

The previous confinements, five in number, had been normal, there was no rupture of the perineum, no displacement, nor prolapse before either pregnancy, and no history of fibroids.

This case presents several points of interest, showing the successful termination of an apparently hopeless case: the cause of the inversion was probably the combination of excessive force on the abdomen, combined with traction on the cords during the attempt to deliver the placenta, both examples of the ignorance of the untrained midwife.

The method of reduction employed was one recommended in some textbooks—on attempting reduction by pressure on the fundus only, contraction took place, and reduction was thus impossible.

By the method of "tucking in" the posterior part of the inverted mass, through the cervix, together with the application of pressure in the proper direction, that is, upwards and forwards, combined with the firm compressing force exerted on the fundus, this force, by compression and thus emptying the uterine vessels, at the same time reducing the size of the inverted uterus, and controlling the haemorrhage, which from the vessels at the placental site was always very profuse, the operation of reduction was much simplified. The removal of the placenta, by reducing the size of the inverted mass, also assisted the operation materially.

The reports of the last few cases show that the prognosis, although very bad, is not, if immediate reduction is practised, and followed by great attention to the urgent symptoms of collapse, quite so hopeless as mentioned in textbooks—the mortality given by some authors being about 75 to 85 per cent.

The value of saline solution injected into the rectum was very marked; a perceptible change took place in the volume of the pulse within a few minutes of the administration, absorption being very rapid after so severe a haemorrhage. The patient afterwards described her sensations when the injection had taken place, "as if something warm was going right through her veins."

The mixture administered of liq. ferri perchlor. and pot. chlor. I have found invaluable in cases of profound anaemia after haemorrhage, especially when complicated with elevation of temperature, the oxygenating power of the chlorate, together with the tonic action of the iron, being presumably both efficacious.

Lastly, the case is of interest as one of a few dangerous cases that one is called to in country practice, to follow the ignorant woman who is a self-styled "midwife." One is continually being called to such cases, often caused by the ignorance of these women. Often payment for one's services will be the last thing considered by the patient. One is obliged to go to the call to duty or run the risk of being considered by the general public, and even by one's neighbouring medical friends, as unworthy of the noble profession of which one is a member. Surely the time has come when two very important questions must be seriously taken up by the General Medical Council—those of the proper training and registration of midwives, and the question of State-aided midwifery.

MEMORANDA:

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

CASE OF SPONTANEOUS CRANIOTOMY.

MRS. A. B., aged 32, expected her first accouchement about December 24th, 1901. She had never had any illness beyond slight attacks of gout. The catamenia had always been regular. A month before the anticipated event there was haemorrhage per vaginam following a "very bad dream," the patient leaving her bed during sleep. The child was then living, and occupied the left dorso-anterior transverse position. The external os barely admitted the finger tip. The haemorrhage ceased within forty-eight hours.

On December 6th labour pains commenced at 11 a.m., and at the time of my visit were occurring every thirty minutes. The position of the child was rectified without difficulty, and a firm binder was put on the abdomen. The nurse had ad-

ministered a "good dose of castor oil" that morning. At 5 p.m. I attended in answer to a summons and found that the child was born. Pains came on stronger after applying the binder, the patient being kept upon her feet. The child (a female) was lying on its back with both legs and thighs flexed, the feet resting against the mother's left buttock. The cord was almost black and without pulsation, but there was no discoloration about the body. The skin (outer) was torn off the right shoulder and arm, the front of the thorax and abdomen. The eyes and tongue were protruded; the head presenting the appearance of craniotomy forceps having been employed. The frontal bone was fractured, the fracture extending from above the left orbit to the right malar bone. The occipital was in two unequal portions. Several pieces of bone could be felt within the scalp, while the scalp itself was uninjured. The child was full term, though it weighed barely 6½ lb. There was some difficulty in removing the placenta, which was small but very thick, and contained several fibrous nodules, two of which were the size of a small marble. The patient lost very little, but was considerably exhausted for the first half-hour after parturition. Her pulse was good, but the temperature was only 97°. She has since done remarkably well.

With a view to advising in the event of a subsequent pregnancy, Dr. Arthur E. Giles kindly saw the patient with me. The result of his examination gives the following pelvic measurements: Super. il. ant., 9½; cristae ilii, 11½; conj. ext., 7½; conj. diag., 4½; tuber. isch., 3½; Kelly's measurement, 4½. Dr. Giles estimated the conjugate vera about 4½.

It is evident, therefore, that pelvic deformity is not responsible for the crushing of the child's head. I can only suggest that the contractions were so powerful that the child was expelled with its head in hyperextension, the body passing into the pelvis before the head was completely clear. Even on this supposition it is difficult to account for the stripping of the skin off the child's right side. Any question of culpable violence could be entirely set aside. The case is an uncommon one, even if it is not unique.

Kensal Rise, W.

J. CATER, M.D.

ANTISTREPTOCOCCUS SERUM IN PUERPERAL FEVER.

ON February 22nd, 1902, I attended Mrs. L., a primipara, aged 24. Labour was natural, and without difficulty. Everything progressed favourably until the fourth day, when she had rigors, and her temperature rose to 105°, and the pulse-rate to 160. There was no tenderness or distension of the abdomen. It was a case of puerperal fever without any symptoms save the high temperature and quick pulse. I put her on quinine, 5 gr. every three hours, and ordered intrauterine douches of perchloride of mercury, 1 in 2,000.

For four days the temperature kept above 104°, and on one occasion reached 105.6°, and the pulse ran from 140 to 160. As the quinine was badly borne, I tried three 10-gr. doses of sodium salicylate. Although this caused profuse perspiration the temperature was unchanged. I then returned to the quinine, and gave her a single large dose (gr. xx) daily, and ordered cold sponging. The lochial discharge and milk secretion entirely ceased on the third day of the fever. On February 28th, the fourth day of the fever, as the patient was apparently sinking, I injected 10 c.cm. of Burroughs and Wellcome's antistreptococcus serum.

The following day the temperature was 103.4°, and the pulse 132. She looked slightly better, and her respiration was natural, whereas on the two preceding days it had been sighing in character. As this was the fifth day without any sleep, I gave her a drachm of paraldehyde, and she slept an hour towards morning. On March 2nd her temperature was 100.5°, and her pulse 144 but very weak—almost running. I injected one-fiftieth of a grain of strychnine, and put her on a mixture of tinct. digitalis, ℥ vijs; tinct. nuc.vomicae, ℥ v; and ammon. carb., gr. iij. She had improved somewhat at night, and I repeated the paraldehyde, but in divided doses, with an hour's interval. She slept well, and, after this, recovery was rapid and uneventful.

The patient took plenty of nourishment throughout—old whisky, milk, eggs, beef tea, chicken soup, etc.

I think there can be no doubt the antistreptococcus serum

saved her life. My only regret now is I did not use it two days earlier. As to the cause of the septicaemia, I cannot believe that the poison was introduced by my fingers, as I took every precaution before making an examination. The sanitary arrangements of the house were in a wretched state, and moisture simply poured down the walls of the bedroom.

DAVID WILSON, jun., L.R.C.P., L.R.C.S., etc.

Whiteabbey, co. Antrim.

AN INFANT WEIGHING TWO POUNDS FIVE OUNCES.

THE following case may be of interest as bearing on the subject of rearing extremely small children.

Mrs. M. was delivered in January last at 6½ months of a female child weighing 2 lb. 5 oz. A large fibroid situated at the fundus was the probable cause of the premature confinement.

The child was wrapped in cotton wool and placed in an incubator, the temperature of which was at first kept up to 90° F. and has been gradually reduced to 65°. She was kept clean by oil inunction only. The milk has been supplied by the Gordon Walker Laboratory, and with the exception of a slight convulsive attack about five weeks ago, she has shown no signs of indigestion. She was fed at first by means of a glass pipette, fifteen drops at a time, every hour, and at the end of a week was taking hourly one teaspoonful of milk of the following strength: 1 per cent. fat, 3.50 per cent. sugar, and 0.25 per cent. albumen. This has been gradually strengthened and the child is now taking every two hours 1½ oz. of milk of the following strength: 3 per cent. fat, 6 per cent. sugar, and 1.25 per cent. albumen, with 5 per cent. lime water added.

I think she owes her life to this modified milk and the assiduous care of Nurse Fone, who has been unremitting in her attention. The child is now taken out of the incubator occasionally and nursed before the fire, but always sleeps in the incubator at night, and it is hoped that in another month or so she will be sufficiently robust to dispense with it altogether.

Oxford Square, W.

M. PRICKETT, M.D.

CASE OF PUERPERAL ECLAMPSIA.

Mrs. A. B., aged 29, multipara, engaged me to attend her at her confinement in the last week in April. She was a strong, healthy woman, and had had no trouble at her three previous labours. I received an urgent message to see her at 10 a.m. on February 16th. On arrival I found her in a state of clonic spasm and quite comatose. Her husband told me that a fit had come on without any warning at 9 a.m., and that several others had occurred since. I ordered an exclusively milk diet and gave chloral, gr. 30 every three hours. She was seen again at noon, but there was no improvement, the fits and coma still continuing. Ten more fits occurred during the afternoon, so, at 6 p.m., I decided to empty the uterus. Dr. Savege kindly administered chloroform, and I dilated the os digitally. At the end of three-quarters of an hour I was able to turn and bring down a leg. Forceps on the head and rapid expulsion of the placenta were considered necessary as the patient appeared in a moribund condition. Another fit came on immediately after the placenta was expelled. A very restless night followed, during which the patient was deeply comatose and quite unable to swallow. All treatment had therefore to be carried on per rectum.

The coma continued till 10 p.m. on February 20th, but from noon on February 17th, Mrs. A. B. was induced to swallow by shouting instructions to her. During the whole time both urine and faeces were passed involuntarily. I was fortunately able to obtain a small amount of the former and found it loaded with albumen.

