schools, among other quasi-philanthropic institutions, were exempt. The London Hospital was exempt from the rates by a local Act.

CONFERENCE ON NURSING.—At a conference convened by the Matrons' Council, to be held at the rooms of the Medical Society of London at 3 p.m. on July 5th and 6th, the following questions will come under discussion: (1) A Poor-law Nursing Service; (2) the Necessity for a Nursing Department in all Governmental Offices dealing with the Nursing of the Sick; (3) the Celebration by Trained Nurses of the New Century; (4) the Nursing of the Sick at Sea; and (5) the State Registration of Trained Nurses. Tickets of admission may be obtained from the Honorary Secretary, Miss M. Breay, 46, York Street, Portman Square, W.

WHEN the guard of the Plymouth express which was recently in collision with a Windsor train at Slough emerged from his broken van he saw, as he describes, a gentleman in jacket and cap creep under the engine and render assistance to a passenger who was lying with his foot imprisoned under its flywheel. The fire was burning fiercely above, volumes of steam were escaping from the engine and playing on the man, large quantities of water were being poured on the fire by the Fire Brigade, and hanging above the passenger and his rescuer was the floor of one of the telescoped carriages which threatened every moment to fall. To his surprise the guard recognised Mr. Paul Swain, of Plymouth, who "worked as hard as any man could." After twenty minutes' exertions the man was set free, but with a fractured leg.

MEDICAL VACANCIES.

The following vacancies are announced:

- ARDEEN UNIVERSITY.—Additional Examiner for Graduation in (1) Materia Medica, (2) Pathology, (3) Surgery. Applications to the Secretary by July 3rd.
- BICKENHEAD 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 (FEVER) HOSPITAL.—Assistant Medical Officer. Salary, £120 per annum, with board, residence, etc. Applications to the Medical Superintendent.
- BIRMINGHAM: GENERAL HOSPITAL.—Pathologist. Salary, £100 per annum, with board and residence. Applications to the House Governor by June 30th.
- BOOTLE HOSPITAL, LIVERPOOL.—Junior Resident. Salary, £80, with board, washing and lodging. Applications to the Secretary.
- BRIDGEWATER INFIRMARY.—House-Surgeon. Salary £80 per annum, with board and residence. Applications to the Secretary by July 12th.
- BRIGHTON: ROYAL ALBERTA HOSPITAL FOR SICK CHILDREN.—House-Surgeon. Salary, £80, with board, lodging, and washing. Applications to the Chairman of the Medical Committee by July 3rd.
- BRIGHTON: SUSSEX COUNTY HOSPITAL.—House-Surgeon, unmarried and under 30 years of age. Salary £140 per annum, with board, residence and washing. Applications to the Secretary by July 4th.
- Bristol ROYAL HOSPITAL FOR SICK CHILDREN AND WOMEN.—House-Surgeon. Salary £120, with rooms and attendance without board; or £80 with board. Applications, endorsed "House-Surgeon," to the Secretary by June 27th.

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 AND COUNTY PUBLIC HEALTH LABORATORY.—Assistant to the Bacteriologist. Salary, £120 per annum. Applications to the Clerk to the Joint Committee, Glamorgan County Office, Cardiff, by July 4th.

CARLISLE DISPENSARY.—House Surgeon. Salary, £150 per annum, with apartments. Applications to the Honorary Secretary, 23, Lowther Street, Carlisle.

CHELSEA HOSPITAL FOR WOMEN.—Resident Medical Officer. Post tenable for twelve months. Salary, £90 per annum. Applications to the Secretary by June 30th.

CHORLEY DISPENSARY AND COTTAGE HOSPITAL.—House-Surgeon. Salary commencing at £80 per annum, with board and lodging. Applications to the Honorary Secretary.

CITY ORTHOPEDIC HOSPITAL, Hatton Garden.—Physician. Applications to the Secretary by July 14th.

ESSEX AND COLCHESTER HOSPITAL.—Resident House Surgeon. Salary, £100 per annum, with board, washing, etc. Applications to the Secretary.

