

THE

# British Medical Journal

95841

THE JOURNAL OF THE BRITISH MEDICAL ASSOCIATION

INCLUDING

AN EPITOME OF CURRENT MEDICAL LITERATURE.

EDITED FOR THE ASSOCIATION BY

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VOLUME I FOR 1900.

JANUARY TO JUNE.

London;

PRINTED AND PUBLISHED BY THE BRITISH MEDICAL ASSOCIATION AT THEIR OFFICE 429, ST. AND

MCM.

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NOTE ON A CASE OF LANNELONGUE'S  
CRANIECTOMY.By CHARLES WARD, F.R.C.S.I.,  
Pietermaritzburg, Natal.

In Treves's *Operative Surgery*, vol. ii, p. 721, it is stated that down to 1894 36 cases of Lannelongue's craniectomy (or slight modifications of it) had been performed, with 4 deaths. As I have no means of referring to the different papers on the subject by Messrs. Horsley, Keen, and others, I am unable to ascertain how long after operation death occurred in the fatal cases, what part complications may have played, nor for what condition the operations were performed. But as the subject seems to be of some interest to surgeons, perhaps the following brief notes may contribute to an estimation of the value of the operation as a curative or palliative measure.

The patient was a boy, aged 6 years, and several medical men having met in consultation it was decided that he was suffering from syphilitic hyperostosis of the skull; and we were pressed by the relatives to do something to relieve his sufferings, which were painful to witness. The chief symptoms were a large head for his age; hard, regular, symmetrical thickening of skull; a haziness of the cornea; profound symmetrical deafness; almost complete obliteration of postnasal fossa; foul discharge from nostrils, and complete loss of speech. The limbs were thin and wasted, and the gait was tottering. He was very restless, and had sudden violent attacks like mania, rushing and biting at anything, with loud screams and struggling. He had been treated with thyroid gland substance, with no improvement. But it was thought that slight benefit had resulted from mercurial inunction and hyd. c. cret. internally.

On November 27th, 1898, at the Durban Sanatorium, I operated as follows: Commencing on the left side, a rectangular flap of scalp about 2½ inches wide was cut, extending the whole length of the parietal bone, and having its base close to the middle line of the vertex. This being reflected up and fixed, a trephine opening was made in the bone posteriorly, and then the bone was cut through forwards the whole length of the incision at about ½ inch from the sagittal suture, and about ½ inch wide. The bone was very thick and of stony hardness, and required considerable force with a chisel and hammer to cut it, ordinary bone forceps making little or no impression on it. There was very free hæmorrhage. The dura mater bulged out considerably and was punctured, letting out about 2 ozs. of clear fluid. The boy's condition being reported as favourable, it was decided to continue, and the same proceedings were carried out on the right side. The wounds were treated in the usual manner.

The case was left in charge of my friend Dr. Birtwell, of Durban, and recovery from the actual operations was rapid and uneventful, mainly owing to the extreme care and attention he was good enough to devote to the case.

It was about three to four months before I could get an opportunity of seeing the case again, and then his condition was very much improved. The deafness was nearly gone, the cornea was clear and bright; speech had returned so far as to enable him to say a few words he had been accustomed to use when able to talk before. He "took notice" and would laugh at certain antics of play which the other children performed for his amusement. The screaming and maniacal fits had completely disappeared, as had also the nasal discharge; he slept and ate better, and his appearance generally was improved. But his legs were decidedly worse, and he could no longer walk; there did not appear to be any more wasting of the limbs, and sensation was little, if at all, affected. Altogether I had considerable hopes of him, and thought it possible specific treatment might yet prove of benefit. But on April 28th, 1899, five months after operation, and whilst still apparently improving, he was suddenly seized with a "fit," and was dead before Dr. Birtwell could reach him.

Unfortunately Dr. Birtwell was unable to make a *post-mortem* examination, and so the case remains incomplete. But I think that it was sufficiently encouraging to warrant similar proceedings should such a case ever occur to me again.

I had also the advice and assistance of the late Dr. Hall, of Durban, at the operation.

## MEMORANDA:

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

PIN INTRODUCED INTO THE EAR PASSED *PER ANUM*.

The following case appears to me to be worthy of record on account of its rarity: A man aged about 22 consulted me on the evening of May 21st. He had suffered from otorrhœa and deafness for many years, the deafness being more pronounced on the left side. Just before I saw him he had been trying to remove some cerumen from the right external meatus with an ordinary small pin, when it suddenly slipped inside. He came at once to see me, and I proceeded to get out a mirror and speculum, and lighted a lamp for the purpose of examina-

tion. Whilst I was making these preparations he exclaimed suddenly that "he felt it in his throat." I examined the throat, passed a probang, but found nothing. I then examined the ear most carefully with a speculum, but could find no pin.

The patient was still dissatisfied, so I advised him to see Mr. J. W. Langdon, Ophthalmic and Aural Surgeon to the Preston Royal Infirmary, early in the morning. He did so, and Mr. Langdon wrote to me saying he could find no foreign body, but there was a perforation of the right membrana tympani with a discharge.

On May 23rd I again saw the patient, who said he had no pain in the ear or throat, but wanted some medicine for a "pain in the stomach." A few days later he informed me that on May 24th, when he was about to have a motion of the bowels, he felt a slight pricking sensation. He examined the stools, and to his great relief and satisfaction found the missing pin.

ALLAN I. PETYT, M.A., M.B., B.C. Cantab.  
Longton, near Preston.

OSSIFIED STYLO-HYOID LIGAMENT SIMULATING A  
FOREIGN BODY.

The case recorded by Mr. G. W. Farmer in the *BRITISH MEDICAL JOURNAL* of June 9th, in which he removed an ossified stylo-hyoid ligament in mistake for a foreign body in the pharynx, reminds me of a case I had some four or five years ago, when I was House-Surgeon at the Chichester Infirmary. A man came to the infirmary one evening and said that whilst eating some hashed rabbit he had swallowed a piece of bone and that this was still sticking in his throat. I examined the pharynx with a mirror and could see nothing abnormal, but on exploring with my finger I felt an elongated hard substance beneath the mucous membrane on the left side behind and slightly below the posterior pillar of the fauces. The patient said that that was the place the bone was. Whilst wondering how the foreign body could have got beneath the mucous membrane without any laceration being seen and thinking of the best way of removing it, it suddenly flashed across my mind that the stylo-hyoid ligament was sometimes ossified, and on carefully examining again I came to the conclusion that the substance I felt was an ossified ligament. I satisfied the patient that there was nothing in his throat and he went home quite contented.

I also failed to feel any ossification in the ligament of the opposite side. It would be interesting to know if the ligament on the left side is more frequently ossified than that on the right. Quain and MacAlister are both silent on this point in their works on anatomy.

South Kensington, S.W. C. FRANK WIGHTMAN, F.R.C.S. Eng.

A METHOD OF MOUNTING MOSQUITOS IN  
GLYCERINE.

REGARDING Dr. Rees's article in the *BRITISH MEDICAL JOURNAL* of June 18th, p. 1468, allow me to give my own experiences, without in the least detracting from his valuable advice. In place of killing aphides, mosquitos, etc., I have by coaxing allowed them to get entangled in a drop of glycerine, and with fine needles have put them into the most advantageous position. Chemistry will explain how glycerine menstruum exhibits the structure of these animals better than a menstruum such as balsam, which refuses absolutely to mix with aqueous media. Care and patience are required to prevent injury and air bubbles in mounting. Glycerine jelly may be used in place of the pure glycerine, made with gelatine water and glycerine. Death in the menstruum seems to make the appearance more natural.

Redhill.

JOHN REID, M.D.

A MILD CASE OF TETANUS: RECOVERY IN FOUR  
DAYS.

