

MEMORANDA:

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

FIRST MANIFESTATION OF HEART SYMPTOMS ABOUT THE AGE OF 40.

At the meeting of the Royal Medical and Chirurgical Society on May 31st, the President, Sir R. Douglas Powell, in his concluding remarks on Dr. Herringham's paper on the elasticity of the aorta, observed that varied arterial pressures usually began to tell on patients about the age of 40.

The truth and practical import of this observation seem to me to have been illustrated many years ago in the manner of death of that distinguished man, Dr. Thomas Arnold, at Rugby, in the year 1842.

Dr. Arnold was 46 years old at the time of his death, and always had much pleasure in active muscular exercise. He retired to rest in perfect health on the night of June 11th, and early next morning died in his first attack of angina pectoris.

The remarkable fact disclosed at the necropsy by Dr. Bucknill was the presence of only one coronary artery; this was of unusually small calibre, and very slightly atheromatous. The walls of the heart were thin, and a few atheromatous patches were found on the aorta. This one small coronary artery had kept the heart going until the age of 40 was well passed over.

Bognor.

JOHN C. THOROWGOOD, M.D., F.R.C.P.

AN OBSCURE CASE OF SCARLET FEVER.

AN able seaman, aged 20, serving as one of the crew of the Admiral's galley of H.M.S. *Alacrity*, reported himself ill on February 9th, 1903, when the ship was at Sandakan, on the east coast of Borneo. On examination his temperature was found to be 104.2°, pulse 120, eyes suffused, his tongue looking like a white strawberry, the pillars of the fauces and soft palate injected and swollen; a red rash composed of small red spots scattered over a subcuticular flush was uniformly spread over the trunk and upper extremities. He complained of a heavy feeling in the head. There had been no vomiting, and he only felt ill the day before placing himself in the sick report. I thought the case would probably turn out to be one of scarlet fever, and decided to land him at once.

Causation.—I went into the history of the case to find out how he could have contracted the disease, and found that (1) he had not been on shore since January 14th, except alongside jetties in his boat; (2) he had had no washing done on shore; (3) he received a home (English) letter once a month, but in these letters no mention had been made of any illness among his relatives. The incubation period of this disease is so well known to be less than a week, in fact often two days, that it is usually an easy matter to trace the infection.

Differential Diagnosis.—(1) He had eaten no tinned foods, no fish, and had been taking no drugs. (2) In "dengue fever," single cases in a ship like this do not occur.

I inquired from the authorities on shore if there would be any objection to land a case of scarlet fever, but as the disease had occurred before in the Colony, no objection was offered. I landed him the same forenoon, and the principal medical officer, Dr. H. Meredith Harrison, of the British North Borneo Company, agreed with me that the case presented the features of scarlet fever. The patient did not know if he had suffered from the disease before or not.

After-history.—He remained in hospital at Sandakan forty-five days. The temperature fell to normal at the end of the first week, and desquamation followed. Dr. Harrison reported the case to be scarlet fever. During convalescence he contracted and suffered from an attack of remittent malarial fever.

He rejoined this ship on April 10th, and I examined his urine and it showed nothing abnormal.

I record this case because (1) scarlet fever is rare in the tropics; (2) I have been unable to trace how the infection can have taken place; and (3) no other cases occurred in the ship.

ROBERT J. MACKEOWN,
Surgeon, H.M.S. *Alacrity*.

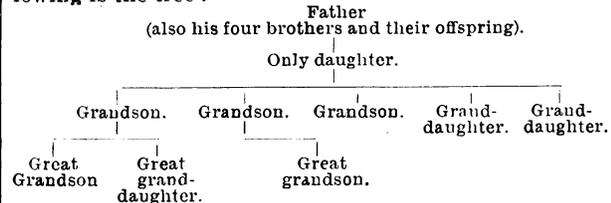
DIGITAL DEFORMITIES.

The genealogical tree of the family with supernumerary digits mentioned by Dr. H. D. Hey in the BRITISH MEDICAL

JOURNAL of May 28th reminds me of a family, five members of which in three generations I was able to show at the Liverpool Medical Institution a year ago. In them the deformity was a *deficiency* of one, two, or all of the phalanges of one or more fingers. In the cases seen the deformities were symmetrical in the different individuals, but were only the same in two; the thumbs were always unaffected.

The family came originally from Norfolk, and the old lady who headed the group told me with pride that their case had often been reported (I gathered in the lay press), and ascribed their plight to a curse laid involuntarily by her grandfather upon his wife, then pregnant. In a rage at some trivial theft he had invoked Heaven that the thief's children might be fingerless from generation to generation, and the culprit being his own wife, he was subsequently satisfied, if not gratified.

Which of the two, the curse or the deformities, is *post* and which *propter* may be open to doubt. The more interesting point is whether such cases show true heredity, or whether maternal impressions, despite the discredit thrown upon their probability, may play a part in their production. The following is the tree:



There were several others in the third generation unaffected, while the last three were unmarried. The fourth generation were children.

HUBERT ARMSTRONG, M.D. Vict.,
Liverpool.

TREATMENT OF OPHTHALMIA NEONATORUM.

A TREATMENT of this disease which does not get the attention amongst the profession it deserves is the instillation of one drop of nitrate of silver solution (gr. j ad ʒj) each hour in the daytime, and every two hours of a night, into the eye, the discharge having first been gently washed away with boracic lotion, and the edges of the eyelids anointed with weak boracic ointment before the child is put back to bed.

I consider that this treatment would cure most of the cases of this disease, and is greatly to be preferred to the painting of the conjunctiva with strong caustic solutions (generally sol. argent. nitrat. gr. x to gr. xx to the ounce), which leaves behind it intense congestion of the eyelids, caused by their manipulation, the baby's crying, and the application of a great irritant (which causes too much reaction).

Should the eyelids be actually everted for the painting, it does much harm by causing secondary congestion.

Forest Gate, E.

ALBERT CORNER.

THE EARLY DETECTION OF RÂLES IN PHTHISIS.

THE first sign of commencing phthisis consists often of fine râles in the suprascapular region. As in this situation the breath sounds are fainter than in any other, and adventitious sounds are correspondingly difficult to hear, I have frequently, with great success, tried to verify the presence of doubtful râles by the simple device of making the patient lie on the affected side, with the arm drawn downwards and forwards, so as to leave as large a space as possible above the scapula. I have never seen mentioned the fact—which will be obvious to every observer who will make the experiment—that in this position the breath sounds, and with them the adventitious sounds, are very much louder over the lung in the inferior position than over the other. Only to-day I fancied I heard the finest râles over the left apex posteriorly while the patient was sitting up; but the respiratory murmur was very faint in this situation, and the supposed râles were fainter still. I laid the patient on her left side and listened again; the inspiration was quite loud and clear. There were no râles, and I enjoyed confidence instead of suffering the fear that on my next examination the fact that my patient had phthisis would be manifest.

The same method may be applied to crepitation at the base in early pneumonia, but does not in this case supply such a felt want.

CHARLES HAZLITT UPHAM, M.R.C.S., L.R.C.P.
Lyttelton, New Zealand.

THE ROYAL SEA-BATHING HOSPITAL, MARGATE.

The Royal Sea-Bathing Hospital, Margate, founded in 1791, is the only institution in the United Kingdom comparable to those at Berck and St. Pol, inasmuch as it is not a convalescent home, but a hospital for the treatment of tuberculosis, especially tuberculosis of bones, joints, and glands, by appropriate surgical means. The hospital contains 150 beds, and the average daily number of patients is 138.6; the total number of in-patients in 1903 was 530. Of these, 127 suffered from diseases of the joints, 104 from caries of the bones, 109 from tuberculous disease of the lymphatic glands—in most cases cervical—and 154 from tuberculous lesions of other organs, including 59 cases of phthisis. The number of operations was 264, 98 being for removal of lymphatic glands. Of the 530 patients treated during the year, the report states that 77 were cured and 223 were greatly benefited, so that about 56 per cent. were treated successfully. The mean duration of residence for each patient in the hospital was seven weeks (seventy-six days). The by-laws state that the usual term of residence of an in-patient in the hospital shall be four weeks, but the visiting surgeon has power to extend the term in suitable cases. This power is commonly exercised and patients kept on for five or six months, and even for a year or more. There are some free patients, but the majority (called ordinary patients) must be provided with a subscriber's letter, and must pay, adults 12s. and children 8s. a week. Full-pay patients are charged £1 10s. od. a week, and the average cost of an occupied bed, calculated on the ordinary expenditure, was in 1903 £1 5s. 10d. At the end of eight weeks an ordinary patient must present a fresh letter or pay the charges of a full-pay patient.