EXETER: ROYAL DEVON AND EXETER HOSPITAL.—Junior Assistant House-Surgeon. Appointment for six months. Salary at the rate of £30 per annum, with board, lodging, and washing. Applications to the House-Surgeon.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton.—(1) Resident House-Physicians. Appointments for six months. Honorarium, £25. (2) Surgeon; must be F.R.C.S. Eng. Applications to the Secretary for (1) by June 25th and for (2) by June 30th.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—Two House-Surgeons to Out-Patients. Appointment for six months, but renewable. Salary, 25 guineas each. Applications to the Secretary by July 10th.

HUDDERSFIELD INFIRMARY.—Junior House-Surgeon. Salary, £60 per annum, with board, residence, and washing. Applications to the Secretary by June 30th.

IPSWICH: EAST SUFFOLK AND IPSWICH HOSPITAL.—Second House-Surgeon, unmarried. Salary, £60 per annum, with board, lodging, and washing. Applications to the Secretary by June 30th.

ITALIAN HOSPITAL, Queen Square, W.C.—Honorary Ophthalmic Surgeon to Out-patients. Applications to the Secretary by June 30th.

KENSINGTON DISPENSARY.—Resident Medical Officer; unmarried and under 35 years of age. Salary £125 per annum, with furnished apartments, etc. Applications to the Honorary Secretary, Mr. C. F. C. Ellis, 56, Bedford Gardens, Kensington, W., by June 30th.

MIDDLESEX HOSPITAL.—Assistant Dental Surgeon. Applications to the Secretary-Superintendent by July 5th.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Registrar. Honorarium 50 guineas. Applications to the Secretary by June 30th.

NORTH RIDING ASYLUM, Clifton.—Junior Assistant Medical Officer; unmarried, age not exceeding 30 years. Salary, £125, rising to £175 per annum, with board, furnished apartments, etc. Applications to the Medical Superintendent by June 25th.

NORWICH: HEIGHAM HALL ASYLUM.—Assistant Medical Officer. Applications to the Medical Superintendent.

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

OLDHAM INFIRMARY.—(1) Senior House-Surgeon. Salary, £85 per annum. (2) Junior House-Surgeon. Salary £70 per annum. Board, lodging, and washing provided for (1) and (2). Applications to the Secretary by June 25th.

PERTH COUNTY AND CITY ROYAL INFIRMARY.—House-Surgeon. Salary £60 per annum, with board. Applications to the Secretary, 38, Tay Street, Perth, by July 9th.

PLAISTOW: ST. MARY'S CHILDREN'S HOSPITAL.—Assistant Resident Medical Officer. Appointment in first instance for six months. Salary, £80 per annum, with board, residence, laundry, etc. Application to the Secretary by July 14th.

PLYMOUTH BOROUGH ASYLUM.—Assistant Medical Officer, unmarried. Salary, £125, increasing to £150, with furnished apartments, board, and washing. Applications, endorsed "Assistant Medical Officer," to Dr. W. H. Bowes, Medical Superintendent, by June 25th.

ROTHERHAM HOSPITAL AND DISPENSARY.—Assistant House-Surgeon. House-£80 per annum, with board, lodging, and washing. Applications, marked "Salary, Surgeon," to the Secretary.

ROYAL LONDON OPHTHALMIC HOSPITAL, City Road, E.C.—Assistant Surgeon; must be F.R.C.S. Eng. Applications to the Secretary by June 25th.

ST. GEORGE'S HOSPITAL, S.W.—(1) Surgeon; (2) Assistant-Surgeon. Must be F.R.C.S. Eng. Applications to the Secretary by June 30th.

SALFORD UNION.—Assistant Resident Medical Officer at the Infirmary, Hope. Salary, £130 per annum, with furnished apartments and attendance. Applications, endorsed "Assistant Medical Officer," to the Clerk to the Guardians, Union Offices, Eccles New Road, Salford, by June 25th.

