

## Association Intelligence.

### BRANCH MEETING TO BE HELD.

NAME OF BRANCH.	PLACE OF MEETING.	DATE.
BATH AND BRISTOL. [Ordinary.]	Victoria Rooms, Clifton.	Wednesday, Jan. 25, 7.15 P.M.

## Reports of Societies.

### HARVEIAN SOCIETY OF LONDON.

THURSDAY, DECEMBER 15TH, 1864.

W. ADAMS, Esq., F.R.C.S., President, in the Chair.

*A Case showing the Dangerous Effects of Mercury through the Skin.* By W. SEDGWICK, Esq. A journeyman tailor, aged 23, in consequence of what appeared to be a venereal sore, with some brown patches on the skin, had applied on October 31st for advice at one of the large hospitals as an out-patient. He received a pot of blue ointment, which he was desired to rub into the thighs night and morning; and a small bottle of colourless lotion for the sore. After using the ointment a few times, the gums became very swollen and raw, and the patient felt very ill and exhausted; but he managed to attend again at the hospital on November 4th, when he was told to continue the ointment and lotion, and to attend again next week. The symptoms of exhaustion, however, increased so rapidly, and the salivation became so profuse, that the patient's friends were much alarmed, and requested Mr. Sedgwick to take charge of the case. Mr. Sedgwick visited the patient for the first time on November 6th, and found him suffering from profuse hæmorrhage from the mouth, which appeared to proceed from the mucous membrane of the gums and cheeks; but it was almost impossible at the time to examine the interior of the mouth, as the jaws were fixed. The mercurial fætor was very offensive and overpowering, and the patient had not had any sleep during the two previous nights. A gargle, composed of a solution of chloride of sodium with hydrochloric acid and syrup, was used with advantage; and the patient was ordered to take every four hours a mixture of quinine and ether. Brandy and milk were given at short intervals, and as much beef-tea as he could manage to swallow. There was considerable hæmorrhage from the mouth for three days afterwards; and this did not entirely cease until November 13th. The gargle for the mouth completely did away, after a few days, with the mercurial fætor; and, by means of twelve-grain doses of Dover's powder at night, some amount of interrupted sleep was obtained. As soon as the patient's mouth could be opened fully enough to allow of examination, it was ascertained that not only were the gums very much swollen and ulcerated, but that the adjacent mucous membrane of the cheeks and sides of the tongue, as far back as it was possible to see towards the base, were also extensively ulcerated. The patient recovered, so as to be able to take out-door exercise for the first time on November 25th; and, at the time of last report (December 1st), was quickly recovering his strength. With reference to any supposed necessity for mercurial treatment in this case, it was stated that the patient had been married two years and a half, and had not apparently required any medical advice since his marriage. He had led a "gay" life, and had been treated for venereal disease; but this, it was said, had been cured.

Mr. DE MÉRIC observed, that the danger of mercury through the skin was like that of using it in other ways. Some persons would take four or five times as much as others to salivate them. In cases of salivation and ulceration of the mouth caused by mercury, he had found a useful application to be a stick dipped in pure hydrochloric acid and applied to the ulcerated surfaces, which then should be gargled with a solution of salt in water.

Dr. DRYSDALE remarked, that medical literature teemed with accounts of injury inflicted by the use of mercury as an ointment rubbed into the blood. Dr. Christison had mentioned a case where two drachms of blue ointment rubbed in on the thighs had produced pyralism and death in three days. Dipping the hands in mercury for a few hours has produced salivation. Ramazzini and Tardieu had given a sad picture of the workmen employed in mines of mercury. Trembling paralysis, swelling of the feet, ulcers of the gums, loss of the teeth, asthma, phthisis, were among the diseases ascribed to this dangerous poison. In describing the mines of Frigas and Almaden, most authors attributed to mercury the accidents which are sometimes met with in the mercurial treatment of syphilis; viz., salivation, vertigo, loss of memory, trembling, partial paralysis, and pains in the bones. Workmen of thirty years of age are quite edentulous. Of 3,911 workmen at Almaden mines, forty-eight sickened yearly; the half of these patients die in the course of a year. As it had been fully proved, he thought, by the evidence adduced by himself and others, that diseases were injured instead of benefited, including syphilis, by the use of mercury, it was high time that its internal use should be abandoned. He had recently received the works of Professor Böck of Christiania, where every case of syphilitic ulcer and its treatment had been kept since 1827, and where mercury is now definitively abandoned; in consequence of which, bone-disease is no longer met with in those treated in Norway.

