

sebaceous variety affecting both cheeks and nose. The disease presented the most typical "butterfly" outline; its surface was covered by scales of a peculiar greyish, mortar-like character, and here and there horny excrescences were observed. The upper lip was perfectly healthy, but the lower lip was occupied by a huge epithelioma which overhung the chin (see Fig. 1, taken from a water-colour drawing). This was excised with a good result (see Fig. 2).

The patient returned in 1893 with an epitheliomatous ulcer originating from a horny excrescence on the tip of the nose. This was treated with *potassa fusa*.

The above particulars are taken from Dr. J. J. Pringle's article on multiple epithelioma which appeared in the *British Journal of Dermatology* of January, 1900, from notes supplied by me. I lost sight of the man until he appeared at my clinic at the Liverpool Skin Hospital on July 10th, 1901.

Present Condition.—The lupus erythematosus had not increased in area, was less scaly, and had none of the warty excrescences before mentioned, but was in no sense atrophic. His lower lip presented a well-marked red, glazed patch of the disease, but there was not the slightest evidence of a return of the epithelioma. On the nose, however, was a large, soft, cauliflower growth, involving the whole surface of that organ. This was extremely vascular, and had become so offensive to his fellows that he was compelled to seek advice (see Fig. 3).

Treatment.—Having had a fair experience of the *x* rays in dealing with malignant growths I decided, first, in order to save time, to remove as much as possible of the growth with a scraper and then submit the raw surface to their influence. On July 11th I thoroughly scraped the nose under nitrous oxide anaesthesia, and as soon as the bleeding was arrested began the treatment. This was confined entirely to the nose, the other portions of the face being protected with a lead foil mask. Ten-minute exposures were given daily, Sundays excepted, until August 21st, when the healing process, which had hitherto been rapid, became arrested, and the newly-formed epithelium melted away. This was evidence to me that the exposures were too long or too frequent, consequently they were postponed until August 31st, when five-minute exposures were given daily until September 7th; these were resumed again on October 5th, when ten-minute exposures were ordered twice weekly through a mere slit in the mask to a fine line of unhealed tissue. The nose was completely healed on October 26th (see Fig. 4). During the treatment an ointment of acid salicylic gr. x, ad. 3j, and finally lotio rub. were used. At the request of the patient the lupus erythematosus was not exposed to the rays.

Microscopical Examination.—This was made by my colleague Dr. MacKenna. Portions of the tissues removed by the curette on July 11th were preserved in 2 per cent. formalin, hardened in alcohol, embedded in paraffin, and cut. The sections were stained with logwood and eosin, and on microscopical examination presented the following appearances. There was great proliferation of the epithelial cells, which penetrated deeply in long branching columns into the subjacent connective tissue. In the connective tissue surrounding the epithelial columns there was considerable leucocytic infiltration. Scattered about the field were homogeneous masses surrounded by closely-packed and flattened epithelial cells with elongated nuclei—the "cell nests" typical of a squamous epithelioma. The microscopical examination therefore confirms the diagnosis of epithelioma made from the clinical history and phenomena.

REMARKS.

The development of epithelioma on lupus erythematosus is a very rare disease, and I would refer those who desire further acquaintance with the subject to Dr. Pringle's article. But it is rarer still for any one to have the opportunity of treating three separate developments of this disease after intervals of six and three years as has fallen to my lot.

Of course exception may be taken to the line of treatment pursued—namely, that scraping was adopted as a preliminary, and that valuable and efficient dressings were used; but I would ask:—Would these have produced such an excellent result without the aid of the *x* rays?

MEMORANDA:

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

ON HAEMORRHAGE INTO THE BURSA PATELLAE.
I HAVE lately had under my care a second case of what I believe to be a rare affection, namely, haemorrhage into the bursa patellae. Both examples occurred in Sisters of Charity, and were doubtless due to pressure. In both the swelling was large and painful, and the skin red and hot, so much so that many surgeons would have felt justified in making a free incision. I preferred to introduce a large aspirator needle and drew off bright liquid blood, and then carefully strapped the joint with plaster and applied a bandage. The interior of the bursa appeared to be rough when the two surfaces came together, and the haemorrhage was free, so that I had to empty the bursa a second time before I completed the strapping. I renewed the strapping in a week, and again three or four times at the same interval, and then dismissed my patient with a bandage.

CHRISTOPHER HEATH, F.R.C.S.

Consulting Surgeon to University College Hospital.

Cz vendish Square, W.

CASE OF DOUBLE DISLOCATION OF THE STERNAL ENDS OF BOTH CLAVICLES BACKWARDS.

I CANNOT find any case recorded of simultaneous dislocation of the sternal ends of both clavicles backwards. The accident occurred at the Royal George Mills, Greenfield, on February 4th, 1902, and is probably worth reporting.

On arriving at the scene of the accident, I found the patient—a heavily built man of 40—in a dazed condition. He would not answer questions, but kept repeating that he "could not breathe," and moaning as if in pain. Examination showed some scalp wounds situated rather behind the occiput, and what at first sight looked like a dislocation of the sternum, its upper edge being, apparently, projected forwards almost the width of two fingers. Of course in reality both clavicles were symmetrically displaced backwards. The accident was caused by a fall down a lift, and the man was seen to alight on the back of head and shoulders.

The reduction was accomplished by placing the man on his back, with his chest thrown upwards with pillows. His elbows were then drawn upwards and outwards, whilst pressure with the hand was exerted to press the upper edge of the sternum, downwards and backwards. The clavicles, with an interval of about a minute, snapped forwards into their places. Then a firm pad was applied, and the patient progressed, without incident.

It appears difficult to understand the backward dislocation of the clavicles, when the force was, apparently, delivered from behind the sterno-clavicular joint. I think this is the probable explanation: the man had a well developed chest, with a sternum bowed forwards. His head must have been bent forwards at the moment when he struck the floor. He fell 16 ft. and the weight of his body—177 lb., must have driven the sternal ends of the clavicles in the line of the least resistance—downwards—behind the sternum.

COLIN CAMPBELL, L.R.C.P.I., M.R.C.S.Eng.

Southport.

PINCE-NEZ IN OPHTHALMIC PRACTICE.

IN the *BRITISH MEDICAL JOURNAL* of March 22nd, p. 710, Dr. Joyce has drawn attention to a very important matter in connexion with pince-nez, namely, that epiphora is caused by the compressing force dragging on the tissues at each side of the nose, and so displacing the puncta.

Until we have a better appliance than the present nose piece the ophthalmic surgeon can prevent this displacement by directing the patient to close the eyes whilst adjusting the pince-nez. If one pinches up the skin on the nose between the finger and thumb, imitating the action of the compressing force of the pince-nez, he will find that when the eyelids are apart the puncta are visibly displaced, whereas when the eyelids are in contact no displacement takes place by this action. Those who have worn this form of frame for some time

discover this, and instinctively close the eyes when settling it on the nose.

I think it is a prudent precaution on the part of the surgeon to request the patient to let him see the pince-nez or spectacles when he receives it from the optician. In this way the point in question can be seen to, as well as that the optical centres are properly placed, whether for "near," "distant," or "constant" use, that there are no scratches or defects in the glass, no bends in the frame, no want of symmetry between the two sides, and that the lenses, whether spherical or cylindrical, are of the prescribed power. I have frequently found mistakes in the spherical lenses, due, I suppose, to the carelessness of the workman. The odium of any of these defects, which cause inconvenience and trouble to the patient, recoils, not on the optician but on the surgeon.

Dublin.

E. MAGENNIS, M.D.

CASE OF HARELIP WITH CLEFT NOSE.

THE accompanying photograph was taken after death from a child 3 months old, and shows a very curious congenital deformity. I have not been able to find any record of a similar case.

There was a cleft palate, harelip, and cleft nose. The nasal defect I am inclined to attribute to arrest in the



development of the right lateral nasal process, and perhaps also of the descending frontal process in the embryo due to some obstruction in the vascular supply. The child lived for three months, and then died of convulsions.

Sunderland.

THOS. A. WATSON, M.B. Edin.

PING-PONG TENO-SYNOVITIS.

A GENTLEMAN, aged 30, of heavy build, came to me a few days ago complaining of acute pain in the left leg. I found considerable cedema of the lower third of the limb, obscuring the anterior border of the tibia. The swelling was tender and reddened, and the pain and general disturbance so great as to suggest the possibility of an acute osteomyelitis.

The patient was put to bed and appropriate remedies employed. The next day the oedema had in great part subsided, and it was obvious from the creaking and crackling sensations on examination that there was acute teno-synovitis, in connexion mainly with the tibialis anticus.