SALISBURY GENERAL INFIRMARY.—Assistant House-Surgeon, unmarried. Salary at the rate of £50 per annum, with apartments, board, and washing. Applications to the Secretary by June 25th.

SHEFFSBURY: 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, 34, King Street, Southport, by June 30th.

STAMFORD, RUTLAND, AND GENERAL INFIRMARY.—House-Surgeon. Salary, £100 per annum, with board, lodging, and washing. Applications to the Secretary by July 10th.

SWANSEA GENERAL AND EYE HOSPITAL.—House-Physician. Salary, £50 per annum, with board, apartments, etc. Applications to the Secretary by June 25th.

TEIGNMOUTH HOSPITAL.—House-Surgeon. Application to the House Committee.

TIVERTON INFIRMARY AND DISPENSARY.—House-Surgeon, unmarried. Salary £80 per annum, with board, lodging, and washing. Applications to the Honorary Secretary by June 30th.

VICTORIA HOSPITAL FOR CHILDREN, Queen's Road, S.W.—Resident Medical Officer. Appointment for six months. Honorarium £25, with board and lodging. Applications to the Secretary by June 30th.

WEST DERBY UNION.—Resident Assistant Medical Officer at the Mill Road Infirmary. Salary, £100 per annum, with rations. Applications to the Clerk to the Guardians, Mill Road, Derby, by June 25th.

WESTERN GENERAL DISPENSARY, Marylebone Road.—(1) House Surgeon, unmarried. Appointment for six months. Salary at the rate of £75 per annum, with board and residence, and 10s. a month for washing. (2) Honorary Physician, must be F. or M.R.C.P. Lond. Applications to the Honorary Secretary.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—(1) House-Surgeon. Salary, £100 per annum. (2) Assistant House-Surgeon, appointment for six months. Salary at the rate of £75 per annum. Board, lodging, and washing provided in each case. Applications to the Chairman of the Medical Committee for (1) by June 25th and for (2) by July 12th.

MEDICAL APPOINTMENTS.

BLOMFIELD, A. B. M.R.C.S. Eng., L.R.C.P., appointed Medical Officer for the North Peckham District of the Camberwell Union, *vice* S. C. Phillips, M.R.C.S., L.R.C.P.

BROWNLEE, John, M.A., M.D. Glasg., and D.P.H. Camb., late Medical Officer of Health, Guernsey, appointed Physician Superintendent of Belvidere Fever Hospital, Glasgow.

CLARK, H. W., M.B., B.S., appointed Medical Officer for the Capel District of the Dorking Union, *vice* J. L. Jardine M.R.C.S. Eng., resigned.

CODD, A. F. G., M.B. Durh., F.R.C.S. Eng., appointed Certifying Factory Surgeon for the Bromley District.

COLLIER, James, M.D., B.Sc. Lond., M.R.C.P., appointed Pathologist to the National Hospital for the Paralyzed and Epileptic, Queen Square, W.C., *vice* Dr. F. E. Batten, appointed Assistant Physician.

DEPREZ, Sidney S., M.B., Ch.B., appointed Senior House-Surgeon to the Bootle Borough Hospital, Liverpool.

DE RENZI, Henry Carter Castriot, M.R.C.S. Eng., L.R.C.P. Lond., appointed Honorary Surgeon to the Wellington Hospital, New Zealand.

FAIRBAIRN, J. S., M.B., B.Ch. Oxon., F.R.C.S. Eng., appointed Pathologist to the Chelsea Hospital for Women.

FLINT, Thomas B., M.R.C.S., L.R.C.P. Lond., appointed Certifying Factory Surgeon for the Buxton District.

GOULDEN, H. E., M.R.C.S. Eng., D.P.H. Camb., appointed Medical Officer for the Fifth District of the Honiton Union, *vice* H. Steven, M.B., C.M. Edin.

HAINES, Wheeler, B.Sc. Lond., M.R.C.S. Eng., L.R.C.P. Lond., L.S.A. Lond., appointed Senior Medical Officer at the North Riding Asylum, Clifton, York.

