

animals, I am inclined to think that it may possibly turn out to be a new species. I am supported in this hypothesis by a recent communication by Kruse to the Medical Society of Bonn.² I do not see any reason why man should not be attacked by different species of *trypanosoma*, each of which might give rise to a different disease. This fact has been clearly demonstrated in the lower animals. The horse, for instance, is liable to be infected by three different species of *trypanosoma*—*trypanosoma brucei*, the cause of *nagana*; *trypanosoma evansi*, the cause of *surra*; *trypanosoma equiperdum* (Doflein), the cause of the disease called "dourine."

Some observers have tried to identify *trypanosoma brucei* with *trypanosoma evansi*, but the most recent investigations have clearly proved that they must be considered two different species, although their morphological differences are slight and inconstant.

REFERENCE.

¹ Castellani, *Transactions Royal Society*, May, 1903, and *Journal of Tropical Medicine*, June 1st, 1903. ² Ueber das *Trypanosoma Castellani* den Erreger des Schlafkrankheit, *Sitzungsberichten der Niederrhein. Gesellschaft. f. Natur. und Heilkunde zu Bonn*, May, 1903.

MEMORANDA:

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

THE DURATION OF LIFE AFTER GASTROSTOMY FOR CANCER OF THE OESOPHAGUS.

As a contribution to this question I may mention the following case:

A gentleman, aged 64, was brought to me in 1900 with all the symptoms of stricture of the lower end of the gullet. Difficulty of swallowing had been noted for two months, and the patient, when I first saw him, could barely swallow any fluid. The bougie was arrested at the termination of the oesophagus. The patient was much emaciated but was still able to walk about. I performed gastrostomy on July 7th, 1900.

There was a cancerous growth involving the termination of the gullet and extending into the stomach. So extensive was the malignant disease in the stomach itself that it reached nearly the whole length of the lesser curvature. The oesophageal opening was practically closed. There were no secondary deposits visible in the liver. The patient lived until June 9th, 1903—a period of three years less one month. Dr. Batchelor, of Staines, who attended the patient throughout with the utmost care and devotion, writes as follows in a letter to me in which he announces the patient's death: "He was practically free from pain all through his long illness, and the gastrostomy wound has never given the slightest trouble."

Wimpole Street, W.

FREDERICK TREVES.

TRAUMATIC RUPTURE OF THE ILEUM.

By an accidental discharge of dynamite during blasting operations a native labourer was struck on the abdomen towards the left iliac fossa by a piece of rock. I saw him about half an hour after. There was merely a slight abrasion externally, but the man complained of great abdominal tenderness, and lay with his legs drawn up. As nothing definite could be made out by examination a sedative was administered, and he was placed in bed for observation, small quantities of iced water being allowed to allay his intense thirst.

Vomiting commenced soon after the accident, and was very persistent. Symptoms of acute peritonitis came on rapidly, and the question of a laparotomy was considered, but had to be ruled out of court owing to local circumstances. His temperature rose rapidly to 104° F. His pulse twenty-four hours after the accident was imperceptible at the wrist, and he rapidly sank, and died about six hours later.

Post-mortem examination showed the presence of extensive peritonitis, the omenta and intestines were reddened and covered with patches of flaky lymph. A rupture was found in the lower part of the ileum; the opening was large enough to admit the end of the thumb, and from it the bowel contents were freely escaping. There was also a tear of the mesentery of the ileum, at some distance from the intestinal wound; this was about 3 in. in length, and involved the whole thickness of the mesentery, but only a small amount of haemorrhage had taken place. The bowels were loaded, which doubtless predisposed to rupture when the sudden compression

took place. The tear in the mesentery was evidently due to the forcing against it at this point of a loop of distended bowel. There was no indication of any other injury to the abdominal viscera.

Salina Cruz, Mexico.

JOHN MCPHERSON, M.B., Ch.B.

RECTAL SERUMTHERAPY.

I WAS much interested to read in the BRITISH MEDICAL JOURNAL of May 23rd, p. 1195, Sir Dyce Duckworth's case of ulcerative endocarditis treated by rectal injections of anti-streptococcus serum, as for the last two years the rectal use of serums has been in constant use at the London Temperance Hospital. Our results have been excellent in the case of antidiaphthelial serum, but antistreptococcus serum by rectal injection has shown the same uncertainty of effect that it does when administered by the subcutaneous method. Its rectal injection is, however, free from the disadvantages and dangers which may attend the subcutaneous method, such as local abscesses or spreading erysipelas-like inflammations, and for this reason may be preferred, as there seems no doubt that it is rapidly absorbed. The rectal method was introduced to the London Temperance Hospital by Dr. Rhodes, the Senior Resident Medical Officer, who is personally responsible for its success.

J. PORTER PARKINSON,
Physician to the London Temperance Hospital, etc.
Wimpole Street, W.

REPORTS

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

ROYAL COLONIAL HOSPITAL, FREETOWN, SIERRA LEONE.

CASE OF ABSCESS OF THE LIVER.

(By W. RENNER, M.D.BRUX., M.R.C.S.Eng., Assistant Colonial Surgeon and Medical Officer to the Hospital.)

J. N., aged 35, a male domestic servant, was admitted into the hospital on September 29th, 1902.

History.—He was a native of the Colony, and had always enjoyed good health. About nine months ago he was engaged as a servant to a miner, whom he accompanied to Sekondi, Gold Coast Colony. They travelled up to Kumasi, and underwent a good deal of hardship. They slept many nights in the bush, and had bad drinking water. He had an attack of looseness of the bowels seven months ago in the bush, and was sent down to Sekondi on the seacoast, from whence he embarked for Freetown. He has been in Freetown for about four months. The looseness of the bowels had stopped. For the last two months he had been losing flesh, and his belly he noticed had swollen. He had had pain on the right side of the belly, and had been suffering from fever (low fever, as he called it).

State on Examination.—Patient was very emaciated, with abdomen enlarged, and a want of symmetry in its contour. The circumference at the umbilicus was 48 in. The liver was found enormously enlarged, the lower border being about 2½ in. above the anterior margin of the ilium and occupying a large portion of the abdominal cavity. About 2½ in. from the margin of the right costal cartilage a large prominence was noticed. The skin was tense, shiny, and pitted on pressure. Adhesion between the skin and peritoneum had already taken place. Palpation gave the idea of fluid. Exploring with a hypodermic syringe a chocolate-coloured fluid was withdrawn.

