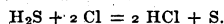


Sulphur Well, a deposition of sulphur occurs at the positive pole. If therefore it is a desideratum to have sulphur in a nascent state on the skin, the arrangement proposed seems exceeding well calculated to effect the object in view, and to be much more efficient than simple immersion of the body in sulphur waters. I have of course no title to discuss the efficacy of the process from a therapeutic standpoint.

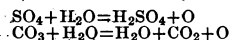
Professor Smithells forwarded at the same time the following supplementary report from Dr. Dawson:

The rationale of the electrolytic process by which sulphur is separated at the positive pole on electrolysis of the Harrogate sulphur waters is probably as follows. It is probable that part of the sulphur is present in the waters as free sulphuretted hydrogen, the remainder being present in the form of alkaline sulphides. (This of course leaves out of consideration the sulphur present in the form of sulphates.) The water from the Old Sulphur Well is not an alkaline water, and it would appear probable that a very considerable quantity of the sulphur is present as  $H_2S$ . The Beckwith water being an alkaline water a smaller proportion of the sulphuretted hydrogen is free; alkaline sulphides exist probably in the solution.

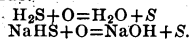
On passing a current through the water from the Old Sulphur Well, which contains large quantities of dissolved salts, especially sodium chloride, the electricity will be carried mainly by the ions of the latter salt. The discharged  $Cl$  ion reacts with the sulphuretted hydrogen in the solution according to



The other negative ions, for example the sulphuric acid and carbonic acid ions which carry a part of the electricity have the same effect as the chlorine ions. The discharged ions react with water producing nascent oxygen:



and this nascent oxygen then reacts with the dissolved sulphuretted hydrogen or alkaline sulphide.



If the Beckwith water contains the greater quantity of its sulphur combined as sulphide or rather as hydrosulphide, for the sulphur ion is scarcely capable of existence in aqueous solution, its electro-affinity being so small, by taking up hydrogen with the production of the sulphhydrogen ion its electro-affinity is increased. These sulphhydrogen ions may carry part of the current, in which case they react at the positive electrode on each other with the production of free sulphur according to



The effect of the current is therefore in all cases the production of free sulphur at the positive electrode.

With regard to the current density which is most suitable for the production of free sulphur at the positive pole, it may be said that the effect will be greatest with small anode density as far as the production of sulphur from the action of discharged chlorine, sulphuric acid, and carbonic acid ions is concerned. Large current density at the anode would lead to the production chiefly of molecular chlorine and molecular oxygen.

On the other hand, large current density at the anode would be favourable to the separation of sulphur by the last process, namely, the interaction of  $SH$  ions. It is highly probable that the production of  $S$  by the action of the discharged  $Cl$ ,  $SO_4$ , and  $CO_3$  ions greatly preponderates, so that a low current density is favourable.

The strength of the current should probably not exceed 20 to 30 milliampères. The current density at the cathode is of no essential importance.

On account of its larger quantity of sulphur and its better-conducting power, the water of the Old Sulphur Well is perhaps preferable to the Beckwith water. This is, perhaps, probably more than counterbalanced by the fact of the latter water being alkaline, which appears to be of great importance.

With regard to the current density which is most suitable for the production of free sulphur at the positive pole, I found that the effect was greatest with small anode density, and Dr. Dawson confirms this, stating that the strength of the current should probably not exceed 20 to 30 milliampères.

The action of an electric current in the manner such as is used in the Harrogate Beckwith Bath would probably be the only one which would give the exact conditions necessary to actually release the nascent sulphur on the exact surface on the patient's skin where it is required.

In the case of certain patients the sulphur is not deposited so visibly as on others; why, I cannot say.

Ordinary sulphur baths are used with benefit at Harrogate in gout and rheumatism. I am, however, convinced that the benefit is much greater and quicker when electricity is used in the sulphur water. I am also persuaded that peripheral neuritis, neuralgia, and certain forms of paralysis do better when electricity is applied in sulphur water than in ordinary water or in blankets. I have come to this conclusion from observations upon seven or eight patients treated daily by both methods through the Harrogate "season."

I also believe that nascent sulphur enters the skin by means of the constant current when applied in sulphur water.

#### CONCLUSIONS.

1. That nascent sulphur is deposited in the Harrogate sulphur water by electricity at the positive pole.
2. That the same thing takes place on the skin of patients in a sulphur electric bath under similar circumstances.
3. That in addition to the remedial influence of nascent sulphur, electricity stimulates the peripheral nerves all over the body in a sulphur bath, and thus renders the action of sulphur more rapid and more efficacious in skin and gouty affections.

#### AMPUTATION MORTALITY AT THE LONDON TEMPERANCE HOSPITAL.

By W. J. COLLINS, M.S., M.D., B.Sc.LOND., F.R.C.S.,  
Surgeon to the London Temperance Hospital, and to the Royal Eye Hospital.

THE following table, for which I am indebted to the Surgical Registrars, Messrs. Griffith and Hosford, includes all amputations performed by me at the London Temperance Hospital since I succeeded Mr. Pearce Gould as Surgeon to the Hospital on July 1st, 1888, up to December 31st, 1900.

Amputation.	For Disease.		For Accident.		Total.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
At hip ...	5	1	0	0	5	1
Of thigh ...	14	1	3	0	17	1
Of leg ...	7	0	7	0	14	0
Of foot ...	7	0	0	0	7	0
Of toes ...	16	0	2	0	18	0
Of arm ...	1	0	2	0	3	0
Of forearm ...	3	0	1	0	4	0
Of hand ...	0	0	1	0	1	0
Of fingers ...	26	0	12	0	38	0
Totals ...	79	2	28	0	107	2

This gives a total of 107 cases, with 2 deaths. The fatal case of amputation at the hip was in a little girl aged 8, in the last stage of morbus coxæ, greatly emaciated, and suffering from advanced amyloid degeneration. The other fatal case was that of a man aged 49, who *post mortem* was found to have sarcoma of the liver and in the pelvis, secondary to sarcoma in the ham, for which amputation of the thigh was performed. This latter was the only case for whom alcohol in any form was ordered.

#### MEMORANDA:

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

##### ACUTE CASE OF PITYRIASIS RUBRA (DERMATITIS EXFOLIATIVA GENERALIS): RAPID RECOVERY.

C., AGED 53, male, had been in poor health for some time, being especially "troubled with his breath." He was a tall stout man, rather flabby, with the well-marked dilated facial capillaries and the slight oedema about the lower extremities characteristic of a feebly-acting heart. He had a mitral systolic murmur. His occupation was indoors, and his habits were fairly abstemious. After a slight cold early in July, 1900, his breathing became suddenly much worse, and the oedema of the feet spread up to the knees. The abdomen showed signs of corresponding passive effusion. Orthopnoea rapidly developed, and his urine contained a trace of albumen. His pulse was irregular and intermittent, and his temperature normal.