HARRIS, J. H., M.R.C.S. Eng., D.P.H. Camb., appointed Medical Officer for the First and Second Districts of the Kingsbridge Union, *vice* R. W. Soper, M.R.C.S. Eng.

HUDSON, J. S., M.R.C.S., L.R.C.P., appointed Pathologist to the Infirmary for Consumption, Margaret Street, W.

HUNTER, David, M.A., M.B., B.O. Cantab., L.S.A. Lond., appointed Medical Superintendent of the new West Ham Borough Asylum at Chadwell Heath.

MITCHELL, A. M., M.D. Camb., D.P.H., appointed Medical Officer of Health for the Borough of Guildford, *vice* J. Morton, M.B. Lond., resigned.

MOWERAY, Robert, M.D., M.Ch., L.M., appointed Medical Officer of Castleberg and Killalea, No. 3 Dispensary District, *vice* Andrew T. Love, M.D., resigned.

MUIR, J. S., M.B., C.M. Edin., appointed Certifying Factory Surgeon for the Selkirk District.

NICHOLL, E. E., M.R.C.S. Eng., L.R.C.P., appointed Medical Officer for the Billingham District of the Seaforth Union, *vice* J. H. Pim, L.R.C.P., L.R.C.S.

ROBERTS, C. Hubert, M.D. Lond., F.R.C.S. Eng., M.R.C.P., appointed Physician to In-Patients at the Samaritan Hospital for Women, London, N.W.

TUCKER, D. W., M.R.C.S., L.R.C.P., and L.R.C.S.I., and L.M., appointed Medical Officer to the Alvalton and Boulton School Board.

LUKE, Thomas D., M.B., B.Ch., appointed Anaesthetist to the Deaconess Hospital, Edinburgh.

DIARY FOR NEXT WEEK.

MONDAY.

London Throat Hospital, 204, Great Portland Street, W. 4.30 P.M.—Mr. Waggett: Diagnosis of Chronic Deafness.

West London Post-Graduate Course, St. George's Hospital, Taversham Road, W. 5 P.M.—Mr. Swinford Edwards: Urinary Cases. (Lecture I.)

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

TUESDAY.

National Hospital for the Paralyzed and Epileptic, Queen Square, Bloomsbury, W.C. 3.30 P.M.—Sir W. E. Gowers, M.D., D.P.H., and L.R.C.S.I., and L.M., appointed Medical Officer to the Alvalton and Boulton School Board.

Royal College of Physicians of London, 5 P.M.—Dr. F. W. Mott: The Degeneration of the Neurone. (Croonian Lecture.) Lecture III.

Medical Graduates' College and Polytechnic, 22, Chancery Street, W.C. 4 P.M.—Dr. Sharkey: Consultation (Medical).

WEDNESDAY.

Evelina Hospital for Sick Children, Southwark Bridge Road, S.E. 4.30 P.M.—Mr. Walter Edmunds: Selected Surgical Cases. (Post-Graduate Course.)

Hospital for Consumption and Diseases of the Chest, Brompton, S.W. 4 P.M.—Dr. Fowler: Thoracic Anæsthesia.

Medical Graduates' College and Polytechnic, 22, Chancery Street, W.C. 4 P.M.—Mr. W. A. Jacobson: Consultation (Surgical).

THURSDAY.

Royal College of Physicians of London, 5 P.M.—Dr. F. W. Mott: The Degeneration of the Neurone. (Croonian Lecture.) Lecture IV.

Medical Graduates' College and Polytechnic, 22, Chancery Street, W.C. 5 P.M.—Mr. J. Hutchinson: Consultation. (Surgical.)

Charing Cross Hospital, Post-Graduate Course, 4 P.M.—Dr. William Hunter: Pathological Demonstration.

West London Post-Graduate Course, St. George's Hospital, Taversham Road, W. 5 P.M.—Mr. Swinford Edwards: Urinary Cases. (Lecture II.)

FRIDAY.

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

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 8s. 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.

