

remedial measure; and if the operation is now, as I trust it has been, freed from the chief danger attending its performance, facts sufficient for the purpose will probably ere long be accumulated.

Association Intelligence.

BRANCH MEETING TO BE HELD.

NAME OF BRANCH.	PLACE OF MEETING.	DATE.
NORTH WALFS. [Intermediate.]	Dr. Roberts's, Hafod Elwy, St. Asaph.	Friday, February 24, 1 P.M.

Reports of Societies.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

TUESDAY, JANUARY 10TH, 1865.

R. PARTRIDGE, Esq., F.R.S., President, in the Chair.

ON ECZEMA OF THE EYELIDS, CONJUNCTIVA, AND CORNEA.
BY FURNEAUX JORDAN, M.R.C.S., BIRMINGHAM.

[Communicated by E. H. STEVENS, M.D.]

MANY observers, and especially writers on diseases of the skin, have considered ophthalmia tarsi to be simply eczema of the lids. Dr. Mackenzie has pointed out that scrofulous, or as he terms it, phlyctenular ophthalmia, is frequently associated with eruptions on the skin. It is the object of this paper to show that not only ophthalmia tarsi is eczema of the lids, but that granular lids, a peculiar swelling of the sub-integumental connective tissue of the lids, lippitudo, strumous ophthalmia, certain forms of simple or catarrhal ophthalmia, keratitis and strumous keratitis, and certain ulcers on the cornea, are merely varieties of eczematous disease. Cases of extreme, firm, indolent, pale or pinkish swelling of the lids, occur occasionally, the only cause of which is eczema of the margins of the lids. The eczema may be very slight, or it may pass away quickly, and leave only the swelling behind. Unchecked eczema of the eyelids terminates in lippitudo just as persistent and progressive eczema of the cornea produces pannus. Both these conditions are analogous to the eczematously red, swollen, and moist condition of the skin which may persist for an indefinite period. Eczema of the conjunctiva presents many important features. The so-called strumous ophthalmia may be regarded as chronic eczema. The several stages of pimple, vesicle, ulcer, or thickened patch, admit of indisputable demonstration. In acute eczema of the conjunctiva, there is for a few days a uniform scarlet colour; then a crowd of vesicles, which soon pass away, and leave an irregular or patchy redness—each patch, however ill-defined, having a redder, thicker, and possibly ulcerated centre. These cases have a slight mucopurulent discharge, and are always tedious. If treated as eczema, they speedily recover. The so-called keratitis, or strumous keratitis, is eczema of the cornea. When vesicles, white patches (necessarily white because of the anatomical structure of the cornea), or ulcers occur on the cornea in conjunction with vesicles on the conjunctiva, the term scrofulous ophthalmia is commonly used. If the same pimples (necessarily flat), vesicles, patches, or ulcers occur on the cornea alone, especially near its centre, the term keratitis is applied, notwithstanding the symptoms are similar, and notwithstanding that there is usually, if it be carefully sought for, evidence of eczema of the

lids or face, or ears or scalp. The characters of eczema of the cornea are quite as typical as they are of eczema elsewhere. The several varieties of eczema of the cornea, conjunctiva, and lids are combined in a great variety of modes. They are much more frequently combined than not, and very frequently indeed associated with cutaneous eczema in its favourite localities. Eczema is often limited to sites as small as the cornea. The treatment should be directed to eczema. Its chief features are non-stimulating diet and alkaline medicines, with a little iron added in most cases. If the lids are affected, as also in pannus, lippitudo, and granular lids, a little of any of the "eczema ointments" may be used, with the customary attention to details; if there be much photophobia, a little morphia may be given in the morning.

ON THE SUBCUTANEOUS INJECTION OF QUININE FOR THE CURE OF AGUE AND OTHER MARSH FEVERS.

BY P. H. DESVIGNES, M.R.C.S.

[Communicated by JOHN BIRKETT, Esq., Hon. Sec.]

The author had had large opportunities of testing the value of this remedy in the intermittent fevers which were so common in the district of Tuscany called the "Maremma." The use of quinine and arsenic, in the usual manner, having repeatedly failed, he resolved to try the subcutaneous injection of solutions of quinine. The solution he employed was a grain and a half in fifteen drops of water, acidulated with a drop of dilute nitric acid. With this he successfully cured several hundred cases.

OBSTETRICAL SOCIETY OF LONDON.

WEDNESDAY, JANUARY 4TH, 1865.

HENRY OLDHAM, M.D., President, in the Chair.

Five gentlemen were elected Fellows.

Communications. Dr. PLAYFAIR read a case of Extra-Uterine Fœtation, on which Dr. PRIESTLEY made some remarks.

Mr. WILLS, through Dr. GRAILY HEWITT, described the Mode of Birth of a Double Monster, and exhibited a photograph of the same.

Dr. PARSONS exhibited a specimen of Pulmonary Embolism, of the tubular kind, after ovariectomy; and described the case.

Dr. RICHARDSON entered at considerable length into the question of these fibrous deposits.

Mr. NAPPER read a case of Amputation of Arm during early Pregnancy.

ANNUAL MEETING.