Rest was enjoined and light nutritious food administered, alcohol entirely stopped, and the following prescribed:  $\mathcal{R}$  Ammon. carb., gr. v; ammon. benz.; sodi. benz.  $\mathfrak{ss}$  gr. x; tinct. digitalis,  $\mathfrak{mij}$ ; tinct. jaborandi,  $\mathfrak{mxx}$ ; decoct. scoparii ad  $\mathfrak{zj}$ ; m. T. d. s. This mixture was gone on with for three weeks, and at the end of that time the patient had quite recovered from the orthopnoea. All swelling had gone,

the albumen had disappeared from the urine, and the pulse was now regular and not intermittent; the patient's appetite had improved as well. On the front of the right leg, however, there appeared just at the beginning of August a small patch of dermatitis accompanied by desquamation, which within four days had extended over the whole body from, literally, the top of the head to the soles of the feet. The bedclothes had to be frequently changed owing to profuse desquamation. The eyelashes and eyebrows fell off, and also the greater part of the scalp hair—what was left of it changing from dark brown colour to grey-white. The conjunctivæ became suffused, and a trace of albumen reappeared in the urine. The only applications used externally were ung. plumbi subacetatis and lotio pb. subacet. Frequent washing of the whole surface gave great relief. The feet and hands were very painful owing to the large raw surfaces left, the epidermis having come off in great flakes.

After fourteen days the patient appeared very low, restless and sleepless, and without any appetite. He was too weak to raise himself, though fortunately his breathing was not embarrassed as it had been. Hiccough came on and continued for nearly twenty-four hours. The patient had hallucinations of sight. During this fortnight the patient was taking a mixture containing tr. nuc. vom. m.v, tr. strophanthi m.ij, three times a day, with eggs and milk.

For the hiccough I administered ammon. bromide, and also the liq. bis. et am. cit. It soon passed off, and day by day, little by little, improvement went on until all trace of the disease three months afterwards had quite disappeared, except that the nails had not become entirely detached, though a fresh nail was developing on each finger and on both thumbs. The hair remained almost white. The patient had lost all appearance of dilated capillaries in his cheeks, his breathing was quite natural, he had no œdema anywhere, and he slept well. His appearance was completely changed, however; he looked at least twenty years older. He was quite slim, having lost a great amount of flesh. His urine was quite free from albumen and his bowels regular, as they had been all along. His temperature remained normal throughout.

The complete recovery from an acute and dangerous disease occurring in a patient so enfeebled is remarkable.

Jewry Street, E.C.

GEO. A. BRUCE, M.B.

#### SUCCESSFUL TRACHEOTOMY IN INFANTS.

IN THE BRITISH MEDICAL JOURNAL for October 20th, 1900, Dr. T. C. Mackenzie describes a successful case of tracheotomy in an infant 4 months old. In his remarks he states that only five recoveries are reported in infants of 7 months and under. I can add one more case to the record.

In 1890 a relative of mine 6 months old was suffering from laryngeal obstruction. The child was extremely ill. Dr. T. Eastes, of Folkestone, performed tracheotomy. After an anxious time a good recovery was made, but it was a considerable time before we were able to dispense with the tube. The case was supposed to be diphtheria, but no membrane was ever seen.

Sandgate.

W. L. CHUBB, M.D.

#### TETANUS SUCCESSFULLY TREATED WITH ANTITETANUS SERUM.

Miss M. A., aged 11, received a slight abrasion on the left knee from a fall on a garden walk on May 7th, 1894. Ten days later her parents noticed an alteration in the expression of her face, and she at the same time complained of stiffness and pain in her neck and jaws. On the following day these symptoms became worse and I was called in to see her, when I found the muscles of the neck and jaws quite rigid and the muscles of the back and abdomen in the same condition. The glands in the left groin were enlarged and tender to pressure. Before trying the serum treatment I asked Dr. Cummins, of Cork, to see the case with me to verify my diagnosis. The injections were commenced on May 22nd, 10 c.cm. being given every twelve hours up to May 28th, when owing to the supply of serum running out the patient was without any for twenty hours. I then gave her 15 c.cm. every six hours until June 3rd, when it was reduced to 15 c.cm. every twelve hours, and on June 7th 15 c.cm. every twenty-four hours, and from June 7th to June 14 7 c.cm. every twenty-four, when it was

discontinued. In all forty-one injections were given, after the second of which there was a marked improvement, but the rigidity continued for many days after the injections were stopped. There were no spasms after the fifth injection. The only complications that arose were an urticarial rash and a small abscess at the seat of one of the injections. The serum was supplied by Burroughs, Wellcome, and Co., some being in liquid form and some dried. The patient received in all 501 c.cm. She was also given a few small doses of chloral in the early part of her illness.

Fermoy.

GEO. F. WOODROFFE, L.R.C.S.I., L.R.C.P.I.

#### FACIAL NEURALGIA DUE TO A HAIR IRRITATING THE MEMBRANA TYMPANI.

MR. C., a law student, aged 21, had been suffering from acute paroxysmal neuralgia for three months. He had had no relief, although, following advice, he had had three teeth extracted and others that were decayed stopped. He was very depressed about himself, and had tried many remedies without gaining the slightest relief. He described the pain as extremely severe, coming on at different times during the day, and often at night, lasting some ten minutes at a time. The pain was apparently distributed along the infraorbital branches of the fifth nerve. He described it as most acute beneath the left eye, from which point it seemed to radiate about the left side of the face, reaching as far as the ear, but he said that it did not affect the nose. There was no temporal pain and the eyesight was perfect. Having excluded dental and ocular causes, I examined the left ear with the speculum and found the membrana tympani much infected. I examined further with a Brunton's auriscope and saw a hair lying along the meatus, and pressing with its end on the tympanic membrane. I succeeded in removing this—a short head hair about three-eighths of an inch in length. He expressed a feeling of relief after the removal of the hair, and on questioning him I elicited that he had had tinnitus during the time that he had been affected. I saw him subsequently; he had had one or two slight attacks of pain during the first day or two, after which the attacks entirely ceased.

Croydon.

A. PERCY ALLAN, M.D., B.S.Lond.

#### SCARLATINA PEMPHIGOIDES.

IN THE BRITISH MEDICAL JOURNAL of November 3rd and December 8th are reported two cases under the above heading. Having just had a similar case in my own practice, and not having come across any mention of such a complication of scarlet fever in any of the numerous books I have referred to, I venture to send the following particulars.

A girl, 4 years of age, contracted scarlet fever early in November from her brother, older than herself, and just convalescent. The onset was particularly mild though unmistakable, the rash small in amount, and not accompanied by any serious complication. Peeling began about the end of the second week. A few days later the girl for two days complained of burning and itching in both hands and legs. An eruption then appeared on the palms of both hands and on the back and inner sides of both legs and thighs. This quickly became vesicular, and in two days there were bullæ on these parts, varying in size from a pea to a crown piece, round or oval in shape, some coalesced, the periphery inflamed, and the bullæ filled with a clear fluid. This soon became opaque. Beyond a little feverishness and the discomfort of the burning and itching the girl did not seem ill or seriously affected.

Potassium citrate was given internally. The affected parts, after being dressed with a simple ointment, were wrapped in cotton-wool. The bullæ gradually shrivelled, and at the end of twelve days had quite disappeared.

I could not attribute the outbreak to any article of diet, and felt puzzled to account for its appearance. None of the textbooks I have referred to give it as a complication of scarlet fever, but in Keating's *Cyclopædia of the Diseases of Children* I find under pemphigus the following sentence: "Pemphigus is apt to follow convalescence from acute febrile disease as scarlatina and measles, and in young infants it has been ascribed to the practice of putting them in too hot a bath."

M. BENSON, M.D.Brux., M.R.C.S., L.R.C.P.Lond.  
Wyndholme, Wigau.

Dr. Ogilvie was married and leaves a widow and three children, for whom and for his brother Dr. George Ogilvie much sympathy will be felt.