BIRTH.

WARRINGTON.—On June 15th, at 69, Rodney Street, the wife of W. B. Warrington, M.D., M.R.C.P. Lond., of a daughter.

MARRIAGES.

SNELL-REID.—At the Roxburgh Hotel, Edinburgh, by the Rev. Alex. Badenoch, M.A., assisted by the Rev. Bernard J. Snell, M.A., B.Sc., Ernest Hugh Snell, M.D., B.Sc., of Coventry, to Mary Catherine, second daughter of the late William Reid, of Dunfermline, N.B.

MURRAY-SPENCE.—At the Parish Church, Dun, on the 13th inst., by the Rev. Robert Scott, M.A., Craig, assisted by the Rev. Alexander Anderson, Dun, William Murray, M.D., Hesse, East Yorks, to Barbara Maud, the second daughter of Andrew Spence, J. P., Glenkensho.

WRIGHTON-HAVERS.—On the 26th April, at St. James's Church, Tunbridge Wells, by the Rev. W. Scott, assisted by the Rev. A. R. Cronk, William Charles Haultain Wroughton, M.R.C.S. Eng., L.R.C.P. Lond., fourth son of Colonel W. N. Wroughton, Indian Staff Corps, to Rose Edith, only daughter of the late J. Cory Havers, Esq., of Joyce Grove, Oxon, and Mrs. Havers, Ferndale, Tunbridge Wells.

DEATHS.

EMBLETON.—On June 18th, at Swanage, of apoplexy, Dennis Cawood Embleton, M.D., M.R.C.S., L.R.C.P., of St. Wilfrid's, Bournemouth, age 46.

JONES.—On the 15th inst., at Springfontein, South Africa, Professor Thomas Jones, F.R.C.S.

NEWTON.—On June 21st, at Trevor Dene, Penarth, Georgia, the wife of Charles John Newton, Surgeon, aged 48 years.