A GIRL, aged 8 years, received a long scratch from a pin on the outside of the left arm an inch or two above the elbow. The wound became painful and finally ulcerated. Four weeks after she had received the scratch, I was called to see her. I found her seated in a chair, evidently in pain, holding her head down on the right side. *Risus sardonicus* was present. I diagnosed tetanus and dressed the small ulcer

(about the size of two peas) with carbolic lotion (1 in 40) and ordered the child to be kept quiet in bed and to take 15 grs. of potassium bromide and 5 grs. of chloral every four hours. She passed a restless night and was much worse next day. She then had severe paroxysms of pain every half hour in the right temporal region and about the diaphragm. She swallowed liquids easily, but was distressed by any noise. On the third day she was much better, the stiffness of the neck and the risus sardonius had subsided, but the movements of the neck were restricted. Towards evening she perspired freely. On the fourth day she could move her head easily and was free from pain. The wound healed and she got well slowly. I have never seen a case of this nature before, and I therefore think it worth recording.

Cardiff.

H. H. TIDSWELL, M.R.C.S., L.C.R.P.

## REPORTS

ON

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

NORTH LONDON CONSUMPTION HOSPITAL,  
HAMPSTEAD.

OPEN-AIR TREATMENT APPLIED IN CASES OF INFLUENZA.

(By WILLIAM M. BERGIN, M.B., Registrar and Pathologist to the Hospital.)

FOR permission to publish the notes of the following cases I am indebted to the members of the honorary staff of the hospital, and in relation with the very widespread pulmonary complications which occurred in the influenza epidemic of this year, especially in the London district, some interesting points present themselves.

On January 2nd, 1900, an epidemic of influenza broke out in the hospital. The resident and nursing staff were first attacked, but symptoms soon appeared among the patients, the women suffering considerably more than the men. In all, 17 persons were treated, in addition to several others whose symptoms were not sufficiently severe to merit the diagnosis. The residents and nurses were treated in their own rooms, fires being kept up, and the ordinary amount of ventilation allowed, but the patients were all treated in full "open-air" wards, that is to say, those in which all the windows and ventilators were wide open day and night, so that although there was always a fire in the wards during the winter, the temperature in them was seldom more than two or three degrees higher than that of the atmosphere outside. The weather during the epidemic was not frosty, but the average temperature in the "open-air" wards was 42°, the range being 37° to 47°.

In addition to this difference of treatment it must also be noted that the patients, all of whom were suffering from pulmonary tuberculosis in one form or another, were sent to bed directly they complained, whereas the nurses concealed their indisposition until they were compelled to give in, several of them at this period having temperatures of 102° or 103°F. The symptoms were similar in all the cases, namely headache, pain in eyeballs, and severe pain in the back and limbs, without any swelling or tenderness of the joints. Abdominal symptoms were entirely absent. The medicinal treatment was practically the same in all the cases, small doses of sodium salicylate being given frequently with the ammoniated tincture of quinine, and gradually reduced as the pain subsided.

Of the 10 patients treated in the "open-air" wards 6 had all the above symptoms severely without their temperatures rising above 99°, whilst of the other 4 none had temperatures above 102°, and in no case did the fever last more than two days. Careful examinations in each case failed to reveal the signs of any complication, but in 1 patient the pulmonary lesion had distinctly increased during the fortnight after convalescence. Of those who were treated in the warm bedrooms the following is a summary:—

	Highest Temperature.	Period of Fever Days.	Complications.
J. W.	103.4°	4	Nil.
M. C.	103.0°	4	Slight broncho-pneumonia.
M. N.	102.0°	4	None detected, but there was a temperature of 99.0° to 99.6° for 10 days after.
M. R.	100.6°	4	Very slight bronchitis.
C. P.	102.0°	4	Bronchitis.
M. E.	100.4°	5	Nil.
P. B.	100.4°	3	Bronchitis and dry pleurisy.

From the foregoing it will be seen that those patients treated in the "open-air wards" had: (1) Lessened range of fever; (2) much shorter duration of fever; (3) freedom from complications. How much of this result must be apportioned to their immediate treatment, compared with the somewhat delayed treatment of the nurses, and what the effect would be upon those not already acclimatised, is impossible to say, but it seems to point strongly to the advantage of much more fresh air than is usually allowed to patients suffering from ordinary diseases. And surely many patients in our general hospitals would be greatly benefited if the ventilation were doubled, though this would of course entail the necessity of extra clothing and artificial heat.

## REVIEWS.

TUBERCULOSIS, ITS NATURE, PREVENTION, AND TREATMENT, WITH SPECIAL REFERENCE TO THE OPEN-AIR TREATMENT OF PHTHISIS. By ALFRED HILLIER, B.A., M.D., C.M. London: Cassell and Co. 1900. (Crown 8vo, pp. 256. 7s. 6d.)

As Dr. HILLIER remarks in his preface, tuberculosis may be studied from many points of view. The study of its etiology takes us into the domain of public health as well as into the laboratory of the bacteriologist. There is already a voluminous literature dealing with prevention, and the views on treatment have become completely revolutionised within the past few years. To those who do not wish to make tuberculosis the subject of special study, "a concise manual dealing with all the hydra heads of tuberculosis in one volume" will be of great service. This is what Dr. Hillier has set himself to provide in the present work. The nature of the disease is explained by Koch's discovery of the tubercle bacillus, and the essential condition for the establishment of tuberculosis (the introduction of the bacillus into a suitable soil) is early insisted on. We could wish that more stress had been laid on the factors which tend to create a favourable soil in the human body, for the predisposing causes include many which may be prevented or removed. The different clinical forms of tuberculosis indicate the variety of situations in which the disease may manifest itself. This chapter, which is based on the classification given in Osler's *Practice of Medicine*, suffers from the necessity for compression.

Chapters upon the Communication from Man to Man and from Animals to Man lead up to the precautions which are necessary for prevention, whether they concern the details of everyday life or the regulations which may be framed by public bodies. In discussing prevention by legislation or by public bodies, Dr. Hillier uses the Reports of the Royal Commission on Tuberculosis to construct a scathing commentary on the inadequacy of present legislation in the prevention of tuberculosis.

The chapter on Treatment is almost entirely restricted to a description of the "open-air" treatment, and of various sanatoria where this treatment is carried out. Numerous illustrations give interest to the description of these institutions. In an appendix some of the leaflets published by the National Association for the Prevention of Tuberculosis are reproduced, together with the directions for applying the tuberculin test in cattle, and the recommendations with regard to meat and milk of the second Royal Commission on Tuberculosis.

The book appears at an opportune time, and will be useful to many who desire a summary of our present knowledge of tuberculosis, and of the methods recommended for its pre-

making him such a renowned and brilliant surgeon as he afterwards proved to be. After he had matriculated his father wrote to me asking my advice as to what he should do with him, as he thought him too young to go to London. I strongly recommended him to send the youth to the Liverpool Northern Hospital, to which I was at that time physician, as resident pupil, and he acted upon my advice. The surgical practice at that hospital has always been extensive and varied, and it is a splendid field for practical experience in this department, as I can personally testify. It so happened that the house-surgeons during the period of his residence were most proficient and skilful, especially one of them, and they took a particular interest in young Jones, teaching him the "art" of surgery, in the way of setting fractures, bandaging, treating wounds, etc., and even allowing him to perform operations of different kinds. The consequence was that when he left Liverpool and went to Guy's Hospital as a first year's student he was really what might be termed a fairly expert surgeon. At any rate, he knew a great deal more about surgery, and was more skilful practically, than the large majority of students are at the end of their career. He was then one of the neatest bandagers I have ever seen, and to watch him put up a fracture was a treat.

Professor Jones's career in Manchester is well known, and I have been much gratified at witnessing the progressive stages of his success. There can be no doubt as to his extreme popularity with his colleagues and students, with his professional brethren in that city and its neighbourhood, and with those holding public and prominent positions. He was also held in the highest esteem and respect, and in a memorial service which took place at Union Chapel, Manchester, with which he was connected, the Rev. Dr. MacLaren gave eloquent and appropriate expression to the universal sentiments entertained towards Mr. Jones in that city, and spoke with affectionate appreciation of the graces of his character. I am acquainted with some who were on terms of intimate friendship with him in Manchester, and by them he was greatly beloved.