It is with great regret that we have to record the death of Dr. JAMES EDWARD PRICHARD, which occurred, after an illness of many months, at his residence in Bristol on February 2nd. Dr. Prichard was the second son of the late Mr. Augustin Prichard, the well-known surgeon of Bristol, and grandson of Dr. James Cowles Prichard, the famous anthropologist, and was born in 1849. He was educated at Clifton College, which he entered within a very short time of its foundation. Thence he proceeded to Oxford, where he gained an exhibition in Hebrew at Wadham College. After taking his B.A. degree with honours, he studied medicine at University College, London, and held the post of House-Physician under the late Dr. Wilson Fox. He became a Member of the Royal College of Surgeons in 1878, proceeding to the M.B. degree at Oxford in 1879. After leaving London he was for a short time House-Surgeon to Tiverton Infirmary; he was afterwards House-Surgeon to the Swansea Infirmary. In 1882 he commenced private practice in Bristol, and in 1889, on the resignation of Mr. Gardiner, he was appointed Surgeon to H.M. Prison at Horfield, which post he held to the time of his death. During the whole of his career in Bristol he had been connected with the Eye Dispensary in Orchard Street, to which he devoted much of his time, and where the loss of his skill and experience will be much felt. When the Horfield School Board was formed in 1893, Dr. Prichard came forward as one of the candidates, and was returned at the head of the poll. He remained a member of the Board, occupying the post of Vice-Chairman, till the election in 1899, when he did not seek re-election. More than a year ago Dr. Prichard began to suffer from symptoms of a growth in the rectum. It was found to be inoperable. Colotomy was performed by Mr. Swain in July, 1900; the operation gave relief, but Dr. Prichard succumbed to exhaustion eight months later. Dr. Prichard, who was one of the most amiable and unassuming of men, by his genial manner had endeared himself to many, and his death will be mourned by a large circle of friends. In accordance with his instructions his body was cremated at Woking.

**THE LATE PROFESSOR POTAIN.**—The late Professor Potain, whose death was recorded in the *BRITISH MEDICAL JOURNAL* not long ago, was a man of the richest intellectual endowment and of the noblest personal character, but the partial fairies who so bountifully blessed his cradle in other ways had denied him the gift of beauty. M. F. Desmoulin in his etching "La Constitution" has given a somewhat idealised representation of the famous clinician, but even there are to be seen the immense nose, the hanging under lip, the forehead bevelled downwards from the broad plain of skull irregularly studded with bosses, the thin grey hair hanging lank around the sides and stretching forward in front of the ear into whiskers of the "admiral" type, somewhat resembling what is known to us as the Dundreary style, but less luxuriant. A hideous divergent squint would have made the face repulsive had it not been redeemed by the expression of the eyes, which reflected the infinite sweetness of the soul within. A curious tale is told of Professor Potain. A foreign physician on a visit to Paris heard on all sides the praises of the Professor, whose writings he had not read. From what he heard he came to the conclusion that Potain must be a young and handsome man, who owed his success to female influence. The sight of the venerable physician in the full bloom of his ugliness was a considerable shock to him, and the disillusionment was completed by the lecture which he heard from the lips of one of the greatest clinical teachers of modern times.

**DR. AUGUSTO ROCHA,** Professor of Clinical Medicine in the University of Coimbra and editor of the *Coimbra Medica*, has recently died of aneurysm of the ascending aorta. He was born at Coimbra in 1849, studied medicine in the University of that city, and took the degrees of Licentiate, and a few months later of Doctor, in 1876. He was appointed Professor in 1882. Professor Rocha was the author of numerous con-

tributions to medical literature, among which may be mentioned monographs on the Intravenous Injections of Chloral in the Treatment of Tetanus, an Investigation of the Typhoid Bacillus in the Drinking-water of Coimbra, Studies on the Nervous System, and papers on medico-legal subjects. He represented the Government of Portugal at the International Medical Congresses held in Rome, Paris, and elsewhere, and was President of the National Congress on Tuberculosis held at Coimbra in 1894, the organisation of which was due to his initiative. Professor Rocha was a prominent figure in the medical profession of his country, and rendered great services by the furtherance of laboratory research of which he may be said to have been the pioneer in Portugal. Under his editorship the *Coimbra Medica* rendered great services to medicine by the publication of much valuable work done in the medical faculty of the University of Coimbra. To his energy also was largely due the initiation of the campaign against tuberculosis which has been set on foot in Portugal.

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF CAMBRIDGE.

**Appointments.**—Professor Macalister, F.R.S., has been appointed an Elector to the Professorship of Chemistry, Mr. F. Darwin, F.R.S., to the Professorship of Zoology, Dr. Pye-Smith, F.R.S., to that of Physiology, Dr. D. Macalister to those of Surgery and Agriculture, and Dr. Clifford Allbutt to that of Pathology. Dr. A. W. Ward has been elected to the Council of the Senate. Mr. C. T. Dent has taken Professor Chiene's place as an Examiner in Surgery.

**Degree.**—Mr. Egbert Sumner Verdon, M.A., M.B., B.C., of Jesus College, now resident in Morocco, has been admitted by proxy to the degree of Doctor of Medicine.

**Scholarship.**—A Shuttleworth Scholarship of £55 a year for three years, open to Cambridge medical students of at least eight terms' standing, will be awarded at Caius College next month. The subjects of the examination, of which details may be had from the Senior Tutor, are Botany and Comparative Anatomy.

### UNIVERSITY OF LONDON.

**INTERMEDIATE EXAMINATION IN MEDICINE.**—The following candidates have satisfied the Examiners:

**Entire Examination.**—First Division: Olive Muriel Elgood, London School of Medicine for Women; A. M. H. Gray, University College; L. G. Parsons, University of Birmingham; J. B. Rous, St. Mary's Hospital. Second Division: E. L. Ash, St. Mary's Hospital; G. E. Bellamy, Charing Cross Hospital; W. B. Clark, King's College; Helen Mary Collen, London School of Medicine for Women; E. H. Drinkwater, University College, Liverpool; J. Ferguson, St. Bartholomew's Hospital; P. G. Foulkes, Middlesex Hospital; Jessie Josephine Francis, London School of Medicine for Women; A. G. R. Green, University of Birmingham; H. A. Haig, University College; G. S. Hett, University College; B. Higham, St. Thomas's Hospital; W. A. L. Holland, University of Birmingham; R. Holtby, St. Bartholomew's Hospital; Catherine Mary Ironside, London School of Medicine and Royal Free Hospital; C. L. Lakin, Charing Cross Hospital; Jessie Lamb, London School of Medicine and Royal Free Hospital; C. H. Latham, St. Thomas's Hospital; N. Macfadyen, St. Bartholomew's Hospital; J. A. Milne, London Hospital; C. A. Moore, University College, Bristol; J. C. Mottram, University College; P. A. Peall, Guy's Hospital; Kate Anne Platt, London School of Medicine and Royal Free Hospital; I. G. Pritchard, King's College; C. M. Roberts, St. Thomas's Hospital; F. H. Rotherham, Cooke's School of Anatomy and Charing Cross and London Hospitals; C. Russ, St. Mary's Hospital; F. W. Schofield, Owens College and Manchester Royal Infirmary; H. G. Sieve-wright, University College, Cardiff; H. D. Smart, Guy's Hospital; Annie Broomhall Thin, London School of Medicine, King's College, and Birkbeck Institute; A. C. A. Van Buren, St. Bartholomew's, King's College, and Cooke's School of Anatomy; H. Watts, Guy's Hospital; Ada Miles Whitlock, London School of Medicine and Royal Free Hospital.