WHEATLEY.—On the 14th inst., at the Grange, Loughton, William Henry Wheatley, L.D.S. Lond. and Glasg., aged 45 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.*—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-Therapeutics,
 Tu. Th., 9.30; Children, Tu. F., 1; Ophthalmic, 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 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, 1 p., M. Tu. Th. F. S., 1.30; o.p., M. W. Th. F., 12; Sur-
 gical, 1 p., daily, 1.30; o.p., M. W. Th. S., 12; Obstetric, 1 p., M. Tu. Th. F., 1.30; o.p.,
 Th. S., 12; Eye, 1 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; (Ophthal-
 mic), M., 1.30; Th., 2.
HOSPITAL FOR WOMEN, Soho. *Attendances.*—O-p., M., 9; Tu. W., 12; Th., 9; F. S., 12.
Operations.—M. Tu., 2; Th. 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, 1 p., 2; o.p., 1.30; Surgical, daily, 1.30 and 2;
 Obstetric, M. 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, 1 p., M., 2.30; Tu. F., 3.30; Th. 2.0; O-p.,
 M. Tu. W. F., 1; Surgical, 1 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. *Opera-
 tions.*—Tu. F., 2; 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. *Opera-
 tions.*—Tu., 3.
ROYAL EYE, Southwark. *Attendances.*—Daily, 2. *Operations.*—Daily.
ROYAL FREE. *Attendances.*—Medical and Surgical, daily, 2; Diseases of Women, Tu. S.,
 9; Eye, M. F., 9; Skin, Th., 9.30; Throat, Nose, and Ear, W., 9.30. *Operations.*—W. S., 9;
 (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.
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, 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. S., 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; Electri-
 cal, 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, 1 p., 1; o.p., 12; Obstetric,
 1 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., 12. *Operations.*—Daily, 1; Ophthalmic, W., 1; Dental, Th., 9.
ST. MARK'S. *Attendances.*—Fistula and Diseases of the Rectum, males, S., 2; females,
 W., 9.30. *Operations.*—Tu., 2.30; Th., 2.
ST. MARY'S. *Attendances.*—Medical and Surgical, daily, 1.45; o.p., 12.45; Obstetric, Tu.
 F., 1.45; o.p., M. Th., 1; Eye, Tu. F., 9; Ear, M. Th., 9; Throat, Tu. F., 3; Skin, M., Th.,
 9; Dental, W. S., 9; Electro-Therapeutics, W. S., 10; Children's Medical, M. Th., 9.
Operations.—M., 2.30; Tu. 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.*—1 p., Medical and Surgical, M. Tu. Th. F., 2; o.p., daily, 1.30
 Obstetric, Tu. F., 2; o.p., W. S., 1.30; Eye, Tu. F., 2; o.p., daily, exc. S., 1.30; Ear, M.
 1.30; Skin, F., 1.30; Throat, Th., 1.30; Children, W., 10.30; Electro-Therapeutics, Th.
 2; Mental Diseases, Th., 10; Dental, Tu. F., 10; X-Rays, Tu. F., 2; Vaccination, W., 11.30.
Operations.—Daily, 2; (Ophthalmic), Th., 2; (Gynaecological), Th., 2; (Throat), M., 9.30;
 (Ear), Th., 9.30.
SAMARITAN FREE FOR WOMEN AND CHILDREN. *Attendances.*—Daily, 1.30. *Opera-
 tions.*—Gynaecological, M., 2; W., 2.30.
THROAT, Golden Square. *Attendances.*—Daily, 1.30; Tu. F., 6.30. *Operations.*—Daily,
 exc. M., 10.
UNIVERSITY COLLEGE. *Attendances.*—Medical and Surgical, daily, 1.30; Obstetrics, M.
 F., 1.30; Eye, M. W., 1.30; Ear, M. Th., 9; Skin, Tu. F., 2; Throat, M. Th., 9; Dental, Tu.
 F., 9.30. *Operations.*—Tu. W. Th., 2.
WEST LONDON. *Attendances.*—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye,
 M. Th., 2; Ear, Tu. F., 2; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electric,
 M. Th., 3.15; Skin, Tu. F., 2; Throat and Nose, Tu. F., 2; S., 10. *Operations.*—Daily,
 about 2.30; F., 10.
WESTMINSTER. *Attendances.*—Medical and Surgical, daily, 2; Obstetric, M. Tu. F.,
 2; Eye, Tu. F., 9.30; Ear, Tu., 2; Skin W., 2; Dental, W. S., 9.15. *Operations.*—
 M. Tu. W., 2.

LETTERS, NOTES, AND ANSWERS TO
CORRESPONDENTS.

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

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 1, Agar
Street, Strand, W.C. London; those concerning business matters, advertisements, non-
delivery of the JOURNAL, etc., should be addressed to the Manager, at the 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 authenti-
cate 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 busi-
ness of the JOURNAL be addressed to the Editor at the Office of the JOURNAL, and not
at his private house.

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

Queries, answers, and communications relating to subjects to which
special departments of the BRITISH MEDICAL JOURNAL are devoted will be
found under their respective headings.

QUERIES.

SPA asks for a receipt for making "Zwieback" bread.

J. R. B. desires to hear of an institution, preferably in the North of
England, where a poor patient suffering from rheumatoid arthritis
could undergo a course of treatment by hot-air baths.

MILK DIET.

TONE asks for information as to some place on the Continent where a
patient who is suffering from chronic diarrhoea could go for a course of
milk diet, where the régime is fairly strict. Is Plombières such a
place?

* * * The choice of a resort must depend on the character of the case.
Milk diet may be obtained at a number of places on the Continent
—too many to mention. Many of the best known resorts
for pulmonary affections have specially good arrangements in
regard to milk, koumiss, etc. In some cases of chronic diarrhoea,
small doses of a water, like that of Carlsbad, seem to be useful,
in addition to careful diet. Plombières, with its hot baths, is beneficial
in some cases.

THE EXAMINATION FOR THE F.R.C.S. EDIN.