It is with mingled feelings that I look back upon the social intercourse which I was privileged to hold with Tom Jones the week of his departure for South Africa. He spent an evening in my house, and was thoroughly genial and happy, notwithstanding the sad prospect that lay before him. Some friends who met him for the first time were deeply impressed with his personality, and took an immediate and strong liking to him. I am glad that I had the opportunity of seeing him once more as an intimate friend, but feel his death all the more keenly for having been thus associated with him so recently. Little did I anticipate or realise when bidding him farewell at Waterloo Station that those of us who are specially interested in the Welsh Hospital should have to mourn his loss so soon. With his widow and daughter we sympathise most profoundly.

I cannot conclude without paying a tribute of respect and admiration to Dr. Herbert Davies, who accompanied Professor Jones to South Africa as Assistant Surgeon, and expressing the deep regret we must all feel as a profession on account of his premature death. He also took part in our

social gathering, and made a most favourable impression. I had not met him before, but I formed immediately a high estimate of his professional abilities and personal character, and I have no doubt whatever that what would have been a most useful and honourable career has been thus ruthlessly cut short.

#### HERBERT DAVIES, M.B., CH.B. VICT.

Assistant Surgeon, Welsh Hospital, South Africa.

It is with extreme regret that we have to announce the death of Dr. Herbert Davies, which occurred on June 15th from dysentery, while on duty at the front as Surgeon to the Welsh Military Hospital at Springfontein. He was the son of Alderman Henry Davies, J.P., of Carus Lodge, Halton, Lancaster. He was born at Preston on May 31st, 1874, and was therefore in his 27th year at the time of his death. He received his early education first at the Preston Grammar School and then at the Shrewsbury Grammar School; his medical education he obtained at Owens College, Manchester. In 1898 he took

the degrees of Bachelor of Medicine and Bachelor in Surgery at the Victoria University. Shortly thereafter he acted as Deputy House-Surgeon at the Stockport Infirmary; he then became House-Physician to the Brompton Hospital for Consumption and Diseases of the Chest and subsequently House-Surgeon at the Manchester Royal Infirmary. After a visit to Russia he accepted the post of House-Surgeon at the North Staffordshire Infirmary and Eye Hospital, and it was during his tenure of this office that he received an invitation from Professor Thomas Jones of Manchester to join the staff of the Welsh Military Hospital for service in South Africa. After obtaining six months' leave of absence from the governors of the North Staffordshire Infirmary, he left England on April 14th with the other members of the hospital staff for the front. He threw himself heart and soul into his work as Assistant Surgeon, and in spite of the trying nature of his duties and owing mainly, in all probability, to his fine physique he had excellent health until

he contracted the attack of dysentery which proved fatal. The news of his death reached his relatives by cable as they were in the act of reading his latest letter, which was written in the happiest strain. Deep sympathy is felt with his family in their bereavement.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. Willy Kühne, Professor of Physiology in the University of Heidelberg, aged 64; Dr. Cadet de Gassicourt, one of the leading authorities on children's diseases in France, formerly Physician to the Hôpital Trousseau, Paris, and a member of the Académie de Médecine, aged 73; Dr. Maximino Teixeira, Professor in the Medical Faculty and Rector of the University of Santiago; Professor Teodáio de Bonis, of the University of Naples, author of numerous works on pathology, aged 53; Dr. J. Icard, editor of the *Lyon Medical*, Librarian of the University of Lyons, and General Secretary of the Society of Medical Sciences; and Dr. Friedrich Brosin, a well-known gynaecologist of Dresden, aged 42.

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF CAMBRIDGE.

**Appointments.**—Sir M. Foster has been appointed the University member of the Council of the Jenner Institute of Preventive Medicine. Mr. A. W. Hill, of King's, and Mr. L. Lewton-Brain, of St. John's, have been appointed University Demonstrators in Botany.

**Degrees.**—At the Congregation on June 10th. Mr. Hubert Nicholls, M.A., M.B., of St. John's College, was admitted to the degree of Doctor of Medicine. During the academical year just ended 15 Doctors of Medicine, 1 Master of Surgery, 53 Bachelors of Medicine, and 65 Bachelors of Surgery took their degrees.

**Fellowships.**—Mr. W. U. Shaw, F.R.S., has been elected a Senior Fellow of Emmanuel College, and Mr. C. T. R. Wilson, F.R.S., a Fellow of Sidney Sussex College.

**THIRD EXAMINATION.**—The following candidates have satisfied the Examiners:

**Part I.**—G. F. Barham, B.A., Cai.; A. E. Boddington, M.A., Cai.; A. R. M. Brennan, B.A., Trin.; J. M. Brydone, Jes.; F. J. Child, B.A., Christ's; H. N. Clarke, B.A., Cai.; J. S. Clarke, B.A., Cai.; J. G. Cooke, Sid. Suss.; K. E. Crompton, B.A., Cai.; G. W. Deeping, B.A., Trin.; J. B. Dunlop, B.A., Sid. Suss.; W. E. M. Ede, B.A., King's; A. Emerson, B.A., Cai.; R. L. V. Foster, B.A., King's; T. B. Gilbert-Smith, B.A., Trin.; W. H. C. Greene, B.A., Corp. Chr.; E. B. Leech, B.A., Christ's; N. Maclaren, B.A., Trin.; A. S. Mellor, B.A., King's; C. H. Miller, B.A., Trin.; J. C. Newman, B.A., Trin.; G. H. Orton, B.A., Trin.; T. W. Paterson, B.A., Cai.; J. S. S. Perkins, B.A., Joh.; J. C. S. Rashleigh, M.A., Trin.; L. Reynolds, B.A., Trin.; H. H. Riddle, B.A., Pet.; J. C. A. Rigby, B.A., Cai.; E. W. S. Rowland, B.A., H. Selw.; L. B. Scott, B.A., Christ's; G. A. C. Shipman, B.A., Trin.; J. L. Timmins, B.A., Emm.; R. H. Urwick, B.A., Trin.; H. Walker, B.A., King's; T. H. E. Watts-Silvester, B.A., Cai.; R. F. Williams, B.A., Cai.; W. W. Wingate-Saul, M.A., Trin.; H. C. S. Woodward, M.A., Down.

**Part II.**—S. Bousfield, M.A., Cai.; J. Bradford, Emm.; H. P. Bradley, B.A., Cai.; G. V. Bull, B.A., Cai.; T. Burfield, B.A., Emm.; C. J. Coleman, B.A., Trin.; B. J. Collingwood, B.A., Cai.; W. S. Darby, B.A., Trin.; W. M. Fletcher, M.A., Trin.; J. H. P. Fraser, B.A., Jes.; O. F. F. Grünbaum, M.A., Trin.; J. Gutch, M.A., Christ's; D. G. Hall, B.A., Emm.; A. C. Hill, M.A., Trin.; T. E. Holmes, B.A., Cai.; G. F. Lobb, B.A., Cai.; J. L. Lock, B.A., Cai.; J. W. Malim, B.A., Christ's; H. N. Matthews, B.A., Joh.; J. C. Matthews, B.A., Joh.; F. J. Nicholls, Joh.; L. J. Paton, B.A., Cai.; A. C. Pearson, B.A., Sid. Suss.; J. H. Philbrick, B.A., Trin.; G. R. Slade, B.A., Trin.; J. G. Taylor, B.A., King's; T. S. Taylor, B.A., King's; R. A. Walker, B.A., Cla.; A. Whitmore, B.A., Cai.; W. M. Willoughby, B.A., Cai.