The patient attributed his condition to his daily avocation which involves much walking, but incidentally another and more material circumstance was elicited—that he had been devoting his evenings with much ardour to "ping pong," and had, moreover, played the game wearing his usual stiff buttoned boots. The pastime in question appears to necessitate many sudden alterations in position, while at the

same time the weight of the body is supported chiefly on the anterior pier of the main pedal arch. The strain on the tibialis anticus muscle must under these circumstances be severe, and until in the fullness of time a costume and footwear appropriate to this national sport be evolved such cases as this will probably from time to time occur.

Barnes.

F. GRAHAM CROOKSHANK, M.D. Lond.

REPORTS

ON

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

NO. 17 STATIONARY HOSPITAL MIDDLEBURG, TRANSVAAL.

CASE OF INTUSSUSCEPTION OCCURRING AS A COMPLICATION OF ENTERIC FEVER.

(Under the care of ALFRED E. ASH, M.B., M.R.C.S.,
(Civil Surgeon, attached R.A.M.C.)

IRREGULARITY in the peristaltic action of the muscular coats of the intestine has long been accepted as the immediate cause of intussusception. Various authors have attributed this irregular action to diarrhoea, dysentery, flatulent dyspepsia, undigested food, polypoid growths in the intestine, severe physical exertion, and other causes.

In the case of a patient convalescing after enteric fever, the prolonged rest in bed and the light dietary to which he has been subjected should tend to render the above mentioned causes of intussusception conspicuous by their absence. On the other hand, the dense induration of the wall of the lower ileum in patches of considerable size, which so frequently obtains after severe enteric fever, might be expected to interfere with the action of the muscular coats adjacent to such indurated patches. This condition, in conjunction with the normal peristaltic movements, might act as a factor in the causation of an intussusception which, corresponding with the seat of the previous ulceration, would occupy the lower ileum, or pass through the ileo-caecal valve.

Lieutenant-Colonel Jennings, R.A.M.C. (commanding this hospital) informs me that during his previous experience of enteric fever in India he has seen two necropsies in which ileo-colic intussusception was present. In each case death had followed symptoms simulating those of peritonitis due to the perforation of an enteric ulcer. The following are notes of a similar case in which the existence of enteric perforation appeared to be almost certain. Laparotomy was performed, and ileo-colic intussusception was discovered.

Case.—Sergeant C., Royal Scots, aged 25, was admitted on October 4th, 1901, to the enteric fever division of the hospital under my medical charge.

History.—After a rather severe attack of enterica the temperature became normal on the twenty-fifth day of the disease, and remained normal until the fortieth day, when a relapse of low type set in and continued until the fifty-seventh day, the total duration of the relapse being eighteen days. On the ninth day of this relapse at 5 a.m., after a very good night, the patient was suddenly seized with acute abdominal pain, which passed off in a short time. The pain returned about an hour later; it was less severe than at first, but became continuous. Some bile and mucus was vomited. At 9 a.m. the pain was very severe. The tendency to vomit was almost constant. The pulse rose to 125 per minute.

State on Examination.—The expression of the patient was drawn and anxious; perspiration was profuse. The abdomen was not distended, the abdominal muscles were rigidly contracted, producing a board-like condition of the walls. The pain was referred by the patient to the umbilical and epigastric regions. Pain on palpation was most marked in the umbilical region. Deep palpation was absolutely impossible. I diagnosed the case as one of peritonitis due to the perforation of an enteric ulcer. The general condition of the patient being good, it appeared to be a suitable case for operation. Colonel Jennings kindly saw the case at once in consultation, and agreed as to the diagnosis and the indications for surgical treatment.

Having decided to operate one-third of a grain of morphine was given at once. Preparations for the operation were made in an adjacent empty E.P. tent, into which the patient was removed.

Operation.—Chloroform was administered at 11.30 a.m., about six hours and a half after the first onset of symptoms. When the abdominal walls had become relaxed under the influence of the anaesthetic, a slight but distinct fullness of the right inguinal region was evident. The tumour was apparently spherical, firm on palpation, and dull on percussion. I opened the abdomen by oblique right inguinal incision. On opening the peritoneum it was at once obvious that it was a case of ileo-colic intussusception, the lower portion of the ileum passing through the ileo-caecal

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF EDINBURGH.

The following is the official list of passes at the recent professional examination for degrees in Medicine and Surgery:

First Professional Examination.—Mukhtar Ahmed, B.A., R. G. A. Bagnall, E. H. Black, C. E. Blair, I. W. Brebner, S. T. Champaloup (with distinction), W. I. M. Clark, Agnes M. Cowan, F. S. Cumming, R. B. Davidson, A. M. Dick, M. G. Dill, A. M. Drennan (with distinction), R. Duncan, J. Dundas, E. W. Dyer, S. S. Dykes, Mary S. Finlayson, C. N. Finn, M. S. Fraser, W. G. Frohlich, G. F. Gallagher, W. J. Geale, L. Gibson, G. A. Gordon, M. C. R. Grahame, J. Green, J. C. Grieve, G. F. Grogan, G. Gunn, Mary D. Hancock, A. J. Harper, A. S. Hendrie, H. S. A. Hogg, F. O. Inglis, R. F. Johnson, H. C. Johnston, W. L. Johnston, E. Lloyd Jones, A. McDonald, D. F. Mackenzie, J. B. Mackenzie, I. R. Macleod, G. M. Mullan, A. C. B. M. Murrie, W. J. MacNab, A. S. Mactavish, J. N. M. Turk, D. Mann, G. M. Melville, H. Millar, F. C. Mills, E. A. J. Morris, Janet M. Murray, J. K. Murray, R. H. Nolan, Ethel A. Olchard, J. S. Orwin, A. S. Paterson, A. B. Porteous, G. A. Purnell, G. Y. Richardson, W. H. Riddell, W. R. Ridley, W. G. Rivers, R. M. Robb, W. G. Robertson, F. Ross, A. Sandison, J. Scott, T. H. Scott, H. L. Sells, H. G. Smith, A. G. V. van Someren, H. V. Taylor, W. A. Taylor, J. A. R. Thompson, Annie D. Urquhart, V. S. Valiathan, B. A. P. Vickerman, R. H. Walton, A. Wight, W. E. R. Williams, J. T. D. Young.

Second Professional Examination.—R. G. W. Adams, E. A. Aylward, J. W. H. Babington, J. M. Barkley, R. B. Barnetson, B. Baty, W. P. Beattie, B. Bell, L. H. I. Bell, A. B. Berrie, J. M. Beyers, A. S. L. Biggar, F. T. Bowerbank, D. Brown (with distinction), T. E. Carlie, V. T. Carruthers, Mildred M. L. Cathels, J. W. Cathels, G. S. Clark, M. A. A. G. Coullie, J. Craw, W. B. Cullen, G. Cunningham, W. H. Cusack, J. M. Darling, J. R. Dobbin, C. E. Dumanoire, T. H. Easton, N. C. Fischer, J. M. R. Flamet, N. C. Forsyth, R. H. Fothergill, L. Fourie, A. N. Frase, W. J. Fraser, L. Gavin, N. J. H. Gavin, H. M. Gillespie, A. G. Glass, M. A. W. Godfrey, J. M. Graham, W. W. Greer, J. Grievie, P. A. Harry, E. Henderson, M. A. (with distinction), A. W. Hogg, J. S. Hogg, R. 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. Landok, S. W. S. Leary, A. J. Lewis, J. Loohead, M. A. (with distinction), J. B. Lockerbie, A. D. M. Callum, J. MacDonald, J. P. McGowan, M. A. H. R. Macintyre, R. J. Mac, Kessack, Amy M. Mackintosh, D. P. Marais, A. M. E. Mills, M. A. E. S. S. Milne, T. B. Monat, W. M. Munby, D. S. Murray, C. O'Flaherty, A. Oliver, C. D. O'Neal, E. G. S. Orbell, G. Ormrod, Florence M. S. Price, H. S. Reid, Margaret H. Robertson, Shiela 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. M. Stuart, Annie F. Theobalds, H. M. Thompson, Rose C. Townsend, G. H. Usher, F. L. de Vertenil, R. W. L. Wallace, D. C. Welsh, D. P. D. Wilkie, F. A. Wille, W. B. Wishart, C. H. Wright, Margaret C. Young.