The business of the annual meeting then commenced. The report of the auditors of the accounts of the treasurer for the year ending December 31st, 1864, was read; from which, it appeared that the balance in the hands of the treasurer is £262:6:5, and that during the year a sum of £181:10 was invested in Consols, in the name of the trustees of the society, making a total now invested in Consols of £731:10. The balance-sheet showed that the society had received during the year the sum of £469:7, as subscriptions from the fellows, and £40:9:6 from the sale of *Transactions*.

Mr. MITCHELL, in proposing the adoption of the report, congratulated the society on its financial prosperity. Mr. NICHOLS having seconded the resolution, it was carried unanimously.

The SECRETARY having read the modifications of the laws rendered necessary by the opening of the library, Dr. MEADOWS proposed their adoption. This, being seconded by Dr. HALL DAVIS, was unanimously adopted.

It was then announced that arrangements were

THE MEDICAL ACT.

LETTER FROM J. G. PARSONS, M.D.

SIR,—Not being quite satisfied with any of the proposed emendations of the 40th clause of the Medical Act, I beg, after mature consideration, to propose the following.

On and after the day of , 1865, it shall not be lawful for any person to pretend to be a medical practitioner, or to take or use any name, title, or description, contained in Schedule E of this Act, unless holding one or more qualifications registered under this Act; and entitling him to the use of such name, title, or description; and every person so offending shall, upon summary conviction, for such offence forfeit or pay a sum of money not exceeding twenty pounds. Provided always that nothing contained in this section shall prevent the free use of any qualification entitling to registration under this Act, granted by any university, college, or body, in the United Kingdom.

SCHEDULE E.

1. Physician or Doctor.
2. Surgeon.
3. Apothecary or General Practitioner.
4. Medical or Surgical Practitioner.
5. Professor of Medicine or of Surgery.
6. Physician or Surgeon, in combination with other words.
7. Any qualification, or the initial letters of any qualification, contained in Schedule A of this Act.
8. Any description implying that he is registered under this Act.

OBSERVATIONS.

By throwing the prohibited titles into a schedule, the wording of the clause is rendered clear and concise.

It prohibits the use of any title, even by registered practitioners, which their qualifications do not confer.

It prevents unqualified persons from evading the law by such compound words as Surgeon-Dentist, Surgeon-Accoucheur, etc.

It does not interfere with the proper use of medical titles granted by any body in the *United Kingdom*, even though the holders should not be registered. If gentlemen omit to get their foreign qualifications registered, they must submit to the inconvenience.

I am, etc., JAMES GAGE PARSONS.

Bristol, February 6th, 1865.

DR. BROWN-SÉQUARD. During the last week, much interest has been excited in Dublin by the visit of Dr. Brown-Séquard to that city, and the performance of a very formidable operation under the advice of that gentleman. The operation—excision of a portion of one of the vertebræ in a case of partial dislocation of the spine from injury—was performed by Dr. Robert Macdonnell in Jervis Street Hospital. In view of the certainty of death as the only remaining alternative, it was determined to endeavour to relieve the symptoms of paralysis by operation. The vertebra, which was low down in the dorsal region, was, we believe, found to be twisted and compressing the chord, and portions of the laminae were removed. Up to the present time, we understand that a slight improvement in motive power, or in the incontinence of urine and feces, has resulted. On Friday, the 3rd instant, a lecture on the Pathology and Diagnosis of Diseases of the Nervous Centres was delivered by Dr. Brown-Séquard before the King and Queen's College of Physicians. (*Dublin Med. Press.*)

Medical News.

APOTHECARIES' HALL. On February 2nd, 1865, the following Licentiates were admitted:—

Hora, Tudor, Blomfield Street
Mahony, Arthur John, Charlwood Street West
Richardson, James Francis Hamilton, Down, Kent
Wilson, Moreton S. W., Mowsley, Leicestershire

At the same Court, the following passed the first examination:—

Crowe, George, University College Hospital
Willmott, Robert, Moseley, near Birmingham

APPOINTMENTS.

*BROADBENT, W. H., M.D., elected Assistant-Physician to St. Mary's Hospital.

*DAVIES, Redfern, Esq., elected Surgeon to the Free Surgical Cottage Hospital, Walsall.

ARMY.

MARLOW, Surgeon-Major B. W., M.D., 28th Foot, to be Staff-Surgeon-Major, *vice* J. H. Ross, M.B.

ROSS, Staff-Surgeon J. H., M.B., to be Surgeon 39th Foot, *vice* C. T. Abbott, M.D.

WILLIAMS, Staff-Surgeon T. R., M.B., to be Surgeon 28th Foot, *vice* B. W. Marlow, M.D.

ROYAL NAVY.

CUNNINGHAM, Chas. L., Esq., Assistant-Surgeon, to the *Liverpool*.

MEIKLEJOHN, John A. S., Esq., Surgeon, to the *Columbine*.

TRIMBLE, James, Esq., Assistant-Surgeon, to the *Britannia*.

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

JOB, S., Esq., to be Assistant-Surgeon 1st Administrative Battalion Nottinghamshire R.V.

MORISON, J. W., M.D., to be Assistant-Surgeon 5th Fife-shire A.V.

PRITCHARD, W., Esq., to be Surgeon 1st Administrative Battalion Nottinghamshire R.V.

ROGERS, R. J., Esq., to be Assistant-Surgeon 1st Sussex A.V.