### UNIVERSITY OF EDINBURGH.

**University Court.**—At a meeting on Monday, June 18th, the University Court appointed Dr. J. O. Affleck additional Examiner in Medicine in its Bearings on Public Health. On the recommendation of the Senatus a grant of £58 from the Earl of Moray Endowment was made to Dr. J. H. Milroy for purposes of research. Dr. John Gibson (Edinburgh) was appointed additional Examiner in connection with a thesis submitted by a candidate for the degree of D.Sc. A bequest by the late Professor Sir Douglas MacLagan of a marble bust of himself was announced. It was intimated that six large volumes of interesting and valuable drawings, chiefly by her father, had been made to the University Library by Miss E. A. Ormerod, LL.D. Edin., and that this—an additional gift by the same lady—had been suitably acknowledged.

### UNIVERSITY OF BIRMINGHAM.

**Appointment of Principal.**—Her Majesty has been pleased to appoint Professor Oliver J. Lodge, D.Sc., LL.D., F.R.S., to be Principal of the University. For the last nineteen years Professor Lodge has been Professor of Physics in University College, Liverpool.

**Election of Dean of the Faculty of Science.**—Professor J. H. Poynting, M.A., D.Sc., F.R.S., has been elected to this position.

### UNIVERSITY OF BRUSSELS.

At the June examination the following practitioners satisfied the Examiners and obtained the M.D. degree: W. Grantham Hill, London; B. Burnett Ham, London; J. L. Atkinson, London; W. Gilbertson, London; C. S. Davis, Bishops Stortford; T. E. Pallett, Earls Colne; G. H. Brand, Northampton; Collingwood Fenwick, London; H. Hipwell, London; S. Whitaker, London. There were 13 candidates.

### ROYAL COLLEGE OF SURGEONS IN IRELAND.

**Fellowship Examination.**—The following gentlemen, having passed the necessary examination, have been admitted Fellows of the College: Mr. R. C. B. Mannsall, M.B., B.Ch., B.A.O. Univ. Dub., and Mr. H. J. Satchwell, L.R.C.P.J. and L.R.C.S.I.

### SOCIETY OF APOTHECARIES OF LONDON.

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

**Surgery.**—J. M. Anderson, Aberdeen and Middlesex Hospital; J. R. Clemens, St. Thomas's and London Hospitals; R. V. Cowey (Section II), Edinburgh and St. Mary's Hospital; W. A. C. Cox (Section II), St. Mary's Hospital; H. J. De Saram, Middlesex Hospital; W. D. French (Sections I and II), University College Hospital; T. R. Griffiths, University College Hospital; J. H. Kellgren (Section II), Cambridge and St. George's Hospital; B. Lewitt, St. Mary's Hospital; A. H. L. Newstead, St. Mary's Hospital; W. P. R. Newth, St. Thomas's Hospital; E. C. Pratt, Birmingham; A. T. Spanton (Section I), Cambridge and St. George's Hospital.

**Medicine.**—E. A. Dunn (Section I), Royal Free Hospital; E. Evans (Sections I and II), Royal Free Hospital; A. W. H. Grant (Sections I and II), Charing Cross Hospital; J. H. Kellgren (Sections I and II),

Cambridge and St. George's Hospital; J. Klein (Sections I and II), St. Mary's Hospital; B. Rowlands, St. Bartholomew's Hospital; M. H. Style (Sections I and II), Royal Free Hospital; T. Young (Section II), St. Bartholomew's Hospital.

**Forensic Medicine.**—E. A. Dunn, Royal Free Hospital; E. Evans, Royal Free Hospital; A. W. H. Grant, Charing Cross Hospital; J. H. Kellgren, Cambridge and St. George's Hospital; J. Klein, St. Mary's Hospital; G. R. Lucas, Charing Cross Hospital; S. Page, Birmingham; B. Rowlands, St. Bartholomew's Hospital; M. H. Style, Royal Free Hospital; T. Young, St. Bartholomew's Hospital.

**Midwifery.**—S. F. Cheesman, Charing Cross Hospital; W. T. Colyer, Cambridge; M. B. Dawson, Middlesex Hospital; E. Evans, Royal Free Hospital; F. J. F. Jones, Guy's Hospital; J. Klein, St. Mary's Hospital; A. H. L. Newstead, St. Mary's Hospital; A. T. Spanton, Cambridge and St. George's Hospital; M. H. Style, Royal Free Hospital; H. V. Swindale, Middlesex Hospital.

The diploma of the Society was granted to J. M. Anderson, H. J. De Saram, W. D. French, T. R. Griffiths, J. H. Kellgren, B. Lewitt, W. P. R. Newth, and T. Young.

## ROYAL NAVY AND ARMY MEDICAL SERVICES.

### ROYAL NAVY MEDICAL SERVICE.

The following appointments have been made at the Admiralty:—JAMES BRADLEY, M.D., Staff Surgeon, to the *Galatea*, undated; WILLIAM E. HOME, M.D., Staff Surgeon, and ARTHUR GASKELL and JAMES D. S. MILLN, M.B., Surgeons, to the *Centurion*, June 21st; HERBERT P. SHUTTELOWORTH, Staff Surgeon, to the *Boscawen*, for the *Minotaur*, June 21st; JOHN P. H. GREENHALGH, Surgeon, to the *Prince George*, June 21st; ARCHIBALD W. CAMPBELL, Surgeon, to the *Lizard*, June 21st; WILLIAM G. JACK, Fleet Surgeon, and SYDNEY J. HAYLOCK, Surgeon, to the *Camperdown*, July 5th; JAMES MCC MARTIN, Staff Surgeon, and RICHARD C. MUNDAY and NELSON J. ROCHE, Surgeons, to the *Centurion*, June 25th; W. P. WALKER, J. O'HEA, L. S. WHITWAM, H. R. H. DENNY, A. J. HEWETT, and G. M. EASTMENT, Surgeons, to the *Duke of Wellington*, for disposal, July 7th; W. P. G. STEWART, J. STJOHN MURPHY, H. J. ROGERS, A. C. RENWICK, R. P. DYER, and T. H. VICKERS, Surgeons, to the *Vivid*, for disposal, July 7th; R. R. FASSON, A. F. FRASER, and R. B. AINSWORTH, Surgeon, to the *Pembroke*, for disposal, July 7th; J. R. MUIR, A. S. FRANKS, and R. R. HORLEY, Surgeons, to the *Wildfire*, for disposal, July 7th.

### ARMY MEDICAL SERVICE.

LIEUTENANT-COLONEL JAMES STEVENSON FORRESTER died at Capetown on June 10th, aged 46 years. He entered the service as Surgeon, September 30th, 1874, and was made Surgeon-Major and Surgeon-Lieutenant-Colonel, October 25th, 1894. He was appointed to the Royal Horse Guards, February 18th, 1885; made Surgeon-Major First Life Guards, October 25th, 1894; and Surgeon-Lieutenant-Colonel Royal Horse Guards, October 13th, 1897. He was in the Egyptian war of 1882, and was present in the engagement at Tel-el-Mahuta, in the two actions at Kassasin, and at the battle of Tel-el-Kebir (medal with clasp, and Khedive's bronze star).

### ROYAL ARMY MEDICAL CORPS.

The following are reported as dangerously ill:—Surgeon-Lieutenant-Colonel W. W. LAKE, Militia Medical Staff Corps, at Bloemfontein; Civil Surgeons R. W. JAMESON and A. ROBERTSON, at Kroonstad; Civil Surgeon W. W. BENNETT, No. 1 Stationary Hospital, Natal; Civil Surgeon W. H. STEELE, at Kimberley.

Major GREIG, R.A.M.C., and Civil Surgeon ASH, suffering from enteric at Heilbron, are reported as doing well.

Civil Surgeons SMALLMANN and HUNTER have been discharged from hospital to duty.

Major H. G. HATHAWAY was severely wounded in the abdomen in the fighting near Pretoria on June 11th; and Captain J. H. CAMPBELL was also severely wounded during the operations in Natal on February 24th.

Assistant Surgeon GEORGE FARR WHITE, F.R.C.S., late of H.M.'s 77th Regiment, died at Wimbledon on June 20th. He was appointed Assistant Surgeon, October 1st, 1866, and resigned the service December 18th, 1867.

Sergeant-Majors ARTHUR WHEELER and HARRY P. WAKEFIELD are appointed Quartermasters, with the honorary rank of Lieutenant, on augmentation, June 23rd.