Operation.—On November 9th the patient was placed under chloroform. An incision of 1½ in. was made through the skin, and a puncture was made with a No. 3 trocar and cannula, to which was attached a rubber tubing of an inch calibre. A large quantity of coffee-brown fluid first escaped, and towards the end it was mixed with pus. A drainage tube an inch in calibre was placed in the wound, and attached to the margins of the skin, and run down to a large wide-mouthed bottle by the side of the bed which contained (1 in 20) carbolic lotion.

Progress.—The abscess cavity was thus continuously drained and washed out twice a day with (1 in 10) hot iza! lotion. On November 11th the tube was unfortunately removed from the

NEWSPAPER PUFFS.

MR. ALEXANDER PAUL SWANSON (Liverpool) writes to say that the letter which appeared in the *Liverpool Daily Post* of June 9th, praising the Liverpool Cancer and Skin Hospital, Dr. Swanson, the matron and nurses, and expressing gratitude for the kindness shown to the writer's child, was not published with his knowledge or consent.

** This is the sort of case where a remonstrance should be sent to the editor from some representative medical society. He should be told that such letters are sometimes written merely as advertisements and are always open to suspicion, and therefore to allow a correspondent to mention Mr. Swanson's name in such a letter is calculated to do him injury in the eyes of his profession, as it lays him open to the suspicion of having been in some way a party to the publication of the letter.

MEDICAL ADVERTISING IN LAY NEWSPAPERS.

R. H. asks whether a medical practitioner may advertise in a lay newspaper for resident patients with a view to the treatment and cure of a particular affection, provided that he does not give his name? We are further asked to say whether the General Medical Council would be likely to object to such an advertisement?

** Many hydropathic establishments are advertised in the most objectionable way, and, except where the doctor's name has been put prominently forward, no complaint has hitherto been made, but there is grave objection to a medical practitioner advertising in a lay newspaper a home for the treatment of a particular class of disease, even although his name may not appear, and we feel sure that it will be necessary to fight for the principle that such advertisements should only be permitted in medical journals. We do not know that the question has ever been before the General Medical Council, and therefore we are unable to say what view the Council would take of it.

PURCHASE OF A PRACTICE.

PURCHASER asks: In purchasing a practice? (1) Is the price to be based on the gross receipts, without deductions? (2) Is it usual to pay cash down, or by instalments? (3) What is to be considered a reasonable introduction?

** (1) The basis of price is the gross receipts. (2) The price is usually paid by instalments. One and a half year's purchase would be in the case of many practices a fair value. (3) This would depend on the character of the practice. A longer time would be required in the case of good-class practice than in the case of a middle or poor-class practice.

AGREEMENTS NOT TO PRACTICE WITHIN AN AREA.

H. B. asks whether it is usual in a dissolution of partnership for the outgoing partner to sign an agreement not to practise either as a principal, *locum tenens*, or assistant, within a certain radius for a given time. He has no objection to signing with regard to principal or assistant, but he objects to being deprived of the chance of acting as *locum tenens*.

** Such an agreement is usual. The remaining partner might reasonably object to the outgoing acting as *locum tenens* to a rival practitioner within the prescribed area.

THREATENED writes that he has dissolved partnership, and under the deed of dissolution it is agreed that the outgoing partner shall not practise within a radius of three-quarters of a mile of his residence. He now threatens to take a house just outside the three-quarters of a mile, and practise as before.

** The outgoing partner may take a house outside the above limit, and practise there, but he may not visit any patient within the prescribed area, or accept any medical appointment necessitating his so doing. In event of violation of these conditions, our correspondent can bring an action against him for damages, and obtain an injunction to restrain him from continuing such unlawful conduct.

A NEW HEALER.

J. W. T.—We have no knowledge of the person whose performances have roused curiosity in Bristol, though it is of course possible that if his career were traced it might be found that he had been before the public under another name. The chief constable should take steps to discover the man's antecedents.

THE MULTIPLICATION OF DOOR PLATES.

C. W. B.—The rule is that medical practitioners should not affix name plates upon houses where they have no tenancy, except in widespread districts where it may be necessary for them to indicate houses at which messages may be left for them. There seems to be no reason of the kind to justify our correspondent in doing so.

THE TRANSFERABILITY OF PUBLIC APPOINTMENTS BY SALE.

TERES.—We are asked to say whether, when a practice is sold which includes public appointments, it is unprofessional for other practitioners to compete with the purchaser by applying for such appointments. As a rule the price to be paid for a practice depends in part upon the extent to which the appointments are secured by the purchaser; and in the case of a death vacancy it may happen that the neighbouring practitioners agree to help the widow and facilitate the sale by not competing for the appointments. Under these circumstances it might be unhandsome to apply.

THE EXHIBITION OF AN X-RAY APPARATUS AT A BAZAAR.

SCOW.—Provided that the exhibitor does not seek to illustrate the uses of the x rays in the treatment of diseases and confines himself to demonstrations of radiography and diaphanoscopy, no reasonable objection can be made.

PROFESSIONAL SECRECY.

W. D. P.—Our correspondent has not acted quite in accordance with the spirit of our reply. He should have told the agent of the insurance company that he would consult the representatives of the deceased person, and if he obtained their permission he would be glad to give the information required upon being paid a reasonable fee. We do not understand his hostile attitude towards the man, which seems to have been carried to the verge of personal violence. Such inquiries on the part of insurance companies are not to be regarded as impertinent. They are within their rights in seeking to obtain such information, and the rule above indicated defines clearly the conditions under which it may be supplied by medical practitioners.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

Surgery.—The Professorship of Surgery was duly re-established on June 11th. An election will be held during the summer.

Degrees.—At the same congregation the following degrees were conferred:—*M.D.*: G. C. Garratt, Trinity. *M.B.* and *B.C.*: H. Robinson, Trinity; L. E. Wigram, Trinity; J. A. Wood, St. John's; W. J. Sasman, Caius. *M.B.*: H. D. Ledward, Trinity; F. H. Parker, Pembroke; W. W. Jeudwine, H. Selwyn. *B.C.*: G. W. Micklithwaite, Trinity; G. B. Norman, St. John's; R. S. Drew, Pembroke.

