

80 mm. mercury pressure, heart recovering. Both vagi stimulated, heart permanently arrested.

Tracing 6.—(Process of vagus exhaustion during induction with chloroform alone.) Dog, weight 24 lb. Blood-pressure record. Chloroform administered on a cloth. Period of administration indicated between vertical lines. Natural respiration. Dog was supported off the table to prevent kinking of manometer connections by the struggling. Struggling ensued upon the sudden short falls of blood pressure. Chloroform administration was stopped while corneal reflex was still present.

Tracing 7.—(Vagus inhibition in non-morphinized dog, including the induction period.) Weight 15 lb. Blood-pressure and respiration tracing. Chloroform administered on a towel from "started" till cessation of respiration. Much struggling with intermittent heart beats in early part of induction. Respiration continued 15 sec. after the heart was arrested.

(To be continued.)

## MEMORANDA:

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

#### URTICARIA ACUTA.

At this season the young stalks of the rhubarb plant are in very general use for tarts and other dishes. It is common knowledge that the ingestion of large or even moderate quantities of this vegetable in susceptible persons will give rise to severe attacks of intestinal colic; but I am not aware that any skin rashes have been described as due to this form of toxæmia. Two cases of urticaria acuta in children have recently been under my observation, which certainly point in that direction. In both the type was severe and lasted three or four days. The convex elevations, with their pink areolæ, were scattered all over the body, but chiefly on the limbs. The irritation caused by the rash was intense. Both the children had marked facial erythema, with a decided rise of temperature on the third day, and in each the distressing symptoms were promptly relieved by a full dose of castor oil, after other more elegant but less efficient aperients had failed to sweep away the irritant from the alimentary canal. Careful inquiries into previous errors of diet and other known causes of indirect irritation met with a negative reply; but it has been since ascertained that the nurse in each instance has admitted giving the children some stewed rhubarb on the day previous to the attacks. An examination of the urine for albumen was made in both the cases without result, but not for any excess of oxalates, which would be suggested on another occasion.

FREDERICK S. PALMER, M.D., M.R.C.P.

London, W.C.

#### KAFFIR THERAPEUTICS.

On reading in the *BRITISH MEDICAL JOURNAL* of November 23rd, 1901, page 1529, Dr. W. A. Densham's letter on "Kaffir Treatment of Gunshot Wounds," I thought a few notes I have made on native treatment of disease might prove interesting. The observations extend over five years' residence in Rhodesia, and for the greater part of the time in close relationship with native life.

CASE I. *Pneumonia*.—The witch doctor treated this by making incisions on the outer sides of the calves, and inserting the tips of cows' horns, about 2 inches long; there were three stuck in each leg. The patient died from blood poisoning.

CASE II. *Wound of Palm*.—I saw this, caused by a native axe, about ten days after the injury. The hand had been dressed by a Mashona with a plug of cowdung. The hand was swollen, and pitted on pressure; and, on removing the cowdung plug, the blood squirted out in jets, showing that most probably the palmar arch had been injured. I replugged with boracic lint, gave chloroform, and then enlarged the wound, endeavouring to find the wounded artery; I was unable to do so, and therefore tied the brachial. I cleaned the wound of the hand thoroughly, dressed it antiseptically, and the patient recovered rapidly, with a perfectly useful hand.

CASE III. *Droopy of Legs and Feet*.—Here incisions were made in both legs, and goats' horns inserted, having had the tips sawn off; these seemed to act fairly well as drainage.

Cowdung is also used for "smearing out" (applied like paint) the mud floors and walls of huts. This is done weekly and is very beneficial, as it destroys the fleas and other pests that much abound.

A bracelet or anklet made from the hair of a cow's tail is an infallible Mashona remedy for rheumatism. The operculum

of a shell to be found only on the Zambesi is worn by those natives who can afford them as a charm against disease and death. It is almost impossible to buy these charms. I offered a Shuna a sovereign for one the other day, and gradually increased the offer to two pounds, but it was ineffectual. I ascertained the history, and though the native had inherited it from his father who had died, the confidence of the son in its virtues was not lessened.

The Dutch settlers in Rhodesia are not much more advanced in medical knowledge than their Mashona brethren, inasmuch as they give a decoction of goat's dung in water as an internal remedy in any abdominal complaint from stomachache to peritonitis. Also in convulsions they give children blood from a dog's ear; this is caught fresh in a spoon, and the unfortunate youngster has to drink it, willy-nilly. For bronchitis, pneumonia, and kindred complaints they kill and skin a goat, often in the bedroom of the patient, and clap the hot skin on the inflamed part; this is left on about half an hour, and the hair or wool on the skin is pulled; if this comes off easily another unfortunate animal is killed and the fresh skin applied, and so on until the hair remains firm on the skin after it has been applied to the sick person. Fresh cowdung is universally used amongst the Dutch as a poultice to "draw" an abscess.

These are absolute facts.

A. DUNLEY OWEN, M.R.C.S. Eng., L.R.C.P. Lond.,  
Clerk in Holy Orders.

Wreningham Mission Station, Enkeldoorn, Rhodesia, S. Africa.

#### TORTUOSITY OF INTERNAL CAROTID ARTERIES.

SEVERAL papers have appeared in the *BRITISH MEDICAL JOURNAL* of late describing the above condition. I may state that tortuosity of these vessels is of not infrequent occurrence in the subjects examined in the anatomy department of Glasgow University. We find, as Dr. Moorhead has stated, that a condition of atheroma or arterio-sclerosis of the vessel wall is very frequently present.

S. CAMERON,  
Junior Demonstrator of Anatomy, Glasgow University.

MIXED SCARLET FEVER AND MEASLES INFECTION.—INSTANCES of mixed infection—scarlet fever and measles—perhaps sufficiently rare to make the record of the following cases interesting.

Mrs. B. has three children; a girl, M., aged 8 years, and two boys, A. and J., aged 6 and 4 years respectively. The girl and the elder boy are at school, while the younger boy is at home.

On January 18th, 1902, the two elder children became suddenly sick and vomited, and, according to their mother, were "feverish" then and on the 19th, when the girl complained of sore throat. Mrs. B. then examined her daughter's skin, and found a slight rash on the chest and back. On the 20th the boy A. appeared all right, and was sent back to school; but, as the girl was no better, I was called in. On examining M. I found her temperature to be 102° F. She had a typical sore throat and tongue; her skin was dry, and covered on the chest, abdomen, back, and limbs, with a well-marked scarlet fever rash. I had no doubt in my mind as to the diagnosis, and at once reported the case as scarlet fever, and ordered the brother A. to be brought back from school, and kept under observation. My next visit was paid on January 22nd, when I found the lad A. to be suffering from a typical attack of measles, the measles rash having first shown itself on the 21st. I was also surprised to find the girl M. had now all the symptoms of measles (her measles rash also appeared on the 21st) in addition to those of scarlet fever. Her attack of measles was quite as typical as her scarlet fever, the measles rash on the face being unmistakable, as were also the cough, coryza, etc. On the body the two rashes were commingled, so that the measles papules were there somewhat lighter in colour than usual, and tended to be confluent in patches.

The younger boy, J., had slept with his sister on the nights of January 18th and 19th, and thus constituted himself an involuntary control experiment. Accordingly, as I was prepared to find, he became suddenly ill on January 23rd, and when I saw him on the 24th he had all the symptoms of scarlet fever, including a very definite rash. It only remained for him to develop a measles rash on February 1st to make my case complete. This he did in due time. His attack of,

measles was as typical as his scarlet fever. Both cases, M. and J., desquamated freely, and are still doing so. With regard to the elder boy, A., I am not certain as to whether he has had scarlet fever or not, as neither rash nor sore throat were seen by his mother, and I did not see him till five days after his illness began, and he then had measles. I think it probable, however, that he had scarlet fever, as he has not developed it since, though fully exposed to the infection, and he has now developed suppurative otitis media, but I have not yet detected desquamation.

Measles is at present epidemic in the village where the above cases occurred, while sporadic cases of scarlet fever are not infrequent.

Mauchline, Ayrshire.

JOHN POLLOCK, M.B., C.M.

#### IS INFECTION OF THE UTERUS A CAUSE OF MAMMARY ABSCESS?

THE following cases may be of interest to your readers, and raise a point which is at least debateable.

CASE I.—A multipara, aged 32, in her first two confinements had stillbirths, and each time the placenta was adherent; the puerperium was not remarkable, except for a slight fever, and the breasts were hard and very painful. Of this I was informed by the patient herself, I at that time not being her medical attendant. Her last two confinements, however, I can speak of from personal experience. In the first of these the second stage of labour was natural and easy, but the placenta was firmly adherent, and had to be removed by introducing the hand into the uterus. The uterus was thoroughly explored for retained particles, and all was removed as far as could be ascertained. The puerperium was natural till the third day, when the temperature rose to  $101^{\circ}$ , and the lochia almost ceased. Hot douching was resorted to, and although the lochial discharge became more abundant, it was not natural, but of a serous nature, with slightly offensive odour. Temperature kept ranging from  $99^{\circ}$  to  $101.2^{\circ}$  till the eighth day, the breasts in the meantime becoming hard and tender. On the ninth day the patient had a rigor, her temperature rose to  $103^{\circ}$ , and suppuration was discovered in the right mamma. She made a good recovery after the abscess was opened.

In her next confinement labour was very similar in character to the previous one; the placenta was again firmly adherent, and removed in a similar way. The temperature remained normal till the fourth day, when a very severe rigor occurred, her temperature rising to  $104^{\circ}$ , and the lochia almost absent. The uterus was again carefully explored and scraped. Hot douching, antipyretics, antistreptococcus serum all failed to reduce the temperature, which ranged from  $104^{\circ}$  to  $106^{\circ}$ , the patient dying on the seventh day. The breasts in this case were free from pain and hardness.

CASE II.—This was a multipara whom I attended in all her confinements, three in number. In all the second stage of labour was natural and easy, but the placenta was adherent in each case—in the first slightly, in the second and third firmly adherent, and had to be removed by introducing the hand into the uterus. The puerperium in her first confinement was uneventful, except for the first four days, when there was a slight rise of temperature; the lochia diminished in quantity, and the breasts were hard and tender. In her second confinement her temperature rose to  $100^{\circ}$ , and kept fluctuating between  $99^{\circ}$  and  $101^{\circ}$  for ten days; there was a slightly offensive discharge which disappeared on the tenth day, but the breasts got hard and very painful. Hot douching, salines, and massage to the breasts were employed, and relieved her condition. In her last confinement her temperature was  $99^{\circ}$  to  $101^{\circ}$  for the first four days, and the lochia not very abundant, slightly serous, and slightly offensive. On the fourth day her breasts were hard and tender; on the fifth day the patient had a slight rigor, the lochia being almost absent, and a temperature of  $102.4^{\circ}$ . A little pus was discovered in the right mamma; the abscess was opened and evacuated. Douching was kept up till the eighth day, when the temperature fell to normal, after which she made a good recovery.

From these cases I think one might infer that as well as a "puerperal" fever being caused by retention and decomposition of secundines in the uterus, a mammary abscess may be produced by the same cause. When suppuration of the mamma occurred in those cases and pus evacuated, the "puerperal" symptoms cleared up.

In Case I when the abscess of the mamma occurred, I believe it saved the patient's life, the poison being got rid of from the system by the breasts, and I think that there is no doubt the uterus was the primary seat of infection.

I have not noticed in any textbook on midwifery or gynaecology that infection of the uterus is stated to be a cause of mammary abscess.

Comrie, Perthshire.

FREDERICK PORTER, M.B.

## REPORTS

ON

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

#### GENERAL HOSPITAL, NOTTINGHAM.

REMOVAL OF A NAIL FROM THE RIGHT BRONCHUS OF A CHILD  
AGED  $2\frac{1}{2}$  YEARS.

(Reported by A. R. ANDERSON, F.R.C.S., Surgeon to the  
Hospital.)

*History.*—G. N. was brought to the out-patient department by his parents on September 14th, 1901, with the statement that he had "swallowed" a nail six months previously, and directly after had a fit of coughing and difficulty of breathing. This was repeated a few days later, when he coughed up some blood-stained mucus, and had continued to do so at intervals ever since.