### ARMY MEDICAL RESERVE.

SURGEON-CAPTAIN T. MCC. FOLEY is promoted to be Surgeon-Major, June 27th.

### INDIAN MEDICAL SERVICE.

LIEUTENANT-COLONEL C. H. JOUBERT, Bengal Establishment, is promoted to be Colonel from March 29th. He joined the department as Assistant Surgeon, March 30th, 1872, and became Brigade-Surgeon-Lieutenant-Colonel, October 1st, 1896.

The promotion of the following Majors to be Lieutenant-Colonels from March 31st, which has been already announced in the BRITISH MEDICAL JOURNAL, has received the approval of the Queen:—Bengal: C. P. LUKIS, R. R. H. WHITWALL, L. A. WADDELL, D. B. SPENCER, J. CLARKE, M.D., C. C. VAID, P. D. FANE, T. R. MULRONEY, M.D., T. R. MACDONALD, Madras: R. H. CAMA, W. B. BROWNING, C.I.E., M. D. C. B. MAITLAND, RUNDLE, J. W. EVANS. Bombay: H. P. DIMMOCK, M.D., C. B. MAITLAND.

The promotion of the undermentioned Captains to be Majors, which also has been previously announced in this JOURNAL, has likewise received the Royal sanction: D. G. MARSHALL, D. M. MOIR, M.D., H. F. WHITCHURCH, V.C., J. R. ROBERTS, F. W. GEE, KANTA PRASAD, P. W. O'GORMAN, W. H. GRAY, G. T. MOULD, Madras: A. E. GRANT, F. C. PEREIRA. Bombay: J. G. HOJEL, H. C. L. ARNIM, G. S. THOMSON.

Captain J. W. WOLFE, Bengal Establishment, has been transferred to

## MEDICAL NEWS.

WE regret to announce that Dr. Paul Gibier, Director of the New York Pasteur Institute, was killed in a street accident on June 10th. The horse in his carriage bolted and Dr. Gibier was thrown out and mortally hurt.

**MILAN SANATORIUM FOR THE PEOPLE.**—The contributions towards the establishment of a sanatorium for the people in the province of Milan now amount to 300,000 lire (£12,000). The sanatorium is under the patronage of the King of Italy.

**LEPERS AT MOLOKAI.**—The leper settlement at Molokai now comprises 1,100 infected persons, this being the largest assemblage of lepers in the world. Of these patients, 625 are males and the rest females; 984 are native Hawaiians, 62 are half-castes, 37 Chinese, 5 American, 4 British, 4 German, and 6 Portuguese. There are 716 buildings in the settlement.

**BRUSSELS MEDICAL GRADUATES' ASSOCIATION.**—The twentieth general meeting of this Association will be held at the Café Royal, Regent Street, W., on Tuesday, July 3rd, at 6.30 P.M. At 7.30 P.M. the members and their friends will dine together. Any Brussels medical graduates wishing to be present should apply to the Honorary Secretary, Dr. Major Greenwood, 243, Hackney Road, N.E. Dinner 7s. 6d., exclusive of wine.

**COLOURED NURSES.**—A training school for nurses was established in connection with the Coloured Home and Hospital in New York in 1898. It continues in successful operation, and the managers are now able to supply coloured nurses who have been well trained in surgical, obstetrical, and medical nursing. These nurses are specially adapted to care for people of their own race.

**NEW YORK WOMEN'S MEDICAL COLLEGE.**—The semi-centennial jubilee of this College was celebrated in connection with the commencement exercises in May. The College has made great advance during its fifty years of existence, a new annexe and a gymnasium being the most recent addition. The niece of a royal prince of India is now, according to the *Medical News*, a student at the College. Among the graduates are a large number of medical missionaries.

**A SOCIETY OF MASSEUSES.**—An application has been made to the Board of Trade for a licence to enable an Incorporated Society of Masseuses to be registered under limited liability conditions, but without the words being appended. Its avowed objects are to improve the status of masseuses, to institute a certificate to be granted after examination, etc., and to carry on clubs and institutes for trained masseuses, at which intoxicating liquors are not to be sold. There is a provision that no member shall undertake massage for men except at the special request of a registered medical practitioner, and that any infraction of this rule shall involve forfeiture of membership of the association. It does not appear how the certificate could be withdrawn from a member who violated this rule.

**CHARING CROSS HOSPITAL MEDICAL SCHOOL.**—The distribution of prizes at this school for the summer session 1899 and the winter session 1899-1900 took place on June 26th, Mr. Beerbohm Tree in the chair. The Dean, in his report for the current year, stated that the number of new students had been 88 as compared with 82 in the previous year. Among the changes in the teaching staff was the appointment of Professor Moore, of the Yale University, to the Lectureship on Biology. In the school buildings important improvements had been effected. A new staircase had been added to the museum, and the electric light had been introduced. Reference was made to the large number of past and present students now serving in South Africa, among them being Mr. Gibbs, one of the Assistant-Surgeons, who is now Senior Surgeon to the Langman Hospital. The Dean announced that the new academical year would open on the evening of October 1st with a conversation given by the students' societies, that the Huxley Lecture would be delivered on Tuesday, October 2nd, by Lord Lister, and that the Old Students'

Dinner would be held on the same evening at the Hotel Cecil. The renovations and additions to the hospital have been commenced, and in two years' time the Dean anticipates that a considerable portion of the new buildings would be ready for occupation.

**BRITISH POSTAL MEDICAL OFFICERS' ASSOCIATION.**—The annual dinner of the Association of British Postal Medical Officers took place on June 21st at the Hôtel Métropole, under the presidency of Dr. W. Dougan. The toast list was of great length necessitating the prolongation of the proceedings till a very late hour. Sir James Crichton-Browne proposed "The Imperial Forces," which was acknowledged by Sir Joseph Fayrer. Mr. Edmund Owen, in a speech enlivened by much wit and humour, proposed "The Houses of Parliament," which was responded to by Mr. Joseph Walton, M.P. Mr. Eugene Wason, M.P., proposed "The Postmaster-General, the Secretary, and other Executive Officers of the Post Office." This was replied to by Sir Robert Hunter (Solicitor to the Post Office). Dr. de Havilland Hall gave the toast of "The Board of Education and other State Departments," which was acknowledged by Sir George Kekewich (Secretary to the Board of Education), and Dr. J. Tatham (Superintendent of Statistics, the Registrar-General's Office). "Preventive Medicine" was proposed by Dr. Wood, and acknowledged by Professor Corfield. Dr. A. Whitelegge (Her Majesty's Chief Factory Inspector) gave the toast of "The General Medical Council," and remarked upon the efforts made by that Council to improve the training and education of students in the detection of infectious diseases. Dr. J. G. Glover, in replying to the toast, said that any fair student of the proceedings of the General Medical Council would conclude that with the limited powers it had under Acts of Parliament it did the best it could. As a slight proof of the right of the General Medical Council to feel that it had done some good for the medical profession, Dr. Glover referred to the question of infectious diseases, and said it had taken an active part in improving the education of students in that particular. It was possible for a man to be a most distinguished student, and yet never see a case of small-pox and possibly measles. He thought that the interests of the profession would be best promoted by more encouragement being given to the General Medical Council. "The Association of British Postal Medical Officers" was proposed by the Rev. Henry Belcher, and was replied to by the President. The toast of "The Guests" was given by Dr. H. Fitzgibbon, and was responded to by Sir Thomas Rowe and Mr. P. J. Freyer. The Honorary General Secretary, Dr. R. Ritchie Giddings, was accorded a hearty vote of thanks for his labours.