Examiner.—Dr. D. MacAlister has been appointed an additional Examiner for the Third *M.B.* Examination, Part I; he has also been reappointed Assessor to the Regius Professor of Physic for the next academic year.

Research Degree.—Mr. J. C. Simpson, advanced student, of Caius College, has been approved for the *B.A.* degree in respect of his original researches on the Organization of a Thrombus.

UNIVERSITY OF LONDON.

ST. THOMAS HOSPITAL MEDICAL COLLEGE.

THE prize distribution of the Medical School of St. Thomas's Hospital took place on June 11th in the Governors' Hall.

Mr. J. G. Wainwright (the Treasurer) said that 16 new beds were to be added within a few days to those at present in use, and in the next two years he looked forward to the addition of 40 beds. Referring to the loss the hospital had suffered by the death of Dr. Barry Blacker, Mr. Wainwright said that it was through him that St. Thomas's Hospital could claim to be the first hospital to establish an x-ray department. Dr. Blacker had introduced an important improvement in electrical treatment, which had been the means of making it more available and more applicable. In consequence of the exposure to the x rays Dr. Blacker's hands became much affected, and the irritation was followed by a further serious development, which caused his death. It was satisfactory to know that the services rendered to the country and to the world by Dr. Blacker had not been overlooked from a pecuniary point of view by the Government.

Sir A. W. Rücker then presented the prizes to the successful students. Mr. H. J. Nightingale secured the first Entrance Science Scholarship of 150 guineas, and Mr. A. C. F. Turner the second scholarship of £60. The Mead Medal was gained by Mr. G. C. Adeney, and the Cheseleiden Medal was won by Mr. H. S. Bennett. Mr. A. E. Boycott, amongst other prizes, received the Seymour Graves Toller Prize.

Sir A. W. Rücker then addressed the meeting on the subject of the growing closeness of the relations between the great medical schools and the University of London. He first showed that the medical profession was organized on the assumption that hospitals and medical schools were connected. The outside world should understand more clearly than it did that the educational work of the great hospitals helped and depended upon the more purely philanthropic work. The success of a hospital must depend on the education and ability of the men who were turned out to be the physicians and surgeons of the future. If it were true that aid to hospitals was almost a direct aid to medical schools, then the converse was also true that aid to medical schools was direct assistance to the great hospitals. In the reorganized University of London they possessed a machinery of the most extraordinary flexibility. The actual government of the University was complicated because its organization was on a democratic basis. The institutions connected with the University all had a share and voice in the way the subjects in which they were interested should be taught. The relation of the University to the great medical schools was something like that of the Universities of Oxford and Cambridge to their colleges: they were absolutely independent but were represented on the governing body of the University. Sir A. W. Rücker then proceeded to explain in detail his reasons for believing that the University of London would become the great centre for post-graduate work. Since October 1st last, 200 graduates of other universities had been entered on the books of the University of London.

VICTORIA UNIVERSITY.

Owens College.—The following appointments on the teaching staff have been made: Mr. W. P. Montgomery, *M.B.*, *F.R.C.S.*, Lecturer in Orthopaedics; Mr. James Niven, *M.B.*, Special Lecturer on Public Health Administration; Mr. J. W. Smith, *M.B.*, *F.R.C.S.*, Assistant Lecturer in Operative Surgery.

The following have passed the *M.D.* Examination:

*A. E. Ash, *Owens*. Thesis: The Enteric Fever of South Africa, with a Report on 550 Consecutive Cases. G. Ashton, *Owens*. Thesis: Relation of Pathological Conditions of the Choroid Plexuses to Mental Diseases. *H. J. Crompton, *Owens*. Thesis: A Contribution to the Pharmacology of Selenium and Tellurium, including the Results of Some Comparative Experiments with Arsenic. *E. N. Cunliffe, *Owens*. Thesis: The Blood in Malignant Disease. *A. E. Finney, *Owens*. Thesis: The Islands of Langerhans in their Relation to Morbid Conditions of the Pancreas, and Diabetes Mellitus. J. F. Hodgson, *Owens*. Thesis: Some Remarks on the Causation of Epilepsy. W. E. Livsey, *Univ.* Thesis: Tobacco Amblyopia: Its Etiology, Statistics, Symptoms, Pathology, Prognosis, and Treatment, with Record of 77 Cases. H. A. C. Magian, *Owens*. Thesis: A Contribution to the Study of Chlorosis. J. Moreton, *Owens*. Thesis: The Treatment of Pulmonary Tuberculosis. *J. W. Miller, *Univ.* Theses: (1) Plague, its Dissemination and the Measures used against it; (2) Some Observations on over 5,600 Cases of Inoculation

against Plague in the Punjab, 1902. *C. A. Ricketts, Owens. Thesis: A Research on the Cell-Lamination of the Human Cerebral Cortex and its Bearing on the Localization of Function. S. J. Ross, Univ. Thesis: Diphtheria. E. Turton, Yorks. Thesis: Defective House Drainage, and an Inquiry into its Influence on the Etiology of Typhoid Fever and Diphtheria.

No gold medal was awarded.

*Theses commended.

UNIVERSITY COLLEGE, LIVERPOOL.

New Lectureships.—Three new lectureships have been established in the Medical Faculty of University College. They are a Clinical Lectureship on Venereal Diseases, a Lectureship on Experimental Medicine, and a Lectureship on Comparative Pathology. Dr. Armand Bernard, M.B., B.A., of the University of Dublin, for many years surgeon to the Lock Department of the Liverpool Royal Infirmary, has been appointed to the first office; Dr. A. S. F. Grinbaum, M.D., M.A.Cantab., F.R.C.P., Director of the Liverpool Cancer Research, has been appointed Lecturer on Experimental Medicine; and Dr. H. E. Annett, M.D., D.Sc.Vict., D.P.H., has been appointed Lecturer on Comparative Pathology. Dr. Annett is an old student of University College and of the Royal Infirmary, and has also studied in London and Berlin. In the latter city he studied diseases of animals for two years under Professor Koch. The study of comparative pathology and the diseases of the lower animals is of the greatest importance in a city like Liverpool, on account of the enormous trade in cattle from abroad in which it is engaged.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

An ordinary Council was held on June 11th, Sir Henry G. Howse, President, in the chair.

Fellowship Examination.

Thirty diplomas of Fellowship were issued to the candidates found qualified at the last Pass Examination.

Examination in Dental Surgery.