Potassium bromide, gr. 40, had to be added to the chloral owing to the extreme restlessness; gr. 6 calomel were dropped on the tongue daily. After the patient had regained consciousness at 10 p.m. on February 20th, everything went well till February 22nd when she again developed fits and became comatose. This state lasted till 3 p.m. on February 25th, when consciousness returned.

Since the latter date there has been an uninterrupted convalescence. The albumen has quite disappeared from the urine, the patient eats and sleeps well, has got downstairs,

and declares herself as well as ever she was. I may add that the child (male) was born alive, but died at the end of twenty-four hours.

The case seems to me to be of some interest (1) because of the unfavourable prognosis after the induction of labour, and (2) because of two such long periods of coma, for example, 108 hours and 69 hours.

Beverley.

W. HERBERT GREGORY, M.D., C.M. Edin.

PERNICIOUS ANAEMIA.

THE case of fatal anaemia reported by Dr. O. K. Williamson and Dr. E. W. Martin is of exceptional interest, not only from its brief duration but from the exceptionally low blood count. In a case of acute Banti's disease recently under my care at the Westminster Hospital the patient died on the sixteenth day from the onset of the illness. The erythrocytes numbered 362,000 per c.mm., the leucocytes being 4,375, and the haemoglobin 20 per cent. It is stated on the authority of Hayem that anything under 300,000 red blood corpuscles is incompatible with life, but Quinke mentions a case in which there were only 143,000.

Welbeck Street, W.

WILLIAM MURRELL.

REPORTS

ON

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

LADY DUFFERIN VICTORIA HOSPITAL, CALCUTTA.

A CASE OF PUERPERAL SEPTICAEMIA OF TWO DAYS' DURATION,

FOLLOWING THE DELIVERY OF A MICROCEPHALIC

MONSTER, TREATED WITH ANTISTREPTOCOCCUS SERUM:

RECOVERY; AND A CASE OF PUERPERAL

SEPTICAEMIA OF FOUR DAYS' DURATION TREATED WITH

ANTISTREPTOCOCCUS SERUM: DEATH.

(Reported by MARGARET M. TRAILL CHRISTIE, M.D., B.S. Lond., Medical Superintendent.)

THE following case is of interest both from the abnormality of the fetus, the difficulty of labour, the rapid onset of septic symptoms, and the success of the treatment with antistreptococcus serum. On January 5th I was summoned by a former in-patient to a neighbouring bhustie (or collection of huts) to see a patient said to have been thirty-six hours in labour, a primipara. A native untrained midwife was in attendance. The patient, a girl of about 20, had a temperature of 101° and pulse 120. The uterus was large and no contractions could be felt, nor could the outline of the child be made out. The midwife said the membranes had ruptured, but examination proved that this was not the case. No fetal heart sounds could be heard. The patient appeared very ill and was restless, and apparently in continuous pain; there was no oedema of the vulva. On vaginal examination the os admitted four fingers, but was fairly distensible. The membranes were felt bulging in fairly the shape of a head, but no fetal part could be felt. The membranes were ruptured with the finger with some difficulty, after first removing some dirty rags which the midwife had inserted as a home-made form of dilating bag. A large gush of liquor followed, and the outline of the child's body became apparent abdominally, though no fetal heart sounds could be heard.

On vaginal examination, the finger encountered a small body a little larger than the foot but not of that shape, and then slipped into a cavity, which closed on it, suggesting the fetal mouth. The uterus now contracted and expelled into the vagina this presenting part, which now suggested the idea of a microcephalic head. Gentle traction on this with the fingers in the vagina, combined with uterine massage, delivered the head and confirmed the diagnosis. Further traction and massage delivered the body of a full-term child, a typical anencephalic monster, with prominent eyes and a complete absence of cranial vault. The cord was pulsating very feebly, and the child drew about a dozen spasmodic breaths at intervals of about half a minute and then ceased

degrees of dullness. But, in musical language a "flat" note is a note with a pitch below the normal. To employ the term "flatness" as in any way related to dullness is, therefore, not justified by analogy, and introduces a serious confusion into the mind of the student, who, if he be familiar with musical terms, naturally expects a "flat" note to have a lower pitch than a natural. I submit, therefore, that the terms "flat" and "flatness" should be entirely discarded in connexion with percussion. There is no advantage in retaining them, as the term dullness with, if necessary, a qualifying adjective such as slight, moderate, or absolute, is sufficiently comprehensive to include all degrees of impaired resonance.—I am, etc.,

Liverpool, May 12th.

THOS. R. BRADSHAW, M.D.

THE MEDICAL PROFESSION AND INHABITED HOUSE DUTY.

SIR,—During the debate on the Budget is the time for medical M.P.s and the Parliamentary Committee to call attention to our long-standing grievance and pecuniary burden—namely, the unfair way in which the houses of medical men are rated. To all intents and purposes the medical man's house is a house of business. Why is he not rated as such? A medical man chooses his house, both as regards character as well as locality, from a purely business point of view. The schoolmaster is in precisely the same position. Why not combine with them to agitate for an alteration in the rating? This high rating is a direct tax upon our industry. The professional man pays all taxes and is exempt from none, and has a precarious income and livelihood withal.—I am, etc.,

Ilkley, May 12th.

A. H. BAMPTON.

PROCESSES OF INFECTION AND PROTECTION.

SIR,—In the BRITISH MEDICAL JOURNAL of May 10th Dr. Edmunds does me the honour to again discuss the differences between chemical selective affinity and true chemical potential. Since a discussion on this subject has no longer any bearing on my article, and since the point raised is one which does not properly belong to the columns of a medical journal, I must respectfully decline to enter further into the matter.—I am, etc.,

Wembley, May 10th.

H. W. ARMIT.

OBITUARY.

DR. MEREDITH CLYMER, a prominent physician in New York, and author of many medical works, died on April 20th, aged 86. He was a native of Philadelphia, and took his doctor's degree at the University of Pennsylvania. He afterwards studied in Paris, London and Dublin, and returning to his native country practised his profession in Philadelphia for ten years. During that time he was consulting physician in chief to the Philadelphia Cholera Hospital and Professor of the Practice of Medicine in the Hampton Sidney College at Richmond, Virginia. He went to New York in 1851 and turned his attention to the investigation of mental and nervous diseases. He was Professor of the Practice of Medicine in the University of New York, and Professor of Mental and Nervous Diseases in the Albany Medical College. During the Civil War he was a surgeon in the United States Volunteers, and medical director of the Department of the South. Dr. Meredith Clymer was a grandson of George C. Meredith, one of the signatories of the Declaration of Independence.

WE regret to announce the death of Mr. HENRY THOMAS BERRY at his residence, Pembroke Villas, W. He was born on September 30th, 1819, and studied at Guy's Hospital in the early Forties. He dressed for Mr. Aston Key, the late Mr. John Poland being a fellow dresser. He was also a fellow student of the late Sir William Gull, and always had a high esteem for his old school. He obtained the diploma of M.R.C.S. in 1842, and that of L.S.A. in the following year. He practised for forty years in the North of London, and retired in 1884. He was a member of the Hunterian Society, and of the Metropolitan Counties Branch of the British Medical Association. After his retirement from professional work he lived at Pembroke Villas,

but still led an active life, and interested himself much in scientific and artistic pursuits, until about five years ago, when he suffered from an attack of hemiplegia. He subsequently, however, recovered to a certain extent. Death occurred on May 2nd. He was buried on May 5th at Nunhead Cemetery.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. Florian Beely of Berlin, a prominent orthopaedic surgeon, aged 55; Dr. Fr. Frusci, Professor of Surgical Anatomy and Operative Surgery in the Medical Faculty of Naples; Dr. Nikolai Jalan de la Croix, Pathologist to the Hospital of SS. Peter and Paul, St. Petersburg, aged 50; Dr. Julius Wise of Chicago, sometime Professor of Materia Medica and Therapeutics at the Memphis Medical College, and known throughout the United States as an editorial writer in medical and religious journals under the pseudonym "Nickerdown," aged 50; and Dr. Henri Filhol, Member of the Paris Académie de Médecine, Professor of Zoology in the University of Toulouse, and afterwards of Comparative Anatomy in the University of Paris, aged 59.

ROYAL NAVY AND ARMY MEDICAL SERVICES.

ROYAL NAVY MEDICAL SERVICE.

DEPUTY INSPECTOR-GENERAL C. A. LEES, M.D., has been awarded the Greenwich Hospital pension of £50 a year, vacant by the death of Deputy Inspector-General J. T. Caddy, M.D., on March 21st last. Deputy Inspector-General Lees joined the service as Surgeon, February 7th, 1857; became Staff Surgeon, August 4th, 1867; Fleet Surgeon, September 1st, 1878; and Honorary Deputy Inspector-General on retirement, September 12th, 1888. He was engaged in boat operations in the Gulf of Finland in 1855, and was at the action of Kolvitsko (medal). During the China war in 1857-9 he had charge of the garrison at Macao Fort; was off the Peiho Forts in 1858 in the *Belleville*; and in 1859 he attended, until their arrival in England, the seriously wounded at the second attack on the Peiho Forts in 1859 (China medal).

The following appointments have been made at the Admiralty: JOHN H. LIGHTFOOT, Surgeon, to the *Formidable*, May 7th; ARTHUR R. THOMAS, Surgeon, to the *Hearty*, May 7th.

MR. DUNCAN MCNEILL, M.B., has been appointed Surgeon and Agent at Flamborough Head and Detachments, May 1st.

SURGEON STRATFORD DOBREE TOLLEMACHE HALLIDAY died at King Edward's Hospital, Grosvenor Crescent, on May 5th, aged 27. He was the third son of Lieutenant-Colonel S. C. Halliday, retired R.A., and entered the Royal Navy as Surgeon, May 23rd, 1898.

We regret to learn that the cause of the retirement of Staff Surgeon W. J. MAILLARD, M.D., V.C., is serious ill-health. All will regret that a career of so much promise should have been brought to a premature termination.

ROYAL ARMY MEDICAL CORPS.

MAJOR S. E. PHILSON, from the Seconded List, to be Major, *vice* R. E. Kelly, M.D., placed on half-pay, April 16th. Major Philson was placed on the Seconded List in May of last year, for service on the staff of the Governor-General of Australia.

Lieutenant H. ENSOR, M.B., D.S.O., is seconded for service with the Egyptian army, May 2nd.

THE UNDERMANNING OF THE ARMY MEDICAL SERVICE.

THE following is the distribution of medical officers employed on the Active and Reserve Lists, according to the *Army List* for May:

Distribution in May Army List.

Ranks.	Home.	South Africa.	Other Foreign Stations.	Not Posted.	Total.	Remarks.	
						Seconded.	Reserve of Officers.
Surgeon-Generals ...	3	2	4	1	10	1	—
Colonels ...	13	5	8	—	26	3	—
Lieutenant-Colonels...	71	63	75	6	215	5	24
Majors ...	42	122	108	2	274	3	3
Captains ...	30	110	108	1	249	12	4
Lieutenants ...	17	119	67	3	206	1	—
Total ...	176	421	370	13	980	25	31

MEDICO-LEGAL AND MEDICO-ETHICAL.

THE CASE OF MR. C. A. BYNOE.

THE following resolution has been passed by the Criminal Law Reform Committee of the Humanitarian League:

"That this Committee, without expressing any opinion on the merits of the actions recently brought by Dr. Bynoe, desires to call the attention of His Majesty's Government to the fact that innocent persons have frequently been convicted of crimes, and that in several instances this conviction has been due to the neglect or default of certain persons; while, according to the present law, as expounded in the Court of Appeal, the aggrieved person has no remedy against those who have thus injured him so long as the conviction stands. But at present the Home Secretary has no power to set aside a conviction, and in general there is no court to entertain an appeal against a conviction on the ground of its wrongfulness. We submit that this state of things ought to be remedied by the Legislature without delay."

MR. A. B. CLARKE, L.S.A., L.R.C.S. Edin. (Shebbear, North Devon) writes: I understand that an application by Mr. C. A. Bynoe will come before the General Medical Council at its next meeting for restoration to the *Medical Register*. I believe that the law has decreed in the Anderson judgement, for instance, that a lie endorsed by "justice" is necessarily an eternal truth. I submit that there is need of consideration for the General Medical Council to consider if they are compelled to act according to the idiotic lack of logic maintained therein?

INQUEST WITHOUT NECROPSY.

AN inquest was held lately by Mr. Coroner Culley at Horsford upon the body of Edith Alice Smith, aged 14 years. According to the evidence as reported in the *Eastern Daily Express*, Norwich, the child was noticed to be slightly unwell on Saturday but on Sunday morning was apparently better. In the evening, however, she suddenly became worse, and died about 7 p.m. before medical aid could be obtained.

A medical practitioner, Dr. R. J. Horn, who attended immediately in obedience to a summons but found the girl dead on his arrival, stated in his evidence that he had no reason to doubt that the death was a natural one. He thought it probable that there was some heart trouble. He knew the child though he had never attended her professionally. She was very thin, and he considered her delicate. From the scant information available as to her symptoms, he thought these might have been due to pneumonia, Bright's disease, or diabetes, but without a necropsy the actual cause of death could not be definitely stated. A verdict of death from natural causes was brought in by the jury.

As far as a judgement can be formed from the facts as stated in the report, the case was one in which the coroner should have ordered a necropsy to be made in order to ascertain the cause of the sudden death, and we do not understand on what grounds he decided not to do so.

CONVICTIONS FOR MANSLAUGHTER.

At the Central Criminal Court on May 8th, Sarah Russell, aged 51, described as a nurse, was indicted for the wilful murder of Annie Thompson. The evidence, as reported in the *Times*, went to show that the prisoner carried on the calling of a nurse, occasionally acting as a midwife, and that on January 16th she performed an illegal operation upon the deceased. The medical evidence proved that the woman died from blood poisoning, the result of the operation. The jury convicted the prisoner of manslaughter, and the judge sentenced her to seven years' penal servitude.

At the Liverpool Assizes, before Mr. Justice Walton, a woman named Ellen Shorrocks, described as a charwoman, was indicted for the murder of Annie Bott, a single woman at Preston. From the report in the *Liverpool Daily Courier* it appeared that the death of the woman Bott was the result of an illegal operation performed upon her by the prisoner. Bott made a statement when dying incriminating Shorrocks, and this statement was accepted as evidence against her. After a long trial the jury brought in a verdict of manslaughter, and the judge, after commenting upon the gravity of the case, sentenced Ellen Shorrocks to ten years' penal servitude. From the police evidence we gather that suspicion had repeatedly fallen upon the prisoner before, but that the evidence was not sufficient to justify her arrest. Incidentally it was mentioned in court that illegal operations were much practised in the district.

THE PLAGUE OF PUFFING PAMPHLETS.

A CORRESPONDENT sends us a large bundle of pamphlets generally of transatlantic origin, advocating the use of special drugs and preparations which he says he has received within the last week or two. All of us suffer in the same way, but generally provide against it by a capacious and substantial waste-paper basket which seems to be an efficient palliative remedy. Our correspondent, however, wants us to suggest some means of prophylaxis. We cannot but think that these pamphlets are sent because they constitute a paying form of advertisement, and that if the majority of recipients shared our correspondent's dislike of them and treated them as he does the senders would soon tire of the process.

CORONERS AND HOSPITAL OFFICERS.

A. B. D.—The senior house-surgeon of a public hospital has sent us a letter and a newspaper cutting concerning a recent inquest held respecting the death of an in-patient. Our correspondent seems considerably annoyed that he was not summoned by the coroner to give evidence in the case, and objects to one of the nurses being called for that purpose.

* * The deceased person, it appears, died in the hospital from the effects of burns, and the jury returned a verdict to that effect, and that the burns arose from an accidental cause. The coroner doubtless sum-

moned such witnesses as he considered necessary to satisfy the jury of the origin and cause of death. He is not bound by law to summon a medical man; but, if the jury desire medical evidence, and are not satisfied without it, they can adjourn for that purpose. In the case referred to, no fee would have been payable to our correspondent, and, if he was not wanted at the inquest, he has been spared the inconvenience of attending. The coroner has very large discretionary powers, and, whilst it is usual and much more satisfactory that medical evidence should be taken on all occasions, there is no compulsory law on the subject. The court is an open one, and any one can attend and offer to give evidence if he considers it his duty to do so, but we should advise our correspondent not to wait until he is summoned to give evidence.

MEDICAL ETIQUETTE.

SAUER TEIG.—Where the patient puts himself under the care of a new medical attendant the latter has no right to demand from the former medical attendant details of the treatment followed by him, but it would be perfectly proper to ask for such information and we have no doubt that it would be in most instances courteously supplied. We think it preferable that the application should come from the medical attendant rather than from the patient.

A. V. C.—The advertisement in question should not include the name of the advertiser.

CHEMISTS AS OPTICIANS.

L.R.C.S.—The use of the letters F.S.M.C. (Fellow of the Spectacle Makers Company) has been the subject of a good deal of comment. In all probability the atropine is required not in order to enable an examination of the fundus to be made, but to paralyse accommodation completely so as to estimate refraction. We do not approve of medical men assisting opticians in this way: atropine should not be prescribed by a medical practitioner except for reasons which he fully understands and with which he concurs. It must be remembered that it is a dangerous drug, and may do great harm to the eyes, and that for this injury the medical practitioner who prescribes it would be held responsible.

THE RELATIONS OF MEDICAL PRACTITIONERS TO MIDWIVES.

A. E. W.—As the law stands at present, we think it possible that a medical practitioner who should undertake habitually to assist a certificated nurse practising midwifery in her bad cases might be held by the General Medical Council to be guilty of "covering." On the other hand, as neither the Committee nor the nurse come within the scope of the Council's jurisdiction, any "sanction" they may give to such a scheme could scarcely be held to be illegal.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF LONDON.

MEETING OF THE SENATE.

A MEETING of the Senate was held on April 30th, when the Vice-Chancellor was in the chair.

Resignation of Vice-Chancellor.

The Vice-Chancellor announced that it was not his intention to seek reelection in June next, and expressed his acknowledgements of the kindness he had received from the Senate during his tenure of office.

The late Chancellor.

A communication was read from the Académie Royale des Sciences, des Lettres et des Beaux-Arts of Belgium, offering the condolence of that body on the occasion of the death of the late Chancellor, the Earl of Kimberley.

New Examiners.

Among the new appointments of examiners for the year 1902-3 were the following:—*Chemistry*, Dr. Alexander Scott, F.R.S.; *Obstetric Medicine*, Dr. A. N. H. Lewers; *Forensic Medicine*, Dr. H. J. Campbell.

Lord Davy.

Lord Davy has resigned his membership of the Academic Council, the Committee on Reorganization, and the University College Incorporation Committee.

Matriculation Examination.

Notice is given that the general scope of the new matriculation examination for all students will be as follows: Candidates shall not be approved by the examiners unless they have shown a competent knowledge in each of the following subjects, according to the details specified under the several heads:

- (1) English. One paper of three hours.
- (2) Elementary Mathematics. Two papers of three hours each.
- (3) Latin, or Elementary Mechanics, or Elementary Physics (Heat, Light and Sound), or Elementary Chemistry, or Elementary Botany. One paper of three hours in each subject.
- (4) Two of the following subjects, neither of which has already been taken under (3). One paper of three hours in each subject. If Latin be not taken, one of the other subjects selected must be another language from the list, either ancient or modern: Latin, Greek, French, German, *Arabic, *Sanskrit, *Spanish, *Portuguese, *Italian, *Hebrew, History, *Ancient or Modern; Logic, Physical and General Geography, Geometrical and Mechanical Drawing, Mathematics (more advanced), Elementary Mechanics, Elementary Chemistry; Elementary Physics: (a) Heat, Light,

* Candidates for examination in these subjects must give at least two months' notice. No examination will be held in them in September, 1902.

and Sound, or (b) Electricity and Magnetism; Elementary Biology: (a) Botany, or (b) Zoology.

The full text of the new regulations will be published at the beginning of June, and the first examination under them will commence on September 15th next. An examination under the old regulations will be held in January, 1903, and under both sets of regulations in June, 1903.

MEETING OF CONVOCATION.

A general meeting of Convocation was held at the University, South Kensington, on May 13th.

Death of Lord Kimberley.—Sir E. H. Busk, Chairman, who presided, alluded to the great loss which the University had sustained by the death of the late Chancellor, who for forty-three years had been a member of the Senate, and was the fifth in order of the Chancellors. The late Duke of Devonshire first held that office for twenty years, then Earl Granville for thirty-five years, and under him the University was thrown open to women; next, the Earl of Derby was Chancellor for two years, Lord Herschell for six years, and, finally, Lord Kimberley for two years. The Chairman concluded by moving a resolution in which the great services of Lord Kimberley to the University and to the cause of higher education were duly expressed; and the sympathy of Convocation with the family of the late Chancellor was also affirmed. The resolution was carried unanimously, and the Chairman was requested to convey the resolution to the present Earl of Kimberley.

Deputy Chairman of Convocation.—Dr. Walmsley moved resolutions respecting this new office, namely, "That the Deputy-Chairman shall be a member of Convocation, and shall hold office for one year." Secondly, "That it is desirable that no retiring deputy-chairman shall be nominated for re-election more than once, until after the expiration of three years from the date of his retirement." These resolutions were carried; and Sir Philip Magnus being the only graduate nominated for the office was declared elected. He returned thanks for the honour and took occasion to observe that the Senate during the past year had made good progress in the organization of the University. A Principal, Professor Rücker, had been appointed, than whom no more suitable person could have been chosen. Heads of the various departments of the University had been appointed, and had instituted a department of University teaching; under which department he trusted that the inspection of schools would be considerably extended, with possibly a "leaving-school" examination. Sir Philip rejoiced that at the matriculation examination internal and external students would be placed on the same level; there would be one porch for all students, but, by means of a wise system of "options," more than one door in that porch. The examination also would for the future relate to the ordinary work of various kinds of schools, and would not need that those entering for it should attend special classes, which interfered sadly with the ordinary routine of school work.

Clerk of Convocation.—Mr. H. E. Allen, LL.B., was elected Clerk.

Chancellor of the University.—The declaration that the Earl of Rosebery, K.G., who had been nominated to fill the vacancy caused by the death of the Earl of Kimberley, K.G., was elected was received with applause. The Chairman, in making the announcement, congratulated Convocation on the fact that at length it was able to elect the Chancellor of the University.

Report of the Standing Committee.—This report alluded to five small questions which had engaged the attention of the Committee during the past year; and Dr. R. M. Walmsley, in moving its reception and adoption, said that the Committee had been marking time during the year, whilst the organization of the University was quietly progressing.

Election of Members of the Standing Committee.—In the Faculty of Medicine there were six vacancies, for which the following graduates were elected, namely: H. M. Murray, M.D., M. A. Scharlieb, M.D., M.S., T. W. Shore, M.D., B.Sc., E. H. Starling, M.D., B.S., S. R. Wells, M.D., B.Sc., and W. H. Willcox, M.B., B.Sc.

UNIVERSITY OF CAMBRIDGE.

Degrees.

At a Congregation on May 8th the following degrees were conferred:

M.B.—H. F. Bradley and B. L. Thurlow, Caius; J. M. Brydson, Jesus.
B.C.—J. F. Hedley, King's; G. R. Wilson, Trinity; A. S. Bradley, G. L. Crisp, G. P. D. Hawker, J. E. B. Snell, and B. L. Thurlow, Caius;
J. M. Brydone, Jesus; F. E. Shipway, Christ's; H. C. Brown, A. F. Elliott, and H. J. Shone, Emmanuel; C. H. Sedgwick, Sidney.

Third Examination for the Degree of M.B.: New Regulations.

The Registry calls the attention of candidates for medical and surgical degrees to the new regulations which will come into force next term for those degrees, and points out that all such candidates, with the following exceptions, are now subject to those regulations:

1. Students who have already passed one part of the Third Examination.

Students who have passed in Surgery and Midwifery (old III M.B. Part I) are required to satisfy the examiners in Section (3) only of the new Part II (Physic).

Students who have passed in Physic (old III M.B. Part II) are required to satisfy the examiners in Sections (1) and (2) only of the new Part II (Surgery and Midwifery).

2. Students who shall have passed both parts of the Second Examination before October next.

These students are still permitted to present the same certificates on admission to Part I of the Third Examination as would have been required from them on admission to Part I under the old regulations; and to present the same certificates on admission to any section or sections of Part II as would have been required from them on admission to Part II under the old regulations.

Students who have been admitted to but have not passed either part of the Third Examination must, either before, after, or together with Part II, pass the new Part I (Pharmacology and General Pathology); but they require no new certificates for admission either to this part or to the section or sections of the new Part II corresponding to the part of the old Third Examination to which they have already been admitted. A special

examination in Pharmacology and General Pathology will be held on June 9th, 1902; the ordinary examination for Part I will be held in December, 1902, and in June and December of future years.

ROYAL UNIVERSITY OF IRELAND.

Third Medical Examination.—The examiners have recommended that the following candidates be adjudged to have passed the above-mentioned examination:

Upper Pass.—T. Barry, Catholic University School of Medicine; W. M. Crofton, B.A., Catholic University School of Medicine; H. P. Devlin, Catholic University School of Medicine; W. Egan, Catholic University School of Medicine; R. Johnston, Queen's College, Belfast; D. J. Keane, Catholic University School of Medicine; S. H. Whyte, Queen's College, Belfast; M. O. Wilson, Queen's College, Belfast.

The above candidates may all present themselves at the further examinations for Honours.

Pass.—Anna E. Adderley, Catholic University School of Medicine; R. J. Cahill, Catholic University School of Medicine; F. Coates, B.A., Queen's College, Belfast; W. H. Davis, Queen's College, Belfast; J. Dawson, Queen's College, Cork; E. Fitzgerald, Queen's College, Belfast; A. S. Gardiner, Queen's College, Belfast; D. P. H. Gardiner, Queen's College, Cork; Mary K. Gibson, Catholic University School of Medicine; H. Gill, Queen's College, Belfast; S. J. Killen, Queen's College, Belfast; F. McDonald, Catholic University School of Medicine; J. W. McFarland, Catholic University School of Medicine; R. H. McGiffin, Queen's College, Belfast; F. A. McOstrich, Queen's College, Cork; G. B. Moffatt, Queen's College, Belfast; E. J. O'Hanlon, Catholic University School of Medicine; J. S. O'Neill, Queen's College, Belfast; P. Quinn, Catholic University School of Medicine; J. T. Shanklin, Queen's College, Galway.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.

An extraordinary Comitia was held on Thursday, May 8th, the President, Sir William S. Church, in the chair.

Admission of Fellows.

The following Members, elected to the Fellowship at the last meeting, were admitted as Fellows: 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. Glas., J. J. Perkins, M.D. Camb.

Communications.

Communications were received: (1) From the Secretary of the Brussels International Conference on the Prevention of Syphilis, praying the College to reconsider its resolution not to send a delegate. Upon the motion of Sir Dyce Duckworth, seconded by the Senior Censor, it was resolved that the College accede to this request, and the nomination of a delegate was left to the President. (2) From the Secretary of the Jenner Institute of Preventive Medicine informing the College that Dr. J. F. Payne, the representative of the College, was retiring by rotation from the Council of the Institute. The nomination of a representative was left to the President.

Admission of Fellows in Absentia.

The Registrar proposed the enactment for the first time of the following by-law: That Dr. Henry Carr Maudsley and Dr. William Camac Wilkinson, elected Fellows on April 24th, being resident in Australia, be admitted *in absentia*, any by-law to the contrary notwithstanding.

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.

A QUARTERLY meeting of the Royal College of Physicians of Edinburgh was held on Tuesday, May 6th, 1902, Dr. Fraser, President, in the chair.

Introduction of New Fellow.

Mr. J. R. Gilmour, M.B. C.M., F.R.C.P.E., was introduced and took his seat as a Fellow of the College.

Admission to the Fellowship.

Dugald Christie, M.R.C.P.E., L.R.C.S.E., The Hospital, Monkden, was admitted by ballot to the Fellowship of the College.

Admission to the Membership.

On a ballot, Charles Mowbray Pearson, M.B., Ch.B. Edin., was admitted to the Membership of the College after examination.

Admission to the Licence.

The Registrar reported that since the last quarterly meeting fifty persons had obtained the licence of the College by examination.

Hill-Pattison Bursary Award.

The Hill-Pattison Bursary, which is in the gift of the College, was awarded, after a competitive examination in Anatomy and Physiology, to Mr. James Grieve Cormack.

Recognition of Lecturers.

Dr. William Fordyce, F.R.C.P.E., was, after examination, recognized as a Lecturer in Midwifery, and Dr. Charles J. Lewis, F.R.C.P.E., was similarly recognized as Lecturer in Public Health, the President conferring on them the Certificate of Qualification.

Election of Representatives on the General Medical Council.

Sir John Batty Tuke was unanimously re-elected Representative of the College on the General Medical Council for a period of five years from May 4th.

Trustee of the College.

The President was elected a Trustee of the College in the room of the late Dr. Peel Ritchie.

Conjoint Committee of Management of Triple Qualification.

The Secretary announced the re-election by the Council of Sir John Sibbald as representative on the Conjoint Committee of Management of the Triple Qualification.

Triple Qualification Examinations.

The draft regulations regarding the various Triple Qualification Examinations for the ensuing year were considered and approved.

Fees for Fellowship and Membership: Change of Laws.

On a motion by the Secretary it was resolved:

"That Law 2 of Chapter VI be altered so as to read as follows: 'The fee to be paid by a Member shall be thirty-five guineas.'"

"That Law 3 of Chapter VI be altered so as to read as follows: 'When a Licentiate shall be raised to the rank of Member he shall pay twenty-five guineas.'"

"That Law 4 of Chapter VI be altered so as to read as follows: 'When a Member shall be raised to the rank of Fellow, he shall pay thirty-eight guineas, exclusive of stamp duty.'"

Reporting on Morbid Specimens.

In consequence of the decision of the town to transfer the reporting on morbid specimens from the College Laboratory to the Usher Institute of Public Health, it was resolved:

"That the College decide to terminate the arrangement with the Town Council, and revert to the previous system of reporting, and remit to the Council of the College to act accordingly."

Annual Report Regarding the Laboratory.

The Curator submitted his report for the past year regarding the research and reporting work undertaken in the laboratory during the year, and the expenditure incurred. The report showed that 35 workers had been engaged in research, 1,480 specimens had been reported on, and the expenditure had amounted to £1,383 10s. 8d. The report was adopted by the College.

Laboratory Demonstrations.

The Curator of the Laboratory announced that a series of demonstrations of some of the investigations in progress in the laboratory had, on the proposal of the Superintendent, been sanctioned by the Council, and would be given in the laboratory on Fridays, May 16th, 23rd, and 30th.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

AN ordinary Council meeting was held on May 8th, 1902, Mr. H. G. Howse, President, in the chair.

Portrait of Benjamin Travers, F.R.S.

The Council accepted a portrait of the late Mr. Benjamin Travers, by Mr. C. R. Leslie, R.A., offered by Dr. Llewellyn Morgan, executor to the late Miss Travers. The best thanks of the Council were given to the donor.

The University of Oxford and the Oxford Eye Hospital.

The President consented to be an *ex-officio* member of a Standing Board for future elections to the combined appointments of a Readership in Ophthalmology to be held in conjunction with the Honorary Surgeony to the Oxford Eye Hospital.

Petition from the Licentiate and Members of the Colleges of Physicians and Surgeons.

A Committee of the Council was appointed to receive a deputation which would present a petition relating to the acquirement of a Doctor's degree by the Licentiate and Members of the Royal Colleges in London.

University of London and the Royal Colleges.

A Committee was appointed to consider and report as to whether or not the time has come for the two Royal Colleges, by joint action, to take such steps as may seem advisable for entering into combination with the University of London for a scheme of common examinations for the degree of M.B. of the University and for the qualifications of L.R.C.P. Lond. and M.R.C.S. Eng.

ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

At the stated business meeting of the College, held on Friday, May 9th, the President (Sir Christopher J. Nixon, M.D.) admitted to the Licences in Medicine and Midwifery R. Allison, H. L. Becker, J. J. Bell, C. H. Browne, S. Browne, C. Cartwright, T. R. de Castillo, H. T. Cookman, C. Foley (Honours), J. J. Harty, R. G. M. Harvey, C. J. D. Odevaine, C. Waters, and J. M. Thomas, L.S.A.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

Election of Examiners.

At a meeting of the President, Vice-President, and Council, held on May 6th, the following Examiners were elected: In Anatomy—Ambrose Birmingham and Alexander Frazer. In Physiology and Histology—E. L'E. Ledwich and C. Coppinger. In Ophthalmology—Arthur H. Benson and P. W. Maxwell. In Pathology and Bacteriology—Arthur Hamilton White. In Pathology—Robert Allen. In Midwifery and Gynaecology—Frederick W. Kidd. In Biology—John J. Burgess. In Sanitary Law and Vital Statistics—H. Benson Goulding. In Engineering and Architecture—J. Charles Wilmot. In Dental Surgery and Pathology—Daniel Corbett, jun., and W. G. Story. In Mechanical Dentistry—George M. P. Murray and William Booth Pearsall. In Chemistry and Physics—Edward Lapper and R. J. Montgomery. In Languages—L. J. Woodroffe. In Mathematics, Physics, Dictation, and English Essay—J. W. Tristram. The election of Examiners in Surgery was postponed.

CONJOINT BOARD IN IRELAND.

Final Examination.—Candidates have passed this Examination as undernoted:

Four Years' Scheme.—All Subjects: J. J. Bell, C. Cartwright, T. R. de Castillo. Completed the Examination: R. G. M. Harvey, C. J. D. Odevaine.

Five Years' Scheme.—Honours: C. Foley. All Subjects: H. L. Becker, J. I. Harty. Completed the Examination: R. Allison, C. H. Browne, S. Browne, H. T. Cookman, C. Waters.

Examination for the Diploma in Public Health.—Candidates have passed this examination as undernoted:

W. E. Burton, M.R.C.S. Eng., L.R.C.P. Lond.; F. I. de Lisle, L.R.C.P., L.M. Edin.; E. G. Gibbs-Smith, L.R.C.P.I., L.S.A. Lond.; L. R. More-O'Ferrall, F.R.C.S.I.; R. McCombe, L.R.C.P. & S.I.; M. McGrath, L.R.C.P. & S.I.; A. G. Robb, M.B., B.Ch., R.U.I.; A. Williams, L.R.C.P. & S. Edin.

SOCIETY OF APOTHECARIES OF LONDON.

INSTRUCTION IN ANAESTHETICS.

At a meeting held on May 13th the Court of Assistants passed the following resolution—namely: "That as from July 1st next every candidate for the examination in medicine shall be required to produce a certificate or evidence of having received instruction in the administration of anaesthetics to the satisfaction of his teachers at a recognized medical school and hospital."

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

THE REGISTRAR-GENERAL'S QUARTERLY RETURN.

[SPECIALLY REPORTED FOR THE BRITISH MEDICAL JOURNAL.]

THE Registrar-General has just issued his return relating to the births and deaths registered in the first quarter of 1902, and to the marriages during the three months ending December last. The marriage-rate was equal to 17.3 per 1,000, and was 0.3 per 1,000 below the average rate in the corresponding quarters of the ten preceding years.

The births registered in England and Wales during the quarter ending March last numbered 232,436, and were equal to an annual rate of 28.6 per 1,000 of the population, estimated by the Registrar-General to be 32,995,614 persons in the middle of this year. This rate was 1.6 per 1,000 below the mean rate in the corresponding periods of the ten preceding years. The birth-rates in the several counties ranged from 20.3 in Rutland, 21.5 in Sussex, 21.7 in Westmorland, 22.6 in Oxfordshire, 22.8 in Dorsetshire, and 22.9 in Cornwall to 30.6 in Essex, 31.2 in Nottinghamshire, 31.6 in Northumberland, 31.7 in South Wales, 34.5 in Staffordshire, 35.5 in Monmouth, and 36.3 in Durham. In seventy-six of the largest English towns, including London, the birth-rate last quarter averaged 30.8 per 1,000, and exceeded by 2.2 per 1,000 the general English birth-rate. In London the rate was 29.8 per 1,000, while it averaged 31.2 in the seventy-five large provincial towns, among which the birth-rates ranged from 16.8 in Bournemouth, 18.4 in Hastings, 20.8 in Hornsey, 21.2 in Halifax, 21.3 in Bury, and 23.3 in Bradford to 37.9 in Rotherham, 38.3 in West Bromwich, 39.4 in Wigan, 39.6 in St. Helens, 39.7 in Merthyr Tydfil, and 41.7 in Rhondda.

The births registered in England and Wales during the quarter under notice exceeded the deaths by 81,161; this represents the natural increase of the population during that period. From returns issued by the Board of Trade it appears that 56,344 emigrants embarked during the three months for places outside Europe, from the various ports of the United Kingdom at which emigration officers are stationed. Of these 56,344 emigrants, 23,012 were English, 3,801 Scottish, and 3,803 Irish, while 25,728 others were of foreign origin. Compared with the averages in the corresponding quarters of the three preceding years the proportion of emigrants to the total population showed an increase in England of 30 per cent., and in Scotland of 44 per cent., while in Ireland the proportion decreased by nearly 11 per cent.

During the first quarter of the year the deaths of 151,275 persons were registered equal to an annual rate of 18.6 per 1,000, being 1.7 per 1,000 below the average rate in the first quarters of the ten preceding years. The lowest county death-rates last quarter were 15.3 in Westmorland, and in Rutland, 15.5 in Northamptonshire, 15.6 in Derby, and 16.1 in Huntingdonshire and in Bedfordshire; the highest rates were 19.4 in Devonshire and in Lancashire, 19.9 in Monmouth, 20.2 in South Wales, and in North Wales, 21.1 in Cornwall and 21.2 in Kent. In seventy-six of the largest towns, with an aggregate population of about fifteen millions, the death-rate averaged 19.9 per 1,000; in 103 smaller towns, containing about three million persons, the rate of mortality averaged 17.3 per 1,000; while in the remaining and chiefly rural parts of England and Wales, with a population of about 14½ millions, the death-rate was 17.5 per 1,000. In London the rate was 21.8 per 1,000; while among the seventy-five large provincial towns the lowest death-rates were 10.6 in Hornsey, 12.6 in Handsworth, 12.7 in Walthamstow, 13.7 in East Ham, 14.0 in Derby, and 14.6 in Ipswich and in King's Norton; and the highest rates 22.3 in Preston, 22.5 in Burnley, 22.9 in Liverpool, 23.1 in Rhondda, 23.6 in St. Helens, and 28.6 in Merthyr Tydfil.

The 151,275 deaths from all causes registered in England and Wales during the three months ending March last included 2,908 which were referred to measles, 2,467 to whooping-cough, 2,234 to diphtheria, 1,207 to scarlet fever, 1,135 to diarrhoea, 1,121 to small-pox, and 938 to "fever" (principally enteric). The mortality from small-pox was above the average; while that from scarlet fever corresponded with it, and that from each of the other principal zymotic diseases showed a decline. Of the 1,121 fatal cases of small-pox registered last quarter, 734 belonged to London, 41 to West Ham, 37 to Edmonton, 22 to Tottenham, and 18 to Erith.

The rate of infant mortality in England and Wales last quarter, or the proportion of deaths under 1 year of age to registered births, was equal to 140 per 1,000, against an average rate of 146 in the corresponding quarters of the ten preceding years. The lowest rates of infant mortality in the various counties were 58 in Rutland, 105 in Huntingdon and in Westmorland, and 120 in Bedfordshire and in Essex; while the highest rates were 162 in Cambridge and in Monmouth, 169 in North Wales, 186 in Cornwall,

MEDICAL NEWS.

SUCCESSFUL VACCINATION.—Mr. J. F. Cheesewright has received the Government grant for the second time for successful vaccination in the Rawmarsh District of the Rotherham Union.

We are asked to state that the sixth annual medical, surgical, and hygienic exhibition will be held at the Queen's Hall on May 20th, 21st, 22nd, and 23rd, and will be open on each day from 1 to 10 p.m.

PROFESSOR J. ROSE BRADFORD, M.D., F.R.S., will give an address to the Medical Society of University College, London, on Wednesday next, on the Relation of Biology to Medicine. The chair will be taken by Mr. Victor Horsley, F.R.S., at 8.30 p.m.

Official reports show that from December 28th, 1901, to April 18th, 1902, the number of small-pox cases which occurred in the United States was 29,304, with 850 deaths. The total for the corresponding period in 1901 was 16,734 cases, with 225 deaths.

JUBILEE OF LAVAL UNIVERSITY, QUEBEC.—By way of commemorating the jubilee of Laval University, Quebec, which will be celebrated in June, old students will contribute to the establishment of several new professorships. Already over 10,000 dollars have been offered for the purpose.

On February 15th the Russian Medical Society celebrated the hundredth anniversary of the birth of its founder, Dr. Fedor Inosemzeff, who died in 1869. Dr. Inosemzeff was Professor of Surgery in the University of Moscow till his death.

SICKNESS INSURANCE IN ITALY.—Signor Cabrini and other members of the Italian Chamber of Deputies have presented a motion representing the necessity for the enactment of a law of compulsory insurance against illness, however caused, on the lines of that which makes the insurance of workmen against accidents compulsory.

The Glasgow University Club, London, will on Tuesday, July 1st, give a dinner in honour of the Coronation, at the Trocadero Restaurant, Piccadilly Circus. The Very Rev. Dr. Story, Principal of the University of Glasgow, has promised to preside. Particulars can be obtained from Dr. C. O. Hawthorne, 28, Weymouth Street, Portland Place, W.

The first meeting of the newly-founded Association of French-speaking Physicians of North America will be held in Quebec on June 25th to 28th, in the buildings of Laval University. Over 600 medical practitioners from Canada and the United States have announced their intention to take part in the proceedings. France will also be officially represented.

MR. H. PERCY DUNN, F.R.C.S., will preside at the past and present West London Hospital Dinner (Post-Graduate College), which will be held at the Trocadero Restaurant, London, W., on Wednesday, July 11th, at 7.30 p.m. Further particulars can be obtained from Mr. L. A. Bidwell, F.R.C.S., 15, Upper Wimpole Street, W.

The opening lecture of the summer session at the Brompton Hospital for Consumption will be given on Wednesday, May 21st, at 4 p.m., when Dr. T. H. Green will speak on difficulties in the recognition of pulmonary tuberculosis. These lectures are open to students of the hospital and to all qualified members of the medical profession.

SIR W. THOMAS LEWIS, in a letter to the High Constable of Merthyr, has offered to erect and present to the Merthyr General Hospital, as a memorial of the Coronation, a children's ward capable of accommodating eight to ten cots, provided that the townspeople of Merthyr will subscribe the necessary funds for the similar extension of the men's ward.

PRESENTATION.—On the occasion of the unveiling by Lord Newton of a bust of Queen Victoria erected by the scholars of the Earlestown District Schools, a silver rose bowl and a silver cup were presented to Dr. and Mrs. Handyside as a token of the excellent work Dr. Handyside had done in the Earlestown District for the cause of education during a term of sixteen years.

THE FUND FOR THE FAMILY OF THE LATE DR. WILLIAM SMYTH.—We are asked to state that the name of Dr. F. Sidney Gramshaw, of Stillington, Easingwold, should have been printed as here and not as it appeared in the list of subscribers. We are also asked to state that a subscription of £2 has been received from "Colonel, I.M.S. (retired)," and that the fund is now closed.

The annual meeting of the Association of Asylum Workers will take place at the house of the Medical Society of London, Chandos Street, W., on Thursday next, May 22nd, at 4 p.m., when the chair will be taken by Sir James Crichton-Browne, the President. Two gold and two silver medals, awarded by the Association for long and meritorious nursing services, will be presented.

THE SWEET GIRL GRADUATE IN ITALY.—From 1877 to 1900 degrees of one kind or another were awarded by the universities of Italy to 257 women. Of these degrees, 24 were in medicine and surgery. Of the rest, 6 were in law, 140 in arts, 37 in philosophy, 20 for proficiency in mathematics, and 30 for proficiency in physics and chemistry. In 1893 the number of female students on the books of the various universities was 98; in 1900 it was over 250.

THE DISSEMINATION OF DISEASE BY PUBLIC TELEPHONES.—The public telephone having been pronounced an active and potent means of disseminating disease germs, the San Francisco Board of Health, in order to find means for the elimination of this danger, has (according to *American Medicine*) ordered that all inventors or manufacturers of telephone appliances that could disseminate disease germs shall forward working models of them for examination to the office of the Board within a period of sixty days.

FEMALE INEBRIATES IN CANADA.—The provision of help for female inebriates has engaged the attention of the Local Council of Women at Ottawa. The Dominion Government will be asked to aid in providing cottage homes for inebriate women. In Ottawa during the past two years intemperance among women and girl prisoners is said to have increased by 75 per cent. In many cases women at or about 20 years of age are imprisoned for drunkenness and crimes committed while under the influence of liquor. Brief imprisonment to check the evil has proved an utter failure, some women having spent at least 20 out of 40 years in prison.

The next general meeting of the Medico-Psychological Association of Great Britain and Ireland will be held at 11, Chandos Street, Cavendish Square, London, W., on Wednesday next, May 21st, at 4 p.m., under the presidency of Dr. Oscar T. Woods. A discussion on Sleep in relation to Narcotics in the Treatment of Mental Diseases will be opened by Dr. Henry Rayner, Dr. T. Clave Shaw will read a paper on the Surgical Treatment of Delusional Insanity, and Dr. Robert Jones will read Notes on the Treatment of Morphinomania. The members will dine together at the Café Royal, Regent Street, at 7 p.m.

The annual general meeting of the Governors of the Royal Medical Benevolent College, Epsom, will be held at the office, 37, Soho Square, London, W., on Friday, May 30th, at 4 p.m., when the results of the voting for the election of pensioners, foundation scholars, and Morgan annuitants will be announced. It will be proposed that Dr. Thomas Buzzard shall be elected to fill a vacancy on the Council, and that Dr. John H. Galton shall be elected vice-president. Certain alterations in the by-laws will also be proposed to provide regulations for the Pugh and France pensioners, for the Da Silva pensions, and for the France Pension Fund.

A FEMALE AMBULANCE SURGEON.—Dr. Emily Dunning has been appointed an ambulance surgeon to Gouverneur Hospital, New York. Dr. Dunning is a graduate of Cornell, having been second in her class on June 6th, 1901. She became a competitor for the post last year, and came out at the top of the list of applicants at the examination, but was refused appointment because of her sex. She then became assistant to Dr. Mary Putnam Jacobi, in which capacity she continued till a new Board of Charities seemed to offer her more encouraging prospects in the contest for a post on the Gouverneur staff. She will undertake all the duties ordinarily required of an interne, which include ambulance service.

THE general meeting of the British Balneological and Climatological Society will be held at 20, Hanover Square, W., on June 3rd, at 5 p.m. The annual dinner of the Society will take place the same evening at Pagan's Restaurant, Great Portland Street, at 6.30 p.m., after which a *conversazione* will be held at 20, Hanover Square, at 9 p.m., when Sir Lauder Brunton will deliver an address.

THE ITALIAN HOSPITAL.—The annual ball in aid of the Italian Hospital, which was omitted last year out of respect for the memory of the late Queen Victoria, was held last week in Princes' Hall, Piccadilly, and proved an even greater success than on former occasions. Nearly 700 guests were present, including the Italian Ambassador, President of the Hospital, and Madame Pausa; the Lord Mayor and Lady Mayoress; the Austrian Ambassador and Countess Deym; the Swiss Minister, M. Bourcart, Madame Orтели (widow of the founder of the hospital) and representatives of the German and other Embassies. Amongst the medical staff, to whose efforts a considerable part of the success attained is due, there were present Sir Dyce Duckworth, Cavaliere Naumann, Cavaliere Distin Maddick, Drs. Donelan, Dickinson, Henry, and Cavaliere FitzGerald.

MEDICAL SICKNESS AND ACCIDENT SOCIETY.—The usual monthly meeting of the Medical Sicknes, Annuity, and Life Assurance Society was held on April 25th at 429, Strand, W.C. There were present: Dr. de Havilland Hall, in the chair; Dr. J. B. Ball, Mr. J. Brindley James, Dr. Frederick S. Palmer, Dr. F. J. Allan, Dr. W. Knowsley Sibley, Dr. Alfred S. Gubb, Dr. Walter Smith, and Mr. Edward Bartlett, and Dr. G. A. Heron, one of the Trustees of the Society. The Committee examined the draft report for 1901, and ordered it to be presented to the members at a general meeting to be held at the Medical Society of London, 11, Chandos Street, Cavendish Square, on Thursday, May 15th, at 5 o'clock. The report showed that the reserves were increased from £143,552 11s. 3d. to £154,353 17s. 3d. The number of new entrants was greater than in the previous year. There had been an increase in the number of members who availed themselves of the recent alteration in the rules to raise their sickness benefits to £6 6s. per week. Prospectuses and all particulars on application to Mr. F. Addiscott, Secretary, Medical Sickness and Accident Society, 33, Chancery Lane, London, W.C.

MEDICAL VACANCIES.

The following vacancies are announced:

- BARBADOS GENERAL HOSPITAL.**—Junior Resident Surgeon. Salary, £200 per annum, with unfurnished house. If resident in England passage paid to Barbadoes and (after three years' appointment) back. Applications to Mr. W. E. Sargent, School Registrar of St. Barbadoes's Hospital, by June 10th.
- BIRMINGHAM CITY ASYLUM.**—Resident Clinical Assistant. Board, residence, and washing provided, and honorarium at the rate of £50 a year. Applications to the Medical Superintendent.
- BIRMINGHAM GENERAL DISPENSARY.**—Resident locum for two or three months. Turns 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.
- BRISTOL CITY LUNATIC ASYLUM.**—Medical Assistant; unmarried. Salary, £140 per annum, increasing to £150, with furnished apartments, board and washing. Applications, marked "Medical Assistant," by May 21st.
- BURY ST. EDMUNDS: SUFFOLK GENERAL HOSPITAL.**—House-Surgeon. Salary, £100 per annum, with board, lodging, and washing. Applications to the Secretary by May 26th.
- CAMBRIDGE: ADDENBROOKE'S HOSPITAL.**—Second Assistant Physician. Applications to the Secretary by June 7th.
- CANTERBURY: KENT AND CANTERBURY HOSPITAL.**—Assistant House-Surgeon; unmarried. Salary, £60 per annum, with board and lodging. Applications to the Secretary by May 30th.
- CARDIFF UNION.**—Assistant Medical Officer for the Workhouse; unmarried. Salary, £130 per annum, with rations, apartments, attendance, and washing. Applications to the Clerk, Union Office, Queen's Chambers, Cardiff.
- CHORLEY: RAWLIFFS HOSPITAL.**—House-Surgeon. Salary, £100 per annum, with board and lodging. Applications to the Honorary Secretary.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST.** Victoria Park, E.—Two House-Physicians. Appointments for six months. Salary at the rate of £30 per annum, with board, washing, and residence. Applications to the Secretary by May 26th.
- 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.
- DOWN 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 £187, with apartments, board, laundry, and attendance. Applications to the Medical Superintendent.
- EAST LONDON HOSPITAL FOR CHILDREN.** Shadwell, E.—House-Physician. Board, residence, etc., provided, and honorarium of £75 on completion of six months' approved service. Applications to the Secretary by June 14th.

- GAIRLOCH PARISH COUNCIL.**—Medical Officer for the Southern Division. Salary at the rate of £100 per annum up till February, 1903, increasing afterwards to £150. Applications to the Clerk of the Parish Council, Poolwee, by June 2nd.
- GLAMORGAN COUNTY ASYLUM.** Bridgend.—Locum tenens for about 54 months. Four guineas a week and board. Applications to the Medical Superintendent.
- GLASGOW SAMARITAN HOSPITAL FOR WOMEN.**—House-Surgeon. Applications to the Honorary Secretary, 89, West Regent Street, Glasgow, by May 20th.
- 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.
- HAYERSTOCK HILL AND MALDEN ROAD PROVIDENT DISPENSARY.** 132, Malden Road, N.W.—Medical Officer. Applications to the Honorary Secretary by June 1st.
- HEREFORD COUNTY AND CITY ASYLUM.**—(1) Senior Assistant Medical Officer, not over 30 years of age. Salary, £150 per annum. (2) Junior Assistant Medical Officer, not over 25 years of age. Salary, £100 per annum. Board, lodging, and washing provided in each case. Applications to the Medical Superintendent.
- HOSPITAL FOR WOMEN.** Soho Square, W.—Honorary Assistant Anaesthetist. Applications to the Secretary by May 31st.
- HULL & CALINGHEIM.**—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.
- KENT COUNTY ASYLUM.** Barming Heath.—Fourth Assistant Medical Officer and Pathologist; unmarried, and not over 30 years of age. Salary, £175 per annum, with furnished quarters, etc. Applications to Dr. F. Fritchard Davies Superintendent.
- KESTIVEN COUNTY ASYLUM.**—Assistant Medical Officer for the new Asylum, near Sleford. Salary, £150 per annum, with board, etc. Applications to the Medical Superintendent, Asylum, Grantham.
- KINGARDINE PARISH COUNCIL.**—Resident Medical Officer and Vaccinator. Salary, £77 10s. per annum, and lunacy fees. Applications to Mr. David Ross, Inspector of Poor, Ardray, by May 31st.
- KING'S NORFOLK 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.
- LANCASHIRE COUNTY ASYLUM.** Whittingham.—Junior Assistant Medical Officer. Salary, £150 per annum, 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.
- LONDON TEMPERANCE HOSPITAL.** N.W.—Assistant Resident Medical Officer. Appointment for six months. Honorarium at the rate of 50 guineas per annum, with board, residence, and washing. Applications to the Secretary by May 26th.
- METROPOLITAN ASYLUMS BOARD.**—(1) Male Assistant Medical Officer for the Asylum at Caterham. Salary, £150 per annum. (2) Male Assistant Medical Officers (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 29th.
- MOUNT VERNON HOSPITAL FOR CONSUMPTION.** Hampstead.—(1) Physician (Senior Assistant Physician is a candidate, and if elected there will be a vacancy of an Assistant Physician) for the Clinical Assistant to the Out-patient Department, Fitzroy Square. Honorarium, £25. Applications to the Secretary, 41, Fitzroy Square, W., by May 31st.
- NEW HOSPITAL FOR WOMEN.** 144, Euston Road, N.W.—(1) House-Physician; (2) House-Surgeon; (3) Clinical Assistant for Out-patient Department; (4) Qualified Medical Woman to take charge of Roentgen Ray Department. Applications to the Secretary by May 25th.
- 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 30th.
- NOTTINGHAM GENERAL DISPENSARY.**—Assistant Resident Surgeon; unmarried. Salary, £163 per annum, increasing £10 yearly, with furnished apartments, etc. Applications to the Secretary, Mr. M. I. Preston, Journal Chambers, Nottingham.
- POPPLAR HOSPITAL FOR ACCIDENTS.** E.—Assistant House-Surgeon. Appointment for six months, but eligible for re-election. Salary at the rate of £80 per annum, with board and residence. Applications to the House-Governor by May 30th.
- ROYAL COLLEGE OF SURGEONS OF ENGLAND.**—(1) Hunterian Professors. (2) Erasmus Wilson Lecturer. (3) Arris and Gale Lecturer. For the ensuing year. Applications to the Secretary by June 2nd.
- ROYAL HOSPITAL FOR CHILDREN AND WOMEN.** Waterloo Bridge Road, S.E.—(1) Assistant Obstetric Physician, must be F.R.C.O.P. Lond. (2) Resident Medical Officer. Applications to the Secretary by May 27th.
- ROYAL WESTMINSTER OPHTHALMIC HOSPITAL.** King William Street, W.C.—Clinical Assistant. Appointments for six months. Applications to the Secretary by May 31st.
- 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 23rd.
- STAFFORD: STAFFORDSHIRE GENERAL HOSPITAL.**—Assistant House-Surgeon. Salary, £80 per annum, with board, lodging, and washing. Applications to the House-Surgeon by May 20th.
- TORQUAY: TOBBAY HOSPITAL.**—House-Surgeon. Salary, £100 per annum, £5 for nurses' lectures, with residence, board, and washing. Applications to the Secretary by May 31st.
- TRURO: ROYAL CORNWALL INFIRMARY.**—House-Surgeon; unmarried. Salary, £100 per annum, increasing £10 yearly, with board and apartments. Applications to the Secretary, 4, Parkville Terrace, Truro.
- VICTORIA HOSPITAL FOR CHILDREN.** Queen's Road, S.W.—House-Surgeon. Appointment for six months. Honorarium, £45, with board and lodging. Applications to the Secretary by May 31st.
- WESTERN GENERAL DISPENSARY.** Marylebone Road, N.W.—Second House-Surgeon; unmarried. Salary, £81 per annum, with board, residence, and laundry. [Applicants to the Honorary Secretary.]
- 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.

- BUTLER-HOGAN.** J. F. R.A.E.U.I., M.D.Brux., D.P.H.Camb., etc., appointed Medical Officer of Health for Tottenham.
- BROUGH.** Daniel, M.R.C.S., L.R.C.P.Lond., appointed Deputy Medical Officer of Health for the Borough of Dewsbury.
- COOMES.** Rowland, M.D.Durh., M.R.C.S., L.R.C.P., appointed Medical Officer of Health for the Bedford Rural District.
- DAILY.** F. J. P., M.R.C.S., L.R.C.P., appointed Medical Officer to No. 10 District of the Hackney Union.

DENNING, C. E., L.R.C.P., L.R.C.S.Irel., appointed Certifying Factory Surgeon for the Epping District of Essex.

DICKSON, W., M.D.Edin., appointed District and Workhouse Medical Officer of the Hungerford and Emsbury Union.

GLENNY, Edmund, L.R.C.P.I., L.R.C.S.I., appointed Senior House-Surgeon to Jervis Street Hospital, Dublin.

GRAVES, E. B., M.B., B.S.Durh., appointed District Medical Officer and Public Vaccinator of the Eccleehall Union.

HARMAN, N., Bishop, M.A., M.B.Cantab., F.R.C.S.Eng., appointed Demonstrator of Pathology in the Middlesex Hospital Medical School, vice C. H. Reissmann, M.A., M.D. Cantab., M.R.C.P.Lond., resigned.

HICKS, Charles, L.R.C.P., L.R.C.S.Edin., appointed Certifying Factory Surgeon for the Horshamond District of Kent.

JOWAS, Herbert Charlton, M.B., B.S.Lond., M.R.C.S.Eng., L.R.C.P., appointed Honorary Medical Officer to the Barnstaple and North Devon Infirmary, vice Dr. Mark Jackson, resigned.

LITTLE, Andrew, M.B., C.M.Aberd., appointed Honorary Surgeon to the Eye and Ear Hospital, Bradford, vice James Kerr, M.D.Camb., resigned.

RUSSELL, Matthew J., L.R.C.P., L.R.C.S.Irel., appointed Medical Officer for the New Kilmainham Ward Dispensary District of the South Dublin Union.

RYAN, John P., L.R.C.P.I., L.R.C.S.I., appointed Junior House-Surgeon to Jervis Street Hospital, Dublin, vice Edmund Glenny, L.R.C.P.I., L.R.C.S.I., promoted.

SCHOLFIELD, H., M.B., appointed Assistant Medical Superintendent of the Paddington Infirmary.

SHAW, Cecil Edward, M.D., M.Ch.R.U.I., Ophthalmic Surgeon to the Ulster Hospital for Children, and Assistant Surgeon to the Eye, Ear, and Throat Hospital, Belfast, appointed Consulting Ophthalmic Surgeon to the County Antrim Infirmary, Lisburn.

STEVENSON, Howard, M.B., B.S.R.U.I., appointed House-Surgeon to the Royal Victoria Hospital, Belfast.

STOTT, W. H., L.R.C.P., L.R.C.S.Edin., appointed Certifying Factory Surgeon for the Cañon District of Lancashire.

VAUGHAN, Kathleen Olga, M.B.Lond., appointed to the Quarantine Office at Suez by the Sanitary Maritime and Quarantine Council of Egypt, in place of Miss Sheldon Amos, M.B.Lond., transferred to Alexandria.

DIARY FOR NEXT WEEK.

TUESDAY.

Pathological Society of London. 20, Hanover Square, W., 8.30 p.m.—Annual general meeting; election of officers and Council. The following papers will be read: Dr. Hunter: (Lantern demonstration) Infective Lesions of the Tongue, Stomach, and Intestines in Addison's Anæmia. Dr. Rolleston: Membranous Cholangitis. Mr. A. Lucas: Unusual Variety of Knee-joint in Haemophilia and Congenital Atresia of the Small Intestine. Dr. J. Smith: Disseminated Carcinoma simulating Tubercle. Dr. Fennell: Sarcoma of the Suprarenal Body.

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

WEDNESDAY.

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

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

THURSDAY.

Neurological Society of London. 11, Chandos Street, 8.30 p.m. (patients at the rooms at 8 p.m.)—Clinical evening. Cases will be shown by Mr. Richardson Cross, Dr. Parkes Weber, Dr. Farquhar Buzzard, Dr. Colman, and others.

Harveian Society of London. Stafford Rooms, Titchborne Street, Edgware Road, W., 8.30 p.m.—Cases will be shown by Mr. Watson Cheyne, Dr. A. Whitfield, Dr. A. Morison, Mr. F. Jaffrey, and others.

FRIDAY.

Clinical Society of London. 20, Hanover Square, W., 8.30 p.m.—Annual general meeting; election of officers for session 1902-1903. The following papers will be read: Sir Thomas Barlow and Dr. H. Batty Shaw: Inheritance of Recurrent Attacks of Jaundice and of Abdominal Crises with Hepato-spleno-megaly. (Two cases will be shown). Dr. W. C. White and Mr. C. H. Golding-Bird: On the Subsequent History of Three Cases of Colitis in whom Right Lumbar Colotomy was performed several years ago.

POST-GRADUATE COURSES AND LECTURES.

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

Hospital for Consumption and Diseases of the Chest, Brompton, Wednesday, 4 p.m.—Lecture on Difficulties in the Recognition of Pulmonary Tuberculosis.

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

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

National Hospital for the Paralysed and Epileptic, Queen Square, W.C. Tuesday, 8.30 p.m. Lecture on Cerebral Abscess.

West London Hospital, Hammersmith Road, W.—Lectures will be delivered at 5 p.m. as follows:—Tuesday: Heart Murmurs, their Significance and Treatment. Wednesday: Surgical Anatomy. Thursday: Treatment of Injuries. Friday: Cases of Diseases of the Skin.

Westminster Hospital, S.W., Tuesday, 4.30 p.m.—Demonstration on Some Surgical Cases.

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.

DEAS.—On May 11th, at Thorndale, Merton, Surrey, the wife of F. Deas, M.R.C.S., L.R.C.P., of a daughter.

MEAKIN.—On March 25th, at Cambridge, the wife of Captain Harold Meakin, M.D.Lond., Indian Medical Service, 2nd Bengal Lancers, of a son.

PRICE.—On May 5th, at Victoria Street, West Bromwich, the wife of T. H. Price, M.R.C.S.Eng., L.R.C.P.Lond., of a daughter.

RUTHERFORD.—On May 13th, at 12, Newton Place, Glasgow, the wife of Henry Rutherford, M.B., of a son.

DEATHS.

ARCHER.—On April 13th, at Rapallo, Italy, in his 68th year, Surgeon-Colonel Samuel Archer, retired pay.

FREELAND.—On April 15th, 1902, at Parham, Antigua, West Indies, Freeland John Freeland, M.D., L.R.C.S.Eng., L.S.A.Lond., elder son of J. B. Freeland, M.R.C.S.Eng., and brother of Douglas L. Freeland, L.R.C.P.Lond., M.R.C.S.Eng., of Snodland, Kent, aged 40 years.

PEARSE.—On May 5th, at Brooklands, Dawlish, Reginald Thomas Pearse, late of Cardiff, in his 69th year.

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, 429, 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, 429, 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 *Articulate*, 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.

H. writes: In the event of a large bottle of prussic acid being broken, say in any crowded room or place, would the persons in the room or place, or in its vicinity, be likely to expire instantaneously from inhaling the fumes?

“* The persons would not instantaneously expire, but after the lapse of a very few minutes they would probably become unconscious, and in the absence of ventilation or of artificial respiration in fresh air deaths might possibly occur.

HORSE HIRE AND HORSE KEEP.

BROUGHAM asks for answers from experience as to: (1) The comparative cost of “hiring” by contract *versus* keeping a horse of one's own; (2) of what would be a fair average cost per week of hiring a horse, trap, and harness, the medical man keeping the horse and feeding him in his own stable.

GENITAL NEUROSIS.

CESTRIAN would be glad of advice as to treatment of the following case: A previously robust man, aged 38, married, has suffered for the past twelve months from severe pain in the penis and spasmodic retractions of that organ; also from pain and a variety of “nervous” sensations in the testicles and perineum. There is great mental depression. Tonics, opium, bromides, and the continuous current have all been tried. Has any member had experience of the use of a seton in such cases?

INCOME TAX.

M.D. writes: I understand that in making my return for income tax I may deduct one-third of the amount of my house rent and taxes, if such a portion of my house is used for professional purposes. I pay as regards taxes, poor-rate, improvement rate, inhabited house duty, water-rate, and gas. Can I claim an abatement in respect of each of these, or if not on which?

“* As much as two-thirds may be deducted if the Commissioners will allow it. The allowances to medical men are enumerated in *Income Tax: How to get it Refunded*, p. 35. A set of professional balance sheets can be got from the Income Tax Repayment Agency, 6, Chichester Road, W.

ANSWERS.

WE would request correspondents who desire to ask questions in this column not to make use of such signatures as “A Member,” “A Member B.M.A.,” “Enquirer,” and so on. By attention to this request much confusion would be avoided.

TYPHOID FEVER.

T. M. W.—In reply to our correspondent's further questions it may be said: (1) That there is no sufficient evidence of the need for exclusion from school of a child coming from a house in which a case of enteric fever exists under ordinary conditions. The regulations of the London School Board provide, however, for such exclusion in their instructions to teachers. (2) That there is not any recognized risk of conveyance of typhoid fever by healthy persons. Infected clothing is of course known to convey the disease.

THE NASAL DOUCHE AS A PROPHYLACTIC.

AN OLD R.M.O. writes, in answer to the inquiry in the BRITISH MEDICAL JOURNAL of May 10th, p. 1192, as to the routine use of the nasal douche in convalescence from scarlet fever: At one of the fever hospitals in Liverpool it was carried out for many months during my residence there under the guidance and with the sanction of the visiting physician. Our original idea was to use it as a prophylactic measure against otitis media, and in the hope that it might still further reduce the number of “return” cases. I cannot say that it seemed to reduce the number of otitis cases very materially, but it certainly did not increase them. The objections to its use seem to apply principally to the stage of acute rhinitis.