

publish the notes of the following case, which shows in a very striking manner the effect of adrenalin chloride in relieving photophobia.

CASE XIII.—A. B., aged 68, was admitted into the Lincoln County Hospital on October 28th, 1901, suffering from acute conjunctivitis, of six weeks' duration, for which she had been under treatment. On admission there was intense photophobia of the right eye, so much that until cocaine was instilled it was impossible to examine the eye; the conjunctiva was inflamed, red, and swollen, and there were the remains of a phlycten on the cornea. Adrenalin chloride solution, 1 in 10,000, was instilled into the eye, with relief in less than a minute, the injection of the conjunctiva disappeared, and the photophobia was entirely relieved. There was no ciliary congestion. The signs returned in the course of a few hours, but in a less marked degree, the drops were repeated three times daily, and the eye irrigated with lotio hydrag. perchlor., 1 in 5,000. In the course of a few days the eye was well.

P.S.—Since writing the above I have had several very marked instances of the relief afforded by adrenalin chloride in photophobia due to conjunctival and corneal affections, but must utter a word of warning against its use in corneal ulcers as in these cases it does harm. I have also proved its great value in acute and chronic iritis, when combined with atropine the relief of pain being very rapid.

MEMORANDA:

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

TWO CASES OF PARTIAL CRETINISM WHICH DEVELOPED SWELLING OF THE THYROID ON CESSATION OF TREATMENT BY THYROID EXTRACT.

THE two following cases appear to have a practical bearing on the treatment of simple goitre by thyroid extract. It is known that some of these cases of simple goitre improve under treatment with iodine, and also under treatment by thyroid extract. The inference is that some of these cases must be very closely allied to cretinism, an inference the more likely because it is also recognized that, in some instances, the condition relapses on cessation of this treatment. The two following cases may supply a link in the chain of evidence.

CASE I.—A girl, aged 8½ years, had been under treatment for partial cretinism at the Hospital for Sick Children, Great Ormond Street, for four years and a-half. Though backward, no one, I think, latterly could have recognized her as a cretin, but in the summer of 1901 she contracted diphtheria, and while she was being treated at a hospital for this disease the treatment by thyroid extract was omitted for five weeks. Her mother brought her back to me to recontinue the treatment, and said that the child had become more dull, slower in speech, and that the tongue had swollen. She had also noticed that the neck had swollen. With the history of the patient before me the explanation was quite clear, but had I seen the child for the first time I hardly think that I should have recognized her as cretinous. The swelling of the neck was a slight but quite obvious swelling of the entire thyroid gland, which at once subsided on renewal of the treatment.

CASE II.—A girl, aged 8, who had been under observation for five and a-half years for partial cretinism, was attending the hospital for thyroid treatment. All cretinous symptoms had disappeared, and I thought it possible that the thyroid gland might have developed with the growth of the child. With caution the dose was diminished, and finally no thyroid was given. Two months after cessation the mother brought the child to me, with the history that she had become a little dull and rather slow in her speech, and that a large swelling had appeared in the neck. Again, had it not been that I knew the previous history, I doubt whether the diagnosis of cretinism could have been made. The thyroid swelling was very definite, and formed an obvious goitre. The swelling was a general one, and both lobes were equally affected. Treatment was promptly resumed, and the goitre rapidly disappeared. Since then the family had moved to the north, and the mother has told me that the treatment had been again intermitted. In February of this year they again returned to London, and I found that the gland was once more very easily palpable, though not large enough to be called a goitre.

I have but little doubt that such cases as these have been observed before, but in most of our textbooks the value of the treatment of simple goitre by thyroid extract is alluded to as a fact, without any very definite reason for the fact. These two cases cannot fail, I think, to increase our confidence in the trial of this method, especially in those cases in which perhaps iodine might have been used in preference. In both instances it will be noted that the diagnosis of simple goitre would probably have not been made had not the former history been known; and it is very possible that some of these cases of simple goitre may show slight symptoms of cretinism, which would be easily overlooked or misconstrued as signs of general ill-health.

F. JOHN POYNTON, M.D., M.R.C.P.,
Assistant Physician to the Hospital for Sick Children,
Great Ormond Street.

CASE OF PROLONGED LACTATION.

WE were consulted in January, 1902, by M. E. S., with regard to her child, who was at that time suffering from bronchitis and constipation. An inquiry into the nature of the child's diet elicited the fact that "she still had the breast," although she was 5 years and 2 months old. The mother is 47 years of age, and well nourished, but somewhat sallow. She had been married 24 years, and of nine conceptions eight children have been born at term, and there was one miscarriage at five months.

Of the children, three—one male and two females—are living; three males and two females died of diseases common in children. The youngest child (a female) is now 5 years and 4 months old, and up to the time we first saw her was fed at the mother's breast three or four times every day, but for the past two years has had some additional food. The mother "always had plenty of milk." She commenced to menstruate at 16, but during the period of lactation under discussion had menstruated twice only (in August, 1901, and February, 1902). The breasts were full, and milk could be readily squeezed from them. The microscope showed this to contain nearly as large a quantity of fat as a specimen of fresh cow's milk with which it was compared. We advised that the child be weaned, and suggested a more suitable diet. This was done, and after seven days the secretion of milk ceased.

At the beginning of March the breasts were found to be small; the nipples and areolae deeply pigmented; and the child doing well. For permission to report this case—which in our experience is unique—we are indebted to Dr. Archibald Donald.

H. R. CLARKE, M.B. } Resident Medical
R. S. NICHOL, M.B. } Officers,
St. Mary's Hospital, Manchester.

THE COAGULATING POWER OF THE BLOOD IN PLAGUE.

DURING the last few weeks of my stay in India I was carrying on investigations as to the bactericidal and sedimenting power of the blood of plague patients, and was struck by a feature in this blood which I do not remember to have seen noted elsewhere.

I venture to publish my incomplete observation as I shall probably have no opportunity of continuing it, and hope that someone else working in the plague-infected districts will think it worth while to carry on the investigation.

The point that I allude to is the failure to coagulate of the blood taken during life from patients suffering from a virulent form of the disease, and I was led to observe it in the following way. From 32 patients who were at different stages of the disease I collected blood in the capsules recommended by Professor Wright of Netley. The blood was in each case drawn from the finger, and the capsule immediately sealed in the flame and kept in the erect position. Of these 32 patients 12 died within forty-eight hours of the examination, and of these 12 rapidly-fatal cases, the blood of 10 showed absolutely no coagulation at all. The capsules were kept for varying periods up to three weeks (one, in fact, is still in my possession), and at no time was a clot observed in them. With normal blood a well-defined clot suspended in a perfectly clear straw-coloured serum is observed in a short time. In the 10 cases alluded to there was no separation of the constituent parts of the blood at all. It remained a dark-red

treacle-like fluid which slowly trickled from one end of the capsule to the other when this was inverted. In some cases, including 2 of the fatal ones, and several which ultimately recovered, the clot formation was imperfect and the serum which separated out scanty and reddish. Of the 10 non-coagulating cases 4 died within twelve hours, 2 within eighteen hours, 2 within twenty-four hours, and 2 within thirty-six hours of the examination. The remaining 2 fatal cases died within forty-eight hours, and showed, as already stated, diminished power of coagulation. Of the 32 patients examined, 19, including 11 of the fatal cases were at the first to the fifth day of the disease; 5, including 1 fatal case, from the sixth to the tenth day of the disease; the remaining 8 were in the convalescent stage.

It would be interesting to observe (1) how far blood taken from patients in other acute fevers shows this absence of coagulation, and (2) the bearing of the sign, when present, on the prognosis and pathology of the disease.

ALICE M. CORTHORN, M.B., B.S.,
London. Late Special Medical Officer on Plague Duty, India.

PLACENTA PRAEVIA.