It was determined that candidates for the First Professional Examination for the Licence be required in future to provide themselves with certain instruments, of which a detailed list has been drawn up. The instruments are for that part of the examination which consists of mechanical dentistry. The detailed list will be issued to the dental schools and to candidates.

Court of Examiners.

Mr. W. F. Haslam (Birmingham) was elected examiner in surgery in the vacancy of Mr. J. R. Godlee.

Purchases.

It was announced that a portrait in oil by Mr. George Richmond, R.A., of the late Mr. Henry Hancock, President of the College in 1872, and a doctor's signboard of the seventeenth century had been purchased.

Votes of Thanks

were accorded to Mr. Thomas Bryant for his services as the representative of the College in the General Medical Council, and to Mr. Alfred Willett and Sir Frederick Treves for their services as members of the Council.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

THE BACTERIOLOGICAL EXAMINATION OF MILK. THE Metropolitan Dairymen's Society recently held a conference of the dairy trades of the metropolis under the presidency of Mr. George Basham. The object of the meeting was to consider the following clauses prepared by the Camberwell Borough Council for insertion in the Sale of Adulterated Butter Bill now before the House of Commons:

- (a) The provisions of the Sale of Food and Drugs Acts, 1875 to 1899, shall apply to samples of milk or butter which shall be proved to contain bacteria capable of producing disease in man; but no prosecution shall lie under this section unless the seller shall have been informed at the time of purchase that such sample was, or samples were, intended for bacteriological examination, and no sanitary authority shall undertake any prosecution under this section except upon the certificate of a bacteriologist, who shall be a registered medical practitioner, and possessed of qualifications satisfactory to the Board of Agriculture (Local Government Board).
- (b) In any prosecution under the preceding section the certificate of a bacteriologist duly qualified and appointed shall be accepted as evidence in the same manner and to the same extent as if he were a public analyst appointed under the Food and Drugs Acts, 1875 to 1899. Provided always that it shall be lawful for any sanitary authority to appoint as bacteriologist its public analyst, being a registered medical practitioner, and possessed of qualifications satisfactory to the Board of Agriculture (Local Government Board).

The Chairman condemned the clauses root and branch, mainly on the ground of the time and expenses which would be involved in making such bacteriological examination of milk. He argued that to be effective the work would have to be carried on in all parts of the kingdom, and that the cost to the ratepayers of the appointment of men qualified to do such work would be so large as to be unjustifiable. A resolution protesting against the clauses was carried unanimously, as was a resolution moved by Mr. John Welford pledging the members of the Metropolitan Dairymen's Society and the Dairy Trade and Can Protection Society to place themselves in commun-

cation with their respective parliamentary representatives with a view to obtaining from them an assurance that should such proposed legislation be introduced it would receive their most careful consideration "in the interests of the public and the dairy trade." A vote of thanks to the Chairman brought the meeting to an end.

It is very kind of the Chairman to take such a deep interest in the pockets of the ratepayers, and doubtless he deserved a vote of thanks for his good intentions. We cannot help thinking, however, that if the ratepayers realized what a source of danger and contamination lies in milk supplied under conditions which too generally prevail, they would gladly pay for the appointment of well-qualified men to protect them from milk too often coming from insanitary and uninspected farms, and sowing broadcast the seeds of disease. Persons belonging to and interested in the milk trade are, perhaps, not those best able to form an unprejudiced opinion on the question whether the public may wish their milk inspected or not. We cannot refrain from expressing our regret that large dealers, who have done much to improve the milk trade, should, for the reasons advanced at this meeting, join in opposing measures designed to improve the unsatisfactory conditions under which the trade is at the present time being carried on, without at least suggesting some alternative means of protecting milk from the gross bacterial contamination which now commonly occurs.

HEALTH OF ENGLISH TOWNS.

IN seventy-six of the largest English towns, including London, 9,343 births and 4,022 deaths were registered during the week ending Saturday last, June 13th. The annual rate of mortality in these towns, which had been 15.5, 14.9, and 14.3 per 1,000 in the three preceding weeks, further declined last week to 13.9 per 1,000. The rates in the several towns ranged from 4.7 in Hornsey, 5.3 in Smethwick, 5.7 in Willesden, 6.4 in Walthamstow, 8.5 in Croydon and in York, 9.6 in Tottenham, and 9.1 in Handsworth, to 18.8 in Oldham, 19.3 in Liverpool, 19.4 in Burnley, 19.6 in West Bromwich and in Preston, 21.5 in Coventry, 22.5 in Middlesbrough, and 25.1 in Great Yarmouth. In London the rate of mortality was 12.4 per 1,000, while it averaged 14.6 per 1,000 in the seventy-five other large towns. The death-rate from the principal infectious diseases averaged 1.4 per 1,000 in the seventy-six large towns; in London this death-rate was equal to 1.2 per 1,000, while it averaged 1.5 in the seventy-five other towns, among which the highest death-rates from the principal infectious diseases were 3.1 in West Bromwich, 3.2 in Wolverhampton and in Preston, 3.8 in Oldham, 6.6 in Middlesbrough, 7.9 in Coventry, and 8.0 in Great Yarmouth. Measles caused a death-rate of 1.5 in Leyton and in Walthamstow, 1.7 in Wigan, 1.8 in Sheffield, 2.7 in Wolverhampton, 3.3 in Middlesbrough, and 5.7 in Coventry; diphtheria of 1.4 in Coventry and 3.0 in Great Yarmouth; whooping-cough of 1.1 in Middlesbrough and 1.5 in Oldham; "fever" of 1.1 in Middlesbrough and 1.6 in West Bromwich; and diarrhoea of 1.6 in Hanley, and 4.0 in Great Yarmouth. The mortality from scarlet fever showed no marked excess in any of the large towns. Three fatal cases of small-pox were registered in Liverpool, and 1 each in Leicester, Derby, Bootle, Bolton, Manchester, Oldham, Rochdale, Halifax, Bradford, and Sunderland, but not one in any other of the seventy-six large towns. The Metropolitan Asylums Hospitals contained 62 small-pox patients at the end of last week, against 64, 60, and 72 at the end of the three preceding weeks; 9 new cases were admitted during the week, against 19, 10, and 24 in the three preceding weeks. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had been 1,750, 1,771, and 1,783 on the three preceding Saturdays, had declined again to 1,710 on Saturday last, June 13th; 145 new cases were admitted during last week, against 234, 225, and 210 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, June 13th, 1,112 births and 524 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 17.2, 18.4, and 18.2 per 1,000 in the three preceding weeks, further declined last week to 17.5 per 1,000, but was 3.6 per 1,000 above the mean rate during the same period in the seventy-six large English towns. Among these Scotch towns the death-rates ranged from 13.7 in Dundee and 13.8 in Paisley to 18.3 in Glasgow and 26.3 in Greenock. The death-rate from the principal infectious diseases averaged 1.5 per 1,000 in these towns, the highest rates being recorded in Paisley and in Greenock. The 285 deaths registered in Glasgow included 10 which were referred to whooping-cough, 2 to "fever," and 11 to diarrhoea. Three fatal cases of whooping-cough and 3 of diarrhoea were recorded in Edinburgh; 3 of diarrhoea in Aberdeen, and 4 of whooping-cough in Greenock.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday last, June 13th, 574 births and 359 deaths were registered in six of the principal Irish towns. The mean annual rate of mortality in these towns, which had been 20.6, 19.1, and 16.2 per 1,000 in the three preceding weeks, rose last week to 18.2 per 1,000, being 4.3 above the mean rate during the same period in the seventy-six large English towns. The death-rates ranged in these six Irish towns from 11.7 in Waterford and 16.4 in Londonderry to 19.2 in Belfast and 22.7 in Dublin. The death-rate in the six towns from the principal zymotic diseases averaged 1.1 per 1,000, the highest rate—2.5—being recorded in Londonderry, while Limerick and Waterford had no deaths from zymotic diseases at all. The deaths registered in Dublin included 1 which was referred to small-pox, 5 to whooping-cough, 2 to enteric, and 1 to scarlet fever. No deaths from small-pox or scarlet fever occurred elsewhere, but Belfast recorded 5 deaths from measles and 1 each from whooping-cough and diarrhoea. Cork had 1 death from whooping-cough and 1 from diarrhoea. In Londonderry 1 death was due to enteric and 1 to whooping-cough.