**Excluding Physiology.**—Second Division: Alice Marian Benham, London School of Medicine for Women; Christian Constance Bernard, London School of Medicine and Royal Free Hospital; Margaret Lucy A. Boileau, London School of Medicine for Women; P. C. Bushnell, St. Thomas's Hospital; W. H. Cole, Guy's Hospital; C. H. Dawe, Guy's Hospital; Mabel Emily Gates, London School of Medicine and Royal Hospital; G. F. I. Harkness, University College; W. C. F. Harland, St. Bartholomew's Hospital; B. Hart, University College; H. B. Hill, St. Bartholomew's Hospital; W. S. Hughes, University College, Cardiff; H. A. Kellond-Knight, St. Bartholomew's Hospital; Kate Knowles, London School of Medicine for Women; A. R. Neligan, St. Bartholomew's Hospital; J. J. Rainforth, London Hospital; C. C. Rushton, Owens and University Colleges; Isabel Gertrude Sexton, London School of Medicine and Royal Free Hospital; J. K. Symes, University College; Margaret Cordelia Vivian, London School of Medicine and Royal Free Hospital.

**Physiology Only.**—First Division: E. W. C. Bradford, St. Mary's Hospital; D. Brodie, St. George's Hospital; Anne Fenton Cleaver, London School of Medicine and Royal Free Hospital; P. C. T. Davy, University College; J. Jones, London Hospital; Beatrice Mary Kidd, London School of Medicine for Women; E. B. Smith, St. Bartholomew's Hospital; Emily Gertrude Stuart, London School

of Medicine and Royal Free Hospital; R. J. Waugh, St. Bartholomew's Hospital; E. C. Williams, St. Bartholomew's Hospital; Henrietta Leila D. Williams, London School of Medicine for Women, Second Division; G. C. Adeney, St. Thomas's Hospital; W. Ball, Westminster Hospital; Jeanette Rachel De Pass, London School of Medicine for Women; Ruby Ellen Glanville, London School of Medicine for Women; H. M. Goldstein, Guy's Hospital; Ida Margaret Guillaume, London School of Medicine and King's College; H. S. Jones, Guy's Hospital; W. W. Nock, Mason University College; C. D. Pye-Smith, Guy's Hospital; J. N. Sergeant, St. Thomas's Hospital; H. B. Simpson, University College; M. W. S. Smith, University College; J. B. Stephens, St. Mary's Hospital; E. W. Strange, Guy's Hospital; R. A. S. Sunderland, St. Bartholomew's Hospital; Louisa Graham Thacker, London School of Medicine and Royal Free Hospital; Edith Eleanor Tucker, London School of Medicine for Women; F. R. E. Wright, St. Thomas's Hospital; W. P. Yettis, St. Bartholomew's Hospital.

#### UNIVERSITY OF BIRMINGHAM.

##### *External Examiners.*

At the last meeting of the Council the following gentlemen were appointed as External Examiners in connection with the examinations to be held in April next: Physics: Professor J. J. Thomson, F.R.S.; Chemistry: Professor MacLeod, F.R.S.; Biology: S. F. Harmer, F.R.S.; Public Health: Dr. George Reid, D.P.H., Medical Officer of Health for the County of Stafford.

##### *Clinical Examinations.*

It was agreed that that one Physician and one Surgeon from the honorary staffs of the General and Queen's Hospitals, Birmingham, should be appointed for a term of three years to assist the Professors and External Examiners at the Clinical Examinations in Medicine and Surgery, and that they should bear the titles of Examiner in Clinical Medicine and Examiner in Clinical Surgery.

##### *The late Dr. Walter Myers.*

A letter was received from the Liverpool School of Tropical Medicine asking for permission to erect within the walls of the University a brass in memory of the late Dr. Myers, such being the wish of his parents. This offer was most cordially accepted.

#### ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.

A QUARTERLY meeting of the Royal College of Physicians of Edinburgh was held on Tuesday, February 5th, 1901, Dr. Fraser (President) in the chair.

##### *The Death of Queen Victoria.*

The President stated that a message of condolence had been sent to the King; the message and reply will be found at page 407.

##### *Introduction of New Fellow.*

Dr. R. M. Ronaldson was introduced, and took his seat as a Fellow of the College.

##### *Admission to the Fellowship.*

T. H. T. Frampton, M.R.C.P.E., M.R.C.S.Eng., was admitted by ballot to the Fellowship of the College.

##### *Admission to the Membership.*

On a ballot, the following candidates were admitted to the Membership of the College after examination: N. D. Bardswell, M.D., C.M., Banchoy; C. P. Childe, F.R.C.S.Eng., L.R.C.P.Lond., Southsea; G. W. H. Cumming, M.D., Torquay, and C. H. Johnson, M.B., C.M., Edinburgh.

##### *Admission to the Licence.*

The Registrar reported that since the last quarterly meeting 33 persons had obtained the Licence of the College by examination.

##### *Annual Report on the Laboratory.*

The Curator submitted his report for the past year regarding the research and reporting undertaken in the Laboratory during the year and the expenditure incurred. The report showed that 25 workers had been engaged in research, 1,122 specimens had been reported on, and the expenditure had amounted to £322 6s. 10d. The arrangements which had been concluded between the College and the Town Council, by which the bacteriological diagnosis of suspected cases of tubercle, diphtheria, and enteric fever occurring among the citizens of Edinburgh is carried out in the Laboratory at the expense of the town, had been in working order for some months. Negotiations were in progress between the College and the Local Government Board, whereby it was intended that the bacteriological examination of suspected cases of plague occurring in Scotland would be conducted within the Laboratory on payment of a fee for each report identical with that paid by the English Local Government Board. A special department of the Laboratory isolated from the rest of the premises and judged suitable by the President (Dr. Fraser) had been set apart for the purpose. The report was adopted by the College.

##### *Recognition of Lecturers.*

Dr. Alexander Bruce, F.R.C.P.E., was after examination recognised as a Lecturer in Practice of Medicine, and Mr. William Wood, M.B., M.R.C.P.E., was similarly recognised as a Lecturer on Materia Medica and Therapeutics, the President conferring on them certificates of qualification.

##### *Parkin Prize Award.*

The Parkin Prize, which is the gift of the College, was awarded after competition equally between Dr. W. G. Aitchison Robertson, F.R.C.P.E., and Dr. Noel Dean Bardswell, M.R.C.P.E. The subject of the essay on the present occasion was in terms of the deed of bequest, "On the effects of Volcanic Action in the production of Epidemic Diseases in the Animal and in the Vegetable Creation, and in the production of Hurricanes and Abnormal Atmospheric Vicissitudes."

##### *Celebration of Ninth Jubilee of Glasgow University.*

A letter was submitted from the Principal and Vice-Chancellor of the University of Glasgow inviting the College to take part in the celebration

of the ninth jubilee of the University. It was unanimously agreed to accept the invitation, and remitted to the Council to prepare an address of congratulation for presentation on the occasion.