*State on Examination.*—The child was *x* rayed, and a large nail was seen a little to the right of the middle line, passing downwards and outwards from the level of the third costal cartilage. He was pale, thin, and badly nourished, and the time between his admission and the date of operation was spent, successfully, in trying to restore his general health. He had at this time occasional attacks of dyspnoea, vomiting, and a frequent irritable cough. With rest in bed and suitable diet all these symptoms subsided, and indeed he became remarkably free from symptoms of any kind, with the exception of a slight amount of fever, the temperature each evening reaching  $100^{\circ}$ , or rather more.

*Operation.*—By October 31st the child's condition had markedly improved, and on this date I operated, doing a high tracheotomy, the trachea being opened from the cricoid cartilage, downwards, for  $\frac{3}{4}$  inch. Two silk threads were passed through either side of the margin of the wound in the trachea, and the ends left long to act as retractors. A quantity of greyish black frothy mucus was coughed up into the wound. A probe was then passed down the trachea, and at a distance of  $3\frac{1}{4}$  inches from the wound the nail was plainly felt. Unsuccessful attempts were made to remove it with Durham's and other forms of tracheal forceps. It was afterwards extracted without difficulty by means of the forceps shown in the figure. The nail lay head downwards in the bronchus and was thickly coated with rust and mucus. The tracheal wound was not sutured, that in the skin was partially closed with gut sutures and dressed with gauze.

*Progress.*—The following day the child was sitting up in bed playing with his toys, and quite comfortable. The subsequent progress was uneventful. The temperature fell to normal at night, and remained so, and on November 13th, a fortnight after the operation, he was discharged with the wound healed, looking fat and well.

*REMARKS.*—The points of interest in this case are the absence of both symptoms and physical signs while the child remained at rest, and the success attending the use of the forceps shown above. I was unable to discover any physical signs which would enable me to say in which bronchus the foreign body had lodged, and several other medical men who examined the chest were equally unsuccessful, so, in the absence of the *x* rays, it is possible it might have been left unrelieved. I can only explain this by supposing that the nail had become impacted obliquely in the tube, allowing free access of air to the lung. At the time of operation I had obtained from Messrs. Down several ingenious forceps which it was hoped might aid in extraction. They all proved useless. Before the operation I had selected the forceps above

ment in 1894 of the latter, has been proprietor. Dr. Bonville Fox had been in very indifferent health for a considerable time, and his death on April 2nd at the age of 49 years was not unexpected. He leaves a widow, two sons, and one daughter.

Dr. Bonville Fox occupied a high position in the special branch of medicine to which he had devoted himself; his opinion was frequently sought by medical men troubled with the intricacies of the law on lunacy or with the mentally affected. To them Dr. Fox was able to give sound advice, founded on a wide experience and matured with sound common-sense.

With the responsibilities of the private asylum, Dr. Fox was yet able to spare time for public matters. He was for many years a Poor-law Guardian, and acted as Vice-Chairman for a considerable period. He also was interested in agricultural matters, being on the Committee of the North-East Somerset Farmers Club, took part in politics, and was always ready when possible to play cricket with the village club.

He will be much missed in Bristol, and particularly in the village in which three generations of Foxes have been proprietors of the asylum.

**DEATHS IN THE PROFESSION ABROAD.**—Among the members of the medical profession in foreign countries who have recently died are Dr. George M. Warner, Professor of Materia Medica and Therapeutics in Louisville Medical College, and for five years editor of the *Louisville Medical Monthly*, aged 44; W. W. Johnston, Professor of the Theory and Practice of Medicine in the Columbian University, Washington, aged 59; Dr. John E. Richardson, a prominent surgeon of Brooklyn, New York, aged 51; Dr. George W. Cushing, a well-known gynaecologist of Brooklyn, aged 53; Dr. O. D. Pomeroy, an eminent ophthalmologist of New York, and author of numerous writings on diseases of the eyes and ears, aged 68; and Dr. Henrot, corresponding member of the French Academy of Medicine, sometime Professor in the Medical School of Rheims, aged 73.

## ROYAL NAVY AND ARMY MEDICAL SERVICES.

### ROYAL ARMY MEDICAL CORPS EXCHANGE.

The charge for inserting notices respecting Exchanges in the *Army Medical Department* is 3s. 6d., which should be forwarded in stamps or post-office order with the notice, not later than Wednesday morning, in order to ensure insertion in the current issue.

MAJOR R.A.M.C., home from South Africa, where he has been two and a-half years and will have to return shortly, wishes to exchange with a Major ordered to India.—Replies to be sent to Major Healey, care of Holt and Co., 3, Whitehall Place, London, S.W.

### ROYAL NAVY MEDICAL SERVICE.

The following appointments have been made at the Admiralty: WALTER H. S. STALKART, M.D., Staff Surgeon to the *Medusa*, April 10th; JOHN MCLEWEE, M.D., Staff Surgeon to the *Humbly*, April 16th; GEORGE WILSON, M.B. Staff Surgeon, and THOMAS F. O'KEEFE, M.B., Surgeons to the *Doris*, undated.

### ARMY MEDICAL SERVICE.

COLONEL W. F. BURNETT, R.A.M.C., is promoted to be Surgeon-General, *vice* J. Jameson, placed on retired pay June 1st, 1901. Surgeon-General Burnett entered the service as Assistant-Surgeon, March 31st, 1866; became Surgeon-Major, March 1st, 1873; Surgeon-Major, March 31st, 1878; Brigade-Surgeon, October 6th, 1892; and Surgeon-Colonel, July 9th, 1896. He served in the Zulu war in 1879 (medal with clasp); in the Afghan war of 1878-80 (medal); and with the Nile Expedition in 1884-5 (medal with clasp and Khedive's bronze star).

Colonel E. TOWNSEND, M.D., C.B., C.M.G., R.A.M.C., is also promoted to be Surgeon-General, *vice* W. A. Catherwood, deceased, September 25th, 1901. Surgeon-General Townsend's previous commissions are dated as follows: Assistant-Surgeon, April 1st, 1857; Surgeon, March 1st, 1873; Surgeon-Major, April 1st, 1879; Brigade-Surgeon, April 1st, 1893; and Surgeon-Colonel, January 27th, 1897. The following is his war record: Abyssinian campaign, 1867, including action of Atrogee (medal); operations in the Malay Peninsula in 1875-6, including actions of January 4th, 18th, and 20th, and February 4th—severely wounded (medal with clasp); Zulu war of 1879, and engagement at Ulundi (mentioned in dispatches); operations against Sekukuni in 1879, and storming of the stronghold (medal with clasp); Egyptian war of 1882, including actions at Tel-el-Mahuta, Kassasin (September 5th), and Tel-el-Kebir (medal with clasp, and Khedive's star); Burmese expedition in 1885-6 (medal with clasp); Ashanti expedition in 1895-6 (mentioned in dispatches, star); North-West Frontier of India in 1897-8 with the Mohmund Field Force as P.M.O. (mentioned in dispatches); and afterwards as Principal Medical Officer 1st Division Tirah Expeditionary Force, including capture of Sampagha and Arhanga Passes, and operations in Bazar Valley (mentioned in

dispatches, C.B., medal with two clasps); South African war in 1899-1900 as Principal Medical Officer 1st Infantry Division, and engagements at Belmont and Enslin (mentioned in dispatches, C.M.G.).

Colonel W. H. McNAMARA, M.D., F.R.C.S., C.B., C.M.G., R.A.M.C., is likewise promoted to be Surgeon-General, *vice* H. S. Muir, placed on the Supernumerary List, from October 4th, 1901. Surgeon-General McNamara's previous commissions are thus dated: Assistant-Surgeon, October 1st, 1867; Surgeon, March 1st, 1873; Surgeon-Major, October 1st, 1879; Brigade-Surgeon, July 6th, 1893; and Colonel, September 7th, 1898. He was in the Egyptian war of 1882 attached to the 1st Battalion Royal Irish Fusiliers, and was at the battle of Tel-el-Kebir (medal with clasp, and Khedive's star); in the campaign in the Soudan in 1898 as Principal Medical Officer British Brigade, and afterwards as Principal Medical Officer British Division; and at the battles of the Atbara (mentioned in dispatches) and Khartoum (mentioned in dispatches, C.B., British medal, and Khedive's medal, with two clasps); and in the South African war in 1899-1900 as Assistant P.M.O., and afterwards as a P.M.O. on the Lines of Communication (mentioned in dispatches, C.M.G.).

Colonel Sir T. J. GALLWEY, M.D., K.C.M.G., C.B., R.A.M.C., also is promoted to be Surgeon-General, *vice* T. F. O'Dwyer, placed on retired pay, December 26th, 1901. Sir Thomas Gallwey was appointed Surgeon, March 31st, 1874; Surgeon-Major, June 15th, 1885; Brigade-Surgeon, July 9th, 1896; and Colonel, November 16th, 1898. His war record is thus given in the Army Lists: Afghan war in 1870, and capture of Ali Musjid and expedition into Bazar Valley (medal with clasp); Egyptian war of 1882, and at Kassasin and Tel-el-Kebir (medal with clasp and Khedive's star); with the Nile expedition in 1884-85, had charge of the Debbah Field Hospital, and took part in the operations of the Desert Column on its return to Korti (mentioned in dispatches, promoted Surgeon-Major, clasp); with the Dongola expeditionary force in 1896 as Principal Medical Officer to the force, including engagement at Firket and operations at Haifa (mentioned in dispatches, C.B., British medal, and Khedive's medal with two clasps); and in 1897-98 as Principal Medical Officer Egyptian army, and at the battles of the Atbara (mentioned in dispatches) and Khartoum (mentioned in dispatches, promoted to be Colonel, two clasps to Khedive's medal). Nominated to the 3rd Class of the Medjidie for services under the Egyptian Government. South African war in 1899-1900 as Principal Medical Officer Infantry Division, afterwards as Principal Medical Officer Natal; at relief of Ladysmith, including battle of Colenso; operations of January 17th to 24th, 1900, and at Spion Kop, February 5th to 7th, and Vaal Krantz, Tugela Heights, February 14th to 27th; and Pieter's Hill, Natal, March to June, and Laing's Nek (several times mentioned in dispatches, K.C.M.G., and medal with six clasps).

### ROYAL ARMY MEDICAL CORPS.

COLONEL J. F. SUPPLE, C.B., Officiating Principal Medical Officer Bombay Command, is appointed Principal Medical Officer, Meerut District.

Colonel N. B. MAJOR, who has been serving in the Punjab, is appointed Principal Medical Officer, Bombay and Nagpore Districts.

### ARMY MEDICAL RESERVE.

SURGEON-CAPTAIN J. ADAMS is promoted to be Surgeon-Major, April 9th.

### INDIAN MEDICAL SERVICE.

SURGEON-GENERAL B. FRANKLIN, C.I.E., Bengal Establishment, has been appointed Honorary Surgeon to the Governor-General of India from December 1st, 1901.

The following changes in the administrative medical charges came into force on April 1st: (1) A Lieutenant-Colonel, Indian Medical Service, appointed Principal Medical Officer, Derajat District; (2) the appointment of Principal Medical Officer, Mandalay District, held by a Colonel R.A.M.C., is abolished, and the administrative medical charge embracing Rangoon and the Southern Shan States Command, is extended to the whole of Burmah, the appointment being held alternately by an officer of the R.A.M.C. and of the Indian Medical Service, with headquarters at Rangoon; (3) the appointment of Principal Medical Officer, Peshawur District, is reserved for a Lieutenant-Colonel R.A.M.C.

Surgeon-General JAMES CHAMPION PENNY, M.D., late Bengal Establishment, died in London on April 3rd, aged 72. He was appointed Assistant Surgeon, January 29th, 1837, and Deputy Surgeon-General on retirement, June 3rd, 1887. He served in the Indian Mutiny campaign in 1857-8, and was at the relief of Lucknow and of Cawnpore, receiving a medal with clasp.