*On the Syphilitic Affections of the Nails.* By V. DE MÉRIC, Esq. The author recapitulated the subjects he had treated on former occasions before the Society; one being the possible escape of children born of syphilitic parents; the other, hard chancre in the female. As to the affections of the nails, he considered them very rare in syphilis; as, in a practice of twenty years, he had seen but a few cases. He divided these into two classes—the purulent (onychia syphilitica), and the dry (ungual psoriasis). Of the first class, Mr. De Méric related several cases both from private and public practice, those occurring in hospital being accompanied by drawings. The dry class, characterised by yellowish stains under the nail, and the gradual brittleness and crumbling of the latter, was illustrated from private practice chiefly; one case being very remarkable by presenting the affection in two individuals, one of whom had been contaminated by the other. The author had brought forward the subject principally to aid diagnosis, and to attempt the description of the characters which are peculiar to syphilitic affections of the nails, seeing that these characters are not sufficiently noticed in systematic works.

The PRESIDENT asked whether there was not, in addition to the two forms of nail-disease so well described by the author, another class of cases, where the nail begins to dry and split up the middle, and spots may be seen in the nail by making a thin section of it and viewing it in the microscope. A lady, in good health, had almost lost the nails of three fingers of both hands by such a disease. All the specifics in the *Pharmacopœia* had been tried on her to no purpose.

of medical officers, to the effect that his health unfits him from further service; if he cannot obtain this certificate, he must serve on, or retire on a lower rate of pension. And the highest rate after the longest possible service is £600 a year. Compare this with the scale of pensions graduated according to service, *not health*, in the new Indian medical scheme. When I said that an officer might retire on £800 a year, I was writing of one who had served his five years as inspector general. Here is an example. Dr. Macpherson of Madras has seen twenty-seven years service, and has served five in the grade of inspector general; and this officer may, and probably will retire on the sum I mentioned. Under the old rules a member of the medical board could retire on £700 a year, *not*, as the "Surgeon-Major" says, £900.

And now with regard to what I said as to *stoppages*. I am quite aware of the rules regarding "privilege leave," without loss of allowances; what I alluded to was another matter entirely. A surgeon, we shall suppose, lands in Calcutta; his regiment is 600 miles up country, or more. Under the old rules he could draw no staff allowance until he joined. Under the new he gets what is now termed "unemployed pay," on a liberal scale, which is available also on leave on private affairs other than *privilege leave*.

Your correspondent is right as to the error of the writer in the *Spectator*, but for that I am not responsible. I have only to say, in conclusion, that I have served more than twenty-two years in India, and that circumstances, into which I need not enter here, make it necessary for me to know pretty exactly the emoluments of medical officers of both services.

I am, etc., D. J. G.

**ABSINTHISM.** According to Dr. Emile Decaisne, the consumption of absinth has of late years increased to an enormous extent in France. It is made by infusing in alcohol ends of wormwood, both major and minor (*sommités d'absinthe*, from which the liquor takes its name), angelica root, *calamus aromaticus*, aniseed, dittany seeds, and common marjoram. Some distillers, however, vary the recipe, and use fennel, mint, and balm. The concentration of the degree of the alcohol is generally very high. Indigo, tincture of turmeric, juice of hyssop, and nettles, are called to aid to improve the colour and appearance of the pernicious draught. The effect of absinth is to produce a superabundant activity of the brain, a cerebral excitement which at first is agreeable. The intoxication "comes on rapidly; the head swims; and the effect produced is nearly the same as that of poisoning by a narcotic, which certainly does not occur with an equal dose of brandy. With the absinth-drinker, as with the brandy-drinker, the excitement the liquor produces diminishes daily in intensity. Each day he is obliged to augment the dose, in order to screw himself up to the right pitch." The diseases brought on by drinking brandy are produced much more rapidly by the use of absinth. One of the greatest dangers of absinth, says Dr. Decaisne, consists in its adulteration. Dr. Decaisne has observed more than 150 cases of chronic absinthism, and concludes that absinth ought to be prohibited. He has convinced himself that absinth, even of good quality and in moderate doses, sooner or later invariably produces disorders in the human economy. He considers that the extent to which it is now consumed in France demands the intervention of Government. He declares that the pale green demon has invaded all classes of society, the idler and the workman, the soldier and his officer; all professions, those who work with the brain, and those who work with the hand, swallow it with frenzied eagerness.

## Medical News.

**APOTHECARIES' HALL.** On January 5th, 1865, the following Licentiates were admitted:—

Haslewood, Albert Octavius, Darlington, Durham  
Meeres, Albert, Haddenham, Bucks  
Milburn, Frederick Lefevre, Aldringham, near Saxmundham  
Somerset, William Porter, Claydon, Bucks  
Wilson, Henry, 393, Strand

### APPOINTMENTS.

#### ROYAL NAVY.

ASHFORD, J. W., Esq., Assistant-Surgeon, to the *Donegal*.  
DEVONSHIRE, C. J., Esq., Assistant-Surgeon, to the *Penguin*.  
DOYLE, E. W., Esq., Acting Assistant-Surg., to the *Princess Royal*.  
MEIKLEJOHN, John A. S., Esq., Surgeon, to the *Columbine*.  
RICHARDSON, F. H., Esq., Assistant-Surgeon, to Jamaica Hospital.

#### VOLUNTEERS. (A.V.=Artillery Volunteers; R.V.=Rifle Volunteers):—

JACKSON, V., Esq., to be Assistant-Surgeon 4th Administrative Battalion Staffordshire R.V.  
NESBITT, F., Esq., to be Assistant-Surgeon 4th Administrative Battalion Staffordshire R.V.

DR. SIEVEKING has been elected a director of the Briton Medical and General Life Association, in the place of Mr. W. Manton deceased.

UNIVERSITY COLLEGE HOSPITAL. A gift of £100 has been received from J. Hibbert, Esq., of Maidenhead.

**HORSE-RACING AND CHARITY.** We are not quite certain into which category of philanthropists to place Mr. Joseph Bond, who for many months has been aiming to mitigate all the woes of humanity by devoting a certain regulated proportion of the stakes in all horse-races above fifty pounds in value to the purposes of hospitals. Mr. Bond's ingenious idea has for a long time been very generally acted upon on the continent of Europe. The infamous gambling dens of the Palais Royal were compelled by the terms of their lease to set aside a portion of their ill-earned profits for the benefit of the hospitals and the poor of Paris; but the four or five hundred thousand francs which annually flowed into the *Bureau d'Assistance* and the coffers of the Hôtel Dieu from this polluted source did not deter the Municipality of Paris from at last abolishing a scandalous nuisance. The rouge-et-noir rooms of Aix-la-Chapelle for a long time warded off their impending doom by large contributions to charitable institutions. Homburg continues to mingle a factitious charity with the abominations of its Kursaal; and from the profits of the roulette table contrives to support all the almshouses and hospitals of his chief and only town. Mr. Bond seems to have argued that betting was like gambling, and that the Homburg system of making naughtiness assist suffering virtue might be advantageously transferred to England. Now, considering Mr. Bond as a racing philanthropist, we confess we cannot regard his hospital scheme with any special favour. There is absolutely no connection between the turf and charity. We dare say the hospitals would like the arrangement well enough; but racing men would be apt to regard the philanthropic clause as a tax, then to resent it as an imposition, and finally to denounce it as a swindle. Mr. Bond might move the hearts of the sporting fraternity were he to deliver a discourse on "Horse-racing and Hospitals" at the Spread Eagle at Epsom, the night before the Derby. But we strongly object to making that which should be in every case a voluntary and spontaneous act in any way obligatory. Charity on compulsion is no charity at all. (*Daily Telegraph*.)

**THE VENEREAL DISEASES COMMISSION.** Dr. Babington has been nominated a member of the Commission on Venereal Diseases, appointed by government in place of the late Dr. Kirkes.

**SUICIDE OF A SURGEON.** An inquest was lately held on Mr. E. Humpage, lately living at Bristol, a surgeon. The jury found "that the deceased died from the effects of a dose of prussic acid taken while in a state of insanity from affection of the brain."

**THE ALKALI WORKS REGULATION ACT.** The Alkali Works Regulation Act has now been in force twelve months. The object of the legislature was to compel manufacturers to condense at least 95 per cent. of the hydrochloric acid evolved in the production of soda from common salt. The operation of the present Act is strictly confined to alkali works. Sulphurous fumes from copper works are allowed to escape as before; and the most careless management of chemical works still remains without government interference. There is no difficulty in the way of complete condensation of the hydrochloric acid. The wilderness around St. Helens, however, is not likely soon to blossom as the rose. It is still what it was described by a witness before the Commission, "one scene of desolation. You may look round for a mile, and not see a tree with any foliage on whatever." The fact is, that only this one "noxious vapour" has been suppressed. Others no less deadly, but almost as easily prevented, are still allowed to escape as freely as before, and while these are at large the country round St. Helens can never be like what it was fifty years ago. The satisfactory results of the Alkali Act will no doubt encourage the legislature to proceed further in the same direction.

**RETENTION OF DEAD BODIES IN HOUSES.** Dr. Barnes has drawn up certain suggestions with the view of diminishing the dangers resulting from the undue retention of the bodies of the dead in inhabited houses, and has submitted them to the General Purposes Committee of the Association of Medical Officers of Health. He says that, there appear to be five principal quarters to which appeal for aid in carrying out measures for diminishing the evil may usefully be addressed:—A. The medical profession generally (through the medical press). B. The vestries, district boards, and boards of guardians (these to appeal to the public). C. The registrar-general. D. The cemetery companies and undertakers. E. The hospital authorities. He recommends as follows:—*For the Vestries.* B. 1. That a circular be prepared for submission to the vestries and district boards, setting forth the dangers arising from the existing practices relating to the dead previous to burial, and containing the following recommendations with a view to the diminution of such dangers. The circular to be sent, in the first instance, to the medical officer of health of each board, requesting him to submit it to his board. 2. That the extreme importance of providing some suitable place for the temporary deposit of dead bodies previous to interment be urged upon the vestries and district boards. That the vestries and district boards be requested to use their influence with their boards of guardians to allow the use of the parochial dead-houses for this purpose. 3. That as a sanitary measure, the vestries and district boards issue a public notice to be permanently maintained, as by painting on boards, and by printed placards, directing attention to the public danger resulting from the undue retention of the dead amongst the living, and stating that in cases of urgency the bodies of the dead may be deposited in the parochial dead-house under the security of a responsible officer, until arrangements are completed for the burial. [The construction of regulations for

the reception and care of the dead in the parochial (avoid the word "workhouse") dead-house or "mortuary" will require some consideration.] 4. That undertakers be informed that dead bodies can be received in the parochial mortuary, and be encouraged to deposit them in this place, rather than to keep them on their own premises. 5. That the undertakers and the master of the poor-house be instructed in every case of a person dying in the poor-house of scarlatina, fever, or other infectious disease, especially to surround the corpse with charcoal. 6. That the undertakers employed by the boards of guardians be instructed when sent to bury a body from the dwellings of the poor, to surround it with charcoal. 7. That the vestries and district boards be invited to consider the propriety of applying to the legislature for the enactment, in an amended Diseases Prevention and Nuisances Removal Bill, or otherwise, of clauses empowering them, as sanitary bodies, to provide mortuaries, and their medical officers to order the removal of corpses to such mortuaries, similar clauses being contained in the City Sewers Act. c. 1. That the registrar-general be requested to append a note to the forms of certificates of the cause of death supplied to medical men recommending the use of charcoal in the manner described. 2. That the public be earnestly invited by placard (?) or by a notice, to be given in every case by the registrar, when applied to by the friends of the deceased for a certificate of the cause of death, to see that the body is surrounded by charcoal as soon as placed in the shell or coffin. D. 1. That a circular be sent to the cemetery companies, requesting them to establish depositories for the dead in convenient places for the reception of bodies waiting interment in their respective cemeteries. 2. That the funeral companies and leading undertakers be invited to establish convenient depositories, such as would, for decency and care, command the confidence of the public. *Measures for the Hospitals.* E. 1. That a circular be issued (either by the Association or from the vestries) to each of the metropolitan hospitals, inviting the authorities to take measures that every dead body, before being allowed to leave their dead-houses, shall be duly surrounded with charcoal. [In support of this request, attention should be drawn to the frequent propagation of disease by the neglect of disinfection; to the fact that bodies are sometimes removed from hospitals to the house of friends or to the premises of undertakers before interment, and that the observance of this precaution would act as a great encouragement to the general adoption of similar means amongst the public.]

**UNIVERSITY OF OXFORD.** The second examination for the Degree of Bachelor of Medicine was held on December 2nd: examiners, Dr. Acland, Dr. Chambers, and Dr. J. W. Ogle. In *Medical and Surgical Pathology*, the questions were on the following subjects:—The microscopical appearances of encephaloid carcinoma and fibro-plastic growth; leucocythemia; the diagnosis of typhus and typhoid fever; the causes of general anasarca; the conditions under which urine contains albumen, sugar, and pus-globules; the conditions producing jaundice, and those in which it may be considered remediable; the characteristics of general paralysis of the insane; and the diseases for which it may be mistaken; the diagnosis of hæmorrhage into the spinal cord; the varieties of hernia in the abdomen, with an enumeration of the swellings which may occur in the inguinal and scrotal regions, besides hernia; and the various modes of growth in fibrous tumours of the uterus. In *Materia Medica and Pharmacy*, the candidates were asked to mention the official preparations of the *British Pharmacopœia* containing opium, and the proportions; the chief

diuretics used in England, and their doses; the "mixtures" in the *British Pharmacopæia*, and their composition; the composition of pulvis jalapæ compositus, of the pilula scillæ composita, of liquor morphæ hydrochloratis, and of liquor strychniæ of the *British Pharmacopæia*; the medicines which impart colour to the excretions; the preparations of iron in the *British Pharmacopæia*; the use of ferri peroxidum hydratum, and the method of making it; the classes of medicines fitted for preparation by decoction or for infusion; the making of liquid extracts; the temperature at which linseed, mustard, charcoal, and yeast poultices are to be made; the principle of volumetric analysis; the French equivalents of the weights and measures employed in the *British Pharmacopæia*. In *Therapeutics*, the candidates were required to give an outline of the mode of treatment of acute rheumatic fever; the treatment of a case of pneumonia supervening upon delirium tremens, and the probable result of the treatment; the steps required by the law of England to be taken before a person of unsound mind can be put under bodily restraint; the line of treatment in a well marked case of pyæmia; the treatment of the various forms of uterine hæmorrhage, its several causes being borne in mind; the steps to be taken if a woman, previously healthy, were seized with convulsions during labour; the measures to be adopted in spasmodic stricture of the urethra; the indications for the use of, and contraindications against the use of, elaterium, digitalis, aloës, and copaiba, severally in various diseases; the poisonous doses of the official preparations of opium respectively, and the treatment of deep narcotism from that drug. In *Forensic Medicine and Hygiene*, the questions were on the symptoms by which the candidates would seek to form a diagnosis between intoxication from alcoholic drinks, and concussion of the brain; the process of testing the contents of the stomach of a person suspected of having been poisoned by arsenic; the symptoms of a poisonous dose of belladonna and of hydrocyanic acid; the symptoms of poisoning by oxalic acid, and the *post mortem* appearances; the evidence that an infant found dead had not breathed; the several ways by which a room, or a ward, may be ventilated; the impurities which have been detected in the air of sick rooms; the mode in which typhoid fever is said to be propagated; the conditions under which drinking water is usually contaminated by lead; and the names of any diseases which make butchers' meat wholly unfit for human food. Then followed a clinical examination of cases in the Radcliffe Infirmary, regarding which the candidates were required to give with care the history, diagnosis, and prognosis of the cases, and also the treatment recommended; and to add such general remarks as might occur by way of clinical comment. They were then asked to describe a specimen of urine, to describe and sketch a microscopical object, and to describe a morbid product. Then followed a translation from Morgagni, of a case of rupture of the left ventricle, regarding which the candidates were asked to relate any similar case which they might have seen or heard of; and to state the probable condition of the cardiac muscular fibres. The examination ended with a translation from the Greek of Aretæus.

#### BOOKS RECEIVED.

1. Lectures on Man. By Dr. Carl Vogt. Edited by James Hunt, Ph.D. Anthropological Society. London: 1864.
2. Two Months of Fever Duty in the Glasgow Royal Infirmary. By W. T. Gairdner, M.D. Glasgow: 1865.
3. The Painless Extinction of Life in Animals Designed for Human Food. By H. MacCormac, M.D. London: 1864.
4. Undine. Translated from the German by Anne Burden. Belfast: 1864.

#### OPERATION DAYS AT THE HOSPITALS.

MONDAY.....Metropolitan Free, 2 P.M.—St. Mark's for Fistula and other Diseases of the Rectum, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.

TUESDAY....Guy's, 1½ P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.

WEDNESDAY...St. Mary's, 1 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—St. Bartholomew's, 1.30 P.M.

THURSDAY....St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Great Northern, 2 P.M.—London Surgical Home, 2 P.M.—Royal Orthopædic, 2 P.M.—Royal London Ophthalmic, 11 A.M.

FRIDAY.....Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.

SATURDAY....St. Thomas's, 1 P.M.—St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 P.M.—Lock, Clinical Demonstration and Operations, 1 P.M.—Royal Free, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.

#### MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

TUESDAY. Pathological Society of London, 8 P.M.

THURSDAY. Harveian Society of London, 8 P.M. Dr. H. C. Stewart, "On the Diagnosis of Embolia affecting the Great Vessels of the Heart, with Cases."

#### TO CORRESPONDENTS.

\* \* All letters and communications for the JOURNAL, to be addressed to the EDITOR, 37, Great Queen St., Lincoln's Inn Fields, W.C.

COMMUNICATIONS.—To prevent a not uncommon misconception, we beg to inform our correspondents that, as a rule, all communications which are not returned to their authors, are retained for publication.

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

LITHOTRITY.—Mr. Charles Hawkins has published in a pamphlet form his excellent article on "Lithotritry," published in the last volume of Holmes's *System of Surgery*; and has appended to it the account of a case of calculus in the bladder removed by lithotritry, in which a communication existed between the bladder and intestine, published in the 41st volume of the *Medico-Chirurgical Transactions*.

MR. HARTSHORNE.—A correspondent writes: "On seeing Mr. Hartshorne's letter in our JOURNAL, my first impression was, that if he had any complaint to make against a professional brother, and a member, moreover, of the same Ethical Society as himself, it was his duty in the first instance to have laid it before the Council for their adjudication; and, if reasonably dissatisfied with their decision, he might then with some show of justice have made a public appeal to his brother practitioners through the columns of the JOURNAL."

VILE PRODUCTIONS.—SIR: I have had the enclosed sent to me (a London postmark) within the last few days. Pray take some notice of the abominable production; it is bad enough to have the vile notices before one in every country newspaper, still worse to have such an infernal torpedo flung into an unsuspecting household.

I am, etc., M.D. LOND.

[The legislature alone can effectually reach these villanies. This is only one of many scores of a similar cast. EDITOR.]

NON-MERCURIAL TREATMENT.—SIR: In your issue of December 24, 1864, there is an account of three cases of syphilis, under the care of Mr. Dunn, at the Farringdon Dispensary, in which the non-mercurial plan of treatment is used. In Cases I and II, I find that an ointment containing nitric oxide of mercury is prescribed; and Case III had previously taken grey powder, and had used mercurial ointment. Might I venture to ask if such is strictly within the limits of the non-mercurial treatment?

I am, etc., ED. LLOYD HARRIES FOX, M.B. LOND.

Broughton, Hants, December 26th, 1864.

COMMUNICATIONS have been received from:—Dr. HENRY MARSHALL; Dr. HARRISON; Dr. DURRANT; Dr. BARCLAY; THE HONORARY SECRETARIES OF THE HARVEIAN SOCIETY; DEPUTY INSPECTOR-GENERAL; Mr. A. H. DOLMAN; Dr. W. H. O. SANKEY; Dr. B. W. RICHARDSON; Dr. TURNBULL; Mr. LUND; Mr. WILLIAM COPNEY; Mr. CURGENVEN; Mr. THURSFIELD; Dr. ALEXANDER FLEMING; Dr. G. JOHNSON; Dr. SKINNER; M.D.; Mr. RICHARD GRIFFIN; Mr. W. J. CLARKE, JUN.; and THE HON. SECRETARIES OF THE OBSTETRICAL SOCIETY OF LONDON.

### ADVERTISEMENTS.

## Salmon's Obstetric Binder, for

immediate use after delivery. 5s. each.  
SALMON'S ELASTIC ABDOMINAL BELTS, adapted for all cases requiring support, especially for Ladies' use before and after Accouchement, from 12s. to 42s.

Elastic Stockings, from 4s. to 16s. Knee-caps, Trusses, Suspensories, Railway Conveniences, Chest Expanders, etc.

Mrs. Salmon attends upon Ladies.

HENRY R. SALMON, 32, Wigmore Street, Cavendish Square, London, W. Private Door.

TO PHYSICIANS, SURGEONS, AND DRUGGISTS.

## Brown's Cantharidine Blistering

TISSUE, prepared from pure Cantharidine. An elegant preparation, vesicating in much less time than the Emp. Lyttæ P. L., easily applied and removed, and will not produce stranguary or troublesome after-sores. It has received the sanction and commendation of many of the most eminent practitioners in the kingdom.—In tin cases, containing ten feet, 6s. 6d.; and small cases of five square feet, 3s. 6d. each.

### BROWN'S TISSUE DRESSING.

An elegant, economical, and cleanly substitute for all ointments as a dressing for Blisters, Burns, etc., and may be called a companion to the above. In tin cases, containing twelve square feet, 1s. 6d. each.

Sole Inventor and Manufacturer, T. B. BROWN, Birmingham. Sold by all Wholesale and Retail Druggists and Medicine Agents throughout the British Empire.



## For Family Arms.

CULLETON'S HERALDIC OFFICE, the established authority for furnishing Family Arms, Crests, and Pedigrees. Send name and county. Arms quartered and impaled, plain sketch, 3s. 6d.; in heraldic colours, 6s. Arms, Crest, and Motto, with heraldic description, beautifully painted in

rich colours, 12s. Family Pedigrees traced from authentic records. By T. Culleton, Genealogist, 25, Cranbourn St. (corner of St. Martin's Lane.)

## Culleton's Heraldic Office, for Engraving

Arms on Stone, Steel, and Silver, according to the laws of Garter and Ulster King-at-Arms, by authority. Crest on Seals or Rings, 7s. 6d.; Book Plate engraved with Arms and Crest, 15s.; Crest Plate, 5s.—T. Culleton, engraver to the Queen, by authority (April 30, 1852), and Die-sinker to the Board of Trade, 25, Cranbourn Street (corner of St. Martin's Lane), W.C.

## Culleton's Solid Gold Signet Rings, 18-

carat, Hall marked engraved with any Crest, 42s.; ditto, very massive, for Arms, Crest, and Motto, £3 15s. The Hall Mark is the only guarantee for pure gold.—T. Culleton, Seal Engraver, 25, Cranbourn Street (corner of St. Martin's Lane).

## Culleton's Patent Lever Embossing Presses,

21s., for Stamping Paper with Crest, Arms, or Address. Any person can use them. Carriage paid.—T. Culleton, 25, Cranbourn Street (corner of St. Martin's Lane).

## Culleton's Visiting Cards. Fifty, best

quality, 1s., post free. Engraving a Copper Plate in any style, 1s.; Wedding Cards, 50 each for Lady and Gentleman, 50 Embossed Envelopes, with maiden name printed inside, all complete, 13s. 6d. Carriage paid. T. Culleton, 25, Cranbourn Street (corner of St. Martin's Lane.)

## Culleton's Guinea Box of Stationery. No

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