#### ROYAL COLLEGE OF SURGEONS OF ENGLAND.

AN Ordinary Council was held on February 7th, 1901, Sir William MacCormac, Bart., K.C.V.O., President, in the chair. An address of condolence to His Majesty the King was adopted; it is published at page 407.

##### *Ethnological Specimens.*

The thanks of the Council were forwarded to Dr. Alfred Sieveking, of the Uganda Railway Service, for a gift of ethnological specimens from East Africa.

The purchase of two Chinese skeletons and a certain number of Chinese skulls for the Museum was authorised.

##### *General Medical Council.*

Mr. Thomas Bryant was reappointed for three years, as the representative of the College on the above Council.

##### *Glasgow University.*

The President, the senior Vice-President, Mr. J. Langton, and Mr. Mayo Robson were appointed delegates to represent the College at the ninth jubilee celebrations of the University to be held on the 12th, 13th, and 14th June, 1901.

##### *List of Members.*

The Secretary was authorised to remove from the list published in the College Calendar the names of all members admitted before the year 1843 whom he may be unable to trace as still living.

#### CONJOINT BOARD IN IRELAND.

FINAL PROFESSIONAL EXAMINATION.—Candidates have passed this examination as undernoted.

W. S. D. Bird, J. F. Brogan, M. A. Curry, F. C. Fowler, P. A. Frazer, M. M. Goldfoot, M. Graham, A. P. Kirby, T. S. G. Martin, A. A. W. Merrick, C. R. Millar, W. J. Murphy, E. M. Pennefather.

#### ROYAL COLLEGE OF SURGEONS IN IRELAND.

##### *Examination for Registered Practitioners.*

MR. THOMAS BLANCHARD SELLORS, L.S.A., London, having passed the necessary examination, has been admitted a Licentiate in Surgery of the College.

## PUBLIC HEALTH

AND

## POOR-LAW MEDICAL SERVICES.

#### LONDON WATER COMPANIES' REGULATIONS.

If the London water companies' desire is to give an object lesson to London of the disadvantages of company-supplied water and to raise a battle cry for the forthcoming London County election, they seem likely to achieve their end.

Under Section xxii of the Metropolis Water Act, 1871, the Local Government Board is about to hold an inquiry by Mr. C. Perrin, M.I.C.E., Dr. T. Thomson and Mr. E. A. S. Fawcett, A.M.I.C.E., in regard to certain new regulations which the water companies desire to substitute for those made in 1872. The regulations if enforced would, it is estimated, entail an expenditure of many hundred thousands of pounds on the part of water consumers, not so much to improve their water supply as to assist the water companies in improving their undertaking, in fulfilling their obligations, and in preventing waste.

The regulations deal with communication pipes, lead pipes, fittings, stop-valves, cisterns, watercloset waste pipes, baths, etc., and many of them appear to indicate reversion to earlier methods of water supply rather than improvements on the existing state of things.

Take for instance the proposed Regulation 19, which is entirely new, that:

Every house (or in case of flats each suite of rooms) supplied by the company shall, except with the consent of the company in writing, under the hand of their secretary, be provided with a cold water storage cistern or cisterns of sufficient capacity to contain in the aggregate at least 25 gallons of water for each room. Each outlet pipe from such cistern or cisterns shall be carried up inside 1 inch above the bottom of the cistern, and such outlet pipe shall be commanded by an efficient screw-down stop-valve, placed in a readily-accessible position, within 1 foot of such cistern, and a draw-off tap from same shall be provided. In no case may there be any connection between the draw-off pipe from the cistern and the supply or communication pipe.

Now there are divergent views held as to the advantages or disadvantages of cisterns, but it is clear that the Act of 1871 repealed the power given by the Metropolis Water Act of 1852 to require the provision of storage cisterns. This was done largely on the opinion then prevailing among sanitary experts against intermittent distribution, and the pollution likely to

## THE SPITTING NUISANCE IN CHICAGO.

The following ordinance was adopted by the City Council of Chicago on January 14th:—"Whereas, spitting on sidewalks, in public places, and in public conveyances is detrimental to health, by reason of the danger of spreading contagious disease, and is also a public nuisance which should be abated, therefore, Be it ordained by the City Council of the City of Chicago that no person shall spit on any public sidewalk or on the floor of any public conveyance, or on the floors of any theatre, hall, assembly room, or public building; that any person violating the provisions of this ordinance shall on conviction be fined in a sum of not less than 1 dol. nor more than 5 dols.; that this ordinance shall be in effect from and after its passage and approval by the Mayor."

## SUPERANNUATION OF DISTRICT MEDICAL OFFICER.

M.D. writes that he has been district medical officer and public vaccinator for more than twenty years, and that owing to impaired health he intends to resign, and to apply for superannuation allowance. He asks what steps he should take to obtain this.

\*"Our correspondent does not state his age, but as we observe that he obtained his diplomas in the year 1876, we assume that he is under 60, and if so, he will, before his pension is granted, have to satisfy the guardians that he has become incapable of discharging the duties of his office with efficiency by reason of some permanent infirmity of body or mind. The pension, if awarded, will be calculated on the average amount of his salary and emoluments during the last five years of service as district medical officer. That he has been public vaccinator does not affect the question in any way whatever."

## SEPARATED MILK.

K. S. asks: (1) What is the legal minimum relative quantity of cream which must be present in milk ordinarily known as "new" or "sweet" milk? and (2) whether any steps be taken, and if so what is their nature, to remedy the fact of a vendor supplying as "new" or "sweet" milk a lacteous fluid, containing no added water, but from which every particle of cream has been mechanically removed by a separator?

\*"There is no legal minimum of cream." The low limit of fat which has been adopted by the Society of Public Analysts, the Society of Medical Officers of Health, and recently by the Somerset House authorities, is one of 3 per cent. of the milk by weight. If milk with less fat than this is sold as whole milk there is no difficulty in securing the conviction of the vendor for an offence under Section 1x of the Sale of Food and Drugs Act, 1875. A sample of the milk would, however, have to be purchased and dealt with in strict compliance with the procedure laid down in that Act.

## HOSPITAL AND DISPENSARY MANAGEMENT.

## FIFE AND KINROSS ASYLUM.

The chief point of interest in the report of this asylum for the year ending July 31st, 1900, is the increase in the number of admissions, which is larger than in any year since the opening of the asylum (in July, 1866), being 21 more than in the preceding year, and 12 more than the average admission-rate of the four years, 1896-1899 inclusive. Of the 137 cases admitted, 35 had previously been under care in the asylum on one or more occasions. A larger number than usual of the cases were the result of heavy bouts of drinking. The total number of cases under care during the year was 656. Of these 57 were discharged recovered, 23 relieved, and 40 died, leaving 536 on the books at the end of the year. The recovery-rate was 41.60 calculated on the number admitted, and the death-rate calculated on the number under treatment was 6.09.

Dr. Turnbull calls attention to the reduction in the margin of spare accommodation, and the necessity for considering what steps it may be advisable to take, as the last addition to the asylum (in 1890) was then considered sufficient for seven years.

Influenza was again epidemic in the asylum in February and March, and attacked a large number of the patients and the staff, and was the cause of death in 22.5 per cent. of the total number of deaths. But for this the death-rate would have been exceptionally low. An important addition to the asylum estate was made by the purchase of 160 additional acres of land, bringing the amount of land in the possession of the District Board to 268 acres. A considerable portion of this new land can be used for disposal of the asylum sewage by irrigation.