### MEDICAL VACANCIES.

The following vacancies are announced:

- ABERDEEN UNIVERSITY.**—Additional Examiner for Graduation in (1) *Materia Medica*, (2) *Pathology*, (3) *Surgery*. Applications to the Secretary by July 3rd.
- AMERSHAM UNION.**—Medical Officer and Public Vaccinator for the Beaconsfield District. Salary, £43 per annum, and fees. Applications to the Clerk, Union Offices, Amersham, by July 16th.
- BIRMINGHAM:** **RUBERY HILL ASYLUM.**—Senior Assistant Medical Officer, unmarried. Applications to the Medical Superintendent.
- BIRMINGHAM WORKHOUSE INFIRMARY.**—Assistant Resident Medical Officer. Salary, £110 per annum, with furnished apartments, rations, etc. Applications to the Clerk to the Guardians by July 7th.
- BRIDGWATER INFIRMARY.**—House-Surgeon. Salary £80 per annum, with board and residence. Applications to the Secretary by July 12th.
- BRIGHTON:** **ROYAL ALEXANDRA 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.**—(1) House-Surgeon, unmarried and under 30 years of age. Salary £140 per annum, with board, residence and washing. (2) Assistant House-Surgeon, unmarried, and under 30 years of age. Salary, £30 per annum, with board and residence. Applications to the Secretary for (1) by July 4th, and for (2) by July 11th.
- BRISTOL EYE HOSPITAL.**—Locum Tenens for two months. Salary, £2 12s. 6d. a week, without residence. Applications to the Secretary.
- BRISTOL ROYAL HOSPITAL FOR SICK CHILDREN AND WOMEN.**—House-Surgeon. Salary £120 per annum, with rooms and attendance without board; or £80 with board. Applications, endorsed "House-Surgeon," to the Secretary by July 12th.
- 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 each case. Applications to the Secretary.
- CAMBERWELL: PARISH OF ST. GILES.**—Locum Tenens at Constance Road Workhouse for four weeks. £55s. per week, and allowances. Applications on forms provided to the Clerk to the Guardians, 25, Peckham Road, S.E.
- 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.
- 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.
- CARDIFF: UNIVERSITY COLLEGE.**—(1) Demonstrator and Assistant Lecturer in Anatomy; (2) Demonstrator and Assistant Lecturer in Physiology. Salary in each case £120. Applications to the Secretary by September 8th.



**CHORLEY DISPENSARY AND COTTAGE HOSPITAL.**—House-Surgeon. Salary commencing at £50 per annum, with board and lodging. Applications to the Honorary Secretary.

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

**CENTRAL LONDON OPHTHALMIC HOSPITAL,** Gray's Inn Road, W.C.—Physician to the Out-patient Department. Applications to the Secretary before July 7th.

**CORNWALL COUNTY ASYLUM,** Bodwin.—Junior Assistant Medical Officer, unmarried. Salary, £100, rising to £120 per annum, with board, furnished apartments, etc. Applications to the Medical Superintendent by July 5th.

**GLASGOW: ST. MUNGO'S COLLEGE.**—Bellahouston Chair of Anatomy. Emoluments, £300 per annum. Applications to the Secretary, 93, West Regent Street, Glasgow, by August 7th.

**HALIFAX ROYAL INFIRMARY.**—(1) Senior House-Surgeon. (2) Third House-Surgeon. Candidates must be unmarried. Salary, £30 and £50 per annum respectively, with residence, board, and washing. Applications to the Secretary by July 11th.

**HAMPSTEAD HOSPITAL,** Parliament Hill, N.W.—Resident Medical Officer. Appointment for six months, but eligible for re-election. Salary at the rate of £120 per annum, with rooms, coal, and gas. Applications to the Honorary Secretary by July 10th.

**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.

**KENSINGTON INFIRMARY.**—Temporary Resident Assistant. Salary, £53s. per week, with apartments, board, and washing. Applications to the Medical Superintendent at the Infirmary, Marjorie Road, by July 2nd.

**LIVERPOOL INFECTIOUS DISEASES HOSPITALS.**—Assistant Resident Medical Officer, unmarried, and not exceeding 26 years of age. Salary, £100 per annum, with board, washing, and lodging. Applications endorsed "Assistant Resident Medical Officer," to be addressed to the Chairman, Port Sanitary and Hospitals Committee, and sent under cover to the Town Clerk, Municipal Offices, Liverpool, by July 5th.

**LIVERPOOL: STANLEY HOSPITAL.**—Honorary Physician. Applications to the Honorary Secretary.

**LONDON HOSPITAL,** Whitechapel.—Assistant Surgeon. Applications to the House-Governor by July 13th.

**METROPOLITAN ASYLUMS BOARD.**—(1) Fourth Assistant Medical Officer for Darenth Asylum. Salary, £150 per annum, rising to £170. (2) Four Assistant Medical Officers at the Fever and Small-Pox Hospitals. Salary, £160 for first year, £180 the second, and £200 the third and subsequent years. Board, lodging, and attendance provided with each appointment. Candidates must be unmarried, and not exceed 35 years of age. Applications on forms provided to be sent to the office of the Board, Victoria Embankment, E.C., for (1) by July 4th, and for (2) by July 12th.

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

**MILE END.**—Assistant Resident Medical Officer at the Workhouse, and Assistant Medical Officer to the Workhouse, unmarried, and not over 30 years of age. Salary, £150 per annum, with board, lodging, and laundry. Applications on forms provided, to be sent to the Clerk, Guardians' Offices, Bancroft Road, Mile End.

**MILLEE HOSPITAL AND ROYAL KENT DISPENSARY,** Greenwich Road, S.E.—Junior Medical Officer. Salary, £80 per annum, with board, attendance, and washing. Appointment for six months, with prospect of election as Senior, salary £200. Applications to the Secretary by July 6th.

**NEWCASTLE-UPON-TYNE ROYAL INFIRMARY.**—Honorary Ophthalmic Surgeon. Applications to the Secretary by July 5th.

**NORTH RIDING ASYLUM,** Clifton, York.—Junior Assistant Medical Officer; unmarried, age not exceeding 30. Salary, £125 per annum, rising to £175, with board, furnished apartments, etc. 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. (2) Junior House-Surgeon. Salary, £55 and £70 per annum respectively, with board, residence, and washing. Applications to the Honorary Secretary by July 9th.

**PETER COUNTY AND CITY ROYAL INFIRMARY.**—House-Surgeon. Salary £80 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.

**PORTSMOUTH BOROUGH ASYLUM.**—Junior Assistant Medical Officer. Salary, £120 per annum, rising to £150, with board, lodging, and washing. Application to the Medical Superintendent.

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

**ST. MARY'S HOSPITAL MEDICAL SCHOOL,** Paddington, W.—Demonstrator of Physiology. Salary, £150. Applications to the Dean by July 14th.

**SALFORD ROYAL HOSPITAL.**—Honorary Medical Officer for the Pendleton Branch Dispensary. Applications to the Secretary by July 7th.

**SHREWSBURY: 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.

**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, washing, and attendance. Applications to the Secretary.

**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 3rd.

**WAKEFIELD: CLAYTON AND WAKEFIELD GENERAL DISPENSARY.**—Junior House-Surgeon, unmarried. Salary, £80 per annum, with board, lodging, and washing. Applications to the Secretary by July 12th.

**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.

**WEST HAM UNION.**—Medical Officer for the No. 4 District. Salary, £130 per annum, rising to £150, and fees. Applications on forms provided to be sent to the Clerk, Union Workhouse, Leytonstone, N.E., by July 11th.

**WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.**—(1) Assistant House-Surgeon; appointment for six months. Salary at the rate of £75 per annum. (2) House-Surgeon. Salary, £100 per annum. Board, lodging, and washing provided in each case. Applications to the Chairman of the Medical Committee for (1) by July 12th, and for (2) by July 14th.

**YORK DISPENSARY.**—Resident Medical Officer. Salary, £110 per annum, with board, lodging, and attendance. Applications to Mr. W. Draper, De Grey House, York, by July 10th.

### MEDICAL APPOINTMENTS.

N. W., M.R.C.M.Aberd., appointed Medical Officer for the Loughton District of the Epping Union, vice F. A. Owgan, L.R.C.P.L., M.R.C.S.Eng., resigned.  
 NOWN, R. B., L.R.C.P., L.R.C.S.Eng., appointed Medical Officer of Health to the Howden Rural District, vice V. H. Fisher, M.D.Durh.