WILLIAMS, T. M., Esq., to be Assistant-Surgeon 1st Administrative Battalion Nottinghamshire R.V.

DEATHS.

COLBOURNE, Robert, Esq., Surgeon, at Great Marlow, aged 66, on January 20.

CREED. On January 26th, at Greenwich, aged 3, Ada Mary, only surviving daughter of Thomas Creed, M.D.

DUCE, James, Esq., Surgeon, at Wednesbury, aged 28, on Jan. 27.

HANDYSIDE. On January 24th, at Clifton, Lætitia, widow of the late Robert Handyside, Esq., Surgeon R.N.

MAITLAND, James, M.D., Deputy Inspector-General of Hospitals, at Anglessea, Gorseport, aged 57, on January 23.

MASFEN, George B., Esq., Bengal Civil Service, at Gondah, Oude, aged 39, on December 6, 1864.

MULLAR. On January 20th, at Kilburn, Frances, wife of F. G. W. Mullar, M.D.

ORD. On January 22nd, at Streatham Hill, aged 32, Julia, wife of W. M. Ord, M.B.

WATSON, James, M.D., at Edinburgh, on January 23.

WHEELER. On January 27th, at Swindon, aged 34, Edward, second son of Daniel Wheeler, Esq., Surgeon, formerly of Reading.

WOLSTENHOLME. On February 4th, at Holywell, Ada Elizabeth, youngest daughter of *John H. Wolstenholme, Esq.

THE LATE MR. BELFOUR. The remains of this gentleman were interred on Saturday last in the cemetery of Hackney Old Church.

BEQUEST. By will John Arnold, of Great Barford, Bedfordshire, and of Aldersgate Street, druggist, leaves to the Bedford Infirmary, £100. His personalty was sworn under £60,000.

THE LATE DR. H. FALCONER. It is contemplated to erect a memorial of the late Dr. Hugh Falconer, in the form of a marble bust, in the rooms of one of the learned societies of which he was so great an ornament. The following gentlemen have undertaken to receive subscriptions for this purpose:—George Busk, Esq., F.R.S., 15, Harley Street; John Percy, M.D., F.R.S., Museum of Practical Geology, Jernyn Street; Colin Macrae, Esq., Oriental Club; and Charles Murchison, M.D., 79, Wimpole Street, W.

FEVER IN LIVERPOOL. A short time ago, the Government sent down to Liverpool Dr. Buchanan, as a medical commissioner, to report upon the cause and spread of fever in Liverpool. A summary of his report has been read before the Liverpool Select Vestry. The report is very minute and exhaustive. The conclusion arrived at by Dr. Buchanan is, that drinking and overcrowding are the principal causes of the fever which has so long afflicted Liverpool.

AN APPEAL. The following appeal has been made through the *Times* by the Rev. T. L. Fellowes, of Brighton Rectory, Acle, Norwich. "The appeal was made on behalf of the children of the late Dr. Andrews, the rector of Portwick, in Norfolk. He was originally a physician, but he had subsequently a strong desire to engage in the work of the ministry, and was ordained by the Bishop of Cape Town, Dr. Gray, in 1848. He remained a missionary in Africa for ten years before he returned to England, six years ago. He had been four years curate of Portwick at the death of his rector in 1863, and the Earl of Rosebery, with whom he had no acquaintance, generously presented him to the living in consequence of the esteem entertained for him by his parishioners. He had held his preferment but a single year when he died, in 1864, aged 55, leaving seven orphan children with no inheritance whatever, and no relations who are capable of assisting them. They had the calamity some years ago to lose their mother. The good fortune of Dr. Andrews was so brief that it only afforded him time to incur the expenses of his new situation without reaping its advantages. His previous salary had never exceeded £100 a year, to which was added such precarious earnings as he could derive from taking pupils. His eldest son is at the Cape, and can obtain his own livelihood. His two eldest daughters, aged 22 and 18, will trust, in like manner, to their own exertions. There remain three boys, aged 15, 14, and 13, and one girl, aged eight. A sum of £450 has been raised already, mainly through the agency of the press, and I venture once more to ask your indulgence to assist us in procuring the £1,050 which is still required."

DR. HUGH FALCONER. On the 31st ult., there died in London a man of science who was little known to the public, but who had made a great reputation for himself in the various scientific societies of London. He died at the age of 55, and twenty of the most active of these years were spent in India in the service of the East India Company. It is this absence from England that has chiefly retarded his public reputation. During the few years in which he has been at home he quickly became known as the possessor of one of the most scientific intellects in England. His chief field of study was palæontology, but he was also favourably known as a student of botany, and indeed generally of natural history. His scientific memory was prodigious, and he had such stores of knowledge at command that men of science in London are just now speaking of his loss as if with him had perished a great treasure of information which is not likely to be soon amassed again. From this enormous knowledge of his great things were expected; but he was cautious to a fault; never liked to commit himself to an opinion until he was perfectly sure of it; and he has died in the fulness of his power, before his race was run. He was born at Forbes, in the north of Scotland; he studied successively at the Universities of Aberdeen and Edinburgh; and went out to India in 1830. His two official appointments there, in which he became best known, were those of superintendent of the Botanic Gardens at Suharunpore in succession to Dr. Royle, and afterwards of those at Calcutta. It was to information