Third Professional Examination.—R. T. G. Aickin, D. Alison, J. A. Anderson, W. W. Anderson, F. L. Atkinson, Agnes Balfour, C. M. Begg, A. W. Beveridge, T. C. Blackwell, J. Brennan, Edith C. Brown, J. E. M. Brown, G. L. Brunton, A. Buchanan, H. Caird, T. P. Caverhill, R. A. Chambers (with distinction), Katherine J. S. Clark, Elizabeth L. Colby, C. H. Craig, R. W. Craig, G. S. Crichton, D. M. K. Crooks, D. H. Croom, F. D. Crosthwaite, W. B. A. K. Cullen, A. Dangerfield, J. M. Darlin, G. H. S. Davidson, J. Davidson, W. H. Davidson, D. E. Derry, A. G. Devereux, J. M. Dewar, J. Donaldson, M. A. M. Dryden (with distinction), Alice M. Ebdon, G. J. Farie, J. Findlay, H. N. Fletcher, J. Fortuin, C. R. Gibson (with distinction), F. H. Gibson, J. D. Giles, J. Girdwood, J. A. Hall, M. A. C. R. F. Elizabeth C. Gunn, A. Mabel Gurney, J. A. Hall, M. A. C. R. F. Hartley (with distinction), G. W. Harty, G. Henderson, A. E. Hodgson, A. F. Hughes, J. P. F. 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. T. C. Linton, M. A. C. D. Lochrane, Isabella Logie, J. M. Lovett, A. Lundie, H. MacCormac, J. R. McGregor, N. D. Mackay, T. A. MacKenzie, Violet C. McNeill, N. D. Mackay, W. MacLaren, J. J. McMillen, J. B. W. Mason, I. M. Macrae, H. C. Martin, E. H. Martin, F. W. Mason, A. G. M. Middleton, A. S. Millard, G. H. S. Millin, W. S. Milne, C. R. P. Mitchell, G. I. Moriarty, C. H. Muller, H. L. Munro, D. M. K. Newton (with distinction), T. Nicol, W. H. Nutt, D. D. Paton, M. A. T. Peebles, J. A. Pottinger, J. 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, N. C. Rutherford, D. G. A. Scott, D. J. Scott, J. E. Scott, M. A. W. M. Selby, G. H. Skinner, J. H. Smith, S. W. Smith, E. W. Smyth, Eva M. Snowball, Effie Stuart, J. Tait, J. E. Taylor, T. Thomson, G. C. Trotter, E. A. Turpin, R. Veitch, J. A. L. Wallace, W. R. S. Watkins, G. J. Wentzel, L. West, R. M. White, C. H. Wright, B. A.; W. D. Wright (with distinction), G. W. Young.

Third Professional Examination (New Regulations, Pathology only).—S. Burns, M. A.

UNIVERSITY OF GLASGOW.

GRADUATION CEREMONY.

The classes in the medical and other faculties resumed work for the summer session on Wednesday, April 24rd.

On the previous day the usual Spring Graduation Ceremony took place in the Bute Hall, Principal Story presiding. There was a large attendance of students and their friends, and the proceedings were of the usual lively character. Amongst the honorary degrees conferred may be mentioned that of LL.D., which was given *in absentia* to Professor Paul Brouardel, the Dean of the Faculty of Medicine in the University of Paris, and President of the Comité d'Hygiène de France.

The following were capped M.D.: Alexander Robert Ferguson, M.B.,

C.M., with honours, thesis: The Leucocytosis of Variola with a Study of the Haematopoietic Organs in the Disease, and also of the Lesions of the Skin; John Knight, M.B., C.M., thesis: Small-pox: its Diagnosis and Public Health Administration; Dugald Campbell Watt, M.B., C.M., thesis: Variola as it affects the Native Races of South Africa, with a discussion on the Existence of Amaas or Kafir Pox.

Among the University prizes presented was a Bellahouston Gold Medal for eminent merit in thesis for M.D., awarded to David Louis Cairns, M.D.

In connexion with the graduation ceremony a *conversazione* was held at the University in the evening. This is the first occasion on which such a function has been held. About 1,600 invitations were issued in the joint name of the Court and the Senate, and were sent to the graduates of 1900-1 and 1901-2, also to the members of Council who were registered in 1882 and 1883, and to the subscribers to the University Equipment Fund. To future functions of the same kind it is intended to invite the former graduates of the University in rotation. There was a large and interesting gathering at the *conversazione*, many graduates having come from a distance.

UNIVERSITY OF DURHAM.

GRADUATION CEREMONY.

UNTIL within the last four or five years Convocation of the University was always held in Durham; but, owing to the increasing importance of the Faculties of Medicine and Science, the privilege of holding each year one of the important biennial Convocations was conceded to Newcastle-upon-Tyne. So far, therefore, as the Faculties of Medicine and Science are concerned, Convocation is held once a year in Durham, and once in Newcastle, the Colleges of Medicine and Science sharing the honour alternately. On Saturday, April 26th, a large and brilliant gathering of professors, lecturers, graduates, students, and friends assembled in the large hall of the College of Medicine to witness the important ceremony of the conferring of degrees. There was the usual pleasantries indulged in by the students. The Rev. Dean Kitchin, as Warden of the University, presided.

The honorary degree of D.C.L. was conferred upon two distinguished members of the medical profession—Sir William Selby Church, Bart., M.D., President of the Royal College of Physicians, London; and Thomas Annandale, Professor of Surgery in the University of Edinburgh.

In presenting Sir William Selby Church to the Warden and Subwardens, Sir George Hare Philipson said: "I have the honour to present Sir William Selby Church, Baronet, the President of the Royal College of Physicians of London, to be the recipient of the Honorary Degree of Civil Law. This distinguished physician and scientist is a graduate in Arts and in Medicine of the University of Oxford, a Doctor of Laws of the University of Glasgow *honoris causa*, and an Honorary Doctor of Science of the Victoria University. He is the Senior Physician and Lecturer in Clinical Medicine at St. Bartholomew's Hospital, London; Honorary Fellow of University College, Oxford; Fellow and Treasurer of the Royal Medical and Chirurgical Society of London, a member of the London Pathological Society, also of the Clinical Society of London, and of several other learned societies. Formerly he was Lees Reader in Anatomy at Christ Church, Oxford, and the representative of the University of Oxford in the General Medical Council. He has rendered valuable services to the State, having served on two Royal Commissions—namely, the South African Commission and the Arsenical Poisoning Commission. He has enriched medical literature by several important and valuable contributions. By matrimony, maternal, and uxorial ties he is connected with the county of Northumberland, and we welcome him in this threefold association. For these reasons the University is desirous of conferring upon Sir William Selby Church its highest distinction—that of Doctor of Civil Law, and of doing honour to itself by enrolling him in its list of honorary members."

In presenting Professor Annandale, Professor Page said: "I present to you for the honorary degree of Doctor of Civil Law the Regius Professor of Clinical Surgery in the University of Edinburgh, Thomas Annandale. Born in Newcastle-upon-Tyne, the son of an eminent surgeon, he commenced his professional career in this School of Medicine. In the year 1860, the degree of M.D. was conferred upon him by the University of Edinburgh, and at the same time he received the gold medal for a thesis on the surgical diseases of the hip-joint. He is a Fellow of the Royal Colleges of Surgeons of Edinburgh and of England, Fellow of the Royal Society, Edinburgh, and Surgeon-General in His Majesty's Bodyguard of Royal Scottish Archers. A voluminous writer, he is the author of the Jacksonian Prize Essay of the Royal College of Surgeons of England and of numerous other valuable contributions to surgical literature. On more than one occasion he has acted as Extern Examiner in Clinical Surgery in the University of Durham. He is one of the best known surgeons and teachers in Great Britain. There is hardly a corner of the King's dominions in which a pupil is not to be found practising the principles which Thomas Annandale has taught, and taught so well, during his long useful, and brilliant career.

Eight graduates in medicine were promoted to the Doctorate on their theses, and upon fourteen practitioners of fifteen years' standing the degree of Doctor of Medicine was conferred after examination. Two gentlemen received the Mastership in Surgery—J. W. Leech and W. H. Richards. As Mr. Leech is one of the Assistant Surgeons of the Newcastle Royal Infirmary, his popularity with the students and his success as a teacher were evidenced by the heartiness of the ovation he received. Among the nineteen Bachelors of Medicine and of Surgery were two ladies. Four gentlemen received the Diploma in Public Health.

THIRD EXAMINATION FOR THE DEGREE OF BACHELOR IN MEDICINE.—The following candidates have satisfied the Examiners:

Honours—Second Class.—R. Bigg, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital.

Pass List.—F. D. Atkins, St. Thomas's Hospital; F. G. Armstrong, College of Medicine, Newcastle-upon-Tyne; J. A. Beil, St. Bartholomew's Hospital; H. L. Currie, College of Medicine, Newcastle-upon-Tyne; Margaret Douglas French, London School of Medicine for Women; W. Gibbons, College of Medicine, Newcastle-upon-Tyne; A. H. Heslop, College of Medicine, Newcastle-upon-Tyne; W. Haward, St. Thomas's Hospital; T. C. Hunter, College of Medicine, Newcastle-upon-Tyne; W. Hughes, Edinburgh School of Medicine;

W. H. Peacock, College of Medicine, Newcastle-upon-Tyne; W. H. Phillips, B.Sc., College of Medicine, Newcastle-upon-Tyne; D. M. Ross, St. Thomas's Hospital; Mary Raw, College of Medicine, Newcastle-upon-Tyne; Constance Charlotte Robertson, College of Medicine, Newcastle-upon-Tyne; D. R. Roberts, College of Medicine, Newcastle-upon-Tyne; F. Stoker, College of Medicine, Newcastle-upon-Tyne; A. Smith, College of Medicine, Newcastle-upon-Tyne; T. Y. Simpson, M.R.C.S., L.R.C.P., London Hospital; J. M. Shaw, College of Medicine, Newcastle-upon-Tyne; O. B. Travers, Guy's Hospital; W. F. Wilson, College of Medicine, Newcastle-upon-Tyne.

SECOND EXAMINATION FOR THE DEGREE OF BACHELOR IN MEDICINE.—The following candidates have satisfied the Examiners in the subjects undernoted:

Anatomy, Physiology, and Materia Medica.—Honours—Second Class: Olga Schiele, London School of Medicine for Women; E. Young, St. Mary's Hospital; R. I. Douglas, St. Bartholomew's Hospital. Pass List: R. Bigg, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital; G. N. Biggs, St. Thomas's Hospital; D. T. Birt, College of Medicine, Newcastle-upon-Tyne; W. H. H. Croudace, College of Medicine, Newcastle-upon-Tyne; J. Galloway, College of Medicine, Newcastle-upon-Tyne; J. H. Lewars, College of Medicine, Newcastle-upon-Tyne; H. L. Noel-Cox, St. Thomas's Hospital; R. B. Reed, College of Medicine, Newcastle-upon-Tyne; A. B. Raffie, College of Medicine, Newcastle-upon-Tyne; R. J. Willan, College of Medicine, Newcastle-upon-Tyne.

FIRST EXAMINATION FOR THE DEGREE OF BACHELOR IN MEDICINE.—The following candidates have satisfied the Examiners in the subjects undernoted:

Elementary Anatomy and Biology, Chemistry and Physics.—Honours—First Class: W. Fairclough, College of Medicine, Newcastle-upon-Tyne. Honours—Second Class: O. Shields, M.R.C.S., L.R.C.P., St. Mary's Hospital. Pass List: O. Arnott, College of Medicine, Newcastle-upon-Tyne; F. R. H. Laverick, College of Medicine, Newcastle-upon-Tyne; R. J. Weidner, College of Medicine, Newcastle-upon-Tyne.

Elementary Anatomy and Biology.—V. E. Badcock, College of Medicine, Newcastle-upon-Tyne; G. E. P. Davis, College of Medicine, Newcastle-upon-Tyne; W. Denham, College of Medicine, Newcastle-upon-Tyne; H. Denham, College of Medicine, Newcastle-upon-Tyne; G. Denholm, College of Medicine, Newcastle-upon-Tyne; N. A. Eddlestone, College of Medicine, Newcastle-upon-Tyne; A. Finlay, London Hospital; A. C. H. McCullagh, College of Medicine, Newcastle-upon-Tyne; G. Pybus, College of Medicine, Newcastle-upon-Tyne; W. Rollin, College of Medicine, Newcastle-upon-Tyne; R. W. Swayne, College of Medicine, Newcastle-upon-Tyne; L. L. Westrope, College of Medicine, Newcastle-upon-Tyne; J. B. Williamson, College of Medicine, Newcastle-upon-Tyne; T. L. Wormald, College of Medicine, Newcastle-upon-Tyne; F. Whitby, St. Bartholomew's Hospital.

Chemistry and Physics.—Helen Young Campbell, London School of Medicine for Women; H. Drummond, College of Medicine, Newcastle-upon-Tyne; Camilla Lucy Hecrath, London School of Medicine for Women; Florence Barrie Lambert, Edinburgh Medical School; A. A. Miller, M.R.C.S., L.R.C.P., Guy's Hospital; Jessie Margaret Murray, London School of Medicine for Women; S. L. McBean, College of Medicine, Newcastle-upon-Tyne; G. H. Spencer, M.R.C.S., L.R.C.P., London Hospital.

Elementary Anatomy.—Lillie Johnson, B.Sc., College of Medicine, Newcastle-upon-Tyne; J. C. Pearce, A.Sc., College of Medicine, Newcastle-upon-Tyne.

UNIVERSITY OF DUBLIN.

At the First Summer Commencements in Trinity Term, held in the Theatre of Trinity College on Friday, April 18th, the degree of Master in Surgery was conferred by the University Caput in presence of the Senate on Mr. Richard Smith (*in absentia*).

ROYAL COLLEGE OF PHYSICIANS OF LONDON.

At the ordinary quarterly comitia held on Thursday, April 24th, the President, Sir William S. Church, in the chair.

Election of Fellows.

The following members were elected to the Fellowship of the College: H. C. Maudsley, M.D.Lond., W. C. Wilkinson, M.D.Lond., F. M. Pope, M.D. Camb., E. Malins, M.D. Edin., W. A. Wills, M.D.Lond., T. H. A. Chaplin, M.D.Camb., W. P. May, M.D.Lond., A. G. Phear, M.D.Camb., G. F. Blacker, M.D.Lond., J. Fawcett, M.D.Lond., H. C. Thomson, M.D.Lond., A. S. F. Grünbaum, M.D.Camb., J. Barr, M.D.Glasg., J. J. Perkins, M.B.Camb.

Admission of Members.

The following gentlemen having passed the required examination were admitted Members of the College: J. S. Bolton, M.D.Lond., W. P. S. Branson, B.A., M.B.Camb., G. G. Gifford, L.R.C.P., C. H. Melland, M.D.Lond., L.R.C.P., S. V. Pearson, B.A., M.B.Camb., E. F. Potter, M.D.Bru., L.R.C.P., W. H. M. Telling, M.D.Lond., L.R.C.P.

Licences Granted.

Licences to practise physic were granted to 123 gentlemen. Of these, 7 were under the four years curriculum and 1 only under the old regulations prior to 1884.

The Murchison Scholarship.

The report of the examiners for the Murchison Scholarship recommending that no award be made was received and adopted.

Date of Croonian Lectures.

The President announced that the Croonian Lectures to be delivered by Dr. J. W. Washbourn had been postponed until November.

Nominations.

The President made the following nominations, which were approved by the College, namely: Sir R. Douglas Powell, Bart., to represent the

College at the Medical Congress to be held at Cairo in December next; Dr. J. F. Payne, the Harveian Librarian, to represent the College at the Tercentenary of the Bodleian Library at Oxford; and as a Committee to make arrangements for the Fellows and Members to view the Royal procession pass the College on June 27th, the College Officers, together with Dr. Theodore Williams, Dr. Allchin, and Dr. Oswald Browne.

Communications.

Communications were received from (1) the Secretary of the College of Surgeons, reporting certain proceedings of the Council on April 10th; (2) the General Medical Council, submitting certain questions with respect to the courses of study in chemistry, physics, and biology required of candidates for the conjoint diplomas, and announcing that the examinations of the Colleges in those subjects will be visited and reported on for the Council during the present year.

Licentiates and the Degree of M.D.

After a discussion in which Dr. F. J. Smith, Dr. Dawson Williams, Dr. Norman Moore, Dr. Allchin, Dr. Payne and the President, took part, leave was given to Dr. Smith to present to the College at a future date a petition from an Association of Licentiates of the College and of Members of the Royal College of Surgeons, with reference to the question whether any means could be found by which in virtue of their diploma they could become eligible for the degree of M.D.

Recognition of Institutions.

On the recommendation of the Committee of Management, the Municipal Science and Art Institute, Walsall, which has been visited and reported on as fulfilling entirely the requirements of the Examining Board, was added to the list of institutions recognized by the Board for instruction in chemistry, physics, and practical chemistry, and the instruction in lunacy given by Dr. T. Clave Shaw at St. Luke's Hospital, was recognized as fulfilling the conditions of Clause 10, Section I, of the regulations of the Examining Board.

Restoration of Membership.

An application from Dr. William Wallis Ord, praying that the Membership which he resigned in June, 1896, might be restored to him, was considered and granted.

Laboratories.

A report of the Laboratories Committee dated March 7th, 1902, was received and adopted. (a) The superintendent of the Bacteriological Department had reported that during the preceding two months 8,450 doses of diphtheria antitoxin, each containing 3,000 units, had been supplied to the hospitals of the Metropolitan Asylums Board, making a total of 25,350,000 units. (b) During the quarter further batches of antitoxin supplied by Messrs. Parke, Davis, and Co. had been tested in the laboratory, and a certificate granted showing its strength, sterility, and freedom from excess of antiseptic. Upon the recommendation of the Committee Dr. T. Grigor Brodie was reappointed as Director of the Laboratories for another year.

CONJOINT BOARD IN SCOTLAND.

The following candidates have passed the examinations of the Board as under:

First Examination (Five-Years Course).—F. M. Murray, F. B. Elwood, A. F. Garrard, J. W. N. Roberts, F. J. Breakell, E. A. S. Shaw, E. F. Nyhan.

First Examination (Four-Years Course).—J. S. Farries, A. Jack, G. M. McLeod.