DAVIS, Henry J., M.A., M.R.Cantab, M.R.C.P.Lond., appointed Assistant Physician to the West London Hospital.  
 DEY, A. M.B., C.M.Aberd., appointed Medical Officer of Health to the Glendale Rural District, vice R. Walker, M.D.Aberd., resigned.  
 FARREN, J. T., L.R.C.S. and L.R.C.P.Édin., appointed Dispensary Medical Officer and Medical Officer of Health for Dungleoe No. 1 Dispensary District of the Glenties Union.  
 FLANEGAN, H. J., L.R.C.S., L.R.C.P.Irel., appointed Medical Officer for the All Saints' District of the Northampton Union.  
 FOSTER, Percy, M.R.C.S.Eng., L.R.C.P.Lond., appointed House-Physician to the Sussex County Hospital, Brighton.  
 HOLLINSHED, F., M.D.St.And., appointed Visiting Medical Officer to the King's Norton Union Infirmary.  
 HORA, J. M.B., B.S.Lond., appointed Resident Medical Officer to the King's Norton Union Infirmary.  
 HULBERT, E. B., M.D.Durh., M.R.C.S., L.R.C.P.Lond., appointed Second Assistant Medical Officer to the St. Marylebone Infirmary, vice E. Worley, M.R.C.S., L.R.C.P.Lond., resigned.  
 LONGFORD, J. M., L.R.C.P., L.R.C.S.Irel., appointed Assistant Medical Officer to the Cottage Homes of the Aston Union, vice A. Ingram, M.B.  
 MITCHELL, Arthur M., M.A., M.D., R.C.Cantab., D.P.H.Camb., appointed Medical Officer of Health for the Borough of Guildford.  
 RACE, J. F., L.S.A., appointed Assistant Medical Officer to the Gordon Road Workhouse, Cambridge, vice F. Friend, M.R.C.S., L.R.C.P.  
 ROBERTSON, J. A., M.D.Glasg., appointed Medical Officer for the Fareet District of the Peterborough Union, vice G. S. Payne, M.R.C.S.Eng.  
 STEDMAN, S. B., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer for the Swinhope District of the Caistor Union, vice J. B. O. Richards, L.R.C.P., L.R.C.S.Édin., resigned.  
 GLASGOW WESTERN INFIRMARY.—The following appointments have been made: to be Dispensary Physician, Carlsaw, James, M.A., M.B., C.M.Glasg., late Extra Dispensary Physician, to be Dispensary Physician.  
 Merton, John, M.B., C.M.Glasg., late Extra Dispensary Surgeon, to be Dispensary Surgeon.  
 Edington, George H., M.D.Glasg., M.R.C.S.Eng., late Extra Dispensary Surgeon, to be Dispensary Surgeon.  
 Webster, Alfred, M.D.Glasg., Extra Dispensary Physician.  
 McKendrick, John, M.D.Glasg., Extra Dispensary Physician.  
 Macrae, Farquhar, M.B., C.M.Glasg., Extra Dispensary Surgeon.  
 McLennan, Alexander, M.B., C.M.Glasg., Extra Dispensary Surgeon.

### DIARY FOR NEXT WEEK.

#### MONDAY.

**West London Post-Graduate Medical Graduates' College and Course,** West London Hospital, Ham-mersmith Road, W., 5 P.M.—Mr. Keetley: The Diagnosis of and Operation for Diseases of the Breast. (Lecture I.)

#### TUESDAY.

**National Hospital for the Paralysed and Epileptic,** Queen Square, Bloomsbury, W.C., 9.30 P.M.—Mr. Marcus Gunn: Ocular Paralysis.

#### WEDNESDAY.

**Evoluta Hospital for Sick Children,** Southwark Bridge Road, S.E., 4.30 P.M.—Dr. W. Soltan Fenwick: On Diarrhoea in Children. (Post-Graduate Course.)  
**Hospital for Consumption and Diseases of the Chest,** Brompton, S.W., 4 P.M.—Dr. Schorstein: The Forms of Dyspepsia in Pulmonary Tuberculosis.  
**Medical Graduates' College and Polytechnic,** 22, Chancery Street, W.C., 8 P.M.—Conversazione and Oration by Professor Osler of Baltimore on the Teaching and Practice of Medicine.  
**Obstetrical Society of London,** 8 P.M.—Specimens will be shown by Drs. Hubert Roberts, Blacker and Fairbairn. Paper (Dr. Amand Routh): Porro-Caesarean Hysterectomy with Metropertoneal Treatment of the Stump in a Case of Fibroids Obstructing Labour, with Remarks upon the Relative Advantages of the Modern Porro Operation over the Sanger-Caesarean in Most other Cases Requiring Abdominal Section.

#### THURSDAY.

**West London Post-Graduate Course,** West London Hospital, Ham-mersmith Road, W., 5 P.M.—Mr. Keetley: The Diagnosis of and Operation for Diseases of the Breast. (Lecture II.)  
**Roentgen Society,** 20, Manover Square, 8 P.M.—Annual General Meeting. Presidential Address by Mr. Wilson Noble.  
**Charing Cross Hospital.** Post-Graduate Course, 4 P.M.—Dr. Mackenzie Davidson: Roentgen-Ray Demonstration.  
**Medical Graduates' College and Polytechnic,** 22, Chancery Street, W.C., 5 P.M.—Mr. J. Hutchinson: Consultation. (Surgical.)

#### FRIDAY.

**Ophthalmological Society of the United Kingdom.** Cases and Card Specimens at 8 P.M.—Chair at 8.30 P.M.—Papers.—Mr. F. M. Ogilvie: On one of the Results of Concussion Injuries of the Eye ("Holes" at the Macula). Messrs. Kenneth Scott and John Griffith: Alveolar Carcinoma of Eyelid. Mr. C. D. Marshall: Further Notes on a Case of Optic Nerve Tumour Previously Reported to the Society. Mr. P. Fleming: Three Cases of Ophthalmitis ("Pseudo-glions") in Children; one Recovery, two Fatal from Meningitis. The Annual General Meeting will be held after the Ordinary Meeting.  
**Medical Graduates' College and Polytechnic,** 22, Chancery Street, W.C., 4 P.M.—Dr. Tilley: Consultation. (Nose and Throat.)

### BIRTHS, MARRIAGES, AND DEATHS.

*The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office order or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.*

#### BIRTHS.

BARENDT.—On June 20th, at 65, Rodney Street, Liverpool, the wife of Frank Hugh Barendt, M.D.Lond., F.R.C.S.Eng., of a son.  
 CROSS.—On June 19th, at The Limes, Wallwood Park, Leytonstone, N.E., the wife of Ernest W. Cross, M.R.C.S.Eng., L.R.C.P.Lond., of a son.  
 FORDE.—On June 18th, at 91, Central Hill, Upper Norwood, the wife of R. M. Forde, Colonial Medical Service, of a son.  
 HIGHT.—At Park Holme, Stirling, on June 21st, the wife of R. Campbell Hight, M.B., C.M., of a son.  
 LINDSEY.—On May 18th, at Bakloh, Punjab, the wife of Captain V. E. H. Lindsey, M.S., 1st Battalion 4th Goorkhas, of a daughter.

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; Rectum, W., 9.45; Orthopaedic, Th., 1. *Operations.*—W. Th. F., 8; S., 2.  
**CHLSEA HOSPITAL FOR WOMEN.** *Attendances.*—Daily, 1.30. *Operations.*—M. Th. F., 2.  
**CITY ORTHOPEDIC.** *Attendances.*—O.p., M. Tu. Th. F., 2. *Operations.*—M., 4.  
**EAST LONDON HOSPITAL FOR CHILDREN.** *Operations.*—M. Tu. Th. F., 2.  
**GREAT NORTHERN CENTRAL.** *Attendances.*—Medical and Surgical, M. Tu. W. Th. F., 2.30; Obstetric, W., 2.30; Eye, M. 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., 1.30; o.p., M. W. Th. F., 12; Surgical, 1-p., daily, 1.30; o.p., M. W. Th. F., 12; Obstetric, 1-p., M. Tu. Th. F., 1.30; o.p., Tu. S., 12; Eye, 1-p., M. Tu. Th. F., 1.30; o.p., M. Tu. F., 12; o.p., M. Tu. F., 12; Skin, Tu., 12; Throat, F., 12; Dental, daily, 9.30. *Operations.*—Tu. F., 1.30; (Ophthalmic), M., 1.30; Th., 2.  
**HOSPITAL FOR WOMEN, Soho.** *Attendances.*—O.p., M., 9; Tu. W., 12; Th., 9; F. S., 12. *Operations.*—M. Th., 2; Th. S., 9.30.  
**KING'S COLLEGE.** *Attendances.*—Medical and Surgical, daily, 2; Obstetric, daily, 2; o.p., daily, 1.30; Eye, M. W. Th. F., 1.30; Ear, Tu. F., 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. 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, 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., 9.30; Eye, Tu. F., 2; Ear and Throat, Tu. F., 9; Skin, Tu., 4; Th., 9.30; Dental, M. F., 9.30; W., 9. *Operations.*—Daily, 1.30.  
**NATIONAL ORTHOPEDIC.** *Attendances.*—M. Tu. Th. F., 2. *Operations.*—W. S., 10.  
**NEW HOSPITAL FOR WOMEN.** *Attendances.*—Daily, 2; Ophthalmic, W. S., 9.30. *Operations.*—Tu. F., 9; Th., 2.  
**NORTH-WEST LONDON.** *Attendances.*—Medical, daily, exc. S., 2; S., 10; Surgical, daily, exc. W., 2; W., 10; Obstetric, W., 2; Eye, W., 9; Skin, F., 2; Dental, F., 9. *Operations.*—Th., 2.30.  
**ROYAL EAR, Frith Street.** *Attendances.*—M. S., 3; Tu. F., 9; W., 2.30; Th., 7.30. *Operations.*—Tu., 3.  
**ROYAL EYE, Southwark.** *Attendances.*—Daily, 2. *Operations.*—Daily.  
**ROYAL FREE.** *Attendances.*—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Skin, Th., 9.30; Throat, Nose, and Ear, W., 9.30. *Operations.*—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.  
**ROYAL LONDON OPHTHALMIC.** *Attendances.*—Daily, 9. *Operations.*—Daily, 10.  
**ROYAL ORTHOPEDIC.** *Attendances.*—Daily, 2. *Operations.*—O.p., M., 2; 1-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; Electro-Therapeutic, 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., 1.30; Ear, W. S., 1.30; Skin, W., 2.45; Throat, F., 2; Dental, M. F., 12. *Operations.*—Daily, 1; Ophthalmic, W., 1; Dental, Th., 3.  
**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. S., 9; 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; (Gynecological), Th., 2; (Throat), M., 9.30; (Ear), Th., 9.30.  
**SAMARITAN FREE FOR WOMEN AND CHILDREN.** *Attendances.*—Daily, 1.30. *Operations.*—Gynecological, 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. S., 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 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 *Atiology, 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.

M. desires to hear of a home for a student (medical) who is somewhat addicted to morphine habits. Terms must be very moderate.

## PRACTICE IN SOUTH AFRICA.

ANXIOUS, who has a family and small capital, asks whether it would be wise for him to go to South Africa after the war with the view of settling for practice in a town.

\*\* We suspect that it would not be wise. A great many British practitioners expelled from the Dutch Republics have been and are acting as civil surgeons, and a great many civil surgeons have gone out from the United Kingdom, some of whom may have seen openings. How long it may take for the country to settle down no man can say.

## LUMBAR COLOTOMY FOR IMPERFORATE ANUS.

L. M. asks for advice as to the best course to adopt in the following case: I was called to see a new born male infant on September 6th, 1899. I found the anus imperforate. The following day the usual operation (that is, cutting down on the position where the anus ought to be) was performed. But although very carefully sought for no gut could be found. Right lumbar colotomy was performed, and the child made an excellent recovery and is now an exceptionally healthy boy of 9 months old. It is now becoming very difficult to keep him clean, and he appears to suffer some pain during defecation.

## HYPODERMIC INJECTIONS OF PILOCARPIN FOR GALL STONES.

DR. R. BROOKS POFHAM, M.R.C.P. Edin., F.L.S. (Estcourt, South Africa), writes: Most remedies used for hepatic colic, such as the anæsthetics morphine, nitrite of amyl, and so on, are chiefly palliative, and those that are curative agents, as the perles of ether and turpentine and others, are certainly not conspicuous by their rapid action or final results. The drug I have lately seen used for gall stones and hepatic colic is pilocarpin given hypodermically and in increasing daily doses. My attention was drawn to the usefulness of this drug by Dr. Mitchell, of Durban, in a severe case of the kind. I have since had opportunities of trying it in several cases in various parts of Cape Colony and Natal, where the relative number of cases appeared to me to be greater; the results were undoubtedly encouraging, and only once have I had unpleasant symptoms from its administration. As we know pilocarpin is a powerful sudorific and sialogogue, and as it causes secretion from various surfaces, it doubtless does so from the gall bladder and duct, lubricating and softening inspissated gall or stones, helping possibly in their expulsion, and appears to be far superior to morphine for the relief of pain; in fact, as Dr. Mitchell suggests, it is the most efficacious medicinal remedy we have up to the present. I am quite aware pilocarpin has been long since suggested for this affection, but I should feel pleased for any information on the subject, as I am ignorant as to its general appreciation and adoption.

## ANSWERS.

WE would request correspondents who desire to ask questions in this column not to make use of such signatures as "A Member," "A Member B.M.A.," "Enquirer," and so on. By attention to this request much confusion would be avoided.

K. will probably find the following book useful: *Medical Partnerships, Transfers, and Assistantships*, by G. B. Stocker and W. Barnard (London: Stevens and Sons. 8s. 6d.)

A. W.—A stethoscope with flexible tube for use with one ear only can, we are informed, be obtained from any surgical instrument maker; it is advisable to make the choice in person, because it is essential that the ear-piece should fit the ear of the practitioner who intends to use it.

## TREATMENT OF PEMPHIGUS.

DR. LESLIE PHILLIPS (Leamington) writes: If arsenic be combined with peptone and cocaine, it has appeared to me to be less liable to produce gastro-enteric disturbance—an immense gain where, as in pemphigus, the therapeutic indication is to gradually increase and push arsenic. As a local treatment, benefit is derived from a dusting powder of emol and camphor. The following prescriptions have served me well: R Liq. Fowleri, viiij; elixir pepsine, 3ss; cocainæ hydrochlor., gr. 4; aq. ad. 5j t.d.s. R Emolis, 5iij; pulv. camphoræ, 3ss; M. ft. pulv.

## ZWIEBACK BREAD.

I. M. S. writes: In reply to "Spa's" inquiry for a recipe for making Zwieback bread, Dr. Tarleton Young gives the following directions for preparing it in his book on *The Carlsbad Treatment and How to Carry it out Anywhere*: "It can be effectively imitated by placing pieces of bread on a toast-hanger in the oven of a kitchen range until they become of a uniform yellow or brown colour all through their entire thickness, and so brittle they break on slight handling. The essence of the process of preparation is that the heat should be slow, penetrating to the interior of the bread while not charring the outside."

## MILK DIET.

M. D., D.P.H. writes: May I suggest to "Tone" that he cannot do better than send his patient with chronic diarrhoea to Plombières? I speak from experience, having been theretwice and intending to go again next month. There is an elaborate system of internal and external douches in addition to the baths, and the results obtained in the treatment of diarrhoea, catarrhal enteritis, appendicitis, &c., are surprisingly good. The milk régime can be had there if necessary.