supplied by him that we owe the cultivation of tea in the district of Assam. It was through his exertions, also, that the cinchona plant has been introduced into India. The South American supply of quinine threatened failure through bad management. He suggested the cultivation of the plant in India, and the result has been completely successful. But beyond this he made great discoveries of fossils in India, and the result of his researches, arranged by himself, is a splendid gallery of specimens in the British Museum, the like of which is not to be found in any other collection in the world. He has been one of the chief instigators and directors of the inquiries which have recently been raised as to the antiquity of man. Many of the facts bearing on the question, such as those connected with flint implements, have been discovered either by him or by friends whom he urged to this or that course of investigation. About ten years ago he returned from India with shattered health, and he has died before his time. All those who had any knowledge of him will deeply feel his loss.

SANITARY CONDITION OF WOOLWICH. At a meeting of the local Board of Health, held on the 24th ult., at Woolwich, a letter was read from Dr. Simon, F.R.S., requesting to be informed what steps had been taken by the Board to carry out the recommendations of Dr. Bristowe, who had been specially employed by the Privy Council to make an inspection of the town with reference to the frightful epidemic which recently prevailed. Dr. Bristowe, in his report, strongly recommended the advisability of connecting the sewage system of the district with the tall shaft at the steam factory department of the Dockyard, as the best available means of getting rid of the noxious gases and effluvia which escaped from the ordinary sewer traps; and it was now stated that the local board had applied to the Admiralty for permission to carry out the plan proposed, but that some objections had been made, which it was believed could be obviated, and the subject was still under the consideration of the Board of Admiralty. A reply to this effect was ordered to be forwarded to the Privy Council.

TESTIMONIAL TO DR. ANDERSON AND MR. BRACEY. Dr. Anderson having resigned his situation as resident medical officer of the Birmingham General Hospital; and Mr. C. J. Bracey, who has filled the situation of house-surgeon at the same institution for the last three years, having also vacated his office, the students of the Sydenham College and the General Hospital availed themselves of the opportunity of expressing their obligations to those gentlemen by presenting them with testimonials on the occasion of the separation of the connection that had existed between them. Accordingly about thirty of the students assembled at Nock's Hotel, Monday evening last, when both gentlemen were present. After tea had been served, Mr. Hickenbotham, a late student of the college and hospital, was called to the chair, and briefly mentioned the object for which they were assembled. Mr. W. N. Hiron, one of the hospital pupils, then presented to Dr. Anderson a handsome marble timepiece, which had been purchased by the pupils as a testimonial of the respect and esteem in which that gentleman was held by them. The timepiece bore the following inscription:—"Presented to Dr. Anderson, by the students of the Birmingham General Hospital, upon his resignation of the office of House-Physician to that Institution. January 23rd, 1865." One of the hospital pupils referred to the distinction Dr. Anderson had attained in the University of Edinburgh where he had enjoyed for a considerable period the advantage of the prac-

tical instruction of Mr. Syme, and to the fact that he had studied under the personal superintendence of Professor Virchow at Berlin. Mr. Hiron said that the regret the students would experience from Dr. Anderson's departure at any period was increased by the comparatively short time they had been permitted to enjoy his society, and more especially by the fact that Dr. Anderson was going to leave Birmingham entirely, to practise in another part of the country (Burton-on-Trent), so that really the separation was more complete than they at first anticipated; he assured Dr. Anderson that they deeply appreciated his very kind attention to their studies, and that he carried with him their most earnest good wishes for his future success. In expressing his acknowledgments, Dr. Anderson assured them that he should always look back with pleasure to the time he had spent amongst them. He was aware of his shortcomings, for which he had always experienced their kind indulgence, and for which he most heartily thanked them. With regard to his late colleague, Mr. Bracey, he could assure them that whatever amount of order had prevailed in the hospital was mainly due to that gentleman, who had been a warm and zealous friend, and in the highest sense of the word had proved himself an amiable and honourable gentleman. In conclusion he thanked them most heartily for their present, and bade them a kind, hearty, friendly, and a most reluctant farewell. Mr. Read, a student of Sydenham College, then presented Mr. Charles J. Bracey with a marble timepiece and a pair of side ornaments, tazzas. This timepiece bore the following inscription:—"Presented to Charles James Bracey, M.B., by the students of the Birmingham General Hospital, upon his resignation of the office of House-Surgeon to that Institution. January 23rd, 1865." Mr. C. J. Bracey, in replying, said that his connection with the General Hospital and Sydenham College had been one of very long duration; it had been his pleasure—as he had felt it was his duty—to direct their attention to the principal cases under treatment, and he said that if he had been able to facilitate their comprehension of disease he was amply repaid; he thanked them for their very kind and handsome present. A vote of thanks was afterwards passed to the chairman, on the motion of Mr. Alfred Bracey, and the remainder of the evening was spent in a very harmonious manner.