Second Examination (Five-Years Course).—G. Hart, C. Shaves, A. F. Spinks, A. R. M'I. MacIlraith, W. W. Dempster, S. R. Scott, E. E. Murphy, E. M. Franklin, F. W. March.

Second Examination (Four-Years Course).—A. Ardill, J. E. Mullan.

Third Examination.—A. Allan (with distinction), R. S. Walker, R. N. Macdonald, W. R. A. Coates, H. Armstrong, J. B. L. S. Scott, D. W. Purkis, Lizzie Denny, W. D. Cockburn.

Final Examination.—H. L. Jones, T. W. M'Cubbin, W. Thomson, E. N. de V. Dawson, H. Solomon, S. L. G. D. Macrae, C. V. Craster, W. H. Duncan, H. Williams, T. A. Welch, P. Carroll.

CONJOINT BOARD IN IRELAND.

PRELIMINARY EXAMINATION.—Candidates have passed this examination as undernoted:

B. Bassett, W. I. Berne, P. Blake, F. G. Blood-Smyth, T. A. Buchanan, P. I. Cleary, I. D'Alton, T. Fitzgerald, B. Foley, H. D. Gilmore, W. J. Kennealy, W. Owens, C. W. C. Robinson, G. F. Shepherd, D. McC. Smith, I. F. Walsh, A. E. Weinstock.

FIRST PROFESSIONAL EXAMINATION.—Candidates have passed this examination as undernoted:

Honours (in order of merit).—I. I. Hogan, L. Lucas, T. P. Byrne, M. I. Coyne.

In all Subjects.—A. Hipwell, P. F. J. Leyland, R. Martin, E. P. Punch, P. J. Rooney.

Completed the Examination.—B. N. Blood, C. Gordon, E. I. Higgins, R. V. Murphy, N. E. Sampey.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

Election of Examiners.—Notice is given that a meeting of Fellows will be held on May 6th, pursuant to the provision of the supplemental charter, to witness the election of examiners. All, with the exception of the examiners in subjects of general education, must be Fellows of the College. The notice paper contains the statement that "persons engaged in private teaching are not eligible to be examiners."

SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, April, 1902.—The following candidates passed in:

Surgery.—W. Ball (Section I), Westminster Hospital; B. M. Dunstan (Section I), St. Thomas's Hospital; J. W. Elliott (Section II), St. Mary's Hospital; A. F. Heald (Sections I and II), Cambridge; A. Holroyde, Leeds; E. A. Houchin, Middlesex Hospital; W. St. A. F. Hubbard (Section II), Charing Cross Hospital; G. R. Lucas, Edinburgh and Charing Cross Hospital; S. A. Rowley, Bristol; T. Scatchard, (Section I), Leeds; P. Southan (Sections I and II), West-

minster Hospital; J. A. W. Webster (Section I), St. Mary's Hospital.
Medicine.—A. H. Bell, Cork and Guy's Hospital; G. F. G. de Laubenque, Middlesex Hospital; A. Holroyde, Leeds; E. A. Houchin, Middlesex Hospital; T. G. Miles (Sections I and II), Guy's Hospital; O. Millauro (Section II), Westminster Hospital; G. Roper, Cambridge; C. J. Taylor (Sections I and II), Bristol; H. C. S. Woodward, St. Thomas's Hospital.
Forensic Medicine.—G. F. G. de Laubenque, Middlesex Hospital; A. Holroyde, Leeds; T. Scatchard, Leeds; C. S. Scott, St. Bartholomew's Hospital; C. J. Taylor, Bristol; W. H. Tomlinson, Manchester.
Midwifery.—G. R. Hannon, King's College Hospital; E. A. Houchin, Middlesex Hospital; W. St. A. F. Hubbard, Charing Cross Hospital; A. H. Hughes, Bristol; P. C. W. Laws, St. George's Hospital; C. H. Osmond, Glasgow; A. L. Walters, St. Thomas's Hospital.
 The diploma of the Society was granted to A. H. Bell, A. Holroyde, W. St. A. F. Hubbard, G. R. Lucas, and P. Southan.

OBITUARY.

THOMAS MORE MADDEN, M.R.C.P.I., F.R.C.S. EDIN.,
M.R.C.S. Eng.,

Obstetrical Physician, Mater Misericordiae Hospital, Dublin.

THE death of Dr. Thomas More Madden, which took place at his country residence in the County Wicklow on April 14th, was not unexpected, as he had received about a year ago while yachting a severe blow on the head, as a result of which cerebral symptoms developed, with the result that his practice had to be abandoned, and his professional residence in Merrion Square, Dublin, given up finally; months of illness were passed in his home in Wicklow. By his death one of the most prominent figures in Irish medicine in the present day was removed, for although Dr. More Madden had not attained to the Fellowship of either the Royal College of Physicians or the Royal College of Surgeons in Ireland he was such a constant contributor to gynaecological literature and a man of such strong convictions that his personality brought him continually into public notice.

He was born 64 years ago in Cuba, where his father at the time represented British interests at the International Congress for the abolition of the slave trade. The atmosphere in which he spent his early days, filled as it was with language that made for freedom, left an abiding influence upon young Madden which could be traced in the independence of his after-life. He began his medical studies in Dublin, but bad health sent him abroad immediately after he obtained his first qualification in 1859, that of L.F.P.S. Glasg. The following three years found him mingling a search for health with studies at Montpellier and Malaga. He travelled through Spain, Northern Africa, and even visited Australia. In 1868 he settled down in Dublin to the practice of midwifery and gynaecology; he became Assistant Master to the Rotunda Lying-in Hospital and at the end of his term of office he was elected Obstetrical Physician to the Mater Misericordiae Hospital—a position which he held until his death. In 1871 he organized an Irish ambulance company, and gave his services to the French Republic during the Franco-Prussian War. For this he received the bronze cross. In 1872 he was an honorary president of the first International Congress of Obstetrics and Gynaecology at Brussels. Previous to this he had been appointed examiner in midwifery in the old Queen's University in Ireland. His pen began about this time to show signs of that productive quality which later on became so manifest. In 1871 he was editor of *Dublin Practice of Midwifery*, in 1874 he wrote *On Change of Climate*, in 1875 *On the Spas of Germany, France, and Italy*. Then numerous papers appeared from time to time in the *BRITISH MEDICAL JOURNAL*, the *Dublin Medical Journal*, and other periodicals. He wrote also several of the articles in Quain's *Dictionary of Medicine*, and altogether the contributions to medical literature from this industrious author are much too numerous to mention in the space at our disposal.

Dr. More Madden was Consulting Physician for a long term of years to the Temple Street Hospital for Sick Children. In the diseases of children he took a great interest, and he entertained and frequently expressed strong views on the neglect of mental culture in children, and the effects produced in their bodies by the foolish and indiscriminate administration of alcohol.

He received many recognitions of his work from learned bodies and medical societies. He was M.D. Texas (*hon. causâ*),

M.A.O.R.U.I., President Obstetrical Section R.A.M. Ireland, and Vice-President British Gynaecological Society. He was President of the Obstetrical Section at the annual meeting of the British Medical Association in Glasgow (1888). He was a J.P. for the Counties of Kildare and Carlow.

Dr. More Madden belonged to that class of men who can be kindly and courteous to all, but who make and retain both lasting friendships and enmities. He had the warm-hearted Irish temperament which is not tied down by exact rules or fear of criticism, and his devotion to his work led him to place money-making in a very secondary position in comparison to the good that he might do.

INSPECTOR-GENERAL ALEXANDER WATSON, M.D., R.N. We regret to announce the death of Inspector-General Watson at Liverpool on April 17th. He was a native of the North of Ireland, but graduated at Edinburgh in 1847. He entered the medical service of the Royal Navy in the following year. As Surgeon (to use the present titles) of H.M.S. *Highflyer*, he was mentioned in dispatches for services rendered during the outbreak of cholera in the fleet at Varna, in the early days of the Crimean war; subsequently he was present at the principal naval operations in the Black Sea, including the bombardments of Sebastopol and the capture of Kertch. He received the Crimean and Turkish medals, with the Sebastopol clasp. He was promoted Staff Surgeon in 1855, and was appointed as an additional medical officer to the flagship of the Commander-in-Chief of the Mediterranean station.

As Staff Surgeon of H.M. screw sloop *Cormorant*, Commander Thomas Saumarez, in 1858, he took part in the capture of the Peiho forts; the *Cormorant* led the way up the river, bursting through the stout bamboo boom defence, and drawing a heavy fire from the northern forts, which she subsequently silenced. After the capture of these forts, Lord Elgin proceeded up the river to Tien-tsin, and there signed the oft-quoted Tien-tsin Treaty. In the following year, when Sir Frederick Bruce, K.C.B., arrived off the Peiho forts to proceed up the river to Tien-tsin for the ratification of the treaty, the Chinese refused a passage. Rear-Admiral James Hope, C.B., with a flotilla of small vessels, including the *Cormorant*, then endeavoured to recapture the forts; they had, however, been greatly strengthened, while the river was obstructed by formidable stakes. Our naval attack suffered a serious repulse, the *Cormorant* and two other vessels were sunk by the fire of the Chinese, and over one-third of the force of some 1,200 officers and men were killed or wounded; Dr. Watson was among the latter. He received the China medal, Taku clasp. On recovering from his wound he was placed in charge of the seriously wounded, and accompanied them to England.

In 1886, as Staff Surgeon of the Commodore's ship, he proceeded to Australia, and in that colony made several lifelong friends. He was present when the attempt was made to assassinate H.R.H. the Duke of Edinburgh near Sydney, N.S.W., in 1868, and remained in attendance on the Duke until his recovery; the pistol-shot had been deflected by a rib and thus a fatal result avoided. He was promoted to the rank of Fleet Surgeon for this service, and appointed Medical Officer of the Duke's ship, the *Galatea*, early in 1869. He remained with him until the ship's return to England two years later.

In 1875 Dr. Watson was specially selected for appointment as Fleet Surgeon of H.M. Indian troopship *Serapis*, in which vessel His Majesty the King, when Prince of Wales, proceeded to and returned from India. He was promoted to the rank of Deputy Inspector-General in 1878, and appointed to Haslar Hospital in the following year. He remained there, in charge of a surgical division, until his retirement in 1881 with the honorary rank of Inspector-General of Hospitals and Fleets.

Dr. Watson was a 'most courteous,' 'genial, kind-hearted officer, ever popular with his shipmates and with his patients; after his retirement he lived in London, a well-known member of the Army and Navy Club. His rooms were much frequented by former shipmates and friends, ever sure of a kindly and hospitable welcome. He was always ready to assist the necessitous. It was a surprise to many naval officers familiar with Dr. Watson's services that he received no special recognition of them from the Admiralty.

MEDICAL NEWS.

SUCCESSFUL VACCINATION.—Mr. C. Martin Mitchell of Emphingham, Rutland, has received the Government award for successful vaccination in his district.

THE annual general meeting of the London and Counties Medical Protection Society, Limited, will be held at the offices, 31, Craven Street, Strand, on Thursday, May 8th, at 4.30 p.m., when the annual report and balance sheet will be considered, and the officers for the ensuing year elected.

THE annual meeting and May dinner of the Aberdeen University Club, London, will be held at the Trocadero Restaurant, London, W., on Wednesday, May 21st, when the chair will be taken by Sir John Anderson, K.C.M.G., at 7 p.m. Communications may be addressed to Dr. James Galloway, 54, Harley Street, London, W.

ROYAL NATIONAL PENSION FUND FOR NURSES.—At the annual meeting of this Fund recently held it was stated that during the past year a larger number of policies had been issued and a larger number of pensions had fallen due than in any previous year. The amount distributed in sick pay had been over £1,633; the working expenses had remained stationary at $\frac{3}{4}$ per cent.; and the total funds had increased during the year from £576,384 to £678,725.

THE annual general meeting of the Medical Defence Union, Limited, will be held at the offices of the Society, 4, Trafalgar Square, W.C., on Thursday, May 15th, at 5 p.m. The annual report and the accounts for the year 1901 will be presented: an election of three members of council will take place and an auditor will be appointed. Mr. M. A. Messiter, Senior Surgeon to the Guest Hospital, Dudley, the President of the Union, will occupy the chair. The annual report is now in the hands of the printers and will, we are informed, be circulated to the members in the course of a few days.

ST. MARK'S HOSPITAL FOR FISTULA, LONDON.—The festival dinner of St. Mark's Hospital, to celebrate the sixty-sixth anniversary of the charity, was held on April 24th, at the Whitehall Rooms, Hôtel Métropole, under the chairmanship of the Lord Mayor, Sir Joseph Dimsdale, M.P., who was supported by Mr. Alderman Sheriff Bell and Mr. Sheriff H. B. Marshall. The Chairman, in proposing the toast of "St. Mark's Hospital," referred to the increase that had taken place in the work carried on by that institution. In 1835 the in-patients numbered 131, and in 1901 the number was 485, with 1,314 new out-patients. The only reliable income was under £2,200 a year, and he appealed to the public to bring that sum up to £4,500 a year. The hospital thoroughly deserved support because of the useful work it was doing. The Treasurer, Mr. R. B. Martin, M.P., having replied, the Secretary announced a list of donations amounting to over £2,000. Mr. Alderman-Sheriff Bell proposed the toast of "The Medical Staff and other Honorary Officers," which was responded to by Mr. D. H. Goodsall in a short but effective speech. Mr. F. S. Edwards also replied to the toast; and after Mr. E. F. Carey had given the toast of "The Visitors," which was acknowledged by Viscount Dungarvan, the proceedings terminated.

MEDICAL VACANCIES.

The following vacancies are announced:

- ARGYLL AND BUTE ASYLUM, Loochgilthead.**—Assistant Medical Officer, age not to exceed 30 years. Salary, £180 per annum and all found. Applications to the Medical Superintendent.
- BANBURY: HORTON INFIRMARY.**—House-Surgeon and Dispenser. Salary, £80 per annum, with board and lodging. Applications to the Secretary, 21, Marlborough Road, Banbury.
- BARBADOS GENERAL HOSPITAL.**—Junior Resident Surgeon. Salary, £200 per annum, with unfurnished house. If resident in England passage paid to Barbados and (after three years' appointment) back. Applications to Mr. W. E. Sargent, School Registrar of St. Bartholomew's Hospital, by June 10th.
- BIRMINGHAM AND MIDLAND RAIL AND THROAT HOSPITAL.**—Surgeon. Applications to the Honorary Secretary by May 15th.
- BIRMINGHAM AND MIDLAND RAIL HOSPITAL.**—Resident Surgical Officer. Salary, £100 per annum. Present Senior and Junior House Surgeons are candidates for promotion. Candidates to state whether willing to accept office of Junior House-Surgeon at £75 per annum if present residents are promoted. Apartments, board, and attendance provided. Applications to the Chairman of the Medical Board by May 12th.
- BIRMINGHAM AND MIDLAND SKIN AND URINARY HOSPITAL.**—Surgical Assistant. Honorarium at the rate of 50 guineas per annum. Appointment for six months, but eligible for re-election. Applications to the Secretary, John Bright Street, Birmingham, by May 7th.
- BRADFORD ROYAL INFIRMARY.**—Junior House-Surgeon; unmarried. Salary, £20 per annum with board and residence. Applications, endorsed "Junior House-Surgeon," to be sent to the Secretary.