I HAVE not seen it recorded in any of the works on midwifery at my disposal that placenta praevia has occurred in the same person twice, and the following case may be of interest:

I was called on March 21st, 1901, to see Mrs. P., who was eight months pregnant. She had a severe attack of uterine haemorrhage, due to placenta praevia; the child was dead, and labour had commenced. With the usual aseptic precautions I separated the placenta, which was central, as high up as possible, and plugged the os and vagina with iodoform gauze. As soon as the os was sufficiently dilated I turned and delivered under chloroform. The placenta was attached to the anterior wall of the uterus for such a short distance that I was able to get my hand past it; on delivery I found the child showed signs of decomposition.

The patient had an attack of perimetritis subsequently, which proved a blessing to her under the circumstances, as it cured an old-standing procidentia uteri. She made a good recovery, and again became pregnant.

I was sent for on April 4th, 1902, and found her in a similar condition to the above, this time she was only six months pregnant. I adopted a similar line of treatment; the child was born alive, but only lived a few minutes. The patient is making a good recovery. It is instructive to observe the discrepancies of various observers as regards the frequency of placenta praevia, from Kaltenbach (who puts the proportion as 1 in 1,600) to the *Rotunda Hospital Reports* of 1 in 175.68.

I have personally attended 2,066 cases, extending over a period of 22 years, and have had 13 cases of placenta praevia. I had one death of the mother, three weeks after delivery, due to pelvic abscess. The mortality of the infants was very high naturally, owing to premature birth and intrauterine death from the continued haemorrhage.

Bromley, E.

SAMUEL ALEXANDER.

ENTERIC FEVER IN INFANTS.

ON reading the note of a case of enteric fever in an infant 4½ months of age, recorded in the *BRITISH MEDICAL JOURNAL* of April 19th, I thought it might be of interest to mention that a case of enteric fever in an infant 5 months old came under my observation in February, 1900. This child suffered much from diarrhoea, the tongue was thickly coated with a white fur, and the temperature during a period of five weeks ranged from 99° to 102.4° F. The chief point of interest in the case, apart from the age of the patient, was the manner in which the skin suffered. Rose-coloured spots appeared about the tenth day of the illness over the abdomen and also in the lumbar region. On the twelfth day a large number of spots appeared on the legs and arms, and also the face and chest. In addition to the profuseness of the rash, the body was covered with sudamina, and during convalescence successive crops of boils made their appearance. The child remained anaemic and weakly for some months after the illness, but eventually made a good recovery.

Helmsdale, N.B.

S. DAVIDSON, M.D.

REPORTS

ON

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

LONDON HOSPITAL.

TOTAL SUPPRESSION OF URINE DUE TO ACUTE NEPHRITIS.

(Reported by W. J. HADLEY, M.D., F.R.C.P., Physician to the Hospital.)

IN view of the article on Suppression of Urine, under Dr. Mitchell Stevens's name, in the *BRITISH MEDICAL JOURNAL* of March 22nd, 1902, the following case may be of interest as showing that the symptoms of non-obstructive suppression of the urine are not infrequently as remarkable for their "latency" as those in which the suppression is due to obstruction.

History.—B. F., female, aged 42, was admitted under my care on January 25th, 1902, with the history that she had been ill nine days with "cold on the kidneys;" that for the first two days there had been slight general oedema, vomiting and pains in the back, but that after that time (two days) these symptoms had passed off, although she had passed absolutely no water for five days before admission.

State on Admission.—There was no headache, very slight vomiting, a little giddiness and night starting; mental condition clear, intelligent, and quite cheerful. The lungs were clear; the heart sounds practically normal, there being a slightly exaggerated second aortic, although the pulse tension was low. Nothing abnormal to be felt in the abdomen. No urine passed, and the catheter showed the bladder empty. No history could be obtained of renal colic. No changes were visible in fundi.

Treatment and Progress of Case.—She was treated with hot-air baths and hypodermic injections of pilocarpin, and sweated profusely; the bowels were opened only slightly with elaterium and croton oil. Later she was bled 1 pint, and 4 pints of saline solution were infused. She lived three days in hospital, during which she passed absolutely no urine, making eight days in all of total suppression. She took plenty of milk, complained of nothing, and was bright and cheerful to the end. At her death she was talking to her friends whilst taking some milk, when suddenly her breathing ceased, although there had been no previous dyspnoea. There never was any headache, drowsiness, twitchings, or mental incapacity, and the vomiting was only trifling, and did not prevent a good amount of milk being taken. The pulse ranged between 80 and 95 per minute, whilst the temperature, although it once rose to 100.2°, was usually at or below normal.

Necropsy.—Body well nourished, no oedema. Right pleural cavity contained 3 x of fluid, both lungs being very oedematous. Heart uncontracted, left side dilated, not hypertrophied; valves healthy. Spleen enlarged (3 x iiij), soft, not diffuent, capsule healthy, no infarcts. Kidneys enlarged (right 3 x jss, left 3 x ijs). Capsules peeled fairly readily, leaving smooth suriace, small haemorrhages into capsules. Substance of kidneys deeply congested, but not haemorrhagic; cortex much increased, and paler than medulla (acute nephritis of short duration). Bladder empty, no cystitis or other morbid condition. No stone or other obstruction in any part of the urinary tract, which was quite healthy from the pelvis of the kidney to the urethra. Liver enlarged, much congested, excess of fibrous tissue in parts, softened in others, but not fatty. There was slight congestion of the stomach, duodenum, and upper part of jejunum; no other morbid changes. The uterus was about the size of an orange, showed placental site, to which distinct membranes were loosely attached; no ovum seen, but it might easily have escaped, as the membranes had ruptured.

REMARKS.—This case is unusual, but not unique, and, although one must acknowledge that cases of obstructive suppression, as a rule, live much longer and show much less "uraemic" symptoms than those of non obstructive suppression, yet there is a fair number of cases of suppression, arising

The next day he was seized with a rigor, which was immediately followed by intense oppression over the chest and high fever. There was no local affection until the fifth day, when the arm became oedematous, and was incised. Dr. H. W. Braunlich, who assisted him in the operation suffered from similar symptoms, and according to the *Journal of the American Medical Association* of April 12th, was not then expected to recover.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. Arm. Janssens, President of the Provincial Medical Council of Antwerp, aged 53; Professor Giuseppe dalle Ore, Surgeon-in-Chief to the Ospedale Maggiore, Milan, and author of a monograph on diseases of the kidneys; Dr. R. M. Bruzelius, sometime Professor of Pathology and Therapeutics at Stockholm; Dr. Julius Bruck, Professor of Dental Surgery in the University of Breslau, aged 61; and Dr. Theodor Roempler, Director of the Goerbersdorf Sanatorium founded by him in 1875, and author of works on chronic pulmonary phthisis and the treatment of consumption at high altitudes.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

Examiners.—Dr. D. MacAlister and Mr. Mansell Moullin have been appointed additional examiners in Medicine and Surgery respectively.

Degrees.—At the Congregation on April 24th the following degrees were conferred:—*M.D.*: H. B. Roderick, Emmanuel, and A. C. Jordan, Sidney. *M.B.*: F. H. M. A. Beckett, Selwyn.

Examination in Sanitary Science.—The following candidates have satisfied the examiners in both parts of the examination, and have obtained the diploma in Public Health:

G. H. S. Blackburne, J. A. H. Brincker, M.B., B.C. Joh.: J. A. Davidson, M.A. Ghany, H. A. J. Gidney, R. W. Gray, G. Haddow, J. R. Higson, J. Hunter, Alice Neville Vowe Johnson, P. W. Kent, S. T. Lewis, M.B., B.C. Joh.: W. J. Lindsay, M.B., B.C. Sid. Suss.: J. MacD. McCarthy, M.B., B.C., Non. Coll.: T. J. McDonogh, A. W. J. MacFadden, R. G. Murray, B. A. Nicol, E. J. O'Meara, D. D. Pandya, R. F. Rand, J. H. Rankin, F. Sanger, Joh.: W. C. P. Smith, Down.: G. Sowden, J. R. Watson, W. M. Willoughby, M.B., B.C., Gonv. and Cai.

Third Examination for Medical and Surgical Degrees.—The following candidates have satisfied the examiners in the subjects undernoted:

Part I.—H. W. Atkinson, M.A. Cai.: E. A. Beck, M.A. Cla.: W. V. Braddon, B.A., Trin. H.: W. H. Brailey, B.A., Queens' W. F. Buckle, B.A., Cai.: H. N. Burroughes, B.A., Trin.: R. Butterworth, B.A., Christ's; J. G. Cooper, Trin.: H. A. Cutler, B.A. Cla.: H. H. Dale, B.A., Trin.: J. F. H. Dally, B.A., Joh.: R. S. Drew, B.A., Pemb.: G. G. Ellett, B.A., Cath.: E. A. Ellis, B.A., Down.: W. H. Fisher, B.A., Emm.: J. E. Frere, B.A., Pemb.: J. D. H. Freshwater, M.A., Trin.: H. U. Gould, B.A., Trin.: C. H. Gregory, B.A., Emm.: T. Guthrie, B.A., King's; C. F. Hardie, B.A., Queens'; W. L. Harnett, B.A., Joh.: E. T. Harris, B.A., Christ's; D. Holroyde, B.A., Trin.: W. W. Holtzmann, B.A., Christ's; C. R. Howard, B.A., Pemb.: B. Hudson, B.A., Cla.: K. H. A. Kellie, B.A., Cai.: F. S. Kidd, B.A., Trin.: P. W. Leathart, B.A., Cla.: H. D. Ledward, B.A., Trin.: T. W. Mercer, B.A., Cla.: G. R. Rickett, B.A., King's; T. St. Clair Smith, B.A., Trin. H.: J. E. Spicer, B.A., Trin.: H. Statham, B.A., Christ's; J. M. Stenhouse, B.A., Sid. Suss.: W. M. Strong, M.A., Trin.: W. B. Swete-Evans, B.A., Cla.: H. T. Thompson, B.A., Christ's; J. M. Twentyman, B.A., Christ's; H. Wales, B.A., Sid. Suss.: F. Whitaker, B.A., Trin.: J. H. F. Wilgress, B.A., H. Selw.: C. R. Worthington, B.A., Cai.: G. A. Wright, Christ's.

Part II (Medicine).—J. F. Alexander, B.A., Trin.: J. A. Andrews, B.A., Joh.: G. F. Barham, B.A., Cai.: B. L. T. Barnett, M.A., Joh.: J. Barnicot, B.A., Pemb.: J. M. Bennion, B.A., Joh.: L. Bousfield, B.A., Pemb.: A. S. Bradley, B.A., Cai.: H. C. Brown, B.A.: Emm.: H. S. D. Browne, B.A., Trin.: C. V. Bulstrode, B.A., Trin.: H. O. Butler, B.A., Emm.: F. R. Carroll, B.A., Trin.: H. H. Clarke, B.A., Trin.: G. L. Crimp, B.A., Cai.: A. F. Elliott, B.A., Emm.: R. L. V. Foster, M.A., King's; G. D. Franklin, B.A., King's; E. H. Harrison, B.A., Cla.: G. P. D. Hawker, B.A., Cai.: J. P. Hedley, B.A., King's; H. T. Hodgkin, B.A., King's; W. W. Jeudwine, B.A., H. Selw.: E. H. Kitchin, B.A., Down.: A. P. Laycock, B.A., Joh.: G. E. Loveday, B.A., Cai.: J. McBryde, B.A., King's; J. C. Matthews, B.A., Down.: F. D. Nicholson, B.A., King's; C. de C. Peller, M.A., Cla.: B. R. Sapwell, B.A., Corp. Chr.: C. H. Sedgwick, B.A., Sid. Suss.: F. E. Shipway, M.A., Christ's; H. J. Shone, B.A., Emm.: J. E. B. Snell, B.A., Cai.: B. Spearman, B.A., Cai.: R. Spearman, B.A., Cai.: H. H. Stiff, B.A., Cai.: G. E. St. C. Stockwell, B.A., King's; B. L. Thurlow, B.A., Cai.: G. H. L. Whale, B.A., Jes.: G. R. Wilson, B.A., Trin.: W. W. Wingate-Saul, M.A., Trin.

Pharmacology and General Pathology only.—C. Akerman B.A., Cai.: W. Hastings, B.A., Christ's; G. G. Hirst, B.A., Cai.: C. W. P. Moffatt, B.A., Cla.: R. N. Poignand, B.A., Cai.: R. E. Whitting, B.A., King's; R. G. Wills, B.A., Joh.

UNIVERSITY OF DURHAM.

At the Convocation holden on Saturday, April 26th, the following degree and diplomas were conferred

Doctor in Medicine.—L. J. Blandford, M.B., B.S., Durham; L. S. Davison, M.B., B.S. Durham; R. H. Dix, M.B., B.S. Durham; H. A. Fielden, M.B., B.S. Durham; J. R. Fuller, M.B., B.S. Durham; E. W. Joscelyne, M.B. Durham; E. Swainston, M.B., B.S. Durham; D. H. Weir, M.B., B.S. Durham.

Doctor in Medicine for Practitioners of Fifteen Years' Standing.—E. H. Armitage, M.R.C.S., L.R.C.P., D.P.H.: C. W. J. Bell, M.R.C.S., L.R.C.P.E.: A. Bowhay, M.R.C.S., L.R.C.P., L.S.A., D.P.H.: E. J. Day, M.R.C.S., L.S.A.: A. W. Fairles, M.R.C.S.: T. F. Gardner, M.R.C.S., M.R.C.P., L.S.A.: F. C. Goodwin, M.R.C.S., L.R.C.P., D.P.H.: W. Gosse, M.R.C.S., L.R.C.P.: R. R. Hunter, M.B., M.S. Glasg., M.R.C.S.: R. J. Morris, M.R.C.S., L.R.C.P., L.S.A.: J. L. Parke, L.K.Q.C.P.I., L.F.P.S.G., L.S.A., D.P.H.: J. W. Patrick, L.R.C.P. and S.: G. F. Pollard, M.R.C.S., L.S.A.: A. T. Rimell, M.R.C.S., L.R.C.P.: J. Rogerson, L.R.C.P. and S.E., L.F.P.S.G.

Master in Surgery.—J. W. Leech, M.D., B.S., F.R.C.S.E.; W. H. Richards, M.B., B.S.

Bachelor in Medicine (M.B.) and Bachelor in Surgery (B.S.).—E. B. Appleby, College of Medicine, Newcastle-upon-Tyne; W. R. D. Daglish, College of Medicine, Newcastle-upon-Tyne; Mary Evelyn De Russett, College of Medicine, Newcastle-upon-Tyne; H. W. Furnivall, College of Medicine, Newcastle-upon-Tyne; J. A. Giles, College of Medicine, Newcastle-upon-Tyne; J. H. Graham, College of Medicine, Newcastle-upon-Tyne; I. H. S. Hawes, St. George's Hospital; K. Manson, College of Medicine, Newcastle-upon-Tyne; Lucy Selina Molony, London School of Medicine for Women; R. W. Nevin, College of Medicine, Newcastle-upon-Tyne; A. H. Proctor, College of Medicine, Newcastle-upon-Tyne; H. Reah, College of Medicine, Newcastle-upon-Tyne; R. S. Renton, College of Medicine, Newcastle-upon-Tyne; H. H. Ruffmann, College of Medicine, Newcastle-upon-Tyne; G. de B. Turtle, King's College; R. T. Vaux, College of Medicine, Newcastle-upon-Tyne; M. C. Wetherell, Guy's Hospital; H. Widdas, College of Medicine, Newcastle-upon-Tyne; T. Wilson, College of Medicine, Newcastle-upon-Tyne.

Diploma in Public Health.—C. V. Dingle, M.D., B.S., B.Hy.Durh.: R. A. Dunn, M.D., B.S., D.Hy.Durh., M.R.C.S., L.R.C.P.: A. Reid, M.R.C.S., L.R.C.P.: R. Walker, M.B., B.S. Durham, M.R.C.S., L.R.C.P.

ROYAL UNIVERSITY OF IRELAND.