ACTION FOR THE RECOVERY OF FEES. TAMPLIN v. COSENS AND ANOTHER. This was an action against the executors of a gentleman of the bar to recover the fees in respect of attendance upon his daughter. The young lady had laboured under double lateral curvature of the spine; and in November 1861, her father took her to the plaintiff, and placed her under his care. Mr. Cosens paid him the usual fee of a guinea, and nothing was then or at any time said as to fees. The plaintiff, however, intimated that his process of cure would probably take a considerable time—at least six months, if not longer. This was in November 1861; and he continued to attend the lady until July 1863, when her father died, and the claim in the present action, of course, could not extend beyond that date; though, in point of fact, the plaintiff continued to attend her, and in the result succeeded in effecting a cure, so that she had perfectly recovered, and, indeed, had since married. The total number of visits came to 218, for which he charged at the rate of one guinea for each visit; and thus the amount of his claim, up to the father's death, came to the sum of £228:14. The executors, however, conceived that the deceased gentleman, whose income, it appeared, was limited, could not have intended to pay so much; and they, therefore,

only acknowledged the claim to the amount of £129:13. Surgeons were called for the plaintiff, and stated that one guinea a visit was the usual rate of charge; and he himself positively stated that he never charged less, although, in cases of poverty, he would sometimes, out of charity, remit his fees, and charge only for alternate visits. And although he was pressed as to whether it was usual to let the fees run on so long, he stated that it was not usual to ask for the fees so long as the case continued. The Solicitor-General said he did not think that, after this evidence, it would be becoming in him to keep the case up longer. The Lord Chief Justice said he quite concurred in that course. The case started with the payment of a fee of a guinea, and nothing had been said as to a reduction or abatement. In such a case, the medical attendant being a gentleman of high eminence, it could not be doubted that the charge was as stated, and if there were any reason, on account of the length of the case and the circumstances of the patient to ask some abatement, it was for the patient or the relatives to request it, and throw themselves upon the liberality of the medical man. A verdict was then taken for the plaintiff for £99.

VIRCHOW AND THE CELLULAR PATHOLOGY. A correspondent from Berlin writes:—"Perhaps the most important thing I have to tell you is as to a recent change in Virchow's opinion regarding the cell theory. This change has been caused by the discoveries of Recklinghausen (Virchow's *Archives*, about a year ago) in the cornea. He has shown that the corneal cells have not special cell-walls, but are merely spaces between masses of intercellular substances. The nuclei in the angles he therefore considers free; and he says that many of them can move along the canaliculi from one angle to another. Moreover, he says that the interior of these canals is continuous with that of the lymphatics; you can inject the lymphatics from them; so that, according to him, the origin of the lymphatics is to be found in the canaliculi of the so-called connective-tissue corpuscles. Then he says that the corpuscles of tendon and connective tissue are merely spaces with contained nuclei—a view which, of course, is not new to an Edinburgh man. Virchow admits all this; he admits that the corneal corpuscles are not cells. He seems rather reluctant to admit that those of tendon and connective tissue are the same, but he does not deny it; and he told me personally that he now did not regard a cell-wall as an "essential part of the cell," as stated in *Cellular Pathology*; but that a nucleus surrounded by a molecular blastema was sufficient to constitute a cell: then he says that the outer part of this cell-blastema consolidates and forms a cell-wall, as Beale has shown; and that this takes place in the amoeba when placed in fresh water. This, of course, is a great triumph for Goodsir, who long ago was cautious enough not to say that the cell-wall is always present. (*Edin. Med. Jour.*)

MEETING OF MEDICAL PRACTITIONERS IN THE EAST OF LONDON. In pursuance of a requisition, a meeting of medical practitioners was held at the Beaumont Institution on Thursday, the 2nd instant, for the purpose of considering the subjects of medical evidence at coroners' inquests and the appointment of medical coroners, and the necessity of establishing a fund for defraying the expenses of legal assistance in defending proceedings arising out of the profession.—Dr. Rosé, of Mile End, was called to the chair.—After some preliminary discussion, a resolution was proposed, to the effect of condemning the present mode of taking medical evidence at inquests followed by the coroner for East Middlesex. The Chairman and several other gentlemen supported the

resolution, and complained that the coroner was in the habit of putting leading questions to witnesses in such a way as to prejudice the medical practitioners. It was also averred that he was supported in this by three well known members of the profession—Dr. James Edmunds, Mr. Gant, and Mr. Gay.—Dr. Edmunds denied the accuracy of the statement which had been made in respect to himself. He had certainly been referred to as an independent witness by the coroner in several important cases; but he challenged any one to mention a single instance where he had allowed his professional character or the just interests of his professional brother to suffer.—After a somewhat stormy discussion, Dr. Edmunds proposed the following amendment: “That any medical practitioner who may be instructed to make a *post mortem* examination in a case where another practitioner has attended at the time of death shall always do the best he can to give such practitioner an opportunity of being present.” This was carried unanimously. Allusion having been made to a case in which Dr. Edmunds was said to have disregarded the principle laid down in his amendment, he explained that the deceased person had not been attended before death by the practitioners mentioned; but only for a short time by a homœopath, to whom he would not feel bound to extend professional courtesies. He did not think that gentlemen who had not seen the case during life, and who had made a *post mortem* examination without a coroner’s order, had any right to expect a second examination to be deferred until they had been communicated with. He was willing, however, to forego his own personal opinion if the meeting should so decide. A resolution was next proposed for the purpose of establishing an East End Defence Fund, to provide standing counsel and a solicitor to watch over the interests of practitioners. This was warmly supported by the previous speakers.—Dr. Edmunds thought that a resolution of this sort should not be set forth without due consideration by a meeting purporting to represent a large section of the metropolitan profession. He questioned the policy both of the object itself and of the local and practical mode in which the meeting would be able to carry it out. His arguments against the existence of the fund itself are, curiously enough, almost precisely anticipated in last week’s JOURNAL; and with respect to the mode of carrying it out, he showed that if such a fund were formed by the meeting, it would only assist and be assisted by a small section of the profession, and that the cost of organising it and investing the funds would be very considerable in proportion. He communicated to the meeting the organisation of the British Medical Association, consisting of nearly 3000 members in all ranks of the profession and all parts of the empire, who were placed in weekly communication by their JOURNAL, which was sent post-free for one guinea annually, while the membership of the local Branches cost only half-a-crown. He suggested that, if the meeting determined to establish a defence fund, it should put itself into communication with the Association, and affiliate itself thereto. Dr. Edmunds thought that a Medico-Ethical Association was what was really wanted. If such an association existed, the misunderstandings which arise between practitioners and patients would be adjusted according to the general voice of the profession; and any one who should afterwards revive them would be discountenanced by his professional brethren. For the purpose of taking the sense of the meeting upon these points, he moved the following amendment: “That a committee be appointed to consider these subjects and report thereon.—The amendment was carried unanimously; and Dr. Miller,

Dr. Rose, Mr. Thompson, Dr. D’Olier, Mr. Stevenson, Mr. Reilly, Dr. Swyer, Dr. Edmunds, and another gentleman, were appointed members of the committee. The meeting, notwithstanding that there had been a good deal of warm discussion, broke up in harmony.

ARTIFICIAL LIMBS. The present sanguinary war has proved a powerful stimulus to inventive talent; and in nothing more than that of artificial substitutes for mutilated limbs. We have noticed from year to year the gradual improvements introduced into this department of surgical appliance; and, while most of them are far superior to either French or English productions, yet one could not but feel there remained great room for more simplicity in the mechanism. We have recently witnessed the working properties of the artificial limbs of Messrs. Kimball and Lawrence. They are constructed from a material (vulcanised rubber) which is comparatively unaffected by either heat or cold. In the arm, the contrivance for communicating the required movements is exceedingly simple, durable, and effective, admitting of such a variety, freedom, and facility of motion, as to wonderfully approximate the functions of the natural extremity. A party present, who was wearing one of these limbs, played, with no small degree of skill, on the violin; tossed up his handkerchief, catching it as it fell; and exhibiting several other equally difficult feats. In the lower limb, there is the same simplicity observed in its construction. The articulation at the knee is at once original and ingenious, combining the properties of precise movement with durability in so eminent a degree that it would appear impossible for it to become disarranged. (*Phil. Med. and Surg. Rep.*)

SMALL-POX. Dr. Corrigan, on the 23rd ult., delivered a lecture at the Richmond Hospital, in which he made some statements with reference to the present prevalence of small-pox in Dublin. “I do not, in my whole hospital experience, remember that this terrible disease (small-pox) at any time prevailed to the extent which it does at present, for about one-fourth of our whole hospital accommodation in the Hardwicke Fever Hospital is occupied by cases of small-pox. We have at present in the hospital thirteen or fourteen cases. I perceive by the week’s register that three deaths from small-pox have occurred within the city within the week—exactly the same number of deaths that occurred from fever. But this number of deaths gives us no indication whatever of the extent of the disease, and this is one of the defects in the Registry of Deaths Act, which I hope will be amended. When this Act was passing through the Houses of Parliament, the College of Physicians drew attention to this defect in the Act—a defect existing in England as well as here—namely, that the death register gives no idea whatever of the sanitary state of a country or a district. In the common fever of the country it is different. If there be ten deaths from fever, we may, without committing any error, infer that there are 100 cases of fever at the time, because the mortality in the ordinary fever is generally ten per cent. But in the disease before us there may be for three deaths 500 cases of small-pox. The evil we have now to dread, the spread of small-pox both in England and Ireland, is like a fire that is smouldering beneath us. Now, I don’t wish to be an alarmist, but at the same time I should be wanting in my duty to the public, and to my position here, if I were not to look fairly in the face the fact that the disease is now spreading around us. It is, in my opinion, an epidemic far more to be dreaded than cholera. Its mortality is nearly as great. The mortality of small-pox is about 30 per cent.; the mortality of cholera is

about 40 per cent. The mortality in cholera terminates the whole mischief; those who recover, recover perfectly; those who die are gone. But in small-pox it is not so; the blood is poisoned, scrofula is generated, consumption follows, and an amazing number of cases of blindness are the result in small-pox of the pustule settling on the eyes; and last, though not least, is the disfigurement produced by it. So that, as regards the epidemic, small-pox is more to be dreaded even than the epidemic of cholera. The poor-law authorities are doing all in their power to meet it. They are doing all they can under the present Vaccination Act for Ireland, but the Vaccination Act is by no means sufficient to meet the evil."