Half the patients are adults—men and women—and half are children—boys and girls. Patients who are confined to bed are, as far as possible, kept in a verandah, with a freely open front (Fig. 8) the beds are only taken into the wards in the very worst weather. The verandah forms three sides of a square in the middle of which there is a garden, the men, women and children being separated by screen partitions.

The meals of the patients are carried out to them, and they never leave the verandah except for bathing purposes. There are seventeen bath-rooms with hot and cold sea water, and in summer convalescents bathe in the sea. When in bad weather they have to sleep in the wards, all the windows on both sides are left open, so that there is a thorough draught. This open-air treatment is considered very beneficial. The patients get five meals a day: early morning breakfast with tea or milk and eggs or bacon; lunch of bread and butter; dinner of meat, vegetables, and pudding; tea with bread and butter, and supper of bread and cheese and beer.

The hospital is an old-fashioned stone house surrounded by grounds of 8 acres and situated at the edge of the sea with the beach immediately beyond (Fig. 9.) Those patients able to leave their beds, sit out in the garden or on the beach all day long. Owing to the beds being moved out into the verandah, the wards have an unsmart appearance, and the white deal boards, which are merely washed and not paraffined, add to this impression. Still the great importance of fresh air for the patients is here recognized as paramount to every other consideration. The honorary staff consists of three surgeons and an assistant-surgeon. There are two resident surgeons. There is a general staff of fifty persons.

The general results of the treatment vary with the stage of disease at which the patient enters the hospital; the earlier the happier the results, and the proportion of cases in which cure or satisfactory improvement is obtained would be largely increased were more patients to enter during the early stages. In 1901, when an inquiry was instituted concerning 464 cases, it was found that only 85 patients were sent in during the first six months of their illness while 119 were admitted four or more years after the first symptoms of tuberculosis became apparent.

The Senior Surgeon to the hospital reports that after fifteen years' constant work in the wards of the hospital he is convinced that the knife plays a very subsidiary part to climatic and general influences. In many cases the magnitude and shock of the operation so diminish the vitality and power of resistance of the patient that the tubercle bacilli are enabled to start fresh mischief elsewhere. When operations become absolutely necessary, progress is much more rapid when patients can live an outdoor life in the sea air. The great principle to instil into the public is that patients should enter the hospital as soon as the very earliest symptoms of the disease are observed. This applies equally to pulmonary

tuberculosis and tuberculosis of the joints, bones, and glands.

The hospital is not open to children under 6 years of age, and in this we find a serious mistake. At the French hospitals they are received as early as 2, and it is at this age that so many children with diseases of the joints or rickets may be saved permanent deformity by speedy operation and after-treatment in good surroundings. At 6 years a child with tuberculous disease is often past cure. If preventive measures were taken and children in their earliest years were admitted, the hospital would eventually be able to dispense with its grown-up patients, for there would be none; and, indeed, in England, where so much is done for adult sufferers from tuberculosis and little for children, it seems regrettable that the whole of the accommodation at Margate should not be devoted to them. Great improvement in the physique of the nation might thus be effected. At present the hospital is handicapped by the beds being blocked by a large proportion of chronic and unbenefitable cases—patients, as the report states, who could be equally well cared for at many other institutions for incurables and convalescents.

It is time that the public, who, with the worthiest intentions, yet tie the hands of the hospital authorities by the letter system, should be educated to know that there are such things as prophylactic measures, and that by prophylactic means a hundredfold more good can be done than by tinkering cases already past permanent cure.

MEDICAL NEWS.

The annual dinner of the Poor Law Officers Association of England and Wales will be held at the Trocadero Restaurant on June 28th at 7.30 p.m.

The Prize Distribution of the Medical School of St. Thomas's Hospital will be held in the Governors' Hall of the Hospital on Friday, 24th June, at 3 p.m. Sir Thomas Barlow, Bart., K.C.V.O., M.D., will give an address, and a garden party will follow in the grounds.

NORTHAMPTON GENERAL HOSPITAL.—Two new wings of this hospital were recently declared open by Earl Spencer, Lord-Lieutenant of Northamptonshire. They replace portions of the fabric dating from the eighteenth century. Towards the cost of the new additions, which amounts to £32,000, donations of £1,000 each have been received from Lord Spencer, the Marquess of Northampton, Lady Wantage, Sir Henry Burdett, and several others.

THE VIVISECTION QUESTION IN GERMANY.—On the occasion of the presentation of the Budget for the Universities in the Bavarian Chamber of Deputies, the Minister, Dr. Von Wehler, referred to a petition which had been addressed to the legislature, asking for the suppression of vivisection. He pointed out that experiments on animals were necessary for purposes of medical research. His statement was received with approval on both sides of the House.

HOMOEOPATHY IN BAVARIA.—It may be remembered that some time ago the Bavarian Chamber of Deputies in a moment of temporary aberration voted in favour of the establishment of a Chair of Homoeopathy in one of the Universities. Recently, in the course of a discussion on the Education Estimates, the Cultus-Minister took occasion to point out that as homoeopathy has no scientific foundation, there is nothing in it that can suitably be made the subject of instruction. The medical councils of all the Bavarian Universities expressed opinions strongly adverse to the proposal.

INTERNATIONAL CONGRESS OF TUBERCULOSIS.—The fifth meeting of this International Congress will be held at Paris from October 2nd to 7th, 1905. It will comprise a medical and a social section; in each of these three subjects will be proposed for discussion. The programme of the medical section is as follows: The treatment of lupus by the new methods; the early diagnosis of tuberculosis by the new methods; comparative study of the different forms of tuberculosis. The social section will discuss: The etiological factors of tuberculosis; the value of the different methods of treatment of tuberculous patients; optional assurance and mutual aid in relation to the struggle against tuberculosis. There will also be a technical section or museum in which will be exhibited histological, pathological, and bacteriological specimens and preparations; statistics, plans of hospitals, sanatoria, and dispensaries; publications and documents relative to antituberculosis leagues and institutions.

ASSOCIATION NOTICES.

NOTICE OF QUARTERLY MEETINGS OF COUNCIL
FOR 1904.

MEETINGS of the Council will be held on Wednesdays, July 6th, and October 19th, in the Council Room of the British Medical Association, 429, Strand, London, W.C.

ELECTION OF MEMBERS.

ANY candidate for election should forward his application upon a form, which will be furnished by the General Secretary of the Association, 429, Strand. Applications for membership should be sent to the General Secretary not less than thirty-five days prior to the date of a meeting of the Council.

LIBRARY OF THE BRITISH MEDICAL
ASSOCIATION.

MEMBERS are reminded that the Library and Writing Rooms of the Association are fitted up for the accommodation of the members in commodious apartments, at the office of the Association, 429, Strand. The rooms are open from 10 a.m. to 5 p.m. Members can have their letters addressed to them at the office.

GUY ELLISTON, *General Secretary*.

BRANCH MEETINGS TO BE HELD.

BATH AND BRISTOL BRANCH: BATH DIVISION.—The annual meeting of this Division will be held at the Royal United Hospital, Bath, on Monday, June 20th, at 6.15 p.m., Mr. R. J. H. Scott in the chair, for the purpose of electing officers, members of the Branch Council (there are five vacancies), and for such other business as may be done at an annual meeting.—W. M. BEAUMONT, 4, Gay Street, Bath, Honorary Secretary.

BATH AND BRISTOL BRANCH: BATH AND TROWBRIDGE DIVISIONS.—A meeting of these Divisions will be held at the Royal United Hospital, Bath, on Monday, June 20th, at 6 p.m., for the purpose of appointing a Representative of the Divisions in Representative Meetings of the Association.—W. M. BEAUMONT, Bath, J. TUBB THOMAS, Trowbridge, Honorary Secretaries.

BIRMINGHAM BRANCH: COVENTRY AND TAMWORTH AND NUNEATON DIVISIONS.—The joint annual meeting of these Divisions will be held at the Coventry and Warwickshire Hospital on Wednesday, June 23rd, at 3 p.m. Agenda: 1. Election of a Representative for the Annual Representative Meeting. 2. Instructions to be given to such Representative on the matters arising at the Representative Meeting. (These matters are fully set out in the SUPPLEMENT to the BRITISH MEDICAL JOURNAL of May 7th; members will probably find it a convenience to bring that SUPPLEMENT with them.)—F. L. HARMAN BROWN, Clive House, Warwick Road, Coventry, Honorary Secretary.