Captain GEORGE RAMSAY, Bengal Establishment, Residency Surgeon at Baghdad, died at Baghdad from heart failure, after a severe attack of fever. He was born in October, 1868, and entered the service as Surgeon-Lieutenant, July 28th, 1894, becoming Surgeon-Captain three years later. He was in the Chitral campaign in 1895, receiving the medal with clasp. In 1894 he was appointed to Guntok in Sikkim as Medical Officer, and the training and education of the young heir to the Sikkim State was entrusted to him for two years. In 1896 he was appointed Acting Residency Surgeon, Baghdad, in which appointment he was subsequently confirmed.

### IMPERIAL YEOMANRY.

SURGEON-CAPTAIN L. A. BIDWELL, from the 2nd Middlesex Royal Garrison Artillery (Volunteers), is appointed Surgeon-Captain in the Buckinghamshire (Royal Bucks Hussars), April 15th.

Mr. WALTER H. CHEETHAM, M.D., is appointed Surgeon-Lieutenant in the Yorkshire Hussars (Princess of Wales's Own), April 5th.

### VOLUNTEER INFANTRY BRIGADES.

SURGEON-LIEUTENANT-COLONEL T. A. McCULLAGH and Volunteer Battalion the Durham Light Infantry, to be Brigade Surgeon-Lieutenant-Colonel while holding the appointment of Senior Medical Officer to the Durham Light Infantry Brigade, April 5th.

Surgeon-Lieutenant-Colonel D. COWIE, M.B., 5th (Glasgow Highland) Volunteer Battalion the Highland Light Infantry, to be Brigade Surgeon-Lieutenant-Colonel while holding the appointment of Senior Medical Officer to the Highland Light Infantry Brigade, April 5th.

## ADVERTISING HYPNOTICS IN THE LAY NEWSPAPERS.

A CORRESPONDENT asks our opinion of an advertisement in *Lloyd's Weekly News* by a well-known firm of chemists, headed, "Sleeplessness is cured with chlorobrom. No opium. No hurtful drug. Harmless. No sleeping-draught habit set up."

\*\*\* According to Martindale and Westcott, chlorobrom contains 30 gr. each of chloralamide and potassium bromide. The compound is certainly not one which should be indiscriminately recommended to the public in such terms.

## MEDICAL ADVERTISING.

JOHN MCGOWN, M.D.—We have referred the matter to the corporation from which the offender holds his licence.

## VACCINATION FEES AND CERTIFICATES.

VACCINATOR writes that he vaccinated an infant a short time ago, and, as the father declined to pay his fee, he refused him a certificate. Since then the registrar of the district has written to him requesting that he will fill up duly signed a vaccination certificate which he encloses: as he (the registrar) understands the child was successfully vaccinated by our correspondent. Is "Vaccinator" legally bound to fill up such certificate for the registrar? Ought not the registrar to demand such certificate from the father?

\*\*\* Our correspondent is legally bound under the Vaccination Acts to give the scheduled certificate to the parents or guardians of any child he may vaccinate, to be by them transmitted to the registrar, under a penalty. It is true the registrar might have demanded the certificate from the parents, but he preferred to write to the medical man instead. If he had not done so, our correspondent might have been fined for a breach of the Vaccination Laws (30 and 31 Vict., c. 84, ss. xxiv, xxx).

## MIDWIFERY ENGAGEMENTS.

W. D. writes: In a working-class practice, where it would be quixotic to sue for an unfulfilled midwifery engagement fee, I charge a half-crown booking fee to be deducted if my services are required later. Thus, if I am called the woman pays 18s 6d. to make up the guinea. If I am not called, I have 2s. 6d. to cover the chance of being sent for at inconvenient times, or having to make arrangements with a brother practitioner to act for me, while she, on her part, has for her half-crown the assurance that professional assistance is to be relied on if required. Though not applicable to better class houses, it works well among the cottages, and particularly among the poorer class of these.

## UNIVERSITIES AND COLLEGES.

## UNIVERSITY OF EDINBURGH.

FIRST PROFESSIONAL EXAMINATION.—The following candidates have passed this Examination as under:

In Chemistry.—J. H. Aikman, J. H. Ainscow, D. W. Anderson, W. H. Armistead, W. Ashworth, D. M. Barcroft, E. H. Black, C. E. Blair, F. Blamire, I. W. Brebner, H. F. Briggs, D. F. Buist, C. H. Burgess, E. Burnet, S. T. Champaloup, W. I. M. Clark, W. Core, R. Cotter, Agnes M. Cowan, F. S. Cumming, R. B. Davidson, A. Davies, A. M. Dick, M. G. Dill, A. M. Drennan, J. D. C. Duncan, R. Duncan, J. Dundas, D. D. Dunn, E. W. Dyer, S. S. Dykes, J. S. Edwards, Mary S. Finlayson, C. N. Finn, M. S. Fraser, R. Fraser, J. W. Frew, J. F. Gallagher, M. Gavin, W. J. Geale, L. Gibson, E. C. Girling, G. A. Gordon, J. E. Gordon, W. L. Gordon, M. C. E. Grahame, J. Green, G. A. Grierson, J. C. Grieve, K. K. Grieve, E. R. Grieveson, G. F. Grogan, G. Gunn, Nettie B. Hendrie, J. E. Hill, G. A. Hodges, H. S. A. Hogg, E. F. Johnson, H. C. Johnston, T. B. Johnston, W. L. Johnston, W. C. A. Jolly, J. T. G. Jones, R. L. Jones, J. H. Lamb, W. Landells, A. G. K. Ledger, S. B. Legge, A. Leitch, N. F. Lloyd, P. Lorne, R. D. M'Alister, J. M'Cutcheon, A. M'Donald, G. B. Macgregor, G. D. M'ivor, J. B. Mackenzie, G. M'Mullan, A. C. B. M'Murtrie, K. M'Murtrie, W. J. Macnab, A. S. Mactavish, J. N. M'Turk, P. Maier, D. Mann, J. S. Manson, G. M. Melville, C. J. Milne, J. E. Mondon, H. J. More, J. K. Murray, M. A. D. Naoroji, A. S. Paterson, J. L. H. Paterson, B. B. Phillips, G. Pollock, H. P. Porteous, O. E. Powell, A. Priestman, C. A. Purnell, C. Pycroft, Edith Pycroft, G. Y. Richardson, W. H. Riddell, W. R. Ridley, W. G. Riley, W. G. Rivers, R. M. Robb, W. A. Robertson, F. Ross, E. Russell, J. Scott, T. H. Scott, H. L. Sells, E. D. Simson, H. Smith, R. S. Stewart, P. Stewart, W. J. P. Sutherland, J. A. Taylor, E. R. Thompson, J. A. R. Thompson, J. N. Turnbull, Annie D. Urquhart, P. Vickers, A. G. Visser, R. H. Walton, W. E. R. Williams, Ethel Wiseman, Emily C. Wybourne, A. W. Young, J. T. D. Young.

SECOND PROFESSIONAL EXAMINATION.—The following candidates have passed this Examination as under:

Completed the Examination.—R. G. W. Adams, E. A. Aylward, J. W. H. Babington, J. M. Barkley, R. B. Barnettson, B. Baty, W. P. Beattie, D. Bell, L. H. I. Bell, A. R. Berry, J. M. Beyers, A. S. L. Biggart, F. T. Bowerbank, D. Brown (with distinction), T. E. Carlyle, V. T. Carruthers, M. M. L. Cathels, J. W. Cathles, J. Craw, J. S. Clark, M. A., A. C. Coullie, W. B. A. K. Cullen, G. Cunningham, M. A., W. H. Cusack, J. M. Darling, J. R. Dobbin, C. E. Dumanoire, T. H. Easton, N. C. Fischer, J. M. R. Flament, N. C. Forsyth, R. H. Fothergill, L. Fourie, N. Fraser, W. J. Fraser, L. Gavin, M. J. H. Gavin, H. M. Gillespie, A. C. Glass, M. A., W. Godfrey, J. M. Graham, W. W. Green, J. Grieve, P. A. Harrow, E. Henderson, M. A. (with distinction), A. W. Hogg, J. S. Hogg, P. B. Hole, G. S. Husband, K. U. A. Inniss, Ada Jackson, W. Jarvis, S. A. Johnston, J. H. H. Joubert, J. Kirk, G. F. S. Lauder, S. W. S. Leary, A. J. Lewis, J. Lochhead, M. A. (with distinction), J. B. Lockertie, A. D. M'Callum, J. Macdonald, J. P. M'Gowan, M. A., Amy M. Mackintosh, H. R. Macintyre, R. J.

Mackessock, M. A., D. P. Marais, A. E. Mills, M. A., B.Sc., L. S. Milne, T. B. Mouat, W. M. Mimby, D. S. Murray, C. C. Flaherty, A. Oliver, C. D. O'Neal, R. G. S. Orbell, G. Ormrod, F. M. S. Price, H. S. Reid, M. H. Robertson, S. M. Ross, C. S. Ryles, F. R. Sinton, L. H. Skene, C. J. Smith, G. M'C Smith, W. A. W. Smith, R. A. L. Van Someren, P. Steele, H. A. Stewart, A. C. Strain, K. A. Moody-Stuart, A. F. Theobalds, H. M. Thompson, R. C. Townend, G. H. Ussher, F. L. de Verteuil, R. W. L. Wallace, D. C. Welsh, D. P. D. Wilkie, F. A. Wille, W. B. Wishart, C. H. Wright, B. A., M. C. W. Young, M. A.

In Anatomy and Physiology.—D. M. C. Church, M. L. Cohen, B. A., A. MacRae, G. D. Mathewson, J. B. Mears, H. P. Milligan, O. M. Mirylees, H. L. Morrow, A. J. Patterson, W. Paton, J. Saffley, F. H. Stewart, M. A., G. H. Winch.

THIRD PROFESSIONAL EXAMINATION.—The following candidates have passed this Examination as under:

Completed the Examination.—R. T. G. Aickin, D. Allison, J. A. Anderson, W. W. Anderson, F. L. Atkinson, Agnes Balfour, C. M. Begg, A. W. Beveridge, T. C. Blackwell, J. Brennon, Edith C. Brown, J. E. M. Brown, G. L. Brunton, A. Buchanan, H. Caird, T. P. Caverhill, R. A. Chambers (with distinction), J. S. Katherine Clark, Elizabeth L. Colby, C. H. Craig, R. W. Craig, C. S. Crichton, D. H. Croom, F. D. Crosshwaite, W. B. Cullen, A. Dangerfield, J. M. Darling, H. S. Davidson, J. Davidson, W. H. Davidson, D. E. Derry, A. C. Devereux, J. M. Dewar, J. Donaldson, M. A.: A. M. Dryden (with distinction), Alice M. Ebdon, G. I. Farie, J. Findlay, H. N. Fletcher, J. Fortune, C. R. Gibson (with distinction), J. H. Gibson, J. D. Giles, J. Girdwood, J. M. Glasse, A. Gray, M. A., Elizabeth C. Gunn, A. Mabel Gurney, A. A. Hall, M. A.: C. R. F. Hartley (with distinction), G. W. Hasty, G. Henderson, M. A.: A. E. Hodgson, A. F. Hughes, J. P. P. Inglis, J. M. Johnston, R. W. Johnstone, J. H. Jones, J. H. Kay, J. W. Keay, I. C. Keir, E. A. King, J. M. Kirkness, L. A. H. Lack, F. F. C. Linton, C. D. Lochrane, Isabella Logie, J. M. Loveth, A. Lundie, H. MacCormac, J. R. M'Gregor, N. D. Mackay, B.Sc.: T. A. MacKenzie, Violet C. M'Laren, W. MacLaren, J. J. M'Millan, J. B. M'Neill, J. M. Macrae, H. C. Martin, R. H. Martin, P. W. Mason, A. G. M. Middleton, A. S. Millard, B.Sc.: G. H. S. Millin, W. S. Milne, C. R. P. Mitchell, G. J. Moriarty, C. H. Müller, H. L. Munro, D. M. K. Newton (with distinction), T. Nicol, W. H. Nutt, D. D. Paton, M. A.: T. Peebles, J. A. Pottinger, Julia L. Pringle, W. L. Pritchard, W. Readman, Eva A. Robertson, W. S. Robertson, Amy Robinson, L. C. Robinson, J. A. Ross, Mabel Ross, J. A. Roux, A. C. Rutherford, G. D. A. Scott, D. J. Scott, J. E. Scott, M. A.: W. M. Selby, G. H. Skinner, J. H. Smith, S. W. Smith, C. W. Smyth, Eva M. Snowball, J. Tait, E. J. Taylor, T. T. Thomson, G. C. Trotter, E. A. Turpin, R. Veith, J. A. L. Wallace, W. R. S. Watkins, E. J. Wentzel, L. West, R. M. M. White, C. H. Wright, B. A.: W. D. Wright (with distinction), and G. W. Young.

In Pathology.—S. Burns, M. A.; L. Ram, W. J. D. Robertson, W. Sander-son, Effie Stewart.

## UNIVERSITY OF GLASGOW.

THE following have passed the First Professional Examination for the degrees of Bachelor of Medicine (M.B.) and Bachelor of Surgery (Ch.B.) in the subjects indicated (B., Botany; Z., Zoology; P., Physics, C., Chemistry):

G. V. Anderson (P., C.), J. M. Anderson (Z., C.), A. H. Arnott (P.), G. D. M. Beaton (P.), D. P. Bremner (Z., P.), W. A. Campbell (Z., C.), D. L. Carmichael (C.), C. G. A. Chislett (B., C.), H. H. Christie (Z., C.), J. S. Clark (Z., C.), A. D. Cowan (B., P.), T. L. Craig (Z., C.), A. M. Crawford (Z., C.), R. Donald (Z.), R. J. Driscoll (B.), J. Dunbar (B.), A. Dunsmuir (Z.), E. J. Dyke (P.), E. M. Eaton (Z., C.), W. M. Fairlie (Z., C.), T. S. Forrest (P., C.), J. W. Georgeson (Z., P.), W. Gilbert (Z., C.), W. Gilfillan (C.), P. F. Grant (Z., C.), A. H. Gray (B., Z., P.), R. N. Guthrie (Z., C.), J. Hammond (P.), W. T. Hardie (Z.), R. M'C. Hill (P.), J. Keys (Z., C.), J. D. Kidd (Z.), G. H. Logan (B., P.), A. Macaulay (B.), A. M'Call (Z., C.), J. M'Cartney (P.), T. M'Cosh (P., C.), D. Macdonald (Z., C.), J. M'Farlane (Z., C.), J. R. M'Gilvray (Z., C.), W. A. M'Kellar (Z.), T. C. Mackenzie (Z.), W. F. Mackenzie (Z.), W. W. Macleod (B., P., C.), J. M'Millan (B., Z., P., C.), A. A. C. M'Neill (Z., C.), J. C. J. C. Macquarie (Z., C.), A. Maguire (Z., P.), R. Marshall (B., Z.), R. May (P.), A. F. Miller (C.), J. Miller (Z., C.), R. S. Miller (Z.), W. Miller (Z.), P. Mitchell, M. A. (B., Z.), R. W. Mitchell (Z.), W. S. Moore (B., P.), A. Naismith (B., Z.), P. J. O'Hare (B., P.), J. Oswald (Z., P.), J. H. Paul (Z., C.), D. M'K. Reid (Z., P.), J. Reid (B., P.), F. G. Robertson (Z., C.), J. H. A. Robertson (Z., P.), M. M. Rodger (B.), W. J. Rutherford (Z., C.), J. Sharp (Z., C.), R. W. Simpson (P.), R. A. Slater (C.), T. B. Smith (Z., C.), J. Stevenson (C.), J. Stevenson (Z., C.), A. Stewart (Z., P.), J. T. W. Stewart (B., Z.), T. Strain (P.), D. L. A. Tate (B., Z.), C. S. Thomson (Z., C.), H. White (Z.), D. J. Williams (Z.), G. H. Wilson (Z., C.), S. Wilson, M. A. (Z., C.), W. A. Wilson (P.), T. Winning, M. A. (B., Z.).

Women.—J. M. Andrew (P., C.), A. R. Hird (P., C.), R. I. Hudson (P., C.), A. M'Phun (Z.), E. Oversby (P., C.), V. D. Reis (P., C.), M. B. Taylor (C.) C. G. Thomlinson (B., Z.).

The following have passed the Second Professional Examination for the degrees of Bachelor of Medicine (M.B.) and Bachelor of Surgery (Ch.B.) in the subjects indicated (A., Anatomy; P., Physiology; M., Materia Medica and Therapeutics):

S. C. Adam (A., P.), A. C. Amy (A., P., M.), H. G. Anderson (A., P.), J. R. S. Anderson (A.), J. W. Arthur (M.), A. R. Barrowman (A., P.), G. Beattie (P., M.), R. D. Bell, M. A. (A., P.), D. Blackley (A., P., M.), G. T. Bogle (M.), R. G. Bradford (A.), F. Brechin (A., P., M.), T. Brodie (P., M.), C. Brown (P., M.), J. Brown (A.), G. Y. Caldwell (A., P., M.), P. Carrick, M. A. (A., P., M.), R. B. Carslaw, M. A. (A., P.), J. A. Cowie, B. A., B.Sc. (A., P., M.), J. C. Crawford (P., M.), T. T. M. Dishington (A., P., M.), H. M. Donaldson (A.), G. H. Downie (A.), C. M. Drew, M. A. (A., M.), H. H. Fulton (A., P.), W. H. Gillatt (A., P.), J. Glover (M.), D. L. Graham (A., P.), J. Graham (A., P.), D. J. G. Grant (A., P., M.), G. M. Gray (A., P.), L. L. Greig (A., P.), A. R. F. Hay (A., P.), J. C. Henderson (A., P.), A. Innes (A., P.), A. Jamieson (A.), R. D. Ken-

neddy (A.), J. Kerr (M.), G. N. Kirkwood (A., P.), R. T. Leiper (A., P., M.), T. S. Macaulay (A., P.), D. C. McCormick (A., P.), J. G. McCutcheon (P.), J. F. Macdonald (M.), J. B. McEwan (A., P.), T. D. McEwan (A., P.), D. Macfarlane (A., P.), J. McFarlane (A., P.), R. Macfarlane (A., P.), R. C. McGuire (A., P., M.), J. M'Houl (A., P.), M. M'Intyre (A., P., M.), R. Mackinnon (A., P., M.), D. J. McLeish, M. A. (A., P.), R. MacLeod (M.), N. S. MacNaughtan (M.), A. B. M'Pherson (P., M.), W. Main (A., M.), A. Meek (A., P., M.), P. Millar (A.), G. D. Muir (P.), J. Muir (A., P.), M. Munro (A., P.), A. H. Napier (A.), G. C. Nielson (A., P.), T. Orr (P., M.), H. H. Patrick (A., P.), A. G. Faxon (M.), J. C. Pickup (A., P.), A. M. M. Pollock (M.), A. M. Pollock (A., P.), J. Porter (A., P.), W. M. Rae (A., M.), D. R. Reid (A., P., M.), D. S. Richmond (A.), J. W. Richmond (A.), B. H. Robertson (M., A.), (A., P.), R. T. C. Robertson (P.), C. Ross (M.), J. Samson (P.), L. D. Shaw (A.), M. A. Sinclair (P., M.), G. G. Smith (A., P.), J. A. Somerville (P., M.), J. Stewart (P.), N. B. Stewart (M.), W. C. Stewart (A., P., M.), M. R. Taylor (A., P., M.), W. Templeton (A., P.), J. W. Thomson (A., P.), R. Watson (A.), A. C. West (A., P.), G. H. Wildish (A.), G. Wilson (P., M.), R. M. N. Wilson (M.), J. Wyner (P., M.), W. Young (A.).

**Women.**—J. Auld (A.), A. A. Baird (A., M.), A. M. C. Black (A.), A. F. Bell (M.), T. Bennett (M., A.), A. G. Bisset (P., M.), A. Blair (P., M.), J. C. Brangan (P., M.), R. Bruce (M.), D. L. Carmichael (M.), A. E. Clark (M.), A. Connal (P., M.), H. C. Davies (P., M.), M. I. Dick (P.), D. Dickie (P., M.), D. G. Dykes (P., M.), J. Eadie (P., M.), C. C. Finlator (P., M.), E. D. Gairdner (P., M.), J. R. Gilmour (P.), J. Hanson (M., A.), P. M. Harvey (P.), L. C. B. Head (P., M.), N. M. C. Hutchison (P., M.), M. Hutton (M., A.), B. Sc. (P., M.), J. M. Kelly (P., M.), A. D. Kennedy (M.), R. Laurie (P., M.), A. Leitch (P., M.), T. W. Love (P., M.), D. Macaulay (P.), J. D. McCulloch (P., M.), D. D. F. Macintyre (P., M.), J. M. Mackellar (P.), N. A. Macleod (P.), J. A. Macvea (P., M.), H. S. Martyn, M.A. (M.), A. Matheson, M.A., B.Sc. (P., M.), S. Mort (P., M.), G. Muir (P., M.), D. Penman (M.), W. Rankin, M.A. (P., M.), D. F. Riddell, M.A. (P., M.), P. H. Robertson (P.), F. D. Scott (P.), W. G. Shand (P., M.), J. B. Stevenson (P.), W. D. H. Stevenson, M.A. (P.), W. Stewart (P., M.), A. W. Sutherland, M.A. (P., M.), J. W. Sutherland (P., M.), P. L. Sutherland (P., M.), J. R. Thomas (P.), J. Turnbull (P.), J. Walker, M.A. (P.), H. F. Warwick (M.), W. N. W. Watson (P., M.), R. T. Wells, M.A. (P.), J. F. Weston (P.), G. J. Williams (P., M.), J. Wilson (P., M.), E. Wright (P., M.).

The following have passed the Third Professional Examination for the degrees of Bachelor of Medicine (M.B.), and Bachelor of Surgery (Ch.B.), in the subjects indicated (P., Pathology; M., Medical Jurisprudence and Public Health):

R. Adam (P., M.), W. K. Anderson (P., M.), T. Ballantyne (M.), A. F. Bell (M.), T. Bennett, M.A. (M.), A. G. Bisset (P., M.), A. Blair (P., M.), J. C. Brangan (P., M.), R. Bruce (M.), D. L. Carmichael (M.), A. E. Clark (M.), A. Connal (P., M.), H. C. Davies (P., M.), M. I. Dick (P.), D. Dickie (P., M.), D. G. Dykes (P., M.), J. Eadie (P., M.), C. C. Finlator (P., M.), E. D. Gairdner (P., M.), J. R. Gilmour (P.), J. Hanson, M.A. (P., M.), W. Harvey (P.), L. C. B. Head (P., M.), N. M. C. Hutchison (P., M.), M. Hutton, M.A., B.Sc. (P., M.), J. M. Kelly (P., M.), A. D. Kennedy (M.), R. Laurie (P., M.), A. Leitch (P., M.), T. W. Love (P., M.), D. Macaulay (P.), J. D. McCulloch (P., M.), D. D. F. Macintyre (P., M.), J. M. Mackellar (P.), N. A. Macleod (P.), J. A. Macvea (P., M.), H. S. Martyn, M.A. (M.), A. Matheson, M.A., B.Sc. (P., M.), S. Mort (P., M.), G. Muir (P., M.), D. Penman (M.), W. Rankin, M.A. (P., M.), D. F. Riddell, M.A. (P., M.), P. H. Robertson (P.), F. D. Scott (P.), W. G. Shand (P., M.), J. B. Stevenson (P.), W. D. H. Stevenson, M.A. (P.), W. Stewart (P., M.), A. W. Sutherland, M.A. (P., M.), J. W. Sutherland (P., M.), P. L. Sutherland (P., M.), J. R. Thomas (P.), J. Turnbull (P.), J. Walker, M.A. (P.), H. F. Warwick (M.), W. N. W. Watson (P., M.), R. T. Wells, M.A. (P.), J. F. Weston (P.), G. J. Williams (P., M.), J. Wilson (P., M.), E. Wright (P., M.).

**Women.**—M. C. Cameron (P., M.), J. Campbell (P., M.), J. G. Duncan (M.), K. Fraser, B.Sc. (P., M.), M. L. McNeill (M.), A. P. Martin (P., M.), E. J. Miller (P., M.), I. D. Mitchell (P., M.), M. H. Smart (P., M.), J. M. Stewart (P., M.).

#### CONJOINT BOARD IN SCOTLAND.

The quarterly examinations of the above Board, held in Edinburgh, were concluded on April 27th, with the following results:

**First Examination (Four Years' Course).**—J. H. Allan, and I. Charan.

**First Examination (Five Years' Course).**—E. Averell, H. G. Mackenzie, H. Bower, H. A. Pascoe, W. W. Dunlop, J. Sullivan, R. J. Martin, Elizabeth Mary Cardozo, D. Kennedy, P. R. Eskill, and J. Noonan. Three passed in Physics, and 3 in Chemistry.

**Second Examination (Four Years' Course).**—G. Charan, R. Gibson, L. P. Anderson, A. Wood, and E. A. J. Ersser.

One passed in Anatomy and Physiology.

**Second Examination (Five Years' Course).**—J. J. Gillis, G. H. van Zyl, A. D. Fox, J. Watson, E. Gaunt, M. A. Gibbs, J. G. Cormack (with distinction), J. Wilson, M. M. Fitzgerald, Elizabeth Mary Cardozo, R. M. Fraser, J. A. Robertson, G. W. Meade, E. H. E. Coghlan, E. H. Knowles, and E. Reboul.

One passed in Anatomy.

**Third Examination (Five Years' Course).**—F. G. Heyer, D. Cameron, W. E. O'Hara, A. M. Laurie, L. B. Hopper, M. King, W. J. Shorten, J. A. Turnbull, W. B. Hendry, J. van S. Taylor, W. J. Purves, T. McE. Glen, T. Owens, P. Shaw, M. S. Naidu, J. Cullen, L. F. Bianchi, A. M. Walsh, Minnie Green, G. A. Paulin, W. C. M. Burnside, T. Russell, B. B. Bharucha, E. Claye, Eileen FitzGerald, and K. J. Bhangara.

**Final Examination.**—Alice Esther Gifford, W. E. Knight, F. E. McGee, H. F. Everett, H. A. Chaplin, J. L. Johnston, J. W. Cross, E. P. Mead, A. L. Fielding, P. H. Mules, R. W. J. Pearson, M. F. Cusack, A. T. Hoskins, F. N. Jaboor, H. H. H. Hurdman, D. P. Johnstone, A. L. White, L. B. Hopper, J. Q. Donald, T. A. Mendes, R. M. Stimpson, R. H. Brierley, W. A. Wilson, T. R. Griffiths, D. R. Gonsalves, R. L. Williams, S. L. Clindinin, V. G. Frost, E. Bidie, Edith Boomgard, L. W. Thomson, T. L. Ashforth, T. G. Davies, D. Banerji, T. J. Evans, T. F. Heas, D. Burrows, and J. A. F. Mutch.

Three passed in the division of Medicine and Therapeutics, 2 in Surgery and Surgical Anatomy, 7 in Midwifery, and 11 in Medical Jurisprudence.

#### ANDERSON'S COLLEGE MEDICAL SCHOOL, GLASGOW.

At the formal closing of the winter session of the Anderson's College Medical School, Glasgow, Lord Provost Chisholm, after distributing the prizes, certificates, and medals to the successful students, in the course of an address referred to the influence of a medical education in the making of good citizens. He said that it was not for him to enlarge on the nobility and the beneficence of that field of effort and enterprise which they had chosen for their future lot, but he would say, as one of the great

cloud of witnesses by which they were surrounded, that they who merely stood outside, looked on with affection and admiration—affection for the men and admiration for the efforts and triumphs of the men who had had been engaged in the fields of medical and surgical science, and had by their efforts and labours produced results so marvellous and so delightful achievements for the relief of the sufferings and sorrows of the world. He was most entitled to, and in the long run most received the honour of his fellows and the honour of the world who most of all served his common kind, and he was remembered more than kings, or conquerors, or millionaires.

#### SOCIETY OF APOTHECARIES OF LONDON.

**PRIMARY EXAMINATION, PART I.**—The following candidates passed in: *Biology*.—S. F. H. Everill, Birmingham; C. E. Pring, Royal Free Hospital.

*Chemistry*.—S. F. H. Everill, Birmingham; J. C. Fletcher, Royal Free Hospital.

*Materia Medica and Pharmacy*.—M. S. Jevons, Royal Free Hospital; T. Lea, Glasgow and Bristol; J. G. Lewis, Cardiff; E. H. Price, Birmingham; E. Sergeant, Royal Free Hospital.

**PRIMARY EXAMINATION, PART II.**—The following candidates passed in:

*Anatomy*.—G. H. Almond, Cambridge and Leeds; A. Bernfield, Royal Free Hospital; E. P. J. Dawes, Birmingham; L. Doudney, Guy's Hospital; A. G. C. Findlay, University College Hospital; A. G. Gamble, Leeds; H. S. Gettings, Birmingham; G. P. K. Grey, Middlesex Hospital; C. Homer, St. Mary's Hospital and Bristol; L. J. Paterson-Clavier, Guy's Hospital; J. W. Peatt, London Hospital; J. O. Sergeant, Leeds; F. A. K. Stuart, St. Mary's Hospital; R. J. C. Thompson, St. Thomas's Hospital; J. A. R. Wells, St. Thomas's Hospital; P. B. Whittington, London Hospital.

*Physiology*.—A. Bernfield, Royal Free Hospital; L. Doudney, Guy's Hospital; F. C. M. Gabites, Edinburgh; H. S. Gettings, Birmingham; J. C. Johnson, Middlesex Hospital; J. G. Lewis, Cardiff; G. B. Messenger, Westminster Hospital; L. J. Paterson-Clavier, Guy's Hospital; J. W. Peatt, London Hospital; R. J. C. Thompson, St. Thomas's Hospital; J. A. K. Wells, St. Thomas's Hospital; P. B. Whittington, London Hospital.

## PUBLIC HEALTH

AND

### POOR-LAW MEDICAL SERVICES.

#### HEALTH OF ENGLISH TOWNS.

In seventy-six of the largest English towns, including London, 8,862 births and 5,000 deaths were registered during the week ending Saturday last, April 5th. The annual rate of mortality in these towns, which had been 19.6, 17.6, and 18.2 per 1,000 in the three preceding weeks, declined again to 17.6 per 1,000 last week. Among these large towns the death-rates ranged from 9.3 in Bournemouth, 9.9 in York, 10.5 in East Ham, 10.6 in Leyton, 11.0 in Hornsey, 11.2 in West Hartlepool, 11.3 in Bootle, and 11.7 in Tottenham, to 21.5 in Liverpool and in Leeds, 21.8 in Middlesbrough, 22.0 in Tynemouth, 22.2 in Merthyr Tydfil, 22.9 in Wigan, 26.5 in Plymouth, and 29.2 in Burnley. In London the rate of mortality was 17.9 per 1,000; while it averaged 17.4 per 1,000 in the seventy-five other large towns. The death-rate from the principal zymotic diseases in the seventy-six large towns averaged 2.0 per 1,000; in London this death-rate was equal to 2.4 per 1,000, while it averaged 1.8 in the seventy-five other towns, among which the highest zymotic death-rates were 3.2 in Birkenhead, 3.3 in Aston Manor, 3.4 in Willesden, 3.5 in South Shields, 3.6 in Barrow-in-Furness, 3.8 in Croydon and in Handsworth, 5.8 in Rhondda, and 12.2 in Burnley. Measles caused a death-rate of 1.6 in Huddersfield, 1.7 in Willesden, 1.8 in Barrow-in-Furness, 2.0 in Stockton-on-Tees, 2.2 in Merthyr Tydfil, and 2.6 in Burnley; scarlet fever of 1.2 in St. Helens; diphtheria of 1.1 in Croydon and in Swansea, and 2.7 in Rhondda; whooping-cough of 1.2 in Northampton and in Walsall, 1.3 in Aston Manor, 1.8 in Barrow-in-Furness, and 1.9 in Handsworth and in Walsley; "fever" of 1.3 in Aston Manor, 1.4 in Birkenhead, and 1.9 in Handsworth; and diarrhoea of 1.2 in Walsall. Of the 77 fatal cases of small-pox registered during the week 54 belonged to London, 10 to West Ham, 4 to East Ham, 2 each to Croydon, Tottenham, and Leeds, and 1 each to Leyton, Walthamstow, and Southampton. The number of small-pox patients under treatment in the Metropolitan Asylums Hospitals, which had been 1,542, 1,567, and 1,526 at the end of the three preceding weeks, had declined again to 1,522 on Saturday, April 5th; 376 new cases were admitted during the week, against 450, 449, and 389 in the three preceding weeks. The number of scarlet fever patients in these hospitals and in the London Fever Hospital at the end of the week was 2,126, against 2,206, 2,185, and 2,147 at the end of the three preceding weeks; 228 new cases were admitted during the week, against 266, 258, and 250 in the three preceding weeks.

#### HEALTH OF SCOTCH TOWNS.

During the week ending Saturday last, April 5th, 1,095 births and 687 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 23.7 and 20.3 per 1,000 in the two preceding weeks, rose again last week to 21.3 per 1,000, and was 3.7 per 1,000 above the mean rate during the same period in the seventy-six large English towns. Among these Scotch towns the death-rates ranged from 16.0 in Paisley, and 17.2 in Perth, to 23.4 in Dundee and 26.3 in Greenock. The zymotic death-rate in these towns averaged 1.8 per 1,000, the highest rates being recorded in Dundee and Greenock. The 326 deaths registered in Glasgow included 2 from small-pox, 5 from measles, 3 from scarlet fever, 3 from diphtheria, 7 from whooping-cough, 2 from "fever," and 9 from diarrhoea. Two fatal cases of whooping-cough were recorded in Edinburgh; 5 deaths from measles and 3 from diarrhoea occurred in Dundee; 2 from whooping-cough and 2 from diarrhoea in Aberdeen; and 14 from scarlet fever in Greenock.



*Analysis of the Vital Statistics of the Metropolitan Boroughs and of the City of London after Distribution of Deaths occurring in Public Institutions during the First Quarter of 1902.*

BOROUGH.	Estimated Popu- lation middle of 1902.	Births.	Deaths.	Annual Rate per 1,000 Living.			Deaths from Principal Zymotic Diseases.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping-Cough.	Typhus.	Enteric Fever.	Simple and Ill-de- fined Fever.	Diarrhoeal Diseases.	Phthisis.	Deaths of Children under 1 year of age in 1,000 Births.
				Births.	Deaths.	Principal Zymotic Diseases.												
COUNTY OF LONDON	4,579,107	34,009	24,291	29.8	21.3	2.34	2,683	734	730	154	356	464	—	107	1	137	2,095	132
Paddington ... ..	145,107	831	737	23.0	20.4	2.86	103	9	74	1	10	1	—	4	—	4	46	152
Kensington ... ..	177,605	968	849	21.9	19.2	1.98	87	0	60	9	7	2	—	2	—	1	54	140
Hammersmith ... ..	114,210	816	595	28.7	20.9	1.94	55	8	35	2	5	2	—	—	—	5	47	126
Fulham ... ..	143,102	1,236	768	34.7	21.5	3.43	123	8	79	5	13	8	—	2	—	2	50	138
Chelsea ... ..	74,018	458	419	24.8	22.7	0.91	17	1	3	2	4	4	—	1	—	3	30	144
City of Westminster ...	180,800	876	964	19.4	21.4	1.93	87	33	25	3	9	3	—	—	—	3	60	116
St. Marylebone ... ..	132,069	1,007	803	30.6	24.4	3.37	111	17	60	3	9	3	—	—	—	4	17	96
Hampstead ... ..	83,743	415	305	19.9	14.6	1.11	23	2	6	4	3	—	—	—	—	4	17	146
St. Pancras ... ..	235,596	1,624	1,314	27.7	22.4	2.51	147	41	28	18	33	18	—	7	—	2	131	131
Islington ... ..	337,268	2,378	1,798	28.3	21.4	2.22	186	17	53	15	28	36	—	9	—	8	156	131
Stoke Newington ... ..	51,700	258	229	20.0	17.8	1.73	22	5	1	2	2	9	—	—	—	1	16	132
Hackney ... ..	221,926	1,641	1,081	29.7	19.5	1.99	110	25	17	2	27	30	—	5	—	4	99	181
Holborn ... ..	58,535	408	403	28.0	27.6	4.19	61	43	3	4	2	5	—	—	—	3	57	135
Finsbury ... ..	100,487	959	689	38.3	27.5	3.72	93	26	36	1	14	11	—	3	—	2	62	147
City of London ... ..	25,598	93	169	14.6	26.5	1.41	9	3	3	1	2	—	—	—	—	—	17	140
Shoreditch ... ..	117,980	1,041	758	35.4	25.8	4.69	138	61	27	1	9	29	—	3	—	8	60	167
Bethnal Green ... ..	129,889	1,186	828	36.6	25.6	3.62	117	33	17	6	10	43	—	6	—	2	80	143
Stepney ... ..	300,551	3,039	1,838	40.6	24.5	4.16	311	173	28	6	23	57	—	8	—	17	144	133
Poplar ... ..	169,214	1,561	978	37.0	23.0	4.03	128	50	17	4	12	29	—	6	—	9	90	145
Southwark ... ..	260,825	1,748	1,232	33.9	23.9	2.58	133	39	27	10	21	21	—	6	—	9	144	144
Bermondsey ... ..	130,218	1,110	781	34.5	20.1	1.56	51	7	4	8	7	20	—	1	—	4	77	145
Lambeth ... ..	305,102	2,292	1,645	39.9	18.1	1.44	119	35	25	7	11	28	—	4	—	9	130	127
Battersea ... ..	171,401	1,278	775	29.9	16.7	1.61	62	14	24	6	3	10	—	1	—	4	67	115
Wandsworth ... ..	241,810	1,533	1,006	25.4	18.8	1.40	97	16	34	4	21	12	—	8	—	2	63	126
Camberwell ... ..	262,775	1,893	1,233	28.9	18.2	1.40	92	17	—	14	23	27	—	4	—	7	116	115
Deptford ... ..	111,577	877	505	31.5	20.1	1.59	44	18	1	5	6	5	—	4	—	5	35	112
Greenwich ... ..	98,013	706	492	28.0	16.1	1.59	39	9	12	3	5	8	—	—	—	2	37	153
Lewisham ... ..	132,432	829	539	24.3	20.3	1.69	56	5	2	4	13	25	—	3	—	2	34	109
Woolwich ... ..	119,556	948	563	31.8	18.9	2.08	62	14	20	4	3	16	—	2	—	3	57	122

**VITAL STATISTICS OF LONDON DURING THE FIRST QUARTER OF 1902.**

[SPECIALLY REPORTED FOR THE BRITISH MEDICAL JOURNAL.]

In the accompanying table will be found summarized the vital statistics of the cities and boroughs in the County of London, based upon the Registrar-General's returns for the first, or winter, quarter of the year. The mortality figures relate to the deaths of persons actually belonging to the various metropolitan boroughs, and are the result of a complete system of distribution of deaths occurring in the public institutions of London among the various boroughs in which the deceased persons had previously resided.

The 34,009 births registered in London during the three months ending March last were equal to an annual rate of 20.8 per 1,000 of the population, estimated at 4,579,107 persons in the middle of the year; this rate was 0.3 per 1,000 below that recorded in the corresponding period of the previous year, and was 1.5 below the average rate in the first quarters of the ten years, 1892-1901. The birth-rates in the various boroughs ranged from 14.6 in the City of London, 19.4 in the City of Westminster, 19.9 in Hampstead, 20.0 in Stoke Newington, and 21.9 in Kensington to 35.4 in Shoreditch, 36.6 in Bethnal Green, 37.0 in Poplar, 38.3 in Finsbury, and 40.6 in Stepney.

The 24,291 deaths of persons belonging to London, registered during the quarter under notice, were equal to an annual rate of 21.3 per 1,000, against 20.3, 23.1, and 18.6 in the corresponding periods of the three preceding years; the mean death-rate in the ten preceding first quarters was 21.7 per 1,000. The lowest death-rates last quarter in the various metropolitan boroughs were 14.6 in Hampstead, 16.3 in Lewisham, 16.7 in Wandsworth, 17.8 in Stoke Newington, and 18.2 in Deptford; the highest rates were 24.5 in Stepney, 24.8 in Shoreditch, 26.5 in the City of London, 27.5 in Finsbury, and 27.6 in Holborn.

During last quarter 2,683 deaths resulted from the principal zymotic diseases in London; of these, 734 were referred to small-pox, 730 to measles, 154 to scarlet fever, 356 to diphtheria, 464 to whooping-cough, 107 to enteric fever, 1 to simple continued fever, and 137 to diarrhoea. These 2,683 deaths were equal to an annual rate of 2.34 per 1,000, against an average of 2.21 per 1,000 in the corresponding periods of the ten preceding years. In the first quarters of the three preceding years the rates had been 1.71, 1.83, and 1.54 per 1,000 respectively. The lowest zymotic death-rates last quarter were 0.91 in Chelsea, 1.11 in Hampstead, 1.40 in Camberwell, 1.41 in the City of London, and 1.59 in Deptford and in Greenwich; the highest rates were 3.62 in Bethnal Green, 3.72 in Finsbury, 4.16 in Stepney, 4.19 in Holborn, and 4.69 in Shoreditch. Small-pox showed the highest proportional fatality in Holborn, Finsbury, Shoreditch, Bethnal Green, Stepney, and Poplar; measles in Paddington, Kensington, Hammersmith, Fulham, St. Marylebone, and Finsbury; scarlet fever in Kensington, St. Pancras, Holborn, Bermondsey, and Camberwell; diphtheria in St. Pancras, Islington, Hackney, Finsbury, Southwark, and Lewisham; whooping-cough in Stoke Newington, Shoreditch, Bethnal Green, Poplar, Wandsworth, and Deptford; "fever" in St. Marylebone, Hampstead, Bethnal Green, Poplar, Wandsworth, and Deptford; and

diarrhoea in Fulham, the City of Westminster, Holborn, Shoreditch, and Stepney.

During the first quarter of the year 2,095 deaths from phthisis were registered, equal to an annual rate of 1.84 per 1,000, against 2.00, 2.07, and 1.82 in the corresponding quarters of the three preceding years. Among the various metropolitan boroughs the lowest phthisis death-rates last quarter were recorded in Kensington, Hampstead, Stoke Newington, Wandsworth, Deptford, and Lewisham; and the highest rates in Holborn, Finsbury, the City of London, Bethnal Green, Southwark, and Bermondsey.

Infant mortality, measured by the proportion of deaths under one year of age to registered births, was equal to 132 per 1,000 last quarter, against 129, 138, and 126 in the corresponding quarters of the three preceding years. The rates of infant mortality during the quarter under notice were lowest in Hampstead, Hackney, Battersea, Camberwell, Deptford, and Lewisham; while the highest rates were recorded in Paddington, St. Pancras, Finsbury, Shoreditch, and Greenwich.

**VACCINATION LEGISLATION IN MASSACHUSETTS.**

A BILL making the vaccination laws more strict and permitting exemption certificates to be issued only by registered physicians after a personal examination, and stating the reason for the exemption, has been allowed to go to a third reading in the Massachusetts Legislature without opposition.

**MEDICAL NEWS.**

**QUEEN VICTORIA MEMORIAL HOSPITAL AT NICE.**—At a public meeting held on March 8th at Nice it was decided, on the motion of Dr. Gilchrist, which was seconded by Mr. Woodall and warmly supported by many persons of influence in the British and American colonies, that the memorial to be established in Nice in honour of the late Queen Victoria should take the form of a cottage hospital conducted on unsectarian lines. Dr. Gilchrist stated that a similar institution had been a marked success in Cannes. Her late Majesty Queen Victoria was keenly interested in all works of medical beneficence, and there was ample evidence of the high value which the King placed upon all measures which could arm them for the struggle against physical inefficiency, disease, and death. Many donations towards the building fund have already been announced, including one of £400 from an English visitor to Nice, and it is intended that an entertainment in aid of the memorial funds shall shortly be given.

**THE LATE MR. WILLIAM MARTINDALE.**—At a meeting of the former colleagues and friends of the late Mr. William Martindale, held at the Pharmaceutical Society, March 4th, it was resolved that steps should be taken to procure a bust of the well known pharmacist who was a past President and Treasurer of the Society, to be placed in the house of the Society. It was further resolved that in the event of the response being satisfactory, a medal or some other encouragement for the advancement of pharmacy should also be provided.

**THE PATHOLOGICAL STUDY OF INSANITY.**—At a meeting of the Committee of Management of the Down District Asylum, held on March 15th, Dr. M. J. Nolan, Resident Medical Superintendent, having submitted the statement by the Special Committee (of which he is a member) of the Medico-Psychological Association of Great Britain and Ireland on the necessity for the establishment of a central laboratory in Ireland for the more particular investigation of the pathology of insanity, the Committee of Management expressed warm approval of the proposal, and stated its readiness to affiliate the Down District Asylum with such an undertaking when it assumed a practical shape, and to contribute towards its maintenance a sum of £25 per annum.

**THE NEW MEDICAL OFFICER OF THE LONDON SCHOOL BOARD.**—Before the departure of Dr. Kerr, the late Medical Officer of the Bradford School Board, to take up his new appointment in London, the office staff of the Bradford School Board presented him with a rosewood clock. Mr. Garbutt, the Clerk of the Board, in making the presentation, testified to the amicable relations that had always existed between the staff and Dr. Kerr, and conveyed to him the expression of their good wishes on his behalf. The clock bore the following inscription: "Presented to Dr. Kerr by the officials of the Bradford School Board on his appointment as Chief Medical Officer for the School Board of London." Dr. Kerr said that the kindness of the officials had touched him deeply, and he would find stimulus in his new work in the Bradford memories he would carry with him.

**FEMALE PARISH MEDICAL OFFICERS IN THE HIGHLANDS.**—In the *BRITISH MEDICAL JOURNAL* of April 5th we stated on the authority of an evening newspaper which is usually well informed, that Dr. Jane Boyes was the first woman parish medical officer appointed in the Highlands. Miss Kathleen Olga Vaughan, M.B. London, writes to point out that this statement is inaccurate. Orkney has had women parish medical officers for several years. The first was Dr. Hannay for the island of Flotta, Orkney, succeeded by Dr. Kate Hogg, who afterwards held the islands of Eday and Pharay, and was herself succeeded in Eday and Pharay by Dr. Caroline O'Connor. Dr. Eleanor Hodson held Longhope, succeeded by Dr. Baker, and the island of Papa Westray has had Dr. Alice Craig. Dr. Jeannie Traill, who now holds an appointment in one of the Western Isles, was succeeded by Dr. Prudence Gaffikin, who in turn was succeeded by Dr. Jeanie Newton, who now holds the post. We understand that Papa Westray always advertises for a lady. Dr. Jane Boyes, therefore, is the tenth woman parish medical officer in the Highlands and islands.

**"SURRA" IN THE PHILIPPINES.**—According to the *New York Medical Record*, a circular issued by the Military Governor of the Philippines, dated January 11th, 1902, states that an Army Medical Board, ordered to inquire into and investigate a disease of animals known as "surra," has found that liquor potassii arsenitis, injected intravenously, in nearly every case destroys the parasites in the blood recently shown by Captain A. M. Smith, Assistant-Surgeon, U.S.A., to produce this disease. Animals so treated are doing well, but the results are not yet conclusive in regard to the prospects of permanent cure. The circular recommends that this treatment should be tried at all points where animals are infected. The Board having also found that common house flies taken on sick animals are frequently full of the blood parasites of "surra" the Military Governor has ordered that hereafter all abrasions or wounds of sick animals are to be kept covered, to prevent the possibility of transmitting the disease by means of these insects. As "surra" has become widely prevalent throughout the Philippine Islands, and by the mortality (85

to 100 per cent.) which it causes not only seriously interferes with the stock-raising industry and the supply of fresh animal food, but also severely impairs the efficiency of the army transportation service, this latest scientific discovery of the United States Army Medical Department is regarded as of high economic as well as military importance.

**MEMORIAL TO THE LATE DR. WILLIAM LONGSTAFF WHITE WALKER.**—When news came from South Africa in February, 1901, that Dr. W. L. W. Walker, son of Dr. Allan Walker of Seaton Burn, Newcastle-upon-Tyne, had been killed in action at Modderfontein on January 31st, 1901, no time was lost in gathering funds to erect a memorial as a mark of esteem to the gallant young civil surgeon. On April 5th there were gathered together in the quiet little cemetery at North Gosforth, not far from Newcastle-upon-Tyne, many friends to witness the unveiling of a granite monument to the memory of the late Dr. Walker, who lost his life while endeavouring to save a wounded orderly. His courage on the battlefield drew from the Boer Commandant Smutz expressions of regard and commiseration. The body of the deceased was buried in the same grave as that of the orderly whom he tried to save. The sad duty of unveiling the stone concealed by the Union Jack fell to his friend and teacher, Professor Sir George Hare Philipson, who in a few well-chosen and appropriate words alluded to the many excellent qualities of his former pupil as well as to the kindly actions he did to those by whose hands he received his fatal wounds.

## MEDICAL VACANCIES.

The following vacancies are announced:

- BETHNAL GREEN INFIRMARY.**—Assistant Medical Officer. Salary at the rate of £100 per annum, with furnished apartments, board, and washing. Applications, on forms to be obtained from the Medical Superintendent of the Infirmary, to whom they should be returned by April 15th.
- BIRMINGHAM PARISH WORKHOUSE INFIRMARY.**—Assistant Resident Medical Officer. Salary, £100 per annum, with furnished apartments, rations, etc. Applications to the Clerk to the Guardians, Parish Offices, Edmund Street, Birmingham, by April 18th.
- BOOTLE BOROUGH HOSPITAL.**—Junior House-Surgeon. Salary, £80 per annum, with board, residence, and laundry. Applications to the Secretary.
- BRADFORD ROYAL INFIRMARY.**—Dispensary Surgeon. Salary, £100 per annum, with board and residence. Applications, endorsed "Dispensary Surgeon," to be sent to the Secretary.
- BRENTFORD UNION.**—Assistant Medical Superintendent of the Infirmary and Assistant Medical Officer of the Workhouse and Schools, unmarried. Salary, £120 per annum, with furnished apartments, rations, washing, etc. Applications on forms provided to be sent to the Clerk to the Guardians, Union Offices, Isleworth, by April 25th.
- BRIDGWATER INFIRMARY.**—House-Surgeon. Salary, £80 per annum, with board and residence. Applications to Mr. John Coombs, Honorary Secretary.
- CAMBRIDGESHIRE, ETC., LUNATIC ASYLUM, Fulbourn.**—Assistant Medical Officer, unmarried. Salary, £150 per annum, with board lodging, and attendance. Applications to the Clerk to the Visitors, 18 Emmanuel Street, Cambridge, by April 25th.
- CANTERBURY, KENT AND CANTERBURY HOSPITAL.**—Honorary Surgeon. Applications to the Secretary by April 25th.
- CARLISLE, CUMBERLAND AND WESTMORLAND ASYLUM, Garlands.**—Junior Assistant Medical Officer, unmarried, and not over 30 years of age. Salary, £130 per annum, rising to £150, with board and lodging. Applications to the Medical Superintendent.
- CENTRAL LONDON SICK ASYLUM DISTRICT.**—Assistant Medical Officer. Salary, £120 per annum, with board and residence. Applications to the Clerk, Cleveland Street Asylum, Cleveland Street, W.
- CORNWALL COUNTY ASYLUM, Bodmin.**—Junior Assistant Medical Officer, unmarried. Salary, £120 per annum, rising to £150, with board, furnished apartments. Applications to the Medical Superintendent by April 25th.
- COSFORD UNION.**—(1) Medical Officer and Public Vaccinator for the Bileston District. Salary, £73 per annum, and fees. (2) Medical Officer of the Workhouse. Salary, £50 per annum, and fees. Applications to be sent to the Clerk to the Guardians by May 1st.
- DUBLIN: ROYAL UNIVERSITY OF IRELAND.**—External Examiners in Surgery, Midwifery, Pathology, and Ophthalmology. Remuneration, £50, £35, £25, and £20 respectively, with usual travelling, etc., allowances. Applications to the Secretaries by April 19th.
- DURHAM COUNTY ASYLUM, Winterton, Ferryhill.**—Junior Assistant Medical Officer. Salary, £150 per annum, rising to £180, with apartments, board, laundry and attendance. Applications to the Medical Superintendent.
- EAST LONDON HOSPITAL FOR CHILDREN, Shadwell.**—Medical Officer for the Electrical Department; must be M.B.C.P. Lond. Applications to the Secretary by April 19th.
- GUY'S HOSPITAL DENTAL SCHOOL.**—Travelling Scholarship of the value of £100. Applications to the Dean, Guy's Hospital, S.E., by June 1st.
- HANLEY, STOKE, AND FENTON JOINT HOSPITAL BOARD.**—Resident Assistant Medical Officer at the Infectious Diseases Hospital, Bucknall. Salary, £50 per annum, with board, residence, and washing. Applications to the Clerk of the Board, Town Hall, Hanley, Staffs.
- HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.**—(1) House-Surgeon; unmarried. Appointment for six months. Salary, £20. Washing allowance, £2 10s., with board and residence. (2) Medical Registrar. Honorarium, 50 guineas per annum. Applications on forms provided to be sent to the Secretary by April 25th.
- ISLE OF MAN: KING WILLIAM'S COLLEGE.**—Medical Officer. Applications to the Secretary by May 1st.
- KING'S LYNN: WEST NORFOLK AND LYNN HOSPITAL.**—House-Surgeon. Salary, £100 per annum, with board, residence and washing. Applications to the Chairman of the Weekly Board by April 25th.
- LEEDS: GENERAL INFIRMARY.**—(1) House-Physician. Appointment for six months. Board, lodging, and washing provided. Applications to the Secretary of the Faculty by April 18th. (2) Honorary Dental Surgeon. Applications to the General Secretary by April 17th.
- LEEDS: HOSPITAL FOR WOMEN AND CHILDREN.**—Non-Resident House-Surgeon. Appointment for six months, but eligible for re-election. Salary at the rate of £125 per annum. Applications to the Secretary of the Faculty by April 17th.

**LEICESTER INFIRMARY.**—Assistant House-Surgeon. Salary, £80 per annum, with board, apartments, and washing. Applications to the Secretary, 24, Friar Lane, Leicester, by April 14th.

**LINCOLN HOSPITAL FOR THE INSANE.**—Assistant Medical Officer. Salary, £100 per annum. Applications to the Medical Superintendent, The Lawn, Lincoln.

**LISCARD: WALLASEY DISPENSARY AND VICTORIA CENTRAL HOSPITAL.**—House-Surgeon, unmarried. Salary, £100 per annum, and board. Applications to Mr. Andrew Lindsay, Newbold, Liscard, Liverpool, by April 25th.

**LIVERPOOL INFIRMARY FOR CHILDREN.**—Assistant House-Surgeon. Appointment for six months. Salary, £25, with board and lodging. Applications to the Hon. Treasurer by April 25th.

**LIVERPOOL STANLEY HOSPITAL.**—Third House-Surgeon. Salary, £70 per annum, with board, residence, and washing. Applications to the Chairman of the Medical Board by April 16th.

**LONDON TEMPERANCE HOSPITAL.** Hampstead Road, N.W.—Assistant Resident Medical Officer. Appointment for six months. Honorarium at the rate of 50 guineas per annum, with board, residence and washing. Applications to the Secretary by May 1st.

**LONDON UNIVERSITY.**—Demonstrator in the Physiological Laboratories. Initial salary, £150. Applications to the Principal by April 14th.

**NATAL: BOROUGH OF DURBAN.**—Medical Officer of Health, must possess public health qualification (B.Sc. or D.P.H.). Salary at the rate of £710 per annum. Applications to Messrs. Webster, Steel and Co., 5, East India Avenue, Leadenhall Street, E.C.

**NEWCASTLE-ON-TYNE DISPENSARY.**—Visiting Medical Assistant. Salary, £160 for first year, £180 afterwards. Applications, on forms to be obtained from the Resident Medical Officer, to be sent to the Honorary Secretary, Mr. Joseph Carr, 41, Mosley Street, Newcastle-on-Tyne, by April 21st.

**NEWCASTLE AND GATESHEAD WATER COMPANY'S CATCLEUGH WATER WORKS.**—Medical Officer. Salary, £200 per annum, and drugs found. Applications to Mr. G. C. Hensell, C.E., Resident Manager.

**NORWICH: NORFOLK AND NORWICH HOSPITAL.**—House-Surgeon, unmarried, and not more than 30 years of age. Salary, £80 per annum, with board, lodging, and washing. Applications to the Secretary by April 15th.

**NOTTINGHAM GENERAL DISPENSARY.**—Assistant Resident Surgeon, unmarried. Salary, £100 per annum, increasing £10 yearly, with furnished apartments, etc. Ladies not eligible. Applications to the Secretary, Mr. M. J. Preston, Journal Chambers, Nottingham.

**NOTTINGHAM PARISH INFIRMARY.**—Assistant Medical Officer. Salary, £160 per annum, and furnished rooms. Applications to the Clerk to the Guardians, Poor Law Offices, Shakespeare Street, Nottingham.

**RAINHILL: COUNTY ASYLUM.**—Assistant Medical Officer; unmarried, and not more than 30 years of age. Salary, £150 per annum, with prospect of rising to £200 and further increase according to promotion, with furnished apartments, board, attendance, and washing. Applications to the Medical Superintendent.

**ROYAL COLLEGE OF SURGEONS OF ENGLAND.**—(1) Four Examiners in Elementary Biology, first examination; (2) Four Examiners in Anatomy, second examination, must be F. or M.B.C.S.; (3) Three Examiners in Physiology, second examination; (4) Four Examiners in Midwifery, third examination; (5) Examiner for Part I and Examiner for Part II for the Examination in Public Health; (6) Four Examiners in Anatomy; (7) Four Examiners in Physiology. Vacancies 1 to 5 are for Conjoint Examining Board, and 6 and 7 are for the Fellowship. Applications to the Secretary by April 25th.

**ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.**—(1) Clinical Pathologist. Salary, £75 per annum. (2) Assistant Pathologist. Salary, £25 per annum. (3) Resident House-Physician. (4) Resident House-Surgeon. (5) House-Physician. (6) House-Surgeon. Candidates for (1) (2) (3) and (4) must be qualified medical men. Board, etc., provided for (3) (4) (5) and (6). Applications to the Secretary by April 19th.

**SALISBURY: FISHERTON ASYLUM.**—Assistant Medical Officer; unmarried, and about 30 years of age. Salary, £150 per annum to commence. Applications to Dr. Finch.

**TEIGNMOUTH HOSPITAL.**—House-Surgeon. Salary, £70 per annum, with board, lodging, and washing, and £6 per annum in lieu of stimulants or mineral waters. Application to the House-Committee.

**TYNEMOUTH INFIRMARY.**—Two House-Surgeons, one on May 1st and the other on October 1st. Salary, at the rate of 38 guineas per annum, with rooms, board, and washing. Applications to Dr. F. C. Mears, 11, Northumberland Square, North Shields.

**WARRINGHAM LUNATIC ASYLUM.**—Medical Superintendent. Salary, £450 per annum, with unfurnished house, etc. Applications, endorsed "Applications for Medical Superintendent, Lunatic Asylum," to be sent to the Clerk to the Visiting Committee, Town Hall, Croxson, by May 7th.

**WEST END HOSPITAL FOR NERVOUS DISEASES, Welbeck Street, W.**—Honorary Dental Surgeon. Must be L.D.S.Eng. Applications to the Secretary by April 25th.

**WEST LONDON HOSPITAL, Hammersmith Road, W.**—Honorary Officer in charge of X-Ray Department, must be registered. Applications to the Secretary-Superintendent by April 25th.

### MEDICAL APPOINTMENTS.

**BUTLER, Hon. G. H., M.R.C.S.Eng., L.R.C.P.Lond.**, appointed Honorary Medical Officer to the Robert Hospital, Tarnsfield, by appointment.

**BYRNE, W. J. S., B.A., M.B., Ch.B.**, appointed Junior Anaesthetist to the Manchester Royal Infirmary, vice J. Turville Smith, M.B.C.S., L.R.C.P., resigned.

**CLAPHAM, Lucy B., M.B.Lond.**, appointed Obstetric Physician to the New Hospital for Women, Euston Road; and appointed Assistant Anaesthetist to the Royal Free Hospital.

**COLLINS, James C., M.B., B.Ch., Trin. Coll., Dub.**, appointed Senior Medical Officer at the Auckland Hospital, New Zealand.

**Cox, Harrie, M.D., Syd.**, appointed General Medical Officer and Vaccinator at Warren, New South Wales, vice J. H. Wilson, L.R.C.P., L.R.C.S.Eng., resigned.

**DAVY, T. G., M.B.C.S.Eng., L.S.A.**, appointed Honorary Medical Officer to the Fremantle Hospital, Western Australia, vice Dr. Hope, resigned.

**ERSON, Edward G. L., L.R.C.P.Eng., L.R.C.S.Eng.**, appointed Health Officer at Peak Hill, Western Australia, vice O'Flaherty, L.R.C.P., L.R.C.S.Eng., resigned.

**GIMBLETT, W. H., M.D.**, reappointed for 8 years as Medical Officer of Health for the Urban District of Buckhurst Hill, Essex.

**HARMAN, N. Bishop, M.A., M.B.Cantab., F.R.C.S.Eng.**, appointed Ophthalmic Surgeon to the Belgrave Hospital for Children, vice E. Treacher Collins, F.R.C.S.Eng., resigned.

**HARRITT, Charles J., M.D.Lond., M.R.C.S., L.R.C.P.**, appointed Honorary Assistant Visiting Surgeon to the Royal Sea-Bathing Hospital, Margate.

**HODGSON, R. E., M.R.C.S., L.R.C.P.**, appointed Senior Resident Surgeon to the Royal Sea-Bathing Hospital, Margate.

**HUNTER, W. M., M.B., B.Ch.E.U.I.**, appointed Certifying Factory Surgeon for the Greenwich District of Antism.

**LAWLIE, John, L.R.C.P., L.R.C.S.Eng.**, appointed Medical Officer at Boonah, Queensland, vice J. H. Finemore, L.R.C.P.Eng., L.S.A., resigned.

**MITCHELL, James Thomas, M.D., Ch.M.Aberd., M.B.C.S.Eng.**, appointed Resident Medical Officer to the Ballarat General Asylum and Lying-in Home, vice Thomas Le Gay Holthouse, M.R.C.S.Eng.

**REIAOE, James, M.B., C.M.Eng.**, appointed Government Medical Officer and Vaccinator at Molong, New South Wales, vice E. Lamb, M.B., C.M.Eng., resigned.

**REID, W. H., M.B., Ch.M.Syd.**, appointed Junior Medical Officer in the Department of Lunacy of New South Wales.

**SAUNDERS, Leonard Douglas, M.R.C.S.Eng., L.R.C.P.Lond.**, appointed House-Surgeon to the Hastings, St. Leonards and East Sussex Hospital, Hastings.

**SEABROOK, Edwin Fraser, M.D.**, appointed Health Officer under the Quarantine Acts for South Australia.

**SEABROOK, L. L., jun., M.B., Ch.B. Adelaide**, appointed Resident Medical Officer of Broken Hill Hospital, New South Wales.

**SPEERS, John W. L., L.R.C.P., L.R.C.S.Eng.**, appointed Non-Resident House-Physician and Surgeon to the Deaconess Hospital, Edinburgh; and reappointed Clinical Assistant to Electrical Department, Royal Infirmary, Edinburgh.

**TURNER, E. R., M.B., C.M.Aberd.**, appointed Medical Officer and Vaccinator for the Parish of Kinellar, vice J. Cameron, L.R.C.S.Eng.

**WHITTE, Margaret, M.B., Ch.M.Syd.**, appointed House-Surgeon to the Children's Hospital, Adelaide, South Australia.

**WILLIAMSON, Oliver K., M.A., M.B., R.C.Cantab., M.R.C.P.Lond., M.R.C.S.Eng.**, appointed Medical Registrar to the Middlesex Hospital.

**WOELLMANN, Arthur B., M.D., B.S.Lond.**, appointed Official Balneologist to the Government of New Zealand.

**YKMAN, Charles, M.B.**, appointed Medical Officer for the Hollington District of the Battle Union.

### DIARY FOR NEXT WEEK.

#### MONDAY.

**Otological Society of the United Kingdom.** 11, Chandos Street, Cavendish Square, W., 4.30 p.m.—Presentation and discussion of report by Mr. Arthur H. Cheate on the Examination of the Ears of One Thousand School Children.

**Medical Society of London.** 11, Chandos Street, Cavendish Square, W., 8.30 p.m.—Clinical Evening. Dr. Parkes Weber: The Infantile Form of Rheumatism associated with Chronic Changes of Spleen, Liver, and Lymph Glands. Dr. W. Ewart: Case of Chronic Nephritis illustrating the Treatment by Drainage and Feeding. Dr. Bertrand Dawson: (1) Fibrosis of Lung, probably Syphilitic; (2) Aortic Incompetence with Marked Diastolic Thrill; (3) Tuberculous Disease of Lung and Knee-joint in Connection with Albuminuria and Paralysis of the left Sixth and Seventh Cranial Nerves; (4) Hypertrophic Osteoarthropathy. Dr. St. Clair Thomson and Mr. A. Carless: Epithelioma of Epiglottis and Back of Tongue; removal by Transhyoid Pharyngotomy. Dr. H. D. Rolleston: Pigmentation (Blue Line) of the Lip. Dr. St. Clair Thomson: Ulceration of the Left Ala Nasi, probably syphilitic, but Unchecked by Treatment.

#### TUESDAY.

**Pharmaceutical Society of Great Britain.** 17, Bloomsbury Square, W.C., 8 p.m.—Dr. Augustine Henry: On Chinese Drugs.

**Pathological Society of London.** 30, Hanover Square, W., 8.30 p.m.—Mr. A. G. R. Foulerton: A Case of Tuberculosis in a Sheep. Mr. H. J. Waring: A New Method of Separation of the Toxin of Tetanus from the Solid Viscera of the Human Body. Dr. F. W. Andrews: The Recognition of Tetanus after Death by the Isolation of the Toxin from the Viscera. Drs. J. W. Washbourn and J. W. H. Eyre: The Pathogenic Action of Strains of Pneumococcus Isolated from Various Sources. Mr. N. Bishop Harman: Further Contribution to the Bacteriology of the Veld Sore.

#### WEDNESDAY.

**Royal Microscopical Society.** 20, Hanover Square, W., 7.30 p.m.

**Royal Meteorological Society.** Institution of Civil Engineers, Great George Street, Westminster, S.W., 7.30 p.m.

**British Balneological and Climatological Society.** 20, Hanover Square, W., 8.30 p.m.—Discussion adjourned from the last meeting, on Chronic Affections of the Kidney, and Morbid Conditions of the Urine arising therefrom, in Relation to Balneological, Climatic, and Dietetic Treatment.

#### FRIDAY.

**Society for the Study of Disease in Children.** 11, Chandos Street, Cavendish Square, W., 5.30 p.m.—Cases by Dr. Edmund Cantey, Mr. Sydney Stephenson, and Dr. Dan McKenzie. Specimens by Dr. J. H. Thomson Walker. Papers:—Mr. E. H. Whitelocke (Oxford): Notes on a Case of Doule Inguinal Hernia in a Female Child, each Sac containing an Ovary-like Organ. Dr. G. Carpenter: A Case of Malignant Endocarditis which developed Optic Papillitis, Sub-retinal Haemorrhages, and Simulated Choroidal Tubercle, and other Changes in the Fundus Oculi.

#### POST-GRADUATE COURSES AND LECTURES.

**Medical Graduates' College and Polyclinic.** 22, Chancery Street, W.C.—Demonstrations will be given at 4 p.m. as follows:—Monday, skin; Tuesday, medical; Wednesday, surgical; Thursday, surgical; Friday, eye.

### 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 orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.*

#### BIRTHS.

**ALLISON.**—At Portrush, Ireland, on April 2nd, the wife of Lieutenant-Colonel H. Allison, M.D., I.M.S., of a son.

**SHAW.**—On Easter Day, at 32, New Cavendish Street, Cavendish Square, W., the wife of John Shaw, M.D.Lond., M.R.C.P., of a daughter.

#### MARRIAGES.

**BARNBY-DAVISON.**—On April 2nd, at the Parish Church, Stokesley, Yorkshire, by the Rev. J. Groves, Vicar of Redcar, William Henry, L.R.C.P. and S., youngest son of the late John Eager Barnby, of Great Yarmouth, to Hilda, second daughter of the late Robert Davison, Southfield Villas, Middlesbrough.

**BASSANO-HOFMANN.**—On April 2nd, at the English Church, Geneva, Switzerland, by the Rev. J. F. Christie, Harold Frederic Bassano, M.A., M.B., B.C.Cantab., etc., of Old Hill, Staffs., to Ljdia Lucil, younger daughter of Herr Rud. Hofmann, of Lucerne, Switzerland.

**BROWN-MORTIMER.**—On April 3rd, at the Parish Church, Matson, by the Rev. Canon Bazeley, Rector, assisted by the Rev. A. Richmond (uncle of the bride), Walter Brown, M.B., of Gloucester, to Mary Eliza, daughter of G. H. Mortimer, of Boddington, Surrey.

**COLLINS-CLARKE.**—On April 3rd, at St. Alkmund's Church, Derby, by the Rev. A. E. Hunt, M.A., Vicar, assisted by the Rev. S. E. Collinson, the bridegroom's brother, Frederick William Collinson, M.D., of Preston, to Clara, daughter of the late Thomas Clarke, of Derby.

**CRAWLEY-BLICK.**—On April 3rd, at Christ Church, Forest Hill, Herbert E. Crawley, M.R.C.S.Eng., L.R.C.P.Lond., to Agatha, daughter of the late Thomas E. Blick, M.B.C.S., of Islip, Oxon.

**FOWLER-MAXON.**—At the Cathedral, Bangor, on April 2nd, by the Rev. William Edwards, M.A., Vicar, assisted by the Rev. James Stewart Fowler, M.D., F.R.C.P.Eng., second surviving son of the late J. S. Fowler, M.D., Demerara, to Edith Isabella Hudson, M.B., eldest daughter of the late F. S. Hudson, C.E., Decan, India.

**HENRY-FARR.**—On April 5th, at Immanuel Church, Streatham Common, by the Rev. H. F. Adams, M.A., Vicar, Geo. Nicol Henry, M.B., fourth son of the late Andrew Henry, of Maddington, to Mary Louise, youngest daughter of the late Dr. George Frederick Farr, of Kennington and East Twickenham, and Mrs. Farr, of Oakdale Road, Streatham.

#### DEATH.

**CHILTON.**—On April 2nd, at 14, Cambridge Park, Redland, Bristol, Reginald Horace Chilton, M.B.C.S., L.R.C.P., aged 31, third son of Horace Chilton, Esq., Solicitor and Under Sheriff of Bristol.