AN INSTITUTE FOR BACKWARD CHILDREN IN ROME.—On February 3rd an institute for children of defective intelligence was officially opened in Rome in the Via Cavallini. Among those present were the Minister of Public Instruction, the Prefect, the President of the Provincial Deputation, the Sindaco, and other representatives of public authorities. The work owes its initiative to Professor Ponfigli, "Dottressa" Montessori, and Dr. Montesano, with the help of Prince Felice Borghese and other rich philanthropists. The institute provides accommodation for eighty children, indoor and outdoor, whose education will be conducted by fourteen teachers, male and female, all of whom have passed through a course of instruction in the school for teachers.

It is stated that a limited company has been formed in Moscow to furnish medical treatment.

## MEDICAL NEWS.

SUCCESSFUL VACCINATION.—Dr. W. R. Meyer, Public Vaccinator of the Hurstpierpoint District of the Cuckfield Union, has received for the second time the Government grant for successful vaccination.

We learn from *The Student* that a unique distinction has been conferred on a graduate of the University of Edinburgh. Miss Faith P. Crowther, M.B., who has been for the last two years a medical missionary in China, has been invited to the Celestial Court as medical adviser to the Son of Heaven.

FRENCH CONGRESS OF SURGERY.—The French Congress of Surgery will hold its fourteenth annual meeting in Paris from October 21st to 26th. The questions proposed for discussion are: (1) The surgery of the spleen, to be introduced by M. F  vrier, of Nancy; (2) the treatment of tuberculous inflammations of glands, to be introduced by M. Broca, of Paris.

ELEVEN notifications of typhus fever were made from a single house in a street in Deptford during the week ending February 2nd, and eight patients suffering from the disease have apparently been admitted into the hospitals of the Metropolitan Asylums Board. It would appear, although the returns do not distinctly state the fact, that the total number of cases is really 8. All the cases, with one exception, a male, aged 39, occurred in children or young persons. Three notifications were made on January 29th, five on January 30th, and three on January 31st.

PRESENTATION.—On February 6th, at Wrenbury, Nantwich, a deputation of members of Court "Wrenbury" 769, A.O.F., waited upon Dr. Thomson, their late medical officer, and presented him, in the name of the Court, with a handsome silver salver bearing the following inscription: "Presented to Wm. Thomson, Esq., L.R.C.P.Ed., by the members of Court 'Wrenbury' 769, A.O.F., in recognition of his services as Medical Officer during a period of fifty years. December 31st, 1900." Tenure of office during such a lengthened number of years must surely be almost unique in the history of friendly societies, and shows the sympathy existing between the members and their late medical officer.

## MEDICAL VACANCIES.

The following vacancies are announced:

- ASHTON-UNDER-LYNE: DISTRICT INFIRMARY.—House-Surgeon. Salary, £100 per annum, with board, lodging, and washing. Applications, marked outside "Application for the Office of House-Surgeon," to the Honorary Secretary by February 19th.
- BIEKENHEAD BOROUGH HOSPITAL.—(1) Senior Resident House-Surgeon. Salary, £100 per annum. (2) Junior Resident House-Surgeon. Salary, £80 per annum. Board and washing provided in each case. Applications to the Chairman, Weekly Board, before March 26th.
- BIRMINGHAM AND MIDLAND EYE HOSPITAL.—(1) Senior House-Surgeon. Salary, £85 per annum. (2) Junior House-Surgeon. Salary, £80 per annum, with apartments, board, and attendance. Applications to the Chairman of the Medical Board by February 18th.
- BRIGHTON, HOVE, AND PRESTON DISPENSARY.—Two House-Surgeons. Salary, £100 per annum, with apartments, etc. Applications to the Assistant Secretary, 115, Queen's Road, Brighton, by February 20th.
- BRIGHTON: ROYAL ALEXANDRA HOSPITAL FOR SICK CHILDREN.—House-Surgeon. Salary, £80 per annum, with board, lodging, and washing. Applications to the Secretary by March 8th.
- BRISTOL ROYAL INFIRMARY.—Resident Obstetric Officer. Salary, £40 per annum, with board, lodging, and washing. Applications to the Secretary by February 25th.
- CARMARTHENSHIRE INFIRMARY.—Resident Medical Officer. Appointment for six months. Salary at the rate of £100 per annum, with furnished apartments, board, washing, etc. Applications to the Secretary, 13, Guildhall Square, Carmarthen, by February 19th.
- DENTAL HOSPITAL OF LONDON AND LONDON SCHOOL OF DENTAL SURGERY, Leicester Square, W.C.—(1) Demonstrator at the Hospital. Honorarium, £200 per annum. (2) Two Demonstrators to assist senior students. Honorarium, £100 and £80 per annum respectively. Applications to the Dean by March 15th.
- DONCASTER GENERAL INFIRMARY AND DISPENSARY.—Assistant House-Surgeon, unmarried. Board and residence provided. Applications, stating age and amount of salary required, to the Honorary Secretary.
- DUDLEY DISPENSARY.—Resident Medical Officer. Salary, £130 per annum, with house, etc. Applications to the Honorary Secretary by February 18th.
- EAST LONDON HOSPITAL FOR CHILDREN, Shadwell.—(1) House-Surgeon. Board, residence, and an honorarium of £25 on completion of six months' approved service. (2) Medical Officer for the Casualty Department. Appointment for six months. Salary at the rate of £100 per annum, and luncheon. Applications to the Secretary by March 9th.
- EVELINA HOSPITAL FOR SICK CHILDREN, Southwark Bridge Road, S.E.—Junior Resident Medical Officer and Registrar. Salary, £50 per annum, with board and washing. Applications to the Committee of Management by February 18th.
- GUILDFORD, GODALMING, AND WOKING JOINT HOSPITAL BOARD.—Medical Officer for the Isolation Hospital at Woodbridge, Guildford. Salary, £175 per annum. Applications to the Clerk to the Joint Board, Commercial Road, Guildford, by February 22nd.
- GUILDFORD RURAL DISTRICT COUNCIL.—Medical Officer of Health. Salary, £250 per annum. Appointment in the first place for three years. Applications, endorsed "Appointment of M.O.H.," to be sent to the Clerk of the Council, Commercial Road, Guildford, by February 22nd.
- GUY'S HOSPITAL MEDICAL SCHOOL.—Gordon Lectureship in Experimental Pathology. Applications to the Secretary to the Board of Electors of the Gordon Lectureship, Guy's Hospital, S.E. before March 9th.

**HOSPITAL FOR SICK CHILDREN**, Great Ormond Street, W.C.—Two House-Physicians, unmarried. Appointments for six and nine months respectively. Salary £20, with board and residence. Applications, on forms provided, to the Secretary by March 5th.

**HULL ROYAL INFIRMARY**.—Junior Assistant House-Surgeon. Salary, £40 per annum, with board and lodging. Applications to the Chairman, House Committee, by February 18th.

**INVERNESS NORTHERN INFIRMARY**.—House-Surgeon and Dispenser. Salary, £70 per annum, with board, etc. Applications to the Honorary Secretary, 15, High Street, Inverness, by February 28th.

**KENT COUNTY ASYLUM**, Barming Heath, Maidstone.—Fourth Assistant Medical Officer and Pathologist. Salary, £175 per annum, rising £5 a year, with furnished apartments, attendance, etc. Applications to Dr. F. P. Davies, Superintendent.

**KING'S COLLEGE**, London.—Sambrook Surgical Registrarship, open to King's College Students only. Applications to the Secretary by March 1st.

**LANCASHIRE COUNTY ASYLUM**, Whittingham.—Senior Assistant Medical Officer. Salary, £225 per annum, rising to £250, with board, lodging, washing, and attendance. Applications to the Medical Superintendent.

**LIVERPOOL INFIRMARY FOR CHILDREN**, Myrtle Street.—House-Surgeon. Salary, £85 per annum, with board and lodging. Applications to the Hon. Secretary by February 28th.

**LIVERPOOL STANLEY HOSPITAL**.—Senior House-Surgeon. Salary, £80 per annum, with board, residence, and washing. Applications to the Chairman, Medical Board.

**MANCHESTER CLINICAL HOSPITAL FOR WOMEN AND CHILDREN**.—Honorary Physician for Diseases of Children. Applications to the Secretary, Park Place, Cheetham Hill, Manchester, by March 2nd.

**MANCHESTER OWENS COLLEGE**.—(1) Senior Demonstrator in Anatomy. (2) Junior Assistant to the Professor of Obstetrics and Gynaecology. Applications to the Registrar by March 1st.

**MANCHESTER TOWNSHIP**.—Visiting Surgeon for the Workhouse Infirmary at Crumpsall. Salary, £160 per annum, and, endorsed "Visiting Surgeon," to the Clerk to the Guardians, New Bridge Street, Manchester, by February 20th.

**MARGATE ROYAL SEA BATHING HOSPITAL**.—Assistant Resident Surgeon. Salary, £80 per annum, with board and residence. Applications to the Secretary, 30, Charing Cross, London, S.W., by February 20th.

**MERTHYR TYDFIL URBAN DISTRICT COUNCIL**.—Medical Officer of Health, not over 45 years of age. Salary, £400 per annum, rising to £500, exclusive of out-of-pocket expenses. Applications, marked "Medical Officer of Health," to the Clerk to the Council, Town Hall, Merthyr Tydfil, by March 5th.

**METROPOLITAN ASYLUMS BOARD**.—Three Assistant Medical Officers at the Fever and Small-pox Hospitals, unmarried. Salary, £160 for the first year, £180 the second, and £200 the third and subsequent years, with board, lodging, and attendance. Applications, on forms provided, to the Clerk to the Board, Victoria Embankment, E.C., by February 20th.

**NORTH RIDING ASYLUM**, Clifton, York.—Assistant Medical Officer, not more than 30 years of age. Salary, £125 per annum, increasing to £175 and £10 per annum in lieu of liquor, with board, lodging, washing, and attendance. Applications to the Medical Superintendent by February 25th.

**NOEWICH HIGHAM HALL ASYLUM**.—Assistant Medical Officer. Applications to the Medical Superintendent.

**NOTTINGHAM GENERAL DISPENSARY**.—Assistant Resident Surgeon; unmarried. Salary, £140 per annum, and all found except board. Applications to the Secretary.

**NOTTINGHAM GENERAL HOSPITAL**.—(1) Assistant House-Physician; (2) Assistant House-Surgeon. Salary in each case £100 per annum, with board, lodging, and washing. Applications to the Secretary by March 1st.

**OXFORD WARNEFORD ASYLUM**.—Assistant Medical Officer. Salary, £100 per annum, with board, lodging, and washing. Applications to the Medical Superintendent.

**ROYAL EAR HOSPITAL**, Soho.—House-Surgeon, non-resident. Small honorarium given. Applications to the Medical Board before February 22nd.

**ROYAL PIMLICO DISPENSARY**.—Resident Medical Officer and Secretary, not exceeding 40 years of age. Salary, £100 per annum and house. Applications to the Secretary, 104, Buckingham Palace Road, S.W., by March 4th.

**ST. PANCRA'S AND NORTHERN DISPENSARY**, 126, Euston Road, N.W.—Resident Medical Officer. Salary, £105 per annum, with residence and attendance. Applications to the Honorary Secretary, Mr. H. P. Bodkin, 23, Gordon Street, W.C., before March 2nd.

**SALFORD ROYAL HOSPITAL**.—(1) House-Surgeon. Salary, £100 per annum. (2) House-Physician. Salary, £80 per annum. (3) Junior House-Surgeon. Salary, £70 per annum. Board and residence provided in each case. Applications to the Chairman of the Board of Management by March 5th.

**SHEFFIELD ROYAL INFIRMARY**.—House-Surgeon. Salary, £120 per annum, increasing by £10 a year for second and third years, with board, lodging, and washing. Applications, endorsed "Applications for the Post of House Surgeon," to the Secretary by March 8th.

**WARRINGTON INFIRMARY AND DISPENSARY**.—Senior Resident House-Surgeon, unmarried. Salary, £120 per annum, with furnished residence and board. Applications to the Honorary Secretary by February 18th.

**WEST BROMWICH DISTRICT HOSPITAL**.—Resident Junior House-Surgeon. Salary, £50 per annum, with board, lodging, washing and attendance. Applications to the Secretary.

**WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL**.—Assistant House-Physician.—Appointment for six months, honorarium at the rate of 475 per annum, with board, lodging, and washing. Applications to the House Governor by February 27th.

**WOOLWICH INFIRMARY**, Plumstead.—Resident Assistant Medical Officer, unmarried, and not more than 38 years of age. Salary, £150 per annum, with apartments, rations, and washing. Applications, on forms provided, to the Clerk to the Board, Union Offices, Woolwich, by February 27th.

**YORK COUNTY HOSPITAL**.—Resident Assistant House-Surgeon. Salary, £80 per annum, with board, attendance, and washing. Applications to the Secretary by February 19th.

## MEDICAL APPOINTMENTS.

**ALLSOM, E. W.**, L.R.C.P., L.R.C.S. Edin., appointed Extern Physician to the South Charitable Infirmary and County Hospital, Cork.

**APTHOMAS, G. M.B.**, M.C., reappointed Ophthalmic Surgeon to the Oldham Infirmary, and Ophthalmic Surgeon to the Oldham Workhouse Infirmary.

**BROWN, R. K. B.A.**, M.B., B.Ch. R.U.I., appointed Medical Officer of Health for the Borough of Bermuda.

**BROWN, Warburton**, L.R.C.P., M.R.C.S. L.D.S., appointed Junior Dental Surgeon to the Seamen's Hospital Society, Greenwich, S.E.

**BUCHANAN, Leslie**, M.D., appointed Surgeon to the Glasgow Eye Infirmary.

**CAMMIDGE, P. J.**, M.R.C.S. Eng., L.R.C.P. Lond., appointed Bacteriologist on the Staff of the County Medical Officer for the West Riding of Yorkshire.

**COLE, Baker Lyster**, B.A. Dub., M.D., B.Ch., appointed Honorary Assistant Physician to the Royal Portsmouth Hospital.

**DAVIS, W. L.**, Bowen, M.R.C.S., L.R.C.P. Lond., appointed Honorary Medical Officer to the Denbighshire Infirmary.

**EATON, Oliver**, M.R.C.S., L.R.C.P. Lond., D.P.H. Camb., appointed Certifying Factory Surgeon for the Exmouth District of Devonshire.

**FORD, Rosa**, M.B. Lond., appointed Resident Medical Officer to the York Dispensary.

**FOWLER, E. G.**, M.R.C.S., L.R.C.P., appointed one of the House Physicians to the General Infirmary at Leeds.

**HANDLEY, Wm. Sampson**, M.S., M.D. Lond., F.R.C.S. Eng., appointed Surgeon to Out-patients at the Samaritan Free Hospital for Women and Children, Marylebone Road.

**HARMAN, Leonard**, M.B. & C., appointed District Medical Officer and Public Vaccinator for the Coombe and Ham Districts of the Kingston-on-Thames Union.

**HODGSON, J. F.**, M.B., Ch.B. Vict., appointed Senior House-Surgeon to the Oldham Infirmary.

**HOGG, Katie Weldon**, B.A. Sydney, M.B., Ch.B. Edin., L.M. Coombe Hospital, Dublin, appointed Assistant to the Master, Coombe Hospital, Dublin.

**JOHNSTON, L. A. W.**, M.R.C.S. Eng., L.R.C.P. Lond., appointed Assistant Medical Officer at the City Fever Hospital, Lodge Road, Birmingham.

**PAKER, J. Foster**, L.R.C.P. Lond., M.R.C.S. Eng., appointed Public Vaccinator for Chester, vice J. T. Rowland, M.D. Stud., deceased.

**PRICE, E. O.**, M.D. Edin., appointed Certifying Factory Surgeon for the Bangor District of Carmarthen.

**ROBERTS, J. Lloyd**, M.B., C.M. Edin., appointed Honorary Consulting Medical Officer to the Denbighshire Infirmary.

**SMITH, P. Caldwell**, M.D. Glas., D.P.H. Camb., appointed Medical Officer of Health for Borough of Wandsworth.

**WATKINS, A. S.**, M.A., M.B., Ch.B. Edin., appointed resident House-Surgeon to the Brighton and Hove Hospital for Women, vice H. R. L. Joy, M.D., resigned.

**EALING COTTAGE HOSPITAL AND DISPENSARY**.—The following have been appointed Dental Surgeons: Carter, Edward, L.D.S., R.C.S. Eng., F.P.S. Glas.; Green, Walter, L.D.S., R.C.S. Eng.; Stocken, Leslie M., L.R.C.P. Lond., M.R.C.S. & L.D.S. Eng.; Bowtell, Herbert E., L.R.C.P. Lond., M.R.C.S. & L.D.S. Eng.

## DIARY FOR NEXT WEEK.

## MONDAY.

**Medical Graduates' College and West London Post-Graduate**  
Polyclinic, 22, Chancery Street, W.C. 4  
Course, West London Hospital, Ham-  
mersmith Road, W. 5 P.M.—Dr. Mansell  
(Skin) 2 to 3.30 P.M.—Mr. Hayward  
Moulin: Gynaecological Cases.

## TUESDAY.

**Medical Graduates' College and**  
Polyclinic, 22, Chancery Street, W.C. 4  
P.M.—Dr. C. T. Williams: Consultation  
(Medical).  
**Chelsea Clinical Society**, Holy  
Trinity Parish Hall, Pavilion Road,  
Sloane Square, 8.30 P.M.—Mr. P. C.  
Abbott: Spinal Curvature and Physical  
Exercises, with Demonstration. Dr.  
C. J. Harrison: Acute Rheumatism of  
Childhood.

**Pathological Society of London**,  
20, Hanover Square, W., 8.30 P.M.—Dr.

## WEDNESDAY.

**Medical Graduates' College and**  
Polyclinic, 22, Chancery Street, W.C. 4  
P.M.—Sir John Batty Tuke: Clinical  
Lecture, Insanity a Symptom of Organic  
Disease.  
**Hospital for Consumption and**  
Diseases of the Chest, Brompton, 3 P.M.  
—Dr. Fowler: The Treatment of Cardiac  
Failure in Aortic Regurgitation.

## THURSDAY.

**Medical Graduates' College and**  
Polyclinic, 22, Chancery Street, W.C. 4  
P.M.—Mr. J. Hutchinson: Consultation  
(Surgical).  
**Central London Throat, Nose, and**  
Ear Hospital, 5 P.M.—Dr. Duges Grant:  
Treatment of Nervous Disorders of the  
Pharynx and Larynx.  
**Charing Cross Hospital Post-**  
Graduate Course, 4 P.M.—Dr. Amand  
Routh: Demonstration of Gynaecological  
Cases.

## FRIDAY.

**Clinical Society of London**, 30,  
Hanover Square, W., 8 P.M.—Discussion  
of Clinical Cases, followed by Discussion.  
Patients on view from 8 to 9 P.M.

## 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.

**BAILLINGALL**.—On February 2nd, at 11, Grand Parade, St. Leonards-on-Sea, the wife of George A. Bailingall, M.A., M.D. (Brux.), of a daughter.

**BREWIS**.—On the 9th inst., the wife of Edward J. Brewis, M.D., "Curriemyre," Willington, Durham, of a daughter.

**DWYER**.—On the 8th inst., at 183, Blackfriars Road, S.E., the wife of Hubert de Burgh Dwyer, M.R.C.P., L.R.C.P. Lond., of a son.

**HERON**.—On February 7th, at 79, Cromwell Road, Bristol, the wife of A. N. Heron of a son.

## MARRIAGES.

**RICHARDS-MACKINTOSH**.—At the Windsor Hotel, Edinburgh, on the 8th instant, by the Rev. H. E. Mackintosh, D.Phil., Taylor (brother of the bride), assisted by the Rev. Prof. Martin D.D. and the Rev. J. Helman, M.A., Solomon Harold Richards, M.B., L.R.C.S., Middlesex, Yorks, youngest son of the late Colonel W. H. Richards, of the 55th Foot, to Jessie Ross, youngest daughter of the late Rev. Alexander Mackintosh, M.A., of Paisley.

**ROBERTSON-HOLLOWAY**.—At St. Alban's, Acton Green, on January 31st, by the Rev. Bernard Scott, W. J. Robertson, M.R.C.S. Eng., L.R.C.P. Lond., eldest son of W. Robertson, M.D., of Glanton House, Northumberland, to Theodora, eldest daughter of W. J. Holloway, Esq., of Mia Gunyah, Bedford Park, W. No cards.

**STOCKWELL-WINTLE**.—On February 12th, at St. Paul's, Clifton, by the Rev. W. Rogers, John Frederick Stockwell, eldest son of Frederick Stockwell, M.D., Bruton, Somerset, to May Evelyn Wintle, youngest daughter of Charles Wintle, solicitor, Bristol.

**WOODING-MORRIS**.—On February 6th, at All Saints, Leamington, by the Rev. Cecil Wooding, M.A., Vice, William Benjamin Wooding, M.R.C.S. England, L.R.C.P. Lond., of Llyn-yr-Eos, Porthcawl, Glamorganshire, to Emily Lucy, second daughter of the late Lewis Morris, Esq., of Norton House, Machynlleth, N. Wales.

## DEATHS.

**JONES**.—On February 11th, at 45, Sheep Street, Northampton, after one day's illness, Arthur Henry Jones, M.D. Lond., aged 48 years.

**RUGG**.—On Monday, February 11th, at Avenue Lodge, Wood Green, Alfred E. Ron Rugg, L.R.C.P. Lond., M.R.C.S., aged 53.