SECOND EXAMINATION IN MEDICINE.—The examiners have recommended that the following candidates be adjudged to have passed the above-mentioned examination:

Upper Pass.—C. Armstrong, Queen's College, Belfast; R. Chambers, L.L.B., Queen's College, Belfast; R. G. G. Croly, Queen's College, Cork; W. Irwin, Queen's College, Cork; R. L. Keown, Queen's College, Belfast; O. C. Sullivan, Catholic University School of Medicine; S. M. Walsh, Catholic University School of Medicine; H. C. Watson, Queen's College, Belfast; L. Welpy, Queen's College, Cork; J. Wright, Queen's College, Belfast.

The above-mentioned candidates may present themselves for the further examination for Honours.

Pass.—W. J. McL. Band, Queen's College, Belfast; C. D. Bell, Queen's College, Belfast; S. Bradbury, Queen's College, Belfast; W. A. Burke, Catholic University School of Medicine; R. G. Clements, Queen's College, Belfast; W. J. Deighan, Catholic University School of Medicine; J. Dempsey, Queen's College, Belfast; M. F. Donovan, B.A., Queen's College, Cork; W. P. Farrell, Catholic University School of Medicine; J. Flack, Queen's College, Galway; A. Hill, Queen's College, Belfast; E. J. Kavanagh, Catholic University School of Medicine; J. Kelly, Catholic University School of Medicine; G. W. Knipe, Queen's College, Belfast; J. Lilley, Queen's College, Belfast; F. A. McCammon, Queen's College, Belfast; S. McMurray, Queen's College, Belfast; E. H. M. Milligan, Queen's College, Belfast; J. P. Moore, Catholic University School of Medicine; E. M. O'Neill, Catholic University School of Medicine; C. G. Robb, Queen's College, Belfast; H. S. Sims, Queen's College, Cork; J. K. Thompson, Queen's College, Belfast; J. Warnock, B.A., Queen's College, Galway.

M.B., B.Ch., B.A.O. DEGREES EXAMINATION.—The examiners have recommended that the following candidates be adjudged to have passed the above-mentioned examination:

Upper Pass.—J. Armstrong, Queen's College, Belfast; *A. L. Black, B.A., Queen's College, Belfast; S. R. Hunter, B.A., Queen's College, Belfast; *W. Phillips, B.A., Queen's College, Belfast; C. F. White, Catholic University School of Medicine.

Those marked with an asterisk (*) may present themselves for the further examination for Honours.

Pass.—D. R. Campbell, B.A., Queen's College, Belfast; J. Clements, Queen's College, Galway and Belfast; T. F. Heas, Queen's College, Cork; J. P. Higgins, M.A., Queen's College, Cork; J. L. Lunham, Queen's College, Cork; M. J. Macauley, Queen's College, Cork, and Catholic University School of Medicine; F. H. McCaughy, Queen's College, Belfast; E. J. McKenna, Queen's College, Cork; F. C. Mann, Queen's College, Belfast; L. T. Moore, Queen's College, Cork; W. F. O'Connor, Queen's College, Cork; P. O'Doherty, Catholic University School of Medicine; J. J. O'Hare, Catholic University School of Medicine; F. W. Stewart, B.A., Queen's College, Belfast; W. A. Stoops, B.A., Queen's College, Belfast; W. J. Thompson, Queen's College, Belfast.

CONJOINT BOARD IN IRELAND.

CANDIDATES have passed the Second and Third Professional Examinations as undernoted:

Second Professional (Old Regulations).—W. H. Bournes.

Second Professional (New Regulations).—Honours in order of merit: J. Bradley, J. J. Connolly, Miss A. M. Barry, Miss J. C. Harrgrave, J. Pratt, M. Lochrin (J. C. Murphy, J. S. Sheil equal), J. C. Heelan, E. C. Mulligan. Pass alphabetically: E. B. Bird, A. J. Bracken, G. P. A. Bracken, A. N. Crawford, C. A. Cusack, F. O'D. Fawcett, P. E. Harrison, G. A. D. Harvey, R. W. D. Leslie, T. C. C. Leslie, W. F. B.

Loughnan, T. J. O'Donnell, E. J. Phillips, J. Quirke, R. E. J. Sheridan, W. J. Sullivan. Completed the examination: P. Kinsella, T. B. Moriarty.

Third Professional.—All subjects: P. McDermott, R. C. Nicholl, J. P. Ziervogel. Completed the examination: F. H. Cooke, R. Humfrey, J. Murray, O. F. M. Ormsby, R. G. H. Oulton, F. C. Yorke.

CONJOINT BOARD IN ENGLAND.

The following gentlemen have passed the first examination of the Board in the subjects indicated:

Chemistry.—C. J. Aveling, University College Hospital; B. R. Billings, London Hospital; J. E. M. Boyd, St. Mary's Hospital; L. D. Ching, St. Bartholomew's Hospital; J. Clarke, Firth College, Sheffield; B. M. Collard, London Hospital; D. E. S. Davies, St. Bartholomew's and King's College Hospitals; F. C. Doble, King's College Hospital; J. McD. Eckstein, St. Bartholomew's Hospital; H. R. Elliott, Firth College, Sheffield; S. F. H. Everill, Mason College, Birmingham; J. R. Foster, University College Hospital; J. T. Fox, City of London School; E. A. Gough, Yorkshire College, Leeds; W. R. Greening, Guy's Hospital; W. B. Griffin and R. L. Haines, St. Bartholomew's Hospital; H. E. Griffiths, University College, Cardiff; H. J. Hills, Guy's Hospital; H. G. Hobson, Middlesex Hospital; T. Huddleston, Mason College, Birmingham, and Birkbeck Institute; A. R. Jones, University College, Cardiff; J. I. F. Knight and H. W. Latham, London Hospital; F. E. W. Meadows and G. N. Montgomery, Middlesex Hospital; G. H. Morris, Guy's Hospital; F. W. Murray, University College, Liverpool; G. K. B. Neal, Charing Cross Hospital; M. K. Nelson, Queen's College, Belfast; E. Nuttall, Owens College, Manchester; G. S. Parkinson, University College, Bristol; P. G. V. Pedrick, Guy's Hospital; L. Russell, King's College Hospital; G. N. B. Sebastian, St. George's Hospital; W. F. Skinner, Firth College, Sheffield; S. Slade, Middlesex Hospital; T. L. Smith, Yorkshire College, Leeds; H. McL. Staley, Owens College, Manchester, and Manchester Technical School; G. Stone, London Hospital; A. W. Swinburne, Yorkshire College, Leeds; T. Timothy, University College, Cardiff; S. Vosper, St. Bartholomew's Hospital; H. Wales, Yorkshire College, Leeds; F. W. Walker, Owens College, Manchester; C. Weller, Birkbeck Institute; J. D. Williams, Queen's College, Belfast.

Practical Pharmacy.—A. J. Ambrose, Westminster Hospital; S. E. G. Amore, Charing Cross Hospital; U. M. Asplen, Cambridge University, and King's College Hospital; K. D. Bell, St. Bartholomew's Hospital; J. L. Blakie, Otago University and Middlesex Hospital; G. A. Bradshaw, St. Mary's Hospital; J. Butterworth, Owens College, Manchester; P. C. V. Bent, S. C. Bowle, W. H. Bush, and J. B. Copland, Guy's Hospital; M. J. Cromie, Westminster Hospital; E. S. Ellis, St. Bartholomew's Hospital; H. L. Evans, St. Thomas's Hospital; W. T. Finlayson, St. Mary's Hospital; H. B. German and G. F. Hardy, Guy's Hospital; J. W. F. Gillies, St. Thomas's Hospital; F. R. Harris, St. Mary's Hospital; W. H. Harvey, St. Bartholomew's Hospital; D. M. Humby, Middlesex Hospital; F. D. S. Jackson and F. C. R. M. Knight, Guy's Hospital; W. W. King and R. Lecky, University College, Bristol; W. Lovell and W. T. McCowen, St. Mary's Hospital; H. P. Margetts, St. Bartholomew's Hospital; A. Mavrogordato, Oxford University and St. Thomas's Hospital; H. E. Morris, Guy's Hospital; J. Morris, St. Bartholomew's Hospital; R. Moyle, Durham University and Guy's Hospital; J. P. Nettell, London Hospital; F. Rawsthorne, Owens College, Manchester; H. Round, Mason College, Birmingham; J. D. Staley, Owens College, Manchester; A. C. Story, University College, Cardiff, and St. Mary's Hospital; M. B. Taylor, Guy's Hospital; J. Turtle, London Hospital; R. H. Williams, University College, Liverpool and Owens College, Manchester.