HEALTH OF WOOLWICH, 1902.
THE estimated population of Woolwich is 122,505, and the birth-rate for 1902 was 29.9. The death-rate was 14.7. Dr. Davies, the Medical Officer of Health, calculates that the saving of 422 lives in the last two years in this borough represents a money gain of £34,400. The zymotic rate was 1.8, and the infant mortality 12.4. Dr. Davies draws attention to the occurrence of several cases of nasal diphtheria without obvious membrane. Voluntary notification of phthisis was in force during the year, and 180 cases were notified. Efforts have been made by the sanitary authority to prevent promiscuous expectoration, and to join with neighbouring districts in the provision of a consumptive sanatorium. Fourteen samples of milk were examined for the tubercle bacillus, with a negative result in all cases. During the last two years twenty-two samples have been thus examined, and 2, or 10 per cent, found to contain tubercle bacilli.

HEALTH OF LAMBETH, 1902.
LAMBETH contains 4,079 acres and a population of 205,102 persons, which gives a density of 74.8 persons to the acre. Dr. Priestley reports the corrected death-rate for 1902 as 17.7 per 1,000, and the birth-rate 29.7 as compared with 28.4 in London. The corrected infant mortality-rate was 127.4. Some 70 or 80 pages of the report deal with the outbreak of small-pox in Lambeth, to which reference has previously been made in our columns. The zymotic death-rate was 1.8. The decline in diphtheria still continues. Antitoxin is supplied by the borough council gratis, and during the year 78 bottles were distributed. The bacteriological laboratory proved very useful, as many as 466 examinations being made (212 suspected tuberculous sputum, 91 blood specimens, 154 throat swabs, 3 urines, and 6 ice-creams). Tubercle bacilli were found in 50.9 per cent. of the sputa, 37.4 per cent. of the bloods gave positive Widal reaction, and 10.4 per cent. of the swabs yielded B. diphtheriae. Voluntary notification of phthisis was adopted during the year, following the practice of a number of other metropolitan boroughs, and 315 cases were notified from June 1st to December 31st. Dr. Priestley incorporates in his report a large amount of most valuable information on a great variety of subjects, including reprints of various special reports he furnished to his authority during the year. These include a report on restaurants, kitchens, etc., ice-creams, bacteriological work, 1899-1902, Midwives Act, Manchester Sanitary Congress, Underground Bakeshows, and Small-pox.

HEALTH OF COVENTRY, 1902.
DR. HUGH SNELL reports the death-rate for Coventry in 1902 as 14.0 per 1,000, which is lower than in any previous year on record. The infantile death-rate of 10.7 has not been lower since the records were kept. The principal reason for these exceptional features in the vital statistics was the almost entire absence of the usual summer incidence of infantile diarrhoea. The zymotic death-rate was 1.1 per 1,000.

PUBLIC HEALTH CONGRESS IN LIVERPOOL.
THE Annual Congress of the Royal Institute of Public Health will be held in Liverpool, beginning on July 15th and terminating on July 21st. An elaborate programme has been issued, comprising papers and discussions on a great variety of subjects affecting the health of the community, several social functions and excursions to places of interest in the neighbourhood. On Wednesday evening, July 15th, the proceedings will be opened by the delivery of an address by the President, Lord Derby, at 8 p.m., in the Small Concert Room, St. George's Hall, after which the Harben medals for the years 1901 and 1902 will be presented to Sir Charles A. Cameron, C.B., M.D., etc., and Professor William R. Smith, M.D., D.Sc. On the following day there will be a *soirée* at the Walker Art Gallery, and on Friday, July 17th, a garden party by invitation of the Lord Mayor. Saturday will be entirely devoted to various excursions. On Sunday the Congress will attend service in the Cathedral, when the Bishop of Liverpool will preach. On Monday the Congress dinner will take place at 7 p.m. The strictly business part of the Congress is divided into nine Sections: (1) Sanitation of Congested Areas and Rehousing the Dispossessed; (2) Preventive Medicine and Vital Statistics; (3) Bacteriology and Comparative Pathology; (4) Tropical Sanitation; (5) Municipal Hygiene and Sanitary Legislation; (6) Engineering; (7) Child Study and School Health; (8) Port Sanitary Administration; (9) Ladies' Committee and Section of Domestic Sanitation. The Sections all meet on July 16th, 17th, 20th, 21st at 10 a.m. Dr. E. W. Hope, Medical Officer of Health for Liverpool, is the Honorary General Secretary.

APPLICATION FOR APPOINTMENT NOT ADVERTISED AS VACANT.
STATHERN writes: A is a medical officer for a parish, but does not live within it. He has held the appointment for several years, but in consequence of his non-residence has to be annually reappointed. At the end of one of A's years of office B. lodges an application for the post on the understanding that there is annually a potential vacancy. Is B committing a breach of professional etiquette?

. Unless the vacancy in question has been advertised, or in some other way publicly notified, we consider it would indicate bad taste if B. were to apply for the appointment.

SPECIAL SERVICES OF MEDICAL OFFICER OF HEALTH.
THE medical officer of health of a rural district, who also engages in private practice, is sent by the rural council to inspect a hospital in a distant part of the county and to report in connexion with a proposed isolation hospital in his own district. He asks whether he can require remuneration other than travelling expenses from the council.

. We think he would be unwise to do so, though in the absence of details as to the conditions of his appointment a confident answer cannot be given. To report as to the best means of providing isolation accommodation is part of the duty of the medical officer of health.

TEMPORARY HOSPITALS.
A CORRESPONDENT asks the following question: By the by-laws of the district in which he lives buildings of iron and wood are not permitted for the purpose of habitation, the only exception made being "in the case of buildings erected as hospitals for temporary occupation." It is proposed to erect, in the grounds of a public institution in this district, an iron building for occasional use as an isolation hospital, and it is stated that the by-law in question forbids this. Against this it is argued that

although the hospital will not be pulled down in any specified time, it is "temporary" in the sense of being only in occasional use. We are asked whether this view is correct, and whether there are any decided cases bearing on the point.

. The case is one in which, failing an agreement, a legal opinion should be sought. We believe that such an opinion will be found to be adverse to the continuance of the temporary structure. A better plan would probably be to come to terms with the local authority, as, for instance, by undertaking to remove the erection within six months whenever notice to this effect is served.

MEDICAL NEWS.

DR. GALLOWAY will deliver the annual oration before the Dermatological Society of Great Britain and Ireland to be held at the house of the Royal Medical and Chirurgical Society, Hanover Square, on Wednesday next at 5 p.m. The subject of the oration will be the relations of different forms of erythema, especially to lupus erythematous.

PRESENTATION TO PROFESSOR OSLER.—The ex-resident physicians and associate physicians of Johns Hopkins Hospital gave a dinner on May 15th, at the Maryland Club, Baltimore, in honour of Dr. William Osler, at which the eminent physician was presented with the *Dictionary of National Biography*, a work which he had long desired.

WE are asked to draw attention to the new by-law of the Royal Medical and Chirurgical Society of London which provides that officers of the Royal Navy Medical Service, the Royal Army Medical Corps and the Indian Medical Service can be nominated for election as Fellows by a single Fellow from personal knowledge, in place of the three signatures required in the case of ordinary candidates. Further, the entrance fee for such candidates has been reduced to 3 guineas and the annual subscription to 1 guinea; during absence abroad the annual subscription will be remitted.

WE published on January 31st the programme of the eleventh International Congress of Hygiene and Demography, which is to be held at Brussels this year from September 2nd to September 8th. We are asked to state that the latest editions of the programme and of circulars giving information with regard to travelling and hotel arrangements may be obtained from Dr. Paul F. Moline, Honorary Secretary of the British Committee, 42, Walton Street, Chelsea, S.W.

ASSOCIATION OF MIDLAND RAILWAY SURGEONS.—The first annual general meeting of the above Association will be held at the Wyvern Hotel, Leicester, on Thursday, June 25th, at 3.30 p.m. As important business is to be transacted, it is hoped that all the surgeons to the Midland Railway Friendly Society will make an effort to attend, and Midland Railway surgeons whose names are still unknown to the Association are invited to attend the meeting or to communicate with Dr. A. E. Payne, Honorary Secretary *pro tem.*, 2, Melbourne Street, Leicester.

THE ROYAL BRITISH NURSES' ASSOCIATION.—The annual meeting of the Royal British Nurses' Association took place on June 6th, Princess Christian presiding. The reports presented showed a slight balance of income over expenditure, but that the Association still owes about £250. Another £70 had been due to the Honorary Treasurer, Mr. John Langton, but remitted by him. During the year 1902-3, 118 nurses applied for registration, 93 being accepted; while 105 new members were elected and 17 resigned. The success of the "Nurses' Settlement" and the establishment of a branch in South Africa were mentioned. A discussion on State registration was included in the proceedings, which concluded by a vote of thanks to Princess Christian for her active interest in the work.

THE MEDICO LEGAL SOCIETY.—A meeting of this Society was held on June 9th, the President, Sir William Collins, being in the chair. The adjourned discussion upon Dr. Garson's paper on the Position of Medical Jurisprudence in London, especially in Reference to the Investigation of Cases of Death from Violence, was continued. This was followed by a paper by Dr. Wynn Westcott on the Overlaying of Infants. Dr. P. Smith read a paper on the Workmen's Compensation Act; and Mr. R. Henslowe Wellington presented a communication on the Recent Southwark Poisoning Trial. This meeting was the last of the first session of this newly-organized Society. It already consists of over 70 members, and has thus made a very successful start. Its secretaries are Dr. W. McCallin and Mr. R. Henslowe Wellington.

DONATION TO HOSPITAL.—The Board of Managers of the Birmingham General Hospital have received from the Aston Villa Football Club a cheque for £1,250, which sum was raised by subscription for the endowment of a footballer's bed in the hospital.

EGYPTIAN OPHTHALMIA.—Mr. A. F. MacCallan, M.B. Cantab., F.R.C.S., has been appointed by the Egyptian Government to direct the ambulant dispensaries which, as already announced, are to travel in Egypt for the treatment of ophthalmia in accordance with the arrangements made under the trust formed by Sir Ernest Cassel. Mr. MacCallan, who was formerly senior house-surgeon at the Royal London Ophthalmic Hospital and is at the present time clinical assistant there, will have the title of Inspector of Travelling Ophthalmic Dispensaries, and is leaving for Egypt immediately. Each dispensary will have a couple of tents with beds for the more serious cases and for those requiring operative treatment.