- BURY ST. EDMUNDS: SUFFOLK GENERAL HOSPITAL.**—House-Surgeon. Salary, £100 per annum, with board, lodging, and washing. Applications to the Secretary by May 5th.
- CAMBERWELL: PARISH OF ST. GILES.**—Locum Tenens at the Constance Road Workhouse. Remuneration, 24 s. per week, with board and residence. Applications, on forms provided, to be sent to the Clerk to the Guardians, 29, Peckham Road, S.E.
- CAMBRIDGE: ADDENBROOKE'S HOSPITAL.**—Second Assistant Physician. Applications to the Secretary by June 7th.
- CANOE HOSPITAL, Fulham Road, S.W.**—Junior House-Surgeon. Salary at the rate of £70 per annum, with board and residence. Applications to the Secretary by May 12th.
- CHELSEA HOSPITAL FOR WOMEN, Fulham Road, S.W.**—Registrar. Honorarium, 30 guineas per annum. Applications to the Secretary by May 10th.
- DEVONPORT: ROYAL ALBERT HOSPITAL.**—Resident Medical Officer; unmarried, under 32 years of age. Salary, £110 per annum, with board and lodging. Applications on forms provided, to be addressed to the Chairman of the Selection Committee by May 30th.
- DUDLEY: GUEST HOSPITAL.**—Assistant House Surgeon. Appointment for six months. Salary at the rate of £40 per annum, with residence, board, and washing. Applications to the Secretary by May 8th.
- DURHAM COUNTY ASYLUM, Winterton, Ferryhill.**—Junior Assistant Medical Officer. Salary commences at £150 per annum, rising to £190, with apartments, board, laundry, and attendance. Applications to the Medical Superintendent.
- EAST LONDON HOSPITAL FOR CHILDREN, Shadwell.**—Officer for the Electrical Department. Applications to the Secretary by May 17th.
- GREENWICH UNION INFIRMARY.**—Second Assistant Medical Officer; unmarried. Salary, £100 per annum, with board, lodging, washing, attendance, and 28 s. per annum in lieu of beer. Applications, on forms provided, to be sent to the Clerk to the Guardians, Union Offices, Greenwich, S.E., by May 8th.
- GUY'S HOSPITAL DENTAL SCHOOL.**—Travelling Scholarship of the value of £100. Applications to the Dean, Guy's Hospital, S.E., by June 1st.
- HOSPITAL FOR DISEASES OF THE THROAT, Golden Square, W.**—Senior Clinical Director. Applications to the Secretary-Superintendent by May 10th.
- KING'S NORTON AND NORTHFIELD URBAN DISTRICT COUNCIL.**—Medical Officer of Health and Medical Superintendent of the Infectious Diseases Hospital. Salary, £500 per annum. Applications, endorsed "Medical Officer of Health," to be sent to the Clerk to the Council, 10, Newhall Street, Birmingham, by May 21st.
- LIVERPOOL: DAVID LEWIS NORTHERN HOSPITAL.**—Assistant House-Surgeon. Salary, £70 per annum, with residence and maintenance. Applications to the Chairman by May 7th.
- LIVERPOOL STANLEY HOSPITAL.**—Senior House-Surgeon. Salary, £100 per annum, with residence, and washing. Applications to the Chairman, Medical Board, by May 15th.
- MILLER HOSPITAL AND ROYAL KENT DISPENSARY, Greenwich Road, S.E.**—Junior Resident Medical Officer. Salary, £80 per annum, with board, attendance, and washing. Post tenable for six months, with prospect of election as Senior at £100 per annum. Applications to the Secretary by May 7th.
- NORTHAMPTON: BERRYWOOD ASYLUM.**—Junior Assistant Medical Officer; unmarried, and under 30 years of age. Salary, £150 per annum, increasing to £200, with board, lodging, washing, and attendance. Applications to the Medical Superintendent by May 6th.
- NORWICH: NORFOLK AND NORWICH HOSPITAL.**—Assistant House-Surgeon. Appointment for six months. Board, lodging, and washing provided, and honorarium £20. Applications to the Secretary by May 6th.
- NORTH-WEST LONDON HOSPITAL, Kentish Town Road, N.W.**—(1) Resident Medical Officer. (2) Assistant Resident Medical Officer. Appointments for six months. Junior Officer eligible for senior post. Salary at the rate of £50 per annum each, with board, residence, and washing. Applications to the Secretary by June 2nd.
- OMAGH DISTRICT ASYLUM.**—Assistant Medical Officer, unmarried, and not exceeding 30 years of age. Salary, £100 per annum, £50 in lieu of rations, and furnished apartments, etc. Applications to the Resident Medical Superintendent by May 7th.
- POPLAR AND STEPNEY SICK ASYLUM DISTRICT, Bromley, E.**—Assistant Medical Officer at the Sick Asylum at East Bromley. Salary, £100 per annum, with rations, furnished apartments, and washing. Applications on forms provided to be sent to the Clerk to the Managers by May 5th.
- PUBLIC DISPENSARY, CLARE MARKET, W.C.**—Resident Medical Officer. Salary, £105 per annum, with furnished apartments, coals, and gas. Applications to Mr. J. Phillips, Secretary, 14 and 15, Portugal Street, Lincoln's Inn, W.C., by May 3rd.
- QUEEN CHARLOTTE'S LYING-IN HOSPITAL, Marylebone Road, N.W.**—Assistant Resident Medical Officer. Appointment for four months. Salary at the rate of £50 per annum, with board, residence, and washing. Applications to the Secretary by May 5th.
- ST. GEORGE'S HOSPITAL, S.W.**—Assistant Dental Surgeon. Applications to the Secretary by May 10th.
- ST. MARY'S HOSPITAL, Paddington.**—Surgeon in Charge of Out-patients. Applications to the Secretary by May 6th.
- SALISBURY: FISHERTON ASYLUM.**—Assistant Medical Officer, unmarried, and about 25 years of age. Salary, £150 per annum to commence, with board, lodging, and washing. Applications to Dr. Finch, Salisbury.
- SHEFFIELD ROYAL INFIRMARY.**—Junior Assistant House-Surgeon. Salary, £70 per annum, with board, lodging, and washing. Applications, endorsed "Application for the post of Junior Assistant House-Surgeon," to be sent to the Secretary by May 10th.
- TOTTENHAM HOSPITAL, N.**—House-Surgeon. Salary, £50 per annum, with board, residence, and laundry. Applications to the Chairman of the Joint Committee by May 12th.
- TRURO: ROYAL CORNWALL INFIRMARY.**—House Surgeon; unmarried. Salary, £100 for first year, increasing £10 yearly, with board and apartments. Applications to the Secretary, 4, Parkvedras Terrace, Truro.
- UNIVERSITY COLLEGE HOSPITAL.**—Radiographer and Photographer, must be legally qualified medical practitioner. Salary, £50. Applications, marked outside "Radiographer and Photographer," to be sent to the Secretary by May 5th.
- WARLINGHAM 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, Croydon, by May 7th.
- WIGAN INFIRMARY.**—Male Junior House-Surgeon. Salary, £90 per annum, with apartments and rations. Applications to the General Superintendent by May 6th.
- WORCESTER GENERAL INFIRMARY.**—House-Physician; unmarried. Salary, £70 per annum, with board, residence, and washing. Applications to the Secretary by May 10th.

MEDICAL APPOINTMENTS.

- BORTHWICK, Thomas, M.D.,** appointed Honorary Bacteriologist to the Adelaide Hospital, South Australia.
- DODGSON, H., M.B., Ch.B. Edin.,** appointed Senior Assistant Medical Officer to the Cumberland and Westmorland Asylum.
- ELDER, J. B., M.B., Ch.B. Aberd.,** appointed Junior Assistant Medical Officer to the Cumberland and Westmorland Asylum.
- FROST, Constance Helen, M.B.,** appointed Assistant Bacteriologist to the Adelaide Hospital, South Australia.
- HOWMAN, Andrew, M.B., Ch.M. Glasg.,** appointed Certifying Factory Surgeon for Williamstown, Victoria, vice J. Ellison, M.D. B.U.I., resigned.
- HORROCKS, H., M.D. Lond., B.S.,** appointed Assistant Gynaecologist to the Perth Public Hospital, West Australia.

KELSALL, H. T., M.D., B.S.Lond., appointed Ophthalmic Surgeon to the Perth Public Hospital, West Australia.

LAIRD, Andrew J., M.D., D.P.H., Assistant Medical Officer of Health for the county of Lanark, appointed Medical Officer of Health for the Borough of Crewe.

LYNCE, Arthur Francis, M.B., B.S., appointed Honorary Pathologist to the Adelaide Hospital, South Australia.

LYNCH, Peter, L., M.D., L.R.C.S. Edin., appointed Certifying Surgeon for Carlton, Victoria, *vice* J. de Burgh Griffith, M.B., Ch.M. Dubl., resigned.

MACKENZIE, Murdoch, M.B., appointed Port Health Officer for Westport, New Zealand.

MELLAND, Charles Herbert, M.D.Lond., M.R.C.P., appointed Honorary Physician to the Ancoats Hospital, Manchester.

MUIR, William Charles C., M.B., C.M.Glasg., appointed Health Officer for the Shire of Alberton, Victoria.

PARK, John S., L.R.C.P.Lond., L.A.H. Dubl., appointed Health Officer for the Shire of Cranbourne, Victoria.

RAMSDEN, Herbert, M.D.Lond., appointed Certifying Factory Surgeon for the Saddleworth District of the West Riding of Yorkshire.

ROBERTS, Edward, J., M.B., appointed Port Health Officer for Nelson, New Zealand, *vice* A. J. Leggatt, M.R.C.S. Eng.

ROSENTHAL, Jacob, M.B., appointed Health Officer for the combined Shire of Newham, Victoria, *vice* J. S. Thwaites, M.B.

SMITH, Margaret, M.B., Ch.B. Edin., appointed Resident Medical Officer at Craigmyle Poorhouse and Hospital, Edinburgh.

STEVENSON, Robert, M.D., appointed Medical Officer to the Bootle Postal District.

TIPPETT, Sydney G., M.B.Lond., appointed Assistant Surgeon to St. Bartholomew's Hospital, Chatham.

TRATMAN, F., M.D.Lond., appointed Senior Surgeon to the Perth Public Hospital, West Australia.

TREHOWN, W., M.B., M.S. Aberd., appointed Assistant Surgeon to the Perth Public Hospital, West Australia.

WALLACE, J. Sim, M.D., D.Sc., L.D.S. Eng., appointed Honorary Dental Surgeon to the West End Hospital for Diseases of the Nervous System.

WILLEY, Florence B., M.B., B.S., B.Sc.Lond., appointed Clinical Pathologist and Assistant Pathologist to the Royal Free Hospital, W.C.

WILLIAMSON, E. T., M.D.Lond., F.R.C.P.Lond., appointed Honorary Assistant Physician to the Manchester Royal Infirmary.

DIARY FOR NEXT WEEK.

TUESDAY.

Pathological Society of London, Middlesex Hospital, W., 8 p.m.—Laboratory Meeting. Cases, specimens, etc., will be exhibited by Dr. Klein, Mr. T. J. Bokenham, Mr. A. G. E. Foulerton and Dr. A. M. Kellas, Dr. A. F. Voeleker, Dr. Campbell Thomson, Mr. Leslie Milburn, Mr. N. Bishop Harman, Dr. Seligmann, and Mr. H. J. Curtis.

WEDNESDAY.

Obstetrical Society of London, 20, Hanover Square, W., 8 p.m.—Specimens will be shown by Mr. Alban Doran, Dr. McCann, Dr. Ralph Vincent, and others. Paper—Dr. John S. Falgout: Five specimens of Fibroid Tumour of the Ovary, with observations on their Pathological Anatomy.

THURSDAY.

British Gynaecological Society, 20, Hanover Square, W., 8 p.m.—Dr. Bedford Fenwick: Fifty Lacerations. Specimens will be shown by Dr. A. J. Smith, Dr. H. Macnaughton-Jones, and others.

Harveian Society of London, Stafford Rooms, Titchborne Street, Edgware Road, W., 8.30 p.m.—Discussion on the Early Diagnosis of Specific Fevers, opened by Dr. Sidney P. Phillips.

FRIDAY.

Clinical Society of London, 20, Hanover Square, W., 8.30 p.m.—Mr. W. G. Spencer: Congenital Diffuse Lymphangioma terminating in Lymphosarcoma in a Child aged 4 years. Mr. George Turner: Sarcoma of the Ankle-Joint. Mr. C. B. Lockwood: Sarcoma of the Synovial Membrane. Dr. W. Ewart and Dr. Isambard Owen: A case illustrating the clinical features of "Horizontal" Dilatation of the Left Auricle. Dr. Isambard Owen: "Horizontal" Dilatation of the Left Auricle. Dr. W. Ewart: A note on Palpable Systolic Intercoastal Pulsation in a case of Mitral Stenosis, with Dilatation and Thrombosis of the Left Auricle.

POST-GRADUATE COURSES AND LECTURES.

Charing Cross Hospital, Thursday, 4 p.m.—Cases in the Wards.

Medical Graduates' College and Polytechnic, 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.

HARVEY—On April 27th, at Clarence Villa, Hatfield Road, Wimbledon, the wife of Joseph Harvey, M.B., of a daughter.

MOORE—On April 28th, at South Hetton, the wife of Alfred A. Moore, M.A., of a daughter.

MARRIAGES.

COBBLEDITCH-WHETTON—April 24th, at St. Luke's Church, West Hampstead, London, by the Rev. J. Salway, Arthur Stanbury Cobbleditch, M.D., B.S.Lond., M.R.C.S., L.R.C.P. Eng., second son of John Osborn Cobbleditch, of Lyndhurst, Clifton, Bristol, to Jessie, fourth daughter of William Whetton, of Springfield, Stradfield, Queen's Co., Ireland.

FELCE-FENMORE—On April 24th, at Widcombe Church, Bath, Stamford G. Felce, M.A., M.D., B.Cantab., of 1, Cricklewood Villas, N.W., to Edith, daughter of the late John Fenmore, of Alcester.

HAYES-DAWSON—On April 24th, at Holy Trinity Church, Warton, by the Rev. Thomas Holland Pain, Vicar of Warton, George Constable Hayes, F.R.C.S., of Leeds, third son of George Horace Hayes, of Melbourne, Australia, to Renée Phoebe, second surviving daughter of Edward Storey, of Crosslands, Lancaster, and widow of Edward Howard Dawson, of Warton Hall.

MORICE-BUTLIN—April 26th, at St. Andrew's Church, Wells Street, by the Rev. H. Foster, M.A., of Malvern College, assisted by the Rev. W. T. Housleworth and the Rev. Crose Hodge, Norman, fourth son of the late Charles Walter Morice and Mrs. Morice, of 8, De Vere Gardens, to Muriel Violet Trentham, younger daughter of Henry Trentham Butlin, F.R.C.S., D.C.L., of 83, Harley Street, W.

ROBERTSON-FERRAR—On April 25th, at Chateaufort Road Chapel, West Norwood, by the Rev. W. Ferrar, M.B., M.R.C.S. Eng., L.R.C.P. Eng., third son of Dr. W. B. Robertson, of West Dulwich, to Elizabeth Taylor (Bessie), eldest daughter of William Ferrar, Esq., Ardlius, Palace Road, Tulse Hill, S.W.

WALKER-SUCKER—April 24th, at All Saints', Daresbury, Cheshire, by the Rev. H. Milnes Walker, brother of the bridegroom, assisted by the Rev. F. Clifton Smith, Vicar, and the Rev. E. O. E. Carleton, Henry Seeker Walker, F.R.C.S., of Leeds, to Elaine Mary Seeker, only daughter of the late Rev. F. J. Seeker, sometime Vicar of St. Peter's, Bishop Wearmouth, and niece of John White, Esq., of Moore Hall, Cheshire.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 1, Agar Street, Strand, W.C., London; those concerning business matters, advertisements, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 428, Strand, W.C., London.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone, unless the contrary be stated.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Manager, 428, Strand, W.C., on receipt of proof.

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

CORRESPONDENTS not answered are requested to look at the Notices to Correspondents of the following week.

MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT UNDER ANY CIRCUMSTANCES BE RETURNED.

IN order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL, and not at his private house.

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is *Artiology, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulate, London*.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

QUERIES.

SANITARIAN would be pleased to know of a useful book on the chemistry of common things, for the purpose of popular lectures.

N. desires to know the most the most suitable residence in England for a gentleman suffering from lumbago and threatened with chronic rheumatism.

DARWINIANA will be glad to hear from any practitioner interested in the subject of reversion as to cases of physical abnormality which might be classified under this head.

PROLAPSE OF URETHRA.

DELTA would be grateful for information relative to prolapse of urethral mucous membrane, the size of a cherry, occurring in an elderly lady. It has been present several weeks, and causes no discomfort. (1) If left alone, is it likely to become worse? (2) If dealt with surgically is an anaesthetic required? (3) Is the removal by snipping it away with scissors as satisfactory as a "buttonhole" operation; and if so, what length of time ordinarily elapses before healing is completed? (4) If left untreated, is a ring pessary worn for cystocele harmful or the reverse?

ANSWERS.

TREATMENT OF GASTRIC CRISES.

DR. W. J. MIDELTON (Bournemouth) writes: I can strongly recommend "H. M. C." to try chloretone (P. D. and Co.) in the case of vomiting he mentions in the BRITISH MEDICAL JOURNAL of April 12th, p. 939. It is a powerful local gastric sedative, and also has some action on the central nervous system. He should commence with 5 gr., and push up to 20 gr., every few hours if necessary. I have successfully treated vomiting after morphine injection, vomiting of pregnancy, and also in my own person obviated sea-sickness with this drug.

INCOME TAX.

A CORRESPONDENT who complains that he has no means of knowing what he may deduct from his income as expenses when estimating his income tax, is advised to consult an income-tax agency if he desires the greatest possible abatement.

CARRIAGE LAMP.

DR. ED. CURETON (Shrewsbury) writes in reply to "Country Practitioner in Ireland" as follows: May I suggest the use of a Deitz lamp, which burns paraffin, will keep alight for eighteen hours, will not blow out, and is cheap—namely, 12s. 6d.? I have used these lamps for some time at all hours on my motor car, where a reliable light is so essential; they can be purchased from Gamage, Holborn.

LETTERS, NOTES, Etc.

ERRATUM.—In the article on the Age Distribution of Small-pox in the BRITISH MEDICAL JOURNAL of April 26th, p. 105c, Table I, the figures in the last column (over 10) under "Not vaccinated until after infection by small-pox" should be 15 and not as printed.

ENTERIC FEVER IN INFANTS.

DR. JOHN G. OGLE (Reigate) writes: In the BRITISH MEDICAL JOURNAL of April 19th Mr. Love records a case of enteric fever in an infant 4½ months old, and states that there have only been two recorded cases of enteric in infants under 1 year old. In the *Lancet*, November, 1895, I published under the same heading an account of a similar case, and added, "Murchison makes mention of three cases in younger infants—namely, 8 days old, 15 days old, and in a fetus of 7 months." There must be many more cases since then recorded in medical periodicals.

TREATMENT OF INFLUENZA.

DR. DOMENICO COMBA (Turin) has sent us a short account of his treatment of influenza based on certain views as to the treatment of infective disorders, which were expounded before the Italian Medical Congress at Pisa in 1901. It consists in the use of mercury perchloride in the early stages followed by potassium and sodium iodide in the later stages. He divides cases of influenza into two groups: (1) Those exhibiting general phenomena, but no localization; (2) those with localized symptoms of infection and more or less severe toxæmia. In the first group he