POISONING FROM DIGITALIS. At Quebec three gentlemen, Messrs. Murney, Rankin, and Scott, lately at the drug store of Messrs. Sturton and Co., ordered a stimulating drink. Mr. Sturton, who is reputed one of the best chemists in the province, was absent; but his son made up the potions as ordered. Unfortunately, he mistook one bottle for another, and gave his patients a draught of digitalis instead of gentian. The party had no sooner left the store than the effect of the poison began to manifest itself. Each of them complained, on leaving the store, that their fingers and the extremities of their toes were affected alike; that a burning sensation, as if pierced by needles, was troubling them, but did not suspect for a moment that they had been poisoned. Although the distance from Mr. Sturton's to Russell's Hotel is scarcely one hundred yards, yet the deadly draught had such an effect that Mr. Murney fell twice from exhaustion, and immediately after entering the hotel his companion, Mr. Rankin, fell senseless on the table in the reading-room. They were immediately conveyed to their respective rooms and medical aid called in. Dr. Marsden and other physicians were in immediate attendance, and the stomach-pump with a free application of antidotes were used, yet they were found of no avail. Mr. Murney, after suffering for an hour and a half, expired, while his friends, Mr. Rankin and Mr. Scott, lay in a very low condition, their medical attendant, Dr. Marsden, remaining with them all night. Mr. Scott and Mr. Rankin are now out of danger. The coroner's inquest has resulted in a verdict of "Manslaughter" against Mr. Sturton, jun. (*Quebec Daily News*.)

NON-COMBATANT (?) SURGEONS. The medical staff is making for itself an imperishable record by its intelligence, endurance, and patriotism. Instances are not wanting where medical men have entirely laid aside their profession, and taken up that of active combatants. Thus the surgeon stationed at Fort Sumter, at the outbreak of the war, is now a brigadier-general in active service, and has been a prisoner in the hands of the enemy. A prominent physician of West Virginia was recently killed in an engagement in the Shenandoah Valley campaign, while acting as commanding officer of a regiment. We have heard of instances in severe battles, where the loss of officers has been great, of medical officers taking their place and leading troops in the charge. Some have lost their lives, and others have been wounded while attending to their duties in collecting and caring for the wounded on the battle-field. The duty often devolves upon us to record the fact that surgeons have been killed or wounded in battle. Another way in which surgeons have shown their heroism and earnest and patriotic devotion to duty has been by remaining with the wounded on the battle-field when the fortunes of the battle have been against their friends. A marked instance of this kind of heroism on the part of our surgeons occurred during the Seven Days' Battles before Richmond in 1862, when Dr.

Swinburne of New York, and a number of other surgeons, remained with the large field-hospital of wounded troops at Savage's Station after it had fallen within the enemy's lines, and were taken prisoners. Bravery on the part of army and navy surgeons, whether in or out of the line of strict duty, is the more commendable, as it has not the stimulus of hope of advancement. There is not a private in the army who may not by personal courage win for himself some substantial acknowledgment of appreciation from the government. Not so the surgeon. No matter what heroism he displays, his status is fixed; his promotion is not influenced thereby. It is right that it should be so, perhaps, as his office is not one in which personal bravery on the battle-field is expected, or even proper. His reward must consist in the consciousness of duty well performed; and his hope for promotion must be founded on a faithful, intelligent, and conscientious discharge of that duty. (*Phil. Med. and Surg. Rep.*)

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 Orthopaedic, 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.

MONDAY. Royal College of Surgeons of England, 4 P.M. Professor Huxley, "On the Structure and Classification of the Mammalia."
TUESDAY. Royal Medical and Chirurgical Society. 8 P.M., Ballot. 8.30 P.M., Dr. Morell Mackenzie, "On Inhalation of Atomised Liquids in Chronic Disease of the Lungs"; Mr. J. W. Hulke, "Ichthyosis of the Tongue"; Dr. Hillier, "On Congenital Hydronephrosis."—Anthropological Society of London, 8 P.M.
WEDNESDAY. Royal College of Surgeons of England, 4 P.M. Professor Huxley, "On the Structure and Classification of the Mammalia."—Medical Society of London, 8.30 P.M. Mr. Henry Smith, Lettsomian Lectures on the Surgery of the Rectum. Lecture II, "On Stricture, Cancer, and Polypus of the Rectum."
THURSDAY. Harveian Society of London, 8 P.M. Mr. J. Z. Lawrence, "On Certain Functional Diseases of the Retina"; and discussion continued on Dr. Drysdale's paper on Phthisis.
FRIDAY. Royal College of Surgeons of England, 4 P.M. Professor Huxley, "On the Structure and Classification of the Mammalia."

COMMUNICATIONS have been received from.—Mr. FURNEAUX JORDAN; Mr. R. W. COE; Dr. DURRANT; Mr. STONE; Dr. JOHN THOMPSON; Mr. J. W. IRVINE; Mr. W. J. TUBBS; Mr. HEDFERN DAVIES; Dr. J. G. PARSONS; Mr. WM. PARKER; Mr. D. KENT JONES; Dr. MAYO; Dr. BRUSH; Mr. THOMAS MARTIN; Dr. JAMES RUSSELL; Mr. A. B. STEELE; Dr. H. D. SCHOLFIELD; Mr. HENRY LEE; Dr. CARR; Dr. J. Y. SIMPSON; THE HON. SECRETARIES OF THE ROYAL MEDICAL AND CHIRURGICAL SOCIETY; Dr. GEORGE JOHNSON; Mr. J. W. BLACK; Dr. THORBURN; THE HONORARY SECRETARY OF THE HARVEIAN SOCIETY; Dr. WATERS; Mr. JOHN H. WOLSTENHOLME; Dr. BEIGEL; Mr. J. GLOVER; Mr. AUGUSTIN PRICHARD; Dr. W. H. COLBOURNE; Dr. W. MARSHALL; COLONEL WALMSLEY; and THE SECRETARY OF THE ROYAL COLLEGE OF SURGEONS OF EDINBURGH.