ASSOCIATION FOR THE ORAL INSTRUCTION OF THE DEAF AND DUMB.—Earl Carrington presided at a Festival Dinner in aid of the funds of this Society, held at the Hotel Cecil on June 11th. He was supported by the Earl of Crewe (President of the Association), Monsignor Stanley, the Rev. C. H. Parez, Dr. Phillips, Mr. A. H. Cheate, and others. The Chairman, in proposing the toast of "The Association," claimed for it a pioneer position in the oral training of the deaf, it having been founded in 1870 by the late Baroness Mayer de Rothschild, chiefly for the benefit of poor Jewish children. Its benefits were now open to all classes and denominations, and it had both a training college for teachers and a school for deaf children at 11, Fitzroy Square, of which Mr. William van Praagh was the director. Structural alterations and improvements were necessary owing to the extension of subjects of instruction, and to meet the expenses the festival dinner—one of three only given since the foundation of the Society—had been organized. As a result donations and subscriptions to the extent of £3,400, including £20 from H.R.H. the Prince of Wales, were announced, a fair instalment of the sum of £5,000 which is required to place the finances on a satisfactory basis.

MEDICAL VACANCIES.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column advertisements must be received not later than the first post on Wednesday morning.

ABERDEEN UNIVERSITY.—Additional Examiner for Graduation in (1) Physiology, (2) Zoology, (3) Geology, (4) Medicine, (5) Midwifery, and (6) Diploma in Public Health.

ARGYLL AND BUTE ASYLUM, LOCHGILPHEAD.—Assistant Medical Officer, resident. Salary, £100 per annum.

AYLESBURY: ROYAL BUCKINGHAMSHIRE HOSPITAL.—Resident Surgeon. Salary, £80 per annum, rising to £100.

BATH: ROYAL UNITED HOSPITAL.—House-Surgeon, resident. Salary, £80 per annum.

BIRKENHEAD BOROUGH HOSPITAL.—Junior Male House-Surgeon, resident. Salary, £80 per annum.

CANTERBURY: KENT AND CANTERBURY HOSPITAL.—House-Surgeon, resident. Salary, £80 per annum.

DEVONPORT: ROYAL ALBERT HOSPITAL.—Assistant House-Surgeon, resident.

Salary at the rate of £50 per annum.

DUDLEY: GUNES HOSPITAL.—Assistant House-Surgeon, resident. Salary at the rate of £40 per annum.

EAST SUSSEX COUNTY ASYLUM, Hellingly.—(1) Second Assistant Medical Officer. Salary, £90 per annum. (2) Third Assistant Medical Officer. Salary, £100 per annum. Both resident.

EVELINA HOSPITAL FOR SICK CHILDREN, Southwark.—Four Qualified Clinical Assistants; also Unqualified Clinical Clerks in the Out-patient Department.

HALIFAX ROYAL INFIRMARY.—Third House Surgeon, resident. Salary, £80 per annum.

KENSINGTON DISPENSARY, Church Street, W.—Vacancy on Honorary Medical Staff.

LIVERPOOL DISPENSARIES.—Assistant Surgeon, resident. Salary, £100 per annum.

LIVERPOOL EYE AND EAR INFIRMARY.—House-Surgeon, resident. Salary, £80 per annum.

MANCHESTER CORPORATION.—Fourth Medical Assistant at the Monsall Fever Hospital. Salary, £100 per annum.

MANCHESTER: OWENS COLLEGE.—Junior Demonstrator in Physiology. Stipend, £100 per annum. Salary, £150 per annum.

NEWCASTLE-ON-TYNE DISPENSARY.—Visiting Medical Assistant. Salary, £160 for first year, rising to £180.

NEWPORT AND MONMOUTHSHIRE HOSPITAL.—Assistant House-Surgeon, resident. Salary, £80 per annum.

NORTH STAFFORDSHIRE INFIRMARY, Hartshill.—House-Physician, resident. Salary, £100 per annum, rising £10 per year.

QUEEN CHARLOTTE'S LYING-IN HOSPITAL, Marblebone Road, N.W.—Assistant Resident Medical Officer. Salary at the rate of £50 per annum.

RYDE: ISLE OF WIGHT COUNTY HOSPITAL.—Resident House-Surgeon. Salary, £90 per annum.

UNIVERSITY COLLEGE HOSPITAL.—Resident Medical Officer.

WEST BROMWICH DISTRICT HOSPITAL.—Resident Junior House-Surgeon. Salary, £50 per annum.

WEST END HOSPITAL FOR DISEASES OF THE NERVOUS SYSTEM, Welbeck Street.—Medical Registrar. Honorarium, 50 guineas per annum.

WESTMINSTER HOSPITAL, S.W.—Administrator of Anaesthetics. Honorarium, £25 per annum.

WIGAN: ROYAL ALBERT EDWARD INFIRMARY.—Senior House-Surgeon, resident. Salary, £100 per annum.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—House-Surgeon, resident. Salary, £100 per annum.

YORK DISPENSARY.—Resident Medical Officer. Salary, £120 per annum.

MEDICAL APPOINTMENTS.

BALL, W., L.S.A. Second Assistant Medical Officer of the St. George's Union Infirmary.

BARRON, W. N., M.R.C.S., L.R.C.P. Lond., District Medical Officer of the Easthampstead Union.

CARSTAIRS, J. Lindley, M.A., M.R.C.S., C.M.G. Glasg., Outdoor Physician for North-Western District, Glasgow Maternity Hospital.

COOK, J. B., M.B., Ch.B.Vict., M.R.C.S., L.R.C.P. House-Surgeon to the Royal Alexandra Hospital for Sick Children, Brighton.

COPLANDS, Myer, M.B. Lond., Resident Medical Officer to the North-West London Hospital.

DAVIS, Henry, M.R.C.S., Anaesthetist to the French Hospital.

EBERHARD, C. C. J., M.R.C.S., L.R.C.P. Lond., District Medical Officer of the Skipton Union.

FLEETWOOD, Leonard, M. L.D.S.R.C.S. Eng., Honorary Surgeon-Dentist to the Chichester Infirmary.

FLETCHER, R. Bronward, M.B., Ch.B.Vict., Resident Medical Officer to St. Mary's Hospital, Manchester.

GAULD, G. O., M.B., B.S. Aberd., District Medical Officer of the Pocklington Union.