J. MCC. desires information as to the best books to read for the F.R.C.S.
Edin. in the following subjects: (1) Surgery, (2) surgical anatomy,
(3) operative surgery, (4) surgical pathology and morbid anatomy.

* * * The following works may be mentioned:

(1) SURGERY.—Erichsen's *Science and Art of Surgery*, 2 vols., tenth
edition (London: Longmans, Green, and Co. 1895. 48s.). Treves's
System of Surgery (London: Cassell and Co. 1895-96. 48s.). Rose and
Carless's *Manual of Surgery*, second edition (London: Baillière, Tindall
and Cox. 1899. 21s.).

(2) SURGICAL ANATOMY.—Article on surgical anatomy in *Quain's
Anatomy*, Appendix, tenth edition (London: Longmans, Green, and Co.
1896. 6s. 6d.), and Anatomy in its Surgical Aspect, as found in *Gray's
Anatomy*, fourteenth edition, edited by T. Pickering Pick (London:
Longmans, Green, and Co. 1897. 36s.), or Cunningham's *Anatomy*,
second edition (Edinburgh and London: Young J. Pentland, 1896. 25s.
should be read.

(3) OPERATIVE SURGERY.—Jacobson's *Operations of Surgery*, third
edition (London: J. and A. Churchill. 1897. 34s.). Waring's *Operative
Surgery* (Edinburgh and London: Young J. Pentland. 10s.).

(4) SURGICAL PATHOLOGY AND MORBID ANATOMY.—*Manual of Bac-
teriology*, by Muir and Ritchie, second edition (Edinburgh and London:
Young J. Pentland. 1899. 12s. 6d.). *Tuberculous Disease of the Bones and
Joints*, by W. Watson Cheyne (Edinburgh and London: Young J. Pen-
land. 1895. 14s.). *Suppuration and Septic Disease*, by the same author
(Edinburgh and London: Young J. Pentland. 1887. 5s.). *Tumours,
Innocent and Malignant*, by J. Bland-Sutton (London: Cassell and Co.
1893. 21s.). Special articles on the various pathological conditions in
any of the standard books above noted.

ANSWERS.

G. B. J.—The statement appears to be perfectly correct. Everybody, we
presume, knows that other ladies have obtained the State licence to
practise in Sweden.

TREATMENT OF CONSTIPATION IN CHILDHOOD.

DR. S. J. BAKER (Abingdon) writes, in reply to "Radius": I would refer
him to a very interesting and instructive article on the subject which
appeared in the BRITISH MEDICAL JOURNAL of July 7th, 1888, by Dr.
Eustace Smith, which I have found of great assistance to me.

FORMIC ALDEHYDE AS A DISINFECTANT.

J. W. W.—The subject of formic aldehyde as a disinfectant has been
treated in a long series of papers published in this country and abroad.
The various methods of generating the vapours, and general considera-
tions upon the value and suitability of the methods, together with a
useful bibliographical summary, will be found in Dr. Henry Kenwood's
paper on The Disinfection of Rooms by Formic Aldehyde (*Transac-
tions of the Sanitary Institute*, vol. xviii). Dr. Rideal's work on *Disin-
fection and Disinfectants* (2nd Edition) may also be consulted with
advantage.

NOTES, LETTERS, Etc.

ERRATUM.—In Dr. Duncombe-Honiball's paper on Accidents and Injuries
caused by Lightning, published in the BRITISH MEDICAL JOURNAL of
May 12th, the thirty-ninth line of column two, page 1154, should read
"I noticed no abnormality of blood," etc., and not as printed.

THE PRINCIPLES AFFECTING THE CONDITION OF SOUND BY THE BONES
OF THE HEAD.

DR. A. A. GRAY (Glasgow) writes in reply to Dr. Colquhoun's letter
(BRITISH MEDICAL JOURNAL, May 26th, p. 1328): I have only to say that
in some points he appears to have understood me wrongly in regard
to my views upon the conduction of sound by the bones of the head.
The paper was an abstract and the fault may have been mine in com-