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.

THE FOURTH NUMBER OF THE OPHTHALMIC REVIEW contains the conclusion of a Clinical Lecture on Cataract, by Von Gräfe; a translation of a paper of Liebreich's on Pigment in the Optic Disk; a Case of Encephaloid Cancer of the Lacrymal Gland, by Dr. Mackenzie; and cases in practice, by Mr. R. B. Carter; a Retrospect, by Mr. Windsor; and a Review of the remarkable work by Professor Donders, which has been lately translated for the New Sydenham Society, by Dr. Moore.

PRYCE v. BOWEN.—SIR: You will oblige me by stating that the following subscriptions have been added to the Bowen Fund, which is now closed.

I am, etc.,

H. D. SCHOLFIELD, M.D., Treasurer.
14, Hamilton Square, Birkenhead, February 7th, 1865.

Dr. Garstang (Blackburn), 10s. 6d.; Joseph Toynbee, Esq. (London), £1:1; Wm. Adams, Esq. (London), £1:1; John L. Jardine, Esq. (Capel Dorking), 10s. 6d.; Preston (per Dr. Hammond), £9:7:6; Messrs. Roberts and Williams (Festiniog, North Wales), £1:1; Liverpool (per Dr. Stookes), £53:12; Dr. Dyster (Tenby), 2s.

PRACTICE v. MATHEMATICAL THEORY AND TEACHING.—SIR: Will you oblige me with space in your columns, and a reply to the following question—Whether the crystalline lens is a useful part for vision? as instanced after the extraction of the lens in cataract; because a mathematical professor disbelieves the fact of vision without a lens.

I am, etc.,

WILLIAM PARKER, M.R.C.S., L.A.C.

27, Daniel Street, Bath, February 6th, 1865.

GENUINE GRATUITOUS CHARITY.—SIR: Imagine an old lady leaving £500 to the Royal Medical Benevolent College, on the strength of some such letter as the following.

I am, etc.,

MEMBER BRITISH MEDICAL ASSOCIATION.

"To the Editor of —."

"Sir,—The amount of active benevolence displayed by the inobtrusive medical practitioner, deserves to be more generally known to the public. By the report of the Royal Free Hospital, in the *Times* of February 9th, 1865, we read that 78,378 poor people were attended at that institution during the past year. As there are eleven medical officers connected with the Royal Free Hospital, it follows that each medical officer treated 7,125 patients. We all know with what aptitude and celerity a medical or surgical diagnosis or operation can be performed by those who are so accustomed to practise; but allowing three minutes to each patient for diagnosis, operation, interval between each case, the going to and from the hospital, etc., and say each patient's case is settled, put an end to or terminated in some way in six interviews, we have eighteen times 7,125 minutes devoted to the hospital by each medical officer in the year, or about seven hours for every day in the year, excepting Sunday, with one week for an autumn trip up the Rhine.

"Seven hours a day—say from 8 A.M. to 3 in the afternoon—there is thus to be seen the sight of eleven gentlemen all busily working in the consultation-room of this one hospital alone, for the benefit of the poor and needy.

"Yours, etc.,

"CANDLE AND BUSHEL."

BOOKS RECEIVED.

1. On Food as a Means of Prevention of Disease. By E. Wilson, F.R.S. London: 1865.
2. The Irrationale of Speech, by a Minute Philosopher. London: 1864.
3. Clinical Observations on Diseases of the Stomach. By B. W. Foster. 1. Gastric Ulcer. Birmingham: 1864.

ADVERTISEMENTS.

Christmas Accounts.—Merritt

and HATCHER will send post free, on receipt of two stamps, a variety of samples and prices of MEDICAL BILL FORMS, by which a great saving of time in making out accounts is effected. MERRITT and HATCHER, Printers, Engravers, and Lithographers, 2, Grocers' Hall Court, Poultry, London, E.C.

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- 995.—Nucleus in Warwickshire. Premium £100.
- 996.—Partnership, with Succession, near Liverpool. Income £300.
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- 1013.—West-end Partnership, with Succession. Income £600. Premium £1,000.
- 1017.—In a fashionable watering-place. Income £1,000. Open surgery. One year's purchase required.
- 1021.—Nucleus in Durham Good house. Income £250. Appointments £36. Premium £75.
- 1023.—In Cambridgeshire, a small Country Practice, capable of immediate extension. Returns £200. Premium £100.
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- 1030.—Unopposed Practice in a beautiful part of Northumberland. Excellent house. Income £250. Terms exceedingly favourable to an immediate purchaser.
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- 1057.—Partnership, with a view to Succession, on the borders of Wales. Holder seriously ill. Terms highly favourable to purchaser.

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