HARLOW, HARRY, L.R.C.P. Lond., M.R.C.S. Eng., Physician to the Chichester Infirmary, via Arthur Buckell, M.D. Lond.

LYLE, H. Willoughby, M.D., B.S. Lond., F.R.C.S. Eng., Honorary Assistant Surgeon to the Royal Eye Hospital, Southwark.

ROCH, Professor Anton, M.R.C.P., L.R.C.S. Ire. Lecturer on Hygiene to the Department of Technical Education and Agriculture for Ireland.

STEPHENS, J. W., M.R.C.S., L.R.C.P. Lond., District and Workhouse Medical Officer of the Cardigan Union.

SUTTER, R. E., M.D., M.S. Aberd., District Medical Officer of the St. Ives Union.

THOMPSON, A. F., M.B., Ch.B.Vict. House-Surgeon to the Manchester Royal Infirmary.

THORP, Wintred, M.B., B.S. Lond., House-Surgeon to the Kettering General Hospital.

YOUNG, G. E., M.D., M.Ch.B. U.I. Medical Officer of the Langley House Receiving Home of the Poplar Union.

DIARY FOR NEXT WEEK.

MONDAY.

Odontological Society of Great Britain 20, Hanover Square, W., 8 p.m.

TUESDAY.

Royal College of Physicians of London. 5 p.m.—Dr. J. L. Payne: On English Medicine in the Anglo-Saxon and Anglo-Norman Periods. (Fitz-Patrick Lecture I.)

Royal Medical and Chirurgical Society. 20, Hanover Square, W., 8.30 p.m.—Dr. Guthrie Rankin: The Treatment of Aneurysm by Subintimal Injection of Gelatine. Mr. D'Arcy Power, M.R.C.P., L.R.C.S. Eng., H. Colt: A case of Aneurysm of the Aorta treated by the introduction of Silver Wire, with a description of instruments invented and constructed by Mr. G. H. Colt to facilitate the introduction of wire into aneurysms; with demonstration by means of the Endiascope.

THURSDAY.

Royal College of Physicians of London. 5 p.m.—Dr. J. L. Payne: On English Medicine in the Anglo-Saxon and Anglo-Norman Periods. (Fitz-Patrick Lecture II.)

Guy's Hospital Medical School. 4 p.m.—Dr. E. W. Ainley Walker: Recent Work upon the Nature of Immunity (Gordon Lectures in Experimental Pathology).

POST-GRADUATE COURSES AND LECTURES.

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

Hospital for Consumption and Diseases of the Chest, Bromton, S.W.. Wednesday, 4 p.m.—Lecture on Some Unusual Auscultatory Phenomena met with in the Examination of the Lungs.

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

Medical Graduate College and Polytechnic, 22, Chancery Street, W.C.. Demonstrations will be given at 4 p.m. as follows:—Monday, skin; Tuesday, medical; Wednesday, surgical; Thursday, surgical; Friday, eye. Lectures will also be given at 5.15 p.m. as follows: Monday, Diseases of the Tongue; Tuesday, Preparation, Methods, and After-treatment in Operations; Wednesday, Meningitis in Childhood; Thursday, Diseases of the Tongue; Friday, Intrathoracic Tumours.

Mount Vernon Hospital for Consumption and Diseases of the Chest, 7, Fitzroy Square, W.. Thursday, 4 p.m.—Lecture on the Hygienic Treatment of Pulmonary Tuberculosis.

National Hospital for the Paralysed and Epileptic, Queen Square, W.C.. Tuesday, 3.30 p.m.—Lecture on Cases in the Wards.

Post-Graduate College, West London Hospital, Hammersmith Road, W.—Lectures will be delivered at 5 p.m. as follows: Monday, Glaucoma; Tuesday, Appendicitis; Wednesday, Medico-legal Relations of Insanity; Thursday, Renal Surgery; Friday, Electric Light Treatment.

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.

BELFRAGE.—On June 16th, at 1, Montague Place, W., the wife of S. Henning Belfrage, M.D., of a son.

BEST.—On June 11th, at the Firs, Waltham Cross, the wife of F. H. de Graves Best, M.R.C.S., L.R.C.P., of a daughter.

CAMPBELL.—On June 13th, at 26, Warkworth Street, Cambridge, the wife of Edward McClure Campbell, L.R.C.P., L.R.C.S. Eng., of a son.

COX.—On June 14th, at 2, Carlingford Villas, Radstock, the wife of Franklin Cox, M.R.C.S. Eng., L.R.C.P. Lond., of a daughter.

DICKSON.—At Brackeod, Loughgelly, on June 13th, the wife of D. Elliot Dickson, M.B., C.M. Eng., of a son.

LELAND.—On June 13th, at 77, Wimpole Street, Cavendish Square, W., the wife of Dr. A. B. Leland, of a daughter.

PHILLIPS.—On June 16th, at Hamilton House, Penge, S.E., the wife of Harry Harding Phillips, M.R.C.S. Eng., etc., of a daughter.

SIMPSON.—At Ealing, on June 14th, the wife of Lieutenant-Colonel R. J. S. Simpson, R.A.M.C., of a daughter.

MARRIAGES.

PINCHES-YEATS.—On June 13th, at St. Mary's Parish Church, Walmer, by the Rev. Canon Venn, William Hooper Pinches, Major R. A. M.C., son of the late William B. Pinches, of Highgate, to Lillian Edith, younger daughter of Richard Oliveron Yeats, of Babsdene, Walmer, Kent.

WILKINSON-STEVENS.—On June 11th, by licence at St. James's Church, Handsworth, by the Rev. T. S. Cave, M.A., assisted by the Rev. A. D. Wilkinson, M.A., James Howard Wilkinson, M.R.C.S. Eng., L.R.C.P. Lond., D.P.H. Oxon., to Elsie Maude Stevens, only daughter of James Stevens, Esq., The Larches, Handsworth.

DEATHS.

GALTON.—At his residence, Chelsea, on June 14th, John Charles Galton, M.A., M.R.C.S., F.Z.S., F.L.S., eldest son of the late Rev. J. L. Galton, Mector of St. Sidwell's, Exeter, aged 63.

JOLLEY.—On June 17th, 1903, at Cranbourne Cottage, Sutton Scotney, Hants, of typhilitis, James Henry Jolley, L.S.A., deeply regretted. Age 33.