Elementary Biology.—C. E. H. Adam, St. Bartholomew's Hospital; C. J. Aveling and R. Barragry, University College Hospital; W. K. Beaman, Charing Cross Hospital; W. H. Bennett, Owens College, Manchester; B. R. Billings, London Hospital; W. A. J. M. Briggs, St. Thomas's Hospital; C. H. R. Bryan, Guy's Hospital; M. B. S. Button, London Hospital; C. Cecil, St. Mary's Hospital; W. W. D. Chilcott, Charing Cross Hospital; J. Clarke, Firth College, Sheffield; H. G. Cole, St. Thomas's Hospital; E. V. Connellan and P. S. Connellan, University College, Bristol; C. F. Curtis, Owens College, Manchester; G. W. M. Custance, St. Thomas's Hospital; A. Davidson, Guy's Hospital; R. M. Dennys and J. McD. Eckstein, St. Bartholomew's Hospital; H. R. Elliott, Firth College, Sheffield; J. J. W. Evans, Westminster Hospital; L. Edwards, London Hospital; J. H. Fitzgerald, Charing Cross Hospital; A. Fleming, St. Mary's Hospital; J. T. Fox, City of London College; F. H. Fuller, Municipal School of Science and Technology, Brighton; E. W. Gandy, Cambridge University and Westminster Hospital; E. S. Goss, University College, Bristol; E. A. Gough, Yorkshire College, Leeds; C. D. Graham, London Hospital; H. Granger, St. Thomas's Hospital; V. B. Green-Armytage, University College, Bristol; M. Greer, University College, Liverpool; H. M. Grey, W. B. Griffin, J. H. Gurley, R. L. Haines, St. Bartholomew's Hospital; T. Huddleston, Mason College, Birmingham; G. M. Huggins, St. Thomas's Hospital; J. G. Ivers, Owens College, Manchester; T. A. Izard, St. Bartholomew's Hospital; C. C. Keates, St. Mary's Hospital; W. R. Kilgour, St. Bartholomew's Hospital; W. H. King, University College Hospital; J. J. Louwrens, St. Mary's Hospital; H. W. Latham and O. R. McEwen, London Hospital; G. N. Montgomery and F. E. W. Meadows, Middlesex Hospital; J. L. Meynell, London Hospital; R. A. Moxon, St. Mary's Hospital; F. W. Murray, University College, Liverpool; R. H. McGillycuddy, University College, London; H. W. Nicholls, Middlesex Hospital; R. B. Nicholson, Owens College, Manchester; P. S. O'Brien-Taylor, St. Mary's Hospital; C. M. Ockwell, Guy's Hospital; F. B. O'Dowd, Mason College, Birmingham; F. W. O'Connor, R. D. O'Connor, M. Onslow-Ford, and F. G. Page, St. Bartholomew's Hospital; H. A. Pallant, Guy's Hospital; G. S. Parkinson, University College, Bristol; F. E. L. Phillips, London Hospital; L. L. Phillips, St. Bartholomew's Hospital; C. G. Plum-

ley, University College and Merchant Venturers College, Bristol; E. C. Pope, St. Mary's Hospital; G. A. Russell, Mason College, Birmingham; E. A. Shrivell, London Hospital; L. E. M. Smith, Charing Cross Hospital; W. H. Smith, Owens College, Manchester; F. E. Sprawson, Birkbeck Institute; G. Stone, London Hospital; A. A. Straton, St. Mary's Hospital; W. F. Sutcliffe, St. Thomas's Hospital; E. J. F. Thomas, University College, Bristol; St. J. A. M. Tolhurst and H. E. B. Turner, Guy's Hospital; W. G. H. M. Verdon, University College, Cambridge; H. F. Vellacott and L. M. Waldron, London Hospital; H. Wales, Yorkshire College, Leeds; H. B. Wickham, University College, Liverpool.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

REMOVAL OF SMALL-POX PATIENTS.

QUELCH v. THE JUSTICES OF SURREY.—On May and an application was made to the Divisional Court for a rule nisi for a *certiorari* to bring up the case of one W. C. Quelch, who was convicted under Section CXXIV of the Public Health Act, 1875, for obstructing the removal of a small-pox patient. Mr. Schultess Young appeared for the applicant. It appeared that on March 3rd, 1902, the justices made the necessary order, acting upon the certificate of their medical officer of health. The applicant alleged that, before making his certificate, the medical officer had taken no steps to ascertain whether there was or was not "proper accommodation" within the meaning of the section. It was stated that, as a matter of fact, the room in which the patient was lying was isolated; that he was not then suffering from, nor did he afterwards develop, small-pox. In these circumstances it was said that the order was wrong, and that the conviction should be quashed.

The Lord Chief Justice: Is there any procedure by which an *ex parte* order can be questioned?

Mr. Young: Only on the dictum of Channell, J., in *Reg. v. Davey*, 1899 2 Q. B. 307. [In this case, after deciding that, upon the hearing of a summons for obstructing the execution of an order, the validity of the order could not be questioned, his lordship said there must be a mode of questioning such orders; probably *certiorari* or *habeas corpus* would be the proper remedy.]

In the course of his judgment, the Lord Chief Justice said: I am of opinion that *certiorari* does not lie in this case. The justices made an order for removal, acting upon the sworn certificate of the medical officer, and they are entitled to do so under Section CXXIV of the Public Health Act, 1875; the very existence of the certificate implies that, in the opinion of the medical officer, there was not sufficient accommodation. It is an established practice that *certiorari* does not lie to review the decision of the magistrates when they have exercised their discretion.

Darling and Channell, JJ., concurred.

HEALTH OF ENGLISH TOWNS.

IN seventy-six of the largest English towns, including London, 8,713 births and 4,724 deaths were registered during the week ending Saturday last, May 3rd. The annual rate of mortality in these towns, which had 18.3 and 17.0 per 1,000 in the two preceding weeks, further declined last week to 16.6. The rates in the several towns ranged from 7.6 in Hornsey, 8.5 in Reading, 8.6 in King's Norton, 9.4 in Devonport, 10.3 in Walthamstow and in Derby, and 11.1 in Leyton and in Wallasey, to 22.2 in Stockton-on-Tees, 22.5 in Hanley, 22.8 in Blackburn, 23.0 in Tyne-mouth, 23.7 in Wigan, 24.5 in Oldham, 24.8 in Rochdale, and 25.5 in St. Helens. In London the death-rate was 15.7 per 1,000, while it averaged 17.0 in the seventy-five other large towns. The death-rate from the principal zymotic diseases in the seventy-six large towns was 1.7 per 1,000; in London this death-rate was equal to 2.0 per 1,000, while it averaged 1.5 in the seventy-five other large towns, among which the highest zymotic death-rates were 3.4 in West Ham and in Bolton, 3.5 in South Shields, 3.6 in Rhondda, 3.7 in Bolton, 4.0 in Grimsby, and 4.5 in Barrow-in-Furness. Measles caused a death-rate of 1.2 in Northampton, 1.8 in Rhondda, 2.0 in Burton-on-Trent, 2.2 in Merthyr Tydfil, and 3.6 in Barrow-in-Furness; scarlet fever of 1.2 in Bolton and 1.7 in Wigan; whooping-cough of 1.2 in Bolton and in Newcastle, 1.3 in Aston Manor, 1.4 in Gateshead, 1.5 in South Shields, and 1.6 in West Bromwich and Grimsby; and "fever" of 1.3 in Aston Manor. The mortality from diphtheria showed no marked excess in any of the large towns. The 64 fatal cases of small-pox registered last week included 43 which belonged to London, 13 to West Ham, 1 to Tottenham, 2 to South Shields, 1 to Willesden, 1 to East Ham, 1 to Oldham, and 1 to Rhondda. The number of small-pox cases under treatment in the Metropolitan Asylums Hospitals, which had been 1,431 and 1,515 at the end of the two preceding weeks, had declined again to 1,442 on Saturday, May 3rd; 250 new cases were admitted during the week, against 274, 328, and 367 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 2,222, against 2,140, 2,155, and 2,178 at the end of the three preceding weeks; 258 new cases were admitted during the week, against 228, 204 and 203 in the three preceding weeks.

HEALTH OF IRISH TOWNS.

THE quarterly summary of births and deaths in the Dublin registration area and in twenty-one of the principal urban districts in Ireland for the thirteen weeks ending March 20th, 1902, is given on p. 1188. Although no deaths from small-pox were registered, there were 3 cases under treatment in hospital in Dublin during the quarter. The zymotic mortality calls for little comment. Galway with 3 deaths from typhus fever is somewhat exceptional in this respect. The physical death-rate remains more unsatisfactory than ever before. In Dublin there were 357 deaths from this disease, exclusive of 21 occurring in institutions and

MEDICAL NEWS.

THE forty-second annual dinner of King's College, London, will be held at the Café Monico, London, W., on Monday, June 16th, when the chair will be taken by the Bishop of London.

A DRAMATIC entertainment in aid of the funds of the Royal Dental Hospital of London was given on May 2nd at the Queen's Gate Hall, S.W. A large audience thoroughly appreciated the efforts of those who filled the various parts in the triple bill consisting of "Opposites," by Mr. Leslie Fomm; "A Successful Failure," by Mr. Frank Stanmore; and "The House Agent's Dilemma," by Mr. G. Hyde Lees.

THE King, the *London Gazette* states, has been pleased to give and grant unto the Honourable Lennox Hannay Lindley, M.B., His Majesty's licence and authority that he may accept and wear the insignia of the First Class of the Order of the Lion and the Sun, conferred upon him by his Imperial Majesty the Shah of Persia, in recognition of his services as Physician to his Imperial Majesty.

THE CHELSEA CLINICAL SOCIETY.—The annual dinner of the Society will be held in the Prince's Room, Criterion Restaurant, on Thursday, May 22nd, at 7.45. Members desirous of attending and accompanied by guests are requested to inform the Hon. Secretary, Dr. Austin Cooper, 104, Buckingham Palace Road, S.W., not later than Thursday, May 15th.

THE SHAH'S PHYSICIAN.—In the BRITISH MEDICAL JOURNAL of January 11th, 1902, it was stated on the authority of the *New York Medical Journal* that Dr. M. Elezarian Randolph, said to be well known in medical circles in New York, had been appointed personal physician to the Shah of Persia. In reference to this announcement we have received a communication from Sir Hugh Adcock, C.M.G., Consulting Physician-in-Chief to H.I.M. the Shah, who states that the gentleman in question has not been appointed to any position near the Shah.

A NEW HOSPITAL FOR CHICAGO.—At a banquet recently given by the National Medical University at Chicago to the faculty and the graduates for the quarter, the announcement was made that it was proposed to build a new hospital at an estimated cost of one million dollars (£200,000). Dr. Julia Holmes Smith, Dean of the institution, presided. The new hospital is to be incorporated as the National Hospital and Sanatorium. A site overlooking Lincoln Park, valued at 2,000,000 dollars, has been selected.

SICILIAN MEDICAL CONGRESS.—The first Sicilian Medical Congress will be held at Palermo from May 29th to June 1st. Professor Cervello is the President of the Organizing Committee. The subjects proposed for discussion are Typhoid and Pseudo-typhoids (Mediterranean fever, etc.), and Renal Surgery. The former discussion will be introduced by Professor Salvatore Tomaselli of Catania, and Professor Umberto Gabbi of Messina; the latter by Professor Iginio Tansini of Palermo, and Professor Gesualdo Clementi of Catania. There will also be a discussion on the overcrowding of the medical profession in Italy, and the means of remedying the evil and generally improving the condition of practitioners.

THE THIRTEENTH INTERNATIONAL MEDICAL CONGRESS.—The Organizing Committee of the Thirteenth International Medical Congress held in Paris in 1900 recently met in order to decide what should be done with a surplus of Fr. 40,000 (£1,600) remaining in their hands. It was decided that the Academy of Medicine should be the trustee of the fund and that the interest of the capital sum should for twenty-five years be given by the Academy every three years as a prize to some one named by the international delegates at each Congress. The prize is to be called the "Prize of the Thirteenth International Congress, Paris." After twenty-five years the capital sum is to become the property of the Academy of Medicine, but the interest is to be applied in the same way. The only difference will be that the international delegates instead of themselves selecting the candidate to whom the prize is to be awarded will propose him for adoption by the Academy. Practically this will come to the same thing.

AMBULANCE FOR CRIPPLED SCHOOL CHILDREN.—The system under which crippled children of the poor who have hitherto been unable to attend school on account of their infirmity are now being conveyed to and from their special schools in horse ambulances (which have been devised and constructed by Messrs. Carter, of New Cavendish Street), has already been mentioned in the BRITISH MEDICAL JOURNAL. Some crippled children, especially those suffering from the effects of anterior poliomyelitis, are often far above the average in brightness, intelligence, and gracious character. It would seem as if in them the vulnerability of the spinal cord to certain toxins were an index of a highly-specialised nervous system, the psychical manifestations of which may be taken as no small compensation. The neat carriages which may be seen in different parts of London with their freight of handicapped little ones may well serve as an object lesson that fitness to survive does not entirely depend on thews and sinews.

THE Friday evening lecture at the Royal Institution of Great Britain on April 25th was given by Mr. Mackenzie Davidson, who gave a sketch of the steps which led to the discovery of the x rays, and warmly praised the completeness of Roentgen's investigation. He observed that the x rays took their origin at the point where the cathode stream met a solid—that is to say, at the anticathode—but as this did not stop all the stream some of it passed on till it met the glass of the tube when more x rays were produced. Radiation was thus going on from a comparatively large surface, so that a sharp shadow could not be obtained. The defect might be obviated in practical work by stopping the stray rays by surrounding the tube with an opaque substance like red lead. An additional advantage of this was that the operator was protected from the unpleasant effects which the rays were capable of producing on the skin. The lecture was illustrated by experiments, including a demonstration of Mr. Mackenzie Davidson's method of obtaining an x -ray picture in stereoscopic relief.

THE ENDOWMENT OF CANCER RESEARCH.—The writer of the letter signed "Research," which appeared in the *Times* of April 25th, has, in order to clear up doubts which have been expressed as to his conditions, stated that he will give £5,000 to the Cancer Research Fund if thirteen other sums of like amount are subscribed before the Coronation, whether by individuals, groups of members of families, firms, or corporate bodies. "Research" has no wish to limit his condition to individual subscribers alone. If his proposal is taken up, the £70,000 required to complete the equipment of the fund will be provided without further trouble. The Rev. James Chadburn has promised £1,000 towards the endowment of an additional bed for cancer at the New Hospital for Women. The Governors of the Middlesex Hospital have received a further donation of £500 from Sir Elliott Lees, M.P., half of which sum has been allocated towards the maintenance of the inmates of the wards in the special department devoted to incurable cancer patients, and the other half to the research department established in connexion with it for investigation into the cause of cancer.

MEDICAL VACANCIES.

The following vacancies are announced:

- BARBADOS GENERAL HOSPITAL.—Junior Resident Surgeon. Salary, £270 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 GENERAL DISPENSARY.—Resident locum for two or three months. Terms 4 guineas per week, with furnished apartments. Applications to the Secretary by May 28th.
- BIRMINGHAM GENERAL HOSPITAL.—(1) Resident Medical Officer. Salary, £70 per annum. (2) Two House-Surgeons. Appointments for six months. Salary, £50. (3) Aural Surgeon and Laryngologist. Residence, board, and washing provided for (1) and (2). Applications to the House-Governor by May 31st.
- BIRMINGHAM AND MIDLAND EAR AND THROAT HOSPITAL.—Surgeon. Applications to the Honorary Secretary by May 15th.
- BIRMINGHAM AND MIDLAND EYE 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.
- BISTOL CITY LUNATIC ASYLUM.—Medical Assistant; unmarried. Salary, £140 per annum, increasing to £160, with furnished apartments, board and washing. Applications, marked "Medical Assistant," by May 1st.
- CAMBRIDGE: ADDENBROOKE'S HOSPITAL.—Second Assistant Physician. Applications to the Secretary by June 7th.
- CANCER HOSPITAL, Fulham Road, S.W.—Junior House Surgeon. Salary at the rate of £70 per annum with board and residence. Application to the Secretary by May 12th.

CANTERBURY: KENT AND CANTERBURY HOSPITAL.—Assistant House-Surgeon unmarried. Salary, £60 per annum, with board and lodging. Applications to the Secretary by May 30th.

CENTRAL LONDON ASYLUM DISTRICT.—Assistant Medical Officer for duty at Cleveland Street, or Hendon. Salary, £120 per annum, with board and residence at Hendon Asylum. Applications to the Clerk, Cleveland Street Asylum, Cleveland Street, W.

COLOMBO MUNICIPALITY.—Medical Officer of Health. Appointment for five years, with option of re-engagement. Salary, £400 for first three years, and £500 for the last two years. First class passage provided. Applications to Dr. Perry, care of British Medical Association, 429, Strand.

DEVONPORT: ROYAL ALBERT HOSPITAL.—Resident Medical Officer; unmarried, under 32 years of age. Salary, £116 per annum, with board and lodging. Applications on forms provided, to be addressed to the Chairman of the Selection Committee by May 30th.

DOWRY COUNTY INFIRMARY.—House-Surgeon; unmarried. Salary, £60 per annum, with board and residence. Applications to Dr. Tate, Downpatrick, by June 5th.

DURHAM COUNTY ASYLUM. Winterton, Ferry Hill. 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. Officer for the Electrical Department. Applications to the Secretary by May 17th.

GLAMORGAN COUNTY ASYLUM. Bridgend. Locum tenens for about 5½ months. Four guineas a week and board. Applications to the Medical Superintendent.

GRAVESEND HOSPITAL.—House-Surgeon. Salary, £60 per annum, with board and residence. Applications to the Honorary Secretary by May 20th.

GUY'S HOSPITAL DENTAL SCHOOL. Travelling Scholarship of the value of £100. Applications to the Dean, Guy's Hospital, S.E., by June 1st.

HAYSTOCK HILL AND MALDEN ROAD PROVIDENT DISPENSARY. 132, Malden Road, N.W.—Medical Officer. Applications to the Honorary Secretary by June 1st.

HULL ROYAL INFIRMARY.—Casualty Officer. Salary, £60 per annum, with board and lodging. Applications to the Chairman, House Committee, by June 5th.

ISLE OF MAN LUNATIC ASYLUM.—Assistant Medical Officer. Salary, £100 per annum, with board, furnished quarters, and washing. Applications to Dr. Richardson.

JERUSALEM: BRITISH OPHTHALMIC HOSPITAL.—Clinical Assistant for about eight months. Salary, £100, with travelling expenses and maintenance allowance. Applications, marked "Ophthalmic Hospital," to E. Gifford-Salmond, Esq., 72, Upperville, E.C.

KENT COUNTY ASYLUM. Barming Heath. Fourth Assistant Medical Officer and Pathologist; unmarried, and not over 30 years of age. Salary, £175 per annum, rising to £240, with furnished quarters, etc. Applications to Dr. F. Pritchard Davies Superintendent.

KINGSDINE PARISH COUNCIL.—Resident Medical Officer and Vaccinator. Salary, £77 10s. per annum and lunacy fees. Applications to Mr. David Ross, Inspector of Poor, Ardgay, by May 23rd.

KING'S NOTION AND NORTHFIELD URBAN DISTRICT COUNCIL.—Medical Officer of Health and Medical Superintendent of the Infectious Diseases Hospital. Salary, £500 per annum. Applications marked "Medical Officer of Health," to be sent to the Clerk to the Council, 10, Newhall Street, Birmingham, by May 21st.

LANCASHIRE COUNTY ASYLUM. Whittingham. Junior Assistant Medical Officer. Initial salary, £150, with furnished apartments, board, washing, and attendance. Applications to the Medical Superintendent.

LISCARD: WALLASEY DISPENSARY AND VICTORIA CENTRAL HOSPITAL.—House-Surgeon; unmarried. Salary, £100 per annum, with board, apartments, and service. Applications to Mr. Andrew Lindsay, Newbold, Liscard, by May 20th.

LIVERPOOL STANLEY HOSPITAL.—Senior House-Surgeon. Salary, £100 per annum, with board, residence, and washing. Applications to the Chairman, Medical Board, by May 15th.

METROPOLITAN ASYLUMS BOARD.—(1) Male Assistant Medical Officer for the Asylum at Caterham. Salary, £150 per annum. (2) Male Assistant Medical Officer (Class II) for the fever and small-pox hospitals. Salary, £180 per annum rising to £240. Board, lodging, attendance, and washing provided in each case. Candidates must be unmarried, and not to exceed 35 years of age. Applications on forms provided, to be sent to the offices of the Board, Embankment, E.C., for (1) by May 21st, and for (2) by May 20th.

NEW HOSPITAL FOR WOMEN. 144, Euston Road, N.W.—Qualified Medical Woman to take charge of Roentgen Ray Department. Applications to the Secretary by May 26th.

NORTHAMPTON: ST. ANDREW'S HOSPITAL FOR MENTAL DISEASES.—Assistant Medical Officer for six or seven months. Salary, £4 4s. a week, with board, lodging, and washing. Applications to the Medical Superintendent.

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. (3) Second Honorary Anaesthetist. Applications to the Secretary by May 31st.

NOTTINGHAM GENERAL DISPENSARY.—Assistant Resident Surgeon; unmarried. Salary, £160 per annum, increasing £10 yearly, with furnished apartments, etc. Applications to the Secretary, Mr. M. I. Preston, Journal Chambers, Nottingham.

OXFORD: RADCLIFFE INFIRMARY.—(1) House-Surgeon. (2) Junior House-Surgeon. Appointment for six months. Salaries, £40 and £20 respectively, with board and lodging. Must be unmarried. Applications to Dr. Ritchie, 28, Beaumont Street, Oxford, by May 17th.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—(1) Hunterian Professors. (2) Francis Wilson Lecturer. (3) Arris and Gale Lecturer for the ensuing year. Applications to the Secretary by June 2nd.

ROYAL WESTMINSTER OPHTHALMIC HOSPITAL. King William Street, W.C.—Clinical Assistants. Appointments for six months. Applications to the Secretary by May 31st.

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.

SEAMEN'S HOSPITAL SOCIETY. Greenwich.—(1) Surgeon to in-patients at the Branch Hospital, Royal Victoria and Albert Docks. (2) Honorary Anaesthetist at the Dreadnought Hospital, Greenwich. Applications to the Secretary by May 20th.

SOUTHAMPTON: ROYAL SOUTH HANTS AND SOUTHAMPTON HOSPITAL.—(1) Senior House-Surgeon. Salary, £120 per annum. (2) Junior House-Surgeon. Salary, £60 per annum. (3) Honorary Dentist. Rooms, board, and washing found for (1) and (2). Applications to the Secretary by May 31st.

SUNDERLAND: MONKWEAEMOUTH AND SOUTHWICK HOSPITAL.—House-Surgeon. Salary, £80 per annum, with board, lodging, and washing. Applications to the Secretary by May 15th.

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.

WESTERN GENERAL DISPENSARY. Marylebone Road, N.W.—Second House-Surgeon unmarried. Salary, £81 per annum, with board, residence, and laundry. Applications to the Honorary Secretary.

WEYMOUTH AND MELCOMBE REGIS URBAN DISTRICT COUNCIL.—Medical Officer of Health, not exceeding 45 years of age. Salary, £300 per annum. Applications, endorsed "Appointment of Medical Officer of Health," to be sent to the Town Clerk, Municipal Office, Weymouth, by May 17th.

WILTS COUNTY ASYLUM, DEVIZES.—Assistant Medical Officer. Salary, £150 per annum, rising to £180, with board, residence, attendance, and washing. Applications to the Medical Superintendent by May 15th.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—(1) House-Physician. (2) House-Surgeon. Salary, £100 per annum each, with food, lodging, and washing. Applications to the House-Governor by May 27th.

MEDICAL APPOINTMENTS.

ALEXANDER, Victor Georges, M.B., Ch.B. Edin., B.Sc., appointed Senior Medical Officer, Concentration Camp, Standerton, Transvaal.

BABA, M. Singh Sodhi, M.B., Ch.B. Edin., Junior Assistant Medical Officer, appointed Senior Assistant Medical Officer, Portsmouth Asylum, vice John J. Glasgow, M.B.C.S., L.M.C.P., resigned.

BRECKLEY, Conynna, M.B., B.C. Cantab., M.R.C.P., appointed Lecturer on Practical Midwifery at the Middlesex Hospital.

BROWN, Major E. Harold, M.D., I.M.S., appointed Clinical Assistant to the Chelsea Hospital for Women.

CASELLIS, A. H., M.B., Ch.B. Glasg., appointed Assistant Medical Superintendent of the Sunnyside Asylum, Montrose, vice Dr. Campbell, resigned.

CLARKSON, Wm., L.R.C.P. Edin., L.F.P.S. Glasg., appointed Medical Officer of Health to the Morpeth Rural District Council.

GOUGH, William, M.B., B.S., B.Sc. Lond., M.R.C.S., L.R.O.P., appointed use-Surgeon to the Hospital for Women and Children, Leeds.

IVER, Francis, M.B. Lond., late Clinical and Assistant Pathologist, appointed House Surgeon to the Royal Free Hospital.

JONES, Herbert, L.R.C.S.I., D.P.H. Camb., appointed Medical Officer of Health for the Bromary Urban District.

LENEX, Lydia, M.D. Brux., L.R.C.P. Lond., L.R.C.S. Edin., appointed Oculist in the Medical Department of the School Board for London.

MCDUGALL, Olive, M.B. Lond., appointed House-Physician to the Royal Free Hospital.

SNAPS, Harold, M.B., Ch.B. Vict., appointed Anaesthetist to the Manchester Children's Hospital, Pendlebury.

DIARY FOR NEXT WEEK.

MONDAY.

Medical Society of London. 11, Chandos Street, Cavendish Square, W., 8 p.m.—General Meeting. Election of Officers and Council for session 1902-3. 8.30 p.m.—ordinary meeting.—Dr. P. Manson: The Diagnosis of Malaria from the Standpoint of the Practitioner in England.

TUESDAY.

Royal Medical and Chirurgical Society. 20, Hanover Square, W., 8.30 p.m.—Mr. Thomas Bryant: An Analysis of Forty-six Tabulated cases of Cancer of the Stomach which have been Operated upon and Survived the Operation from Five to Thirty-two Years. Mr. Rickman J. Godlee: A Contribution to the Study of Tropical Abscess of the Liver.

University of London Physiological Laboratories. South Kensington, 5 p.m.—Dr. Waller: The Signs of Life.

WEDNESDAY.

Dermatological Society of London. 11, Chandos Street, Cavendish Square, W., 5.15 p.m.—Demonstration of Cases of Interest.

University of London Physiological Laboratories. South Kensington, 5 p.m.—Dr. Leonard Hill: The Physiology of Respiration.

FRIDAY.

Society for the Study of Disease in Children. North-Eastern Hospital for Children, Hoxsey Road, N.E., 5.30 p.m.—Cases and specimens by Dr. James Taylor, Mr. Douglas Drew, Dr. J. P. Parkinson, Mr. H. Currie-Smith, Mr. A. B. Roxburgh, Dr. J. H. Sequeira, Mr. S. F. Rose and Mr. Sydney Stephenson. Paper by Dr. C. Hawthorne: A Note on a case of Arthritis accompanying Ophthalmia Neonatorum.

POST-GRADUATE COURSES AND LECTURES.

Charing Cross Hospital, Thursday, 4 p.m.—Surgical Cases.

Hospital for Sick Children, Great Ormond Street, W.C.—Thursday, 4 p.m.—Demonstration of Selected Cases.

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

National Hospital for the Paralyzed and Epileptic. Queen Square, W.C. Tuesday, 3.30 p.m. Lecture on the Value of the tendon-jerks and Superficial Reflexes in Diagnosis.

Westminster Hospital, S.W., Tuesday, 4.30 p.m.—Demonstration on Some Clinical Aspects of Arthritis.

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.

EDWARDS.—On May 6th, at Shian Penzance, the wife of E. C. Edwards, M.D., of a son.

HOWELL.—On May 5th, at Middlesbrough-on-Tees, the wife R. E. Howell, M.B., M.R.C.S., of a son and daughter.

PEARSON.—At 17, Alva Street, Edinburgh, on April 20th, the wife of C. Mowbray Pearson, M.B., Ch.B., of a daughter.

TURNER.—On May 2nd, at Westbury, Parley, Surrey, the wife of S. Duke Turner, M.B., B.S., D.P.H., of a daughter.

MARRIAGES.

ALFORD-CLAY.—On April 8th, at the Parish Church, Hornsey, by the Rev. Frob. J. Jeske, M.A., assisted by the Rev. St. Clair Donaldson, M.A., Herbert Thomas Marzaduke Alford, L.R.C.P. Lond., M.B.C.S. Eng., youngest son of the late Herbert Alford, of Weston-super-Mare, to Edith Violet, youngest daughter of the late Richard Clay, of Muswell Hill.

HARRIS-SCALES.—On April 23rd, at St. Mark's, Hamilton Terrace, N.W., Herbert George Harris, M.D., B.S. Durm., son of the late W. J. Harris, of Worthing, to Hilda Mary, eldest daughter of G. H. Scales, of Ashton, Lancs.

HOSKOTYD-HEAD.—On April 30th, at St. Oswald's Church, Collingham, Ls., by the Rev. E. T. Gwynn, B. Holroyd, M.B.C.S. Eng., L.R.C.P. Lond., of Pannal, Yorks, to Emma, second daughter of Mr. T. Whitehead, of Collingham.

PIERCE-VAUGHAN.—On April 23rd, at the Parish Church, St. Pancras, London, by the Rev. P. Bull, M.A., Vicar of monnow, assisted by the Rev. D. Fretton, D.D. (uncle of the bridegroom) and the Rev. L. Fagot, Vicar, James Arthur Lilwall Peirce, L.R.C.P. Lond., M.B.C.S. Eng., eldest son of Dr. James P. Peirce, J.P., Newlands, Redditch, to Mabel, youngest daughter of the late James Vaughan, of Fitzroy Square, W.

DEATHS.

COWIE.—At Bournemouth, on May 5th, John Cowie, M.B., C.M. (of Accrington, Lancs.), aged 44.

KILLICK.—Arthur Killick B.A., M.B., B.C. Cantab., on April 21st, at Seven Kings, Ilford, aged 35.

MACPHAIL.—On Tuesday, April 22nd, 1902, at C.A.M.'s Hotel, New York, Georgina Burland, wife of Andrew Macphail, B.A., M.D., C.M., M.R.C.S. Eng., L.R.C.P. Lond., Professor of Pathology, University of Bishop's College, Montreal.

STEPHENS.—On April 30th, at Lynton, N. Devon, Daniel Robert Porritt Stephens, M.B. Camb., M.R.C.S. Eng., eldest son of the late Daniel Woolcott Stephens, of Hinderswe Yorkshire.