BIRMINGHAM BRANCH: WEST BROMWICH DIVISION.—The annual meeting of this Division will be held in the Board Room of the West Bromwich District Hospital on Wednesday, June 23rd, at 4 p.m. Business: To elect officers. 1. Two Representatives on Branch Council. 2. Ordinary members of Executive Committee. 3. Representative in Representative Meetings of the Association. To receive report from Executive Committee. To consider the business of Annual Representative meeting. To consider memorandum from Exeter Division. Other business.—H. B. W. PLUMMER, 54, Birmingham Road, West Bromwich, Honorary Secretary.

BORDER COUNTIES BRANCH.—The annual meeting of this Branch will be held on Thursday, June 30th, in the County Hotel, Carlisle, at 3 p.m. Business: 1. Reports of election of new officers. 2. Election of six members of Council. 3. President's address.—FRANCIS R. HILL, 62, Warwick Road, Carlisle, Honorary Secretary.

CAMBRIDGE AND HUNTINGDON BRANCH.—The annual meeting of this Branch will be held at Cambridge on Thursday, June 30th. Members desiring to make communications should write to the Honorary Secretary as soon as possible.—F. E. APTHORPE WEBB, 25, Newmarket Road, Cambridge, Honorary Secretary.

EAST ANGLIAN BRANCH.—The annual meeting of this Branch will be held at Lowestoft, on Thursday, June 23rd. Members wishing to read papers or show cases should communicate with Dr. Gutch, Ipswich, as soon as possible.—B. H. NICHOLSON, M.B., East Lodge, Colchester, Honorary Secretary.

EDINBURGH BRANCH.—The annual meeting of this Branch will be held in the Hall of the Royal College of Physicians (No. 9, Queen Street) on Friday, June 24th, at 4.15 p.m. Business: Election of office-bearers, etc.—NORMAN WALKER, A. LOGAN TURNER, Edinburgh, Honorary Secretaries.

EDINBURGH BRANCH: NORTH-EAST EDINBURGH DIVISION.—The annual meeting of this Division will take place on Tuesday, June 14th, at 3 p.m., in the Royal College of Physicians, 9, Queen Street.—G. KEEPIE PATRICKSON, 19, Albany Street, Edinburgh, Honorary Secretary.

EDINBURGH BRANCH: SOUTH-EASTERN COUNTIES DIVISIONS.—The annual meeting of this Division will be held in the King's Arms Hotel, Melrose, on Thursday, June 16th, at 3 p.m. Business: (1) Election of office-bearers. (2) Consideration of motion, of which Dr. Hamilton (Hawick) has given notice, "That the Division invites all the members of the Edinburgh Branch to meet at Hawick in July"; and of a further motion, "That, alternately, the annual meeting of the Branch be held in one of the county towns within its area, and that it be held next year at Hawick." (3) Consideration of agenda of the Annual Representative Meeting to be held at Oxford, in order to instruct the Representative of Division what lines to follow when the various questions come under discussion. (4) Consideration of the Contract Practice inquiry issued by the Medico-Political Committee.—W. HALL CALVERT, The Laurels, Melrose, Honorary Secretary.

GLASGOW AND WEST OF SCOTLAND BRANCH.—Nominations for the office of Representative of this Branch on the Council (the Branch electing two), each signed by three members, must be in the hands of the Honorary Secretary on or before June 15th.—JAS. H. NICOLL, 4 Woodside Place, Glasgow, Honorary Secretary.

LANCASHIRE AND CHESHIRE BRANCH.—Preliminary notice. The annual meeting of this Branch will be held in Blackburn on the afternoon of Thursday, June 30th. The Honorary Secretary will be pleased to hear from any member desirous of reading papers, etc.—T. ARTHUR HELME, 3, St. Peter's Square, Manchester, Honorary Secretary.

LANCASHIRE AND CHESHIRE BRANCH: MANCHESTER AND LIVERPOOL DIVISIONS.—*Oxford Meeting*: Arrangements are being made to have a special car attached to a train leaving London Road for Oxford on Monday, July 25th. Members desirous of joining the party will help by sending their names to Dr. Bagley, 229, Clowes Street, Manchester, S.E., before July 1st, stating whether morning or afternoon will suit them best, and which route they prefer. The Great Central is the quickest, leaving London Road at 10 a.m., 12.30 p.m., and 2.15 p.m.; the Great Western, 12 noon, and 2.10 p.m.

LANCASHIRE AND CHESHIRE BRANCH: ROCHDALE DIVISION.—A joint meeting of the Bury and Rochdale Divisions will be held at the Dispensary, Knowsley Street, Bury, on Thursday, June 23rd, at 4.15 p.m. Business: 1. The election of Joint Representative for the Annual Representative Meetings. 2. Consideration of notices of motions to be discussed at the annual meeting. 3. Consideration of the revised draft of Medical Act Amendment Bill as published in the SUPPLEMENT of the BRITISH MEDICAL JOURNAL of May 28th.—W. C. BURNS, M.B., A. B. MCMASTER, M.D., Joint Honorary Secretaries.

LEINSTER BRANCH: DUBLIN DIVISION.—The annual general meeting of this Division will be held in the Royal College of Physicians at 5 p.m. on Wednesday, June 22nd.—L. G. GUNN, M.D., 43, Fitzwilliam Square, Honorary Secretary and Treasurer.

LEINSTER AND SOUTH-EAST OF IRELAND BRANCHES.—Nomination of candidates for election as members of the Central Council must be in hands of undersigned on or before June 13th.—ARTHUR H. WHITE, Derrybawn, Rathgar, Dublin, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: KENSINGTON DIVISION.—The annual meeting of this Division will be held at the Kensington Town Hall, High Street, Kensington, at 5 p.m., on Wednesday, June 15th, Dr. H. Campbell Pope, in the chair. Business: (1) To elect officers for 1904-5 as follows: Chairman, Vice-Chairman, Secretary and Treasurer, four Representatives of Division on Branch Council, seven Ordinary Members of Executive. (2) To elect the Representative of the Division in Representative Meetings of the Association. (3) To receive the annual report of the Executive Committee. (4) To consider the business of the Annual Representative Meeting. (5) To make new rules, or alter or repeal existing rules. (6) To receive—(a) Result of voting for Medical Defence Scheme. (b) Communication from Medico-Political Committee. (c) Communication from Ethical Committee.—G. CRAWFORD THOMSON, M.D., 111, Sinclair Road, West Kensington, W., Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: RICHMOND DIVISION.—The annual meeting of this Division will be held at the Greyhound Hotel, Richmond, on Wednesday, June 22nd, at 8.45 p.m. Agenda: 1. To elect officers, the Representatives of the Division on the Branch Council, and the members of the Executive Committee. 2. To elect the Representatives of the Division in Representative Meetings of the Association. 3. To receive the annual report of the Executive Committee. 4. To consider the business of the Annual Representative Meeting.—J. R. JOHNSON, 3, Ellerker Gate, Richmond, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: WESTMINSTER DIVISION.—A meeting of this Division will be held at 20, Hanover Square, on Tuesday, June 14th, at 5 p.m.: Sir Isambard Owen will preside. Agenda: 1. Minutes. 2. To elect one member on Executive Committee. 3. To consider the business of the Annual Representative Meeting (notices of motion have been published in the BRITISH MEDICAL JOURNAL of May 7th, page 118). 4. To consider the question of the Association adopting a scheme of medical defence. 5. Any other business.—W. KNOWSLEY SIBLEY, M.D., Honorary Secretary.

NORTH LANCASHIRE AND SOUTH WESTMORLAND BRANCH.—The annual meeting of this Branch will take place at the County Hotel, Ulverston, on June 20th, at 3 p.m. There will also be a joint meeting of the Furness and Kendal Divisions to elect their Representative. Members willing to show cases, specimens, etc., are requested to communicate as soon as possible with the Honorary Secretary, A. S. BARLING, High Street, Lancaster.

NORTH WALES AND SHROPSHIRE BRANCH.—The annual meeting will be held at Shrewsbury on or about the 7th day of July. Members having papers to read or cases to communicate are requested to notify either of

the Secretaries on or before June 25th.—W. JONES MORRIS, Portmadoc; H. JONES ROBERTS, Penygroes; H. H. B. MACLEOD, Clive House, Shrewsbury, Honorary Secretaries.

SOUTH-EASTERN BRANCH.—The sixtieth annual meeting of this Branch will be held at Grand Hotel, Eastbourne, on Wednesday, June 22nd, at 2.15 p.m. Mr. J. H. Ewart (President-elect) kindly invites members to lunch at the hotel from 1 to 2 p.m. Agenda: In addition to the business of an ordinary meeting. 1. To receive the report of the election of new officers, who shall thereupon take office. 2. To receive the report of the Council on the affairs of the Branch and the annual financial statements. 3. To make new rules or alter or repeal existing rules (if so desired). 4. Dr. Larking gives notice that he will move: That in the opinion of this meeting the present South-Eastern Branch should be divided into two Branches separated by a line running roughly between London and Hastings, and that the opinion of the Divisions concerned be obtained on the question. After the meeting drives will be arranged to Beachy Head and Pevensey Castle. Dinner at the hotel at 6.45 p.m., charge 6s. 6d. (wine will be provided by the local members). Those who propose to be present at lunch or dinner are requested to signify their intention to Dr. Merry, 2, Chiswick Place, Eastbourne, not later than Monday, June 20th.—T. JENNER VERRALL, 97, Montpellier Road, Brighton, Honorary Secretary.

SOUTH-EASTERN BRANCH: CANTERBURY DIVISION.—The annual meeting of this Division will be held at the Kent and Canterbury Hospital, on Thursday, June 23rd, at 4 p.m., Dr. Gogarty in the chair. Agenda: 1. To read minutes of the last meeting. 2. Election of officers. (a) Chairman; (b) Vice-Chairman; (c) Representative on Branch Council; (d) Honorary Secretary and Treasurer; (e) Executive Committee (additional member). 3. To consider a communication from Dr. Gosse. 4. To consider the proposed resolutions and other business for the forthcoming Representative Meeting at Oxford (*vide* SUPPLEMENT, May 7th, 1904). 5. To consider existing rules and discuss whether any alterations are necessary. 6. To consider a communication from the Exeter Division of the South-Western Branch. 7. Any other business. 8. Possibly an address by Mr. Smith Whitaker, Medical Secretary of the British Medical Association.—A. R. HENCHLEY, 1, London Road, Canterbury, Honorary Divisional Secretary.

SOUTH-EASTERN BRANCH: FAVERSHAM DIVISION.—The annual meeting of this Division will be held at the Cottage Hospital, Faversham, on Thursday, June 16th, at 3 p.m. Agenda: 1. Confirmation of minutes of last meeting. 2. Time and place of next meeting. 3. Annual report of the Honorary Divisional Secretary. 4. Election of the following officers: Chairman, Vice-Chairman, Secretary and Treasurer, Member of Branch Council, Executive Committee. 5. A communication from the Exeter Division. 6. To consider the business of the Annual Representative Meeting. 7. Paper by Dr. S. R. Alexander. 8. Any other business. All members of the South-Eastern Branch are invited to attend these meetings and to introduce professional friends.—WILLIAM GOSSE, Westdene, Sittingbourne, Honorary Divisional Secretary.

SOUTH MIDLAND BRANCH.—The annual meeting of this Branch will be held at the New Schools, Sheep Street, Winslow, Bucks, on Thursday afternoon, June 16th, under the presidency of Dr. Kennish. The President requests the pleasure of members' company to luncheon at the Bell Hotel, Winslow, at 1.30 o'clock, and will be obliged by the favour of a reply, addressed to himself, not later than the morning of June 12th. Agenda: Minutes of autumnal meeting. New members elected by Council. Letters and communications. Papers and cases. President's address. Mr. Whitelocke (Oxford). Some Cases of Ectopic Gestation treated by Operation. Mr. Savory (Bedford): Case of Benign Papilloma of Renal Pelvis, Haemorrhax, Nephrectomy, Recovery. Dr. Milligan (Northampton): Case of Acute Perforative Appendicitis in which Abdominal Section had to be performed a second time, with remarks generally on Appendicitis.—E. HARRIES JONES, 45, Sheep Street, Northampton, Honorary Secretary.

SOUTH-WESTERN BRANCH.—The annual meeting of this Branch will be held on Tuesday, June 21st, at the Public Hall, Paignton, at 3 p.m., when Dr. Thompson will resign the chair to Dr. J. Alexander, who will deliver his inaugural address. The report of the Branch Council and annual financial statement for the year 1903-4 will be presented to the meeting, and the officers of the Branch be elected for the year 1904-5. The Branch Council will submit to the meeting for approval a code of rules to regulate procedure in ethical matters, and will propose the following alterations in Rule 15, Sections C and D: Section C to read—Exhibition of Clinical Cases. Section D to read—Reading of Papers. Luncheon, by kind invitation of the President-elect, will take place from 1 p.m. to 2.30 p.m., at the Public Hall. After the meeting a garden party will be held at the Queen's Park, when the President and Mrs. Alexander will receive members and their wives. The annual dinner will be held at the Public Hall at 6.45 p.m. Tickets (exclusive of wine), 6s. 6d.; after which a short play by amateurs will be given. All members who wish to stay over the next day have leave to play golf on the Churston Links by the kind consent of the Committee of the Churston Golf Club. All members attending the meeting will be honorary members of the Paignton Club by kind consent of the committee. The Esplanade and Gerston Hotels afford good accommodation for members wishing to stay the night. The Honorary Secretary will be obliged if those members who purpose attending the dinner will inform him on or before June 14th, and at the same time forward the amount of the dinner ticket.—G. YOUNG EALES, 1, Matlock Terrace, Torquay, Honorary Secretary.

STAFFORDSHIRE BRANCH.—The annual meeting of this Branch will be held at Wolverhampton, on Thursday, June 16th.—E. PETGRAVE JOHNSON, Brook Street, Stoke-on-Trent, Honorary General Secretary.

WEST SOMERSET BRANCH.—The annual meeting of this Branch will be held at the Crown Hotel, South Petherton, on Tuesday, June 28th, at 12.30 p.m., under the presidency of Mr. A. W. Sinclair. Agenda: Minutes of last meeting. Annual report of Council. Treasurer's report. Election of President-elect. Election of other officers. Election of Ethical Committee. Ethical case: Report of Committee on case recently before them. Resolution: The following will be proposed: "That members of the

Council attending ordinary meeting of the Council at Taunton shall receive their second-class return railway fare." President's address on Neurasthenia. Luncheon will be served at the Crown Hotel at 1.30 p.m.—W. B. WINCKWORTH, Sussex Lodge, Taunton, Honorary Secretary.

YORKSHIRE BRANCH.—Preliminary Notice.—The annual meeting of this Branch will be held at Leeds on Wednesday, June 22nd. Members wishing to read papers or show cases or specimens are requested to communicate with the Honorary Secretary as soon as possible. Annual dinner at 6.30.—ADOLPH BRONNER, 33, Manor Row, Bradford, Honorary Secretary.

SPECIAL CORRESPONDENCE.

MANCHESTER.

The Chair of Pathology and Pathological Anatomy in the University.—Royal Infirmary.—Citizens' Life-Saving Classes.—Insanitary Houses in Salford.

LESS than a quarter of a century ago in 1881 Dr. Julius Dreschfeld, the present Professor of Medicine in Owens College and in the University, was nominated Professor of Pathology, and many who were students at and after that period remember with what success that important department of medicine was taught. In 1891, the Proctor trustees, by a timely gift, enabled the Council of the College to endow the Chair, and Professor Delépine was elected. Since then much has happened. The subject has greatly extended. Bacteriology has made great strides, both in its application to disease and to the prevention of disease. Moreover, the subject of public health has grown greatly and demands much time on the part of those who have to teach it and to meet the requirements of corporations. The Council of the University has now taken a step of great importance in the interest of the College and the University on the one hand, and certain corporate institutions on the other. A new Chair of Comparative Pathology and Bacteriology has been founded, and Professor Delépine is the first occupant. He is also Director of the new public health laboratories which are being erected near the new site of the Royal Infirmary, as he was of the older public health laboratory on the Stanley Grove Estate. This arrangement still leaves the subject of pathology and pathological anatomy, as it is taught to students of medicine, to be provided for. It is proposed to appoint a Professor of Pathology and Pathological Anatomy. There is more, however, it appears, in contemplation. Should an agreement be come to between the College and the Royal Infirmary, the professor would have certain duties in connexion with the pathological department of the infirmary, whereby he would be responsible for the conduct of necropsies and other matters incidental thereto.

Progress is reported in respect of the new infirmary. The Board of Management has referred the tenders for the work of clearing the Stanley Grove estate to the Estates Subcommittee to accept a tender and proceed with the operations. The Board has accepted estimates for a chapel to be built in connexion with the hospital at Cheadle at a cost of £3,122. The infirmary has received a legacy of £1,000 under the will of the late Mr. Frederick Midgley, of Manchester and Huddersfield, and another of £500 under the will of Mr. James Jewitt.

It appears that the Manchester Corporation was the first, and is still the only corporation which has arranged citizens' life-saving classes. The number of pupils exceeds 500, and the tuition has been given at the public baths. Instructors and books are provided free by the Corporation. Nearly 300 of those who were trained acquitted themselves successfully. The object of the training is to encourage the cultivation of the art of swimming. The Corporation offers special inducements to scholars, and awards a free ticket to those who succeed in gaining the Life-saving Society's proficiency certificate. Special advantages are also offered to policemen and firemen—qualification for the Life-saving Society's proficiency certificate entitles them to free admission to the baths as long as they remain in the employment of the Corporation.

The past has an inveterate tendency to remain in the present, and of this there are few more striking examples than those that exist in connexion with insanitary property, which is not only an evil in itself, but a source of danger to the community. The Health Committee of Salford recommended the Council of the borough to issue a closing order in respect of certain dwelling-houses, on the ground that they were unfit for human habitation. A sharp distinction must be drawn between a "closing order," and one for demolition. What was asked for was a closing order to

quently performed at a nursing home belonging to a Mrs. Palmer. The operation was successful, but subsequently the patient experienced further discomfort. Being then at Brighton, she consulted Dr. Calvert, who advised another operation, which was performed at the Sussex Hospital. It was then found that an abscess had been caused by a mattress sponge which had not been removed after the first operation. After this operation the plaintiff rapidly recovered. She now brought this action to recover the expenses to which she had been put and for damages for the alleged negligence.

After the plaintiff had given evidence, Dr. Calvert was called. He was of opinion that sponges should be counted both before and after the operation by the surgeon as well as the nurse. This was the practice at the Sussex Hospital. In cross-examination, he said that he understood that many surgeons accepted the counting of the nurse, but this was not his practice.

At the conclusion of the plaintiff's case, Mr. Dickens submitted that there was no evidence of negligence to go to the jury. The Judge having ruled that the case must proceed, Mr. Dickens, in opening the case on the part of the defendant, drew attention to the fact that although on September 20th the plaintiff had written to the defendant expressing gratitude and thanks, a solicitor's letter asking for damages was sent on November 9th. It was clear that the defendant had performed a very difficult operation with a satisfactory result, as the plaintiff's medical witnesses had admitted that she would have died if the operation had not been performed. Coming to the alleged negligence, the suggestion was that the defendant should have counted the sponges herself. He submitted that an operating surgeon was not called upon to perform this part of the work, as his attention should be concentrated on the operation and condition of the patient. He would call evidence in support of this view. Here the defendant had left the counting of sponges to a skilled nurse, and he would submit to the Court at the proper time that the defendant was not responsible for the acts of the nurse.

At this point his Lordship intimated that this was a question for the jury.

Miss Mary Thorne gave evidence in support of counsel's opening statement. She said that she had held various hospital appointments between 1895 and 1898, and since 1898 had been in private practice at 10, Nottingham Place. She had a cheap day for poor patients, and it was on one of these days that Miss Byrne visited her in April, 1903. She found that Miss Byrne was suffering from a large tumour in the pelvis. On April 26th defendant saw Miss Byrne in consultation with Miss Aldrich-Blake, when it was considered justifiable to operate. The patient was sent to a home belonging to Mrs. Palmer, in whom the defendant had confidence. The defendant asked Mrs. Palmer to make arrangements as she had done for previous operations. The operation involved the removal of a large abscess which was adherent to the uterus and the tube leading to one of the ovaries. Two large mattress sponges and twenty-four swab sponges were provided. Mrs. Palmer was in charge of the sponges, and handed them as required. After the operation defendant twice asked Mrs. Palmer whether the sponges were correct. Receiving satisfactory answers she closed the abdomen in the usual way. The plaintiff made an excellent recovery. In defendant's view it was sufficient to leave the counting of the sponges to a competent nurse. She had never seen it done by the surgeon, though she had seen it done herself during the last few months. She had received no fees for the operation, but had charged Miss Byrne 17s. 6d. for three prior attendances.

In cross-examination, witness said that she left the conduct of the case to the Medical Defence Union. She had checked the number of instruments used, but not the number of sponges. She took out all the sponges which she saw. It was difficult to distinguish sponges in the abdominal cavity when they were wet.

In re-examination, defendant explained that Mrs. Palmer carried on a perfectly independent business as superintendent of a nursing home. She had no idea until she came into court that the sponge left in was a mattress sponge.

By the Court: The surgeon has control of every one in the operating room. The sponges would be counted by the nurse when put into the sterilizer.

Dr. W. S. A. Griffith, who had heard Miss Thorne's evidence, said that the operation was one of unusual difficulty. The practice as to counting sponges varied. Sometimes, where an emergency operation was performed, and the operator had assistants to whom he was unaccustomed, he would have to count the sponges himself. In other cases, however, it was to the interest of the patient to delegate the duty to an experienced nurse. In cross-examination he said that a sponge left behind would be likely to cause injury. The duty of putting the sponges in position was discharged either by the surgeon or the assistant-surgeon. A skilled surgeon could not say whether sponges had been removed or not unless part of the sponge was protruding from the wound. A sponge of the kind produced might easily lie unnoticed in the abdominal cavity. In his view there was no carelessness on the part of the surgeon if he delegated the duty of counting to a competent assistant. It was usual for the operating surgeon or his professional assistant to perform all the vital parts of the operation. The head nurse employed at a private operation was usually selected by the operator.

Counsel here read an extract from Sir Frederick Treves's book, in which the author described the leaving of a sponge in the peritoneal cavity as "an unfortunate lack of care."

Dr. Walter Tate said he had performed about 600 abdominal operations. It was quite possible for the sponge produced to lie hidden in the abdomen. He had never counted the sponges in any of his own cases; he had always left it to the nurses. In cross-examination he said it was a serious matter for a person to have a sponge left behind. The operator was always justified in leaving the counting to the nurses. In the witness's view it was undesirable that the operator or his assistant should leave the patient to handle septic sponges. It was only by means of the fingers that it would be possible to make the count, as the sponges were often stuck together. There was nothing to prevent the surgeon standing over and checking the nurse except the delay.

Mr. Douglas Drew, F.R.C.S., and Miss Aldrich-Blake, M.B., etc., also gave evidence on the part of the defendant.

Mrs. Palmer, the proprietress of the nursing home, said she had counted the sponges before and after the operation. There were twenty-six sponges used. It was her practice to count and recount in threes. On the occasion in question she had made a note of the figures on a piece of paper. She was still certain that she had made a correct count.

Counsel having addressed the jury, the learned Judge, at the conclusion of the summing-up, asked the jury to answer the following questions: (1) Was the defendant guilty of a want of due and reasonable care in the

counting or superintending the counting of the sponges? (2) Was Mrs. Palmer employed by the defendant as assistant during the operation? (3) Was Mrs. Palmer negligent in counting the sponges? (4) Was the counting of the sponges a vital part of the operation which the defendant undertook to see properly performed? (5) Was Mrs. Palmer under the control of the defendant during the operation?

After an absence from court for an hour and a-half, the jury answered all the questions in the affirmative, but stated that it was not a case for damages, which they assessed at one farthing.

Mr. Dickens having asked for judgement, the Judge directed that the jury should again consider the question of damages. They then left the court. Upon their return the foreman announced that, "in the opinion of the jury, the plaintiff was entitled to not more than £25 for pain and suffering." Judgement accordingly.

His Lordship said he was glad to find that by their verdict the jury made no imputation upon the skill of the defendant as a surgeon. A stay of execution was granted on the usual terms.

PROSECUTION OF AN UNQUALIFIED DENTIST IN SCOTLAND.
ON May 26th, at Stirling Sheriff Court, Robert Robertson, 50, Tillie Street, Glasgow, and Denny, Stirlingshire, was charged at the instance of the Medical and Dental Defence Union of Scotland, Limited, that he did, by public advertisement in the newspapers "pretend to be or take or use the name or title of surgeon-dentist." This was the first prosecution at the instance of the Defence Union, which was represented by Mr. Findlay, of Turnbull and Findlay, solicitors, Glasgow.

Mr. J. C. Muirhead, solicitor, Stirling, appeared for the accused, who intimated a plea of not guilty. Mr. Muirhead also took three objections to the relevancy of the complaint: First, that the Defence Union had no title to sue; secondly, that it was no contravention to pretend to be a surgeon-dentist; and thirdly, that no alternative to the fine that might be imposed in case of conviction was stated in the complaint.

The Sheriff held that the Union was entitled to prosecute, and that it was not necessary to state in the complaint, seeing that it was under the Summary Jurisdiction Act, the alternative penalty if a fine was not paid. In the case of the other objection, however, that it was no offence to "pretend to be" a surgeon-dentist, the complaint was bad on this point, as undoubtedly it was not a contravention to "pretend" so long as nothing else followed. The complaint, however, might be amended by deleting the words "pretend to be" a dentist, and the charge restricted to "using the name or title of a surgeon-dentist."

Mr. Muirhead said, to save the time of the Court, he would admit the publication by the accused of the advertisements complained of. This had gone on for a long time, and the accused's attention was never before called to its being wrong.

Mr. Findlay: The accused has been moving about from place to place, doing this though he gave me a personal undertaking in January last to cease the practice.

The Sheriff: There is no question he represented himself to be a surgeon-dentist.

The plea of not guilty was then withdrawn, and one of guilty made. The Sheriff said that the maximum penalty was £20, but, as the accused had given the undertaking to withdraw the circulars and advertisements complained of, the fine would be modified to £5, with £1 2s. 6d. expenses, or thirty days' imprisonment.

VALUE OF PRACTICE.

M.A. writes: A and B are practitioners in the same village. A has much the larger practice, which he has held for nearly twenty years. B has only recently acquired the smaller practice, but is better qualified than A, and has every possibility of cutting into A's practice. A is prepared to negotiate with B for the sale of his practice, and B wishes to know whether it would be unreasonable on his part to demand two years' purchase on the present value.

* * A. could not be advised on business principles to give as much as two years' purchase for such a practice.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF OXFORD.

Representative on the General Medical Council.—Joseph Frank Payne, D.M., Magdalen College, has been re-elected a member of the General Medical Council.

Appointment of Examiners.—Sir Arthur V. Macan, B.M., M.S.Dub., has been appointed an Examiner in Midwifery; William Williams, D.M., D.P.H., non-collegiate, has been appointed an Examiner in Preventive Medicine; Marcus Seymour Pembrey, D.M., Christ Church, has been appointed to examine in physiology in the First B.M. Examination *pro hac vice*.

UNIVERSITY OF CAMBRIDGE.

Professor of Surgery.—Professor Howard Marsh, M.A., Fellow of King's College, has been approved for the degree of Master of Surgery.

Gift of Drawings.—Two portfolios of drawings, one of diseases of the eye, the other of diseases of the eye, have been presented to the University by Dr. Ole Bull, of Christiania. They will be exhibited by Professor Clifford Allbutt at the meeting of the British Medical Association to be held next month in Oxford.

Appointments.—Dr. W. H. R. Rivers, Fellow of St. John's College, has been appointed a member of the Special Board for Moral Science. Dr. Humphry, Dr. S. West, Dr. W. Hale White, and Dr. J. Rose Bradford have been appointed Examiners in Medicine; Dr. Handfield-Jones and Dr. Herman, Examiners in Midwifery; Mr. C. T. Dent, Mr. E. Owen, Mr. C. W. Mansell Moullin, and Sir Hector C. Cameron, Examiners in Surgery, for the ensuing academical year.

UNIVERSITY OF LONDON.

The following candidates have passed the M.B. Examination: *First Division.*—H. H. Greenwood, Yorkshire College; Beatrice Mary Kidd, London School of Medicine for Women; E. G. Pringle, St. Bartholomew's Hospital; P. Rees, B.Sc., Charing Cross Hospital; H. T. Smart, Guy's Hospital; S. M. Smith, St. Mary's Hospital.

Second Division.—F. H. Alexander, University College; J. H. Arthur, London Hospital; O. F. H. Atkey, King's College; J. G. Atkinson, St. Bartholomew's Hospital; Sophie Grace Banham, B.Sc., London School of Medicine for Women; Alice Marian Benham, London School of Medicine for Women; Victoria Evelyn M. Bennett, London School of Medicine for Women; Ruth Levy Bensusan, London School of Medicine for Women; A. J. Blaxland, University College; Agnes Maud Brown, London School of Medicine for Women; H. H. Carter, Guy's Hospital; J. H. Clatworthy, Guy's Hospital; E. L. Clay, University of Birmingham and Queen's and General Hospitals; Helen Mary Collen, London School of Medicine for Women; J. M. Collins, St. Bartholomew's Hospital; P. C. T. Davy, University College; J. T. D'Ewart, Victoria University; Laetitia Nora Ede, University of Durham; R. Félix, Middlesex Hospital; J. A. Ferriere, University College; J. W. Fox, London Hospital; P. A. M. Green, London Hospital; P. W. Hamond, Guy's Hospital; G. M. Harston, Charing Cross Hospital; B. Hart, University College; W. H. Harwood-Yarred, B.Sc., St. Thomas's Hospital; G. S. Hett, University College; C. D. Holdsworth, University College; Margaret Hudson, B.A., London School of Medicine for Women; C. E. Iredell, Guy's Hospital; J. James, King's College; F. A. Johns, London Hospital; S. Johnson, St. Mary's Hospital; C. H. F. Johnston, Charing Cross Hospital; E. W. Jones, University of Birmingham and Queen's Hospital; F. W. Jones, B.Sc., London Hospital; H. S. Jones, Guy's Hospital; R. M. Kalapesi, St. Bartholomew's Hospital and Grant Medical College, Bombay; H. R. Kidner, B.Sc., St. Bartholomew's Hospital; Elizabeth Knight, London School of Medicine for Women; Kate Knowles, London School of Medicine for Women; Jessie Augusta Lewin, London School of Medicine for Women; A. Lewthwaite, University College; M. G. Louison, Guy's Hospital; C. E. W. Lyth, London Hospital and University College, Sheffield; F. C. McCombie, King's College; N. Macfadyen, St. Bartholomew's Hospital; E. C. Mackay, St. Bartholomew's Hospital; H. C. C. Mann, Guy's Hospital; J. A. Milne, London Hospital; B. Moiser, Guy's Hospital; E. C. Myott, Guy's Hospital and Victoria University; P. A. Peall, Guy's Hospital; C. B. Penny, Guy's Hospital; F. B. Pinniger, Charing Cross Hospital; Kate Anne Platt, London School of Medicine for Women; Marian Theresa Pool, London School of Medicine for Women; J. J. Rainforth, London Hospital; J. E. Richards, Charing Cross Hospital; C. M. Roberts, St. Thomas's Hospital; G. W. Russell, Guy's Hospital; A. C. Stark, Westminster Hospital; Louisa Graham Thacker, London School of Medicine for Women; E. F. Travers, St. Bartholomew's Hospital; Laura Sobey Veale, London School of Medicine for Women; C. R. Verling-Brown, St. Bartholomew's Hospital; Ada Miles Whitlock, London School of Medicine for Women; S. R. Williams, University College and General Hospital, Bristol; W. B. Winston, B.Sc., St. Thomas's Hospital; R. S. Woods, London Hospital; F. R. E. Wright, St. Thomas's Hospital; S. Zobel, University College.

[N.B.—This list, published for the convenience of candidates, is issued subject to its approval by the Senate.]

ROYAL COLLEGE OF SURGEONS IN IRELAND.

The annual meeting of the Royal College of Surgeons in Ireland was held on Saturday, June 4th; Sir Lambert Ormsby, President, in the chair.

The report showed receipts for the year, £4,139 18s. 10d.; disbursements, £3,558 4s. 9d., leaving in bank to credit, £581 14s. 1d. The investment account shows a sum of £10,407 7s. 11d. Ten candidates were admitted to the Fellowship of the College; 55 received the Conjoint Diploma; 25 the Conjoint Diploma in Public Health; 8 the licence in Dental Surgery, and 43 passed the Conjoint Preliminary Examination; 16 Fellows, 55 Licentiates, and 1 Licentiate in Dental Surgery died. There are at present living 435 Fellows, 2,834 Licentiates, 181 Diplomates in Public Health, and 515 Licentiates in Dental Surgery.

The President made a short address, and referred specially to the death of Mr. H. G. Croly, Sir P. C. Smyly, Professor Sir George Duffey, and Mr. Austin Meldon.

On the motion of Sir William Thomson, seconded by Sir P. Myles, the report was adopted.

At a meeting of the Fellows held on June 6th the following were elected President, Vice-President, Honorary Secretary and Council:—*President:* Mr. Arthur Chance. *Vice-President:* Mr. Henry R. Swanzy. *Secretary of the College:* Sir Charles A. Cameron, C.B. *Council:* Mr. Edward Hallaran Bennett, Mr. William Stoker, Sir Charles Alexander Cameron, C.B., Mr. John B. Story, Sir William Thomson, C.B., Sir Charles B. Ball, Sir Thomas Myles, Mr. John Lentaigne, Mr. Richard D. Purefoy, Sir Lambert Ormsby, Mr. Henry G. Sherlock, Mr. R. Bolton M'Causland, Mr. John S. M'Arde, Mr. Robert H. Woods, Mr. Thomas Donnelly, Mr. William Taylor, Mr. Edward H. Taylor, Mr. G. Jameson Johnston, and Mr. R. Charles B. Maunsell.

CONJOINT BOARD IN IRELAND.

At a special examination for the Diploma in Public Health, the following were successful: M. A. Curry, L.R.C.P. and S.I., Edward Carnell, L.R.C.P.I.

TRINITY COLLEGE, DUBLIN.

CANDIDATES have passed examinations as under:

Final in Midwifery.—J. G. Wallis, A. W. Goldsmith, R. S. Smyth, W. Thunder, J. A. Sibthorpe, W. J. M'Ivor, W. P. Tate, C. E. Fawcett, W. Mitchell, G. A. Crowley.
B. A. O. Degree.—R. Moore.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

HEALTH OF ENGLISH TOWNS.

In seventy-six of the largest English towns, including London, 9,279 births and 4,277 deaths were registered during the week ending Saturday last, June 4th. The annual rate of mortality in these towns, which had been 16.1, 15.5, and 15.4 per 1,000 in the three preceding weeks, further declined last week to 14.6 per 1,000. The rates in the several towns

ranged from 5.5 in King's Norton, 7.7 in Handsworth (Staffs.), 8.0 in Burton-on-Trent, 8.7 in Newport (Mon.), 9.0 in West Hartlepool, 9.4 in East Ham, 9.5 in Smethwick, 9.6 in Hornsey, and 9.9 in Coventry, to 18.8 in Stockport, 18.9 in Middlesbrough, 20.3 in Norwich, 21.3 in Preston, 22.2 in Newcastle-on-Tyne, 22.5 in Huddersfield, 24.0 in Warrington, and 34.9 in Wigan. In London the rate of mortality was 13.2 per 1,000, while it averaged 15.2 per 1,000 in the seventy-five other large towns. The death-rate from the principal infectious diseases averaged 1.7 per 1,000 in the seventy-six towns; in London this death-rate was equal to 1.6 per 1,000, while among the seventy-five large provincial towns the rates ranged upwards to 3.1 in Burnley and in Sunderland, 3.2 in Leeds, 3.4 in Salford, 3.8 in Huddersfield, 4.1 in Hanley, 4.3 in Rhondda, 4.7 in Walthamstow, and 7.0 in Warrington. Measles caused a death-rate of 1.6 in Newcastle-on-Tyne, 1.8 in Norwich, Birkenhead, and St. Helens, 2.1 in Burnley and in Rhondda, 2.3 in Leeds, 2.7 in Huddersfield, and 3.7 in Walthamstow; scarlet fever of 1.6 in Hanley and 2.3 in Warrington; diphtheria of 1.6 in Hanley and 3.0 in Stockton-on-Tees; whooping-cough of 1.1 in Birmingham and in Swansea, 1.2 in Blackburn, 1.7 in Smethwick, 1.8 in Bolton, and 3.9 in Warrington; and "fever" of 1.7 in Wigan. One fatal case of small-pox was registered in Leicester and one in Halifax, but none in any other of the large towns. The Metropolitan Asylums Hospitals contained 96 small-pox patients on Saturday last, June 4th, against 99, 96, and 118 on the three preceding Saturdays; 10 new cases were admitted during the week, against 26, 18, and 33 in the three preceding weeks. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had been 1,600, 1,630, and 1,663 at the end of the three preceding weeks, had further risen to 1,673 at the end of last week; 207 new cases were admitted during the week, against 239, 222, and 194 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, June 4th, 1,071 births and 604 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 17.9, 18.7, and 17.6 per 1,000 in the three preceding weeks, rose again last week to 18.1 per 1,000, and was 3.5 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 10.8 in Perth and 13.0 in Leith, to 19.4 in Greenock and 23.0 in Dundee. The death-rate from the principal infectious diseases averaged 1.9 per 1,000 in these towns, the highest rates being recorded in Edinburgh and Greenock. The 278 deaths registered in Glasgow included 2 which were referred to small-pox, 3 to measles, 16 to whooping-cough, and 7 to diarrhoea. Four fatal cases of measles, 4 of whooping-cough, 2 of scarlet fever, 2 of diphtheria, and 2 of diarrhoea were recorded in Edinburgh; 3 of measles and 2 of diarrhoea in Dundee; 3 of whooping-cough and 2 of diarrhoea in Aberdeen; 2 of whooping-cough in Paisley; and 6 of measles in Greenock.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, May 28th, 497 births and 342 deaths were registered in the same six towns, against 563 births and 379 deaths in the preceding period. The mean annual death-rate in these towns, which had been 19.9, 21.2, and 22.4 per 1,000 in the three preceding weeks, fell considerably to 16.9 per 1,000 in the week under notice, this figure being only 1.5 above the mean annual rate in the seventy-six English towns during the corresponding period. The figures ranged from 9.6 in Limerick and 13.9 in Londonderry, to 19.5 in Belfast and 22.4 in Dublin. The death-rate from the principal zymotic diseases during the same period and in the same six towns averaged 0.8 per 1,000, or 0.6 below the figure for the two preceding weeks, the lowest figure, 0.7, being recorded in Cork, while Londonderry and Waterford registered no deaths under this heading at all. The whooping-cough rate throughout Ireland showed very satisfactory improvement, the total being 6 deaths in Belfast and 4 in Dublin. Diphtheria caused only 1 death in Cork and 1 in an outlying small town. From enteric the only death in Ireland was 1 in Dublin. From scarlet 2 deaths occurred in Dublin, and 1 in an outlying small town.

During the following week ending Saturday, June 4th, 582 births and 366 deaths were registered, against the 497 births and 342 deaths shown above. The mean annual death-rate, which had been 21.2, 22.4, and 16.9 per 1,000 during the three preceding weeks, suddenly rose again to 29.1 per 1,000, this figure being practically double that recorded for the same week in the seventy-six English towns, namely, 14.6 per 1,000. The figures ranged from 19.3 in Belfast and 20.6 in Dublin to 31.4 in Limerick and 56.0 in Waterford. The death-rate from the principal zymotic diseases during the same period and in the same six towns averaged 1.1 per 1,000, or 0.3 above the figure for the preceding week, the highest figure, 2.6, being recorded in Belfast, while Limerick and Waterford registered no deaths under this heading at all. From whooping-cough there were 7 deaths in Belfast and 9 in Dublin. From measles, 4 in Belfast and 5 in Dublin. In Belfast also there were three deaths from diphtheria, 2 from enteric, and 1 from scarlet fever.

THE NOTIFICATION OF MEASLES.

The Sanitary Committee of the Corporation of Wigan has adopted the recommendation of the medical officer of health that the voluntary notification of first cases of measles in a household should be continued for a further period of three years.

MEDICAL VACANCIES AND APPOINTMENTS.

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.

BIRMINGHAM AND MIDLAND EYE HOSPITAL.—House-Surgeon, resident. Salary £75 per annum.

BIRMINGHAM: GENERAL HOSPITAL.—(1) Honorary Physician; (2) House-Surgeon, resident. Salary at the rate of £50 per annum. (3) House-Physician Salary, £20 for six months.

BIRMINGHAM UNIVERSITY.—Second Demonstrator in Anatomy. Stipend, £150 per annum.

CAMBRIDGE UNIVERSITY.—John Lucas Walker Studentship, annual value, £200.
CANCER HOSPITAL, Fulham Road, S.W.—Assistant Anaesthetist. Honorarium guinea per annum.

CANTERBURY: KENT AND CANTERBURY HOSPITAL.—House-Physician, resident. Salary, £80 per annum.
 CUMBERLAND AND WESTMORLAND ASYLUM, Carlisle.—Junior Assistant Medical Officer, resident. Salary, £130, rising to £150 per annum.
 DERBYSHIRE ROYAL INFIRMARY.—Resident House-Surgeon. Salary, £100 per annum.
 EVELINA HOSPITAL FOR SICK CHILDREN, Southwark.—Clinical Assistants for the Out-patient Department.
 GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road.—(1) Second House-Surgeon. (2) Third House-Surgeon. (3) Junior House-Physician. Salary at the rate of £30 per annum each.
 HEMEL HEMPSTEAD: WEST HERTS INFIRMARY.—House-Surgeon, resident. Salary, £100 per annum.
 HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton.—Resident House-Physicians. Honorarium, £25 for six months.
 HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—Ophthalmic Surgeon. KNIGHTSWOOD HOSPITAL.—Resident Medical Officer. Salary, £120 per annum.
 LIVERPOOL: DAVID LEWIS HOSPITAL.—(1) Second Honorary Anaesthetist. (2) Junior House-Surgeon. Salary at the rate of £70 per annum.
 LIVERPOOL DISPENSARIES.—Assistant Surgeon, resident. Salary, £100 per annum.
 LIVERPOOL INFIRMARY FOR CHILDREN.—House-Surgeon, resident. Salary, £100 per annum.
 LIVERPOOL: ROYAL SOUTHERN HOSPITAL.—Ambulance Surgeon. Salary, £11s. per week.
 LONDON HOSPITAL.—Cancer Research Scholarship value £150.
 LONDON LOCK HOSPITAL, Hatfield Road.—Registrar.
 MANCHESTER: VICTORIA UNIVERSITY.—Professor of Pathology and Pathological Anatomy.
 METROPOLITAN ASYLUMS BOARD.—Two Male Assistant Medical Officers for the Asylum at Darenth, resident. Salary, £150 per annum, rising to £170.
 NORTH STAFFORDSHIRE INFIRMARY, Hartshill.—Assistant House-Surgeon, resident. Honorarium, £25 for six months.
 SHAMELESS HOSPITAL SOCIETY, Greenwich.—House-Surgeon for the Branch Hospital, resident. Salary, £50 per annum.
 SOUTHPORT INFIRMARY.—Resident Junior House and Visiting Surgeon. Salary at the rate of £70 per annum.
 ST. MARY'S HOSPITAL MEDICAL SCHOOL, Paddington.—Lecturer on Chemistry.
 WEST END HOSPITAL FOR DISEASES OF THE NERVOUS SYSTEM, PARALYSIS AND EPILEPSY, Welbeck Street.—Honorary Assistant Physician.
 WESTERN GENERAL DISPENSARY, Marylebone Road, N.W.—Honorary Ophthalmic Surgeon.
 WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—Assistant House-Physician, resident. Honorarium at the rate of £75 per annum.

APPOINTMENTS.

BAKER, A. E., M.B.Lond., M.R.C.S., District Medical Officer of the Hastings Union.
 BETHELL, A., M.R.C.S.Eng., District Medical Officer of the Hunkerford and Ramsbury Unions.
 BURKE, H., L.R.C.P.I., L.F.P.S.Glasg., Certifying Factory Surgeon for the New-birmingham District, County Tipperary.
 CRICHTON, Harry, M.B., B.S.Durh., Assistant Surgeon to the Ingham Infirmary, South Shields.
 CUSACK, R., L.R.C.S.I., L.A.H.Dub., Certifying Factory Surgeon for the Cashel District, County Tipperary.
 ELLIS, L. Erasmus, M.D.Brux., M.R.C.S.Eng., L.R.C.P.Lond., L.S.A.Lond., Clinical Assistant to the National Hospital for Diseases of the Heart, Soho Square, London, W.
 EVANS, H. D., M.R.C.P., L.S.A., J.P., Medical Officer to the Blaenau Festiniog Postal District.
 FENNELL, Charles H., M.A., M.D.Oxon., M.R.C.P.Lond., Second Assistant Medical Officer at Footing Bee Asylum (Metropolitan Asylums Board).
 FINNEY, C. E., M.D., B.S., Sub. District Medical Officer of the Saffron Walden Union.
 FITZGERALD, J., L.R.C.P. & S.Edin., Certifying Factory Surgeon for the Cappawhite District, County Tipperary.
 GLEN, T. MacM., L.R.C.P. & S.Edin., L.F.P.S.Glasg., District Medical Officer of the Wiston Union.
 GREEN, T. A., M.D., C.W.Edin., Surgeon to the Out-patients at the Bristol Royal Hospital for Sick Children and Women.
 HEBURN, F. D., M.D., F.R.C.S.I., Consulting Surgeon to the Adelaide Hospital, Dublin, since Sir Philip C. Smyly, deceased.
 HUNT, T. H., M.D., B.S.Lond., Honorary Medical Officer to the Royal Hallam Infirmary.
 HUNTER, James H., M.D., B.S., B.Hy.Durh., Assistant surgeon to the Ingham Infirmary, South Shields.
 JEFFERISS, F. D., F.R.C.S.Edin., L.R.C.P., District Medical Officer of the Medway Union.
 KROGH, S., L.R.C.S.I., L.A.H.Dub., Certifying Factory Surgeon for the Dundrum District, County Tipperary.
 LAWSON, T. C., M.R.C.S.Eng., District Medical Officer of the Parish of Alcester.
 LINDSEY, Eric C., M.R.C.S., L.R.C.P.Lond., House-Surgeon to the General Hospital, Bedford.
 MACDONALD, John, M.B., C.M.Edin., Assistant Surgeon to the Ingham Infirmary, South Shields.
 MACMANUS Hugh, M.R.C.S., L.R.C.P., Senior Resident Medical Officer of the Notting-ham Union Workhouse Infirmary.
 MITCHELL G. M., M.Ch.B.U.I., Certifying Factory Surgeon for the Templemore District, County Tipperary.
 MITCHELL M., L.R.C.P. & S.I., Certifying Factory Surgeon for the Tullaroan District, County Kilkenny.
 MUIR, J. M., M.B., M.S., Port Health Officer for Wynard and Table Cape, Tasmania.
 NICHOLSON, T. D., M.B., C.M.Edin., Medical Officer of Health, Shap Urban District.
 OWEN, Arthur Dunlop, M.R.C.S.Eng., District Surgeon, Barrydale, Cape Colony.
 POWELL, J. L., M.D., F.R.C.S.I., Certifying Factory Surgeon for the Borrisoleigh District, County Tipperary.
 ROBERTS, Edward J., M.B., B.S., Senior House-Surgeon to the Hobart General Hospital, Tasmania, vice Dr. Lines, resigned.
 SMITH, Malcolm A., M.R.C.S., L.R.C.P., Medical Officer to H.B.M. Legation, Bangkok, Siam.
 SMYTH, J., M.B., C.M., Clinical Assistant to the Chelsea Hospital for Women.
 STORAS, E. G., M.B.C.S., L.R.C.P., D.P.H., Certifying Factory surgeon for the Overton District, County Fife.
 TETLEY, T. W., M.R.C.S., L.R.C.P., Certifying Factory Surgeon for the Kirby Moorside District, County York.
 THOMSON, Eric M., M.A., M.B., Ch.B.Aberd., Senior Resident Medical Officer, Government Lunatic Asylum, Kingston, Jamaica.
 THORNE, J. M., M.R.C.S., L.R.C.P., Clinical Assistant, Chelsea Hospital for Women.
 MANCHESTER ROYAL INFIRMARY.—The following appointments have been made: House-Physicians: J. de V. Mather, M.B., Ch.B.Vict., and H. Hodge, M.B., Ch.B.Vict.
 House-Surgeons: H. Buck, M.B., Ch.B.Vict., and L. Clay, M.B., Ch.B.Vict.
 ST. THOMAS'S HOSPITAL. The following gentlemen have been selected as House-Officers from June 7th, 1904: Resident House-Physicians.—H. C. Lecky, M.A., M.B., B.Ch.Oxon.; C. H. Latham, M.R.C.S., L.R.C.P.
 House-Physicians to Out-patients.—B. Higham, M.R.C.S., L.R.C.P.; W. Haward, M.B., B.S.Durh., L.R.C.P.
 Obstetric House-Physicians.—(Senior) C. N. Sears, M.B., B.S.Lond., M.R.C.S., L.R.C.P.; (Junior) J. P. Hedley, M.A., M.B., B.C.Cantab., M.R.C.S., L.R.C.P.
 Special Departments. Throat.—G. E. Rickett, M.A., B.C.Cantab. Skin.—G. E. Rickett, M.A., B.C.Cantab.
 Several other gentlemen received extensions of their appointments.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 8s. 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.

CORNER.—On June 2nd, the wife of Edred M. Corner, of a daughter.
 DEVITT.—On April 21st, 1904, at her residence, Ravenswood, North Queensland, the wife of Richard E. Devitt, M.B., B.Ch. R.U.I., J.P., Government Medical Officer, etc., of a daughter.
 HODGENS.—May 18th, at Newcastle, Jamaica, the wife of Captain C. O'C. Hodgens, R.A.M.C.U., of a daughter.

MARRIAGES.

KNIGHT-VERDON.—At Christ Church Streatham Hill, S.W., on June 1st by the Rev. C. Nicoll, George David Knight, M.D.Aberd., to Dorothy Lescelme, only daughter of M. Walter Vernon, M.D., of Streatham, S.W.
 MORRIS-HARBOTTLE.—At Trinity Wesleyan Church, Whitley Bay, on June 1st, by the Rev. J. Harryman Taylor, M.A. (brother-in-law of the bride), assisted by the Rev. Bruce W. Rose, Mober Alexander Morris, M.B., B.S., M.R.C.S., L.R.C.P., to Louisa, youngest daughter of the late Anthony Harbottle, of Newcastle-upon-Tyne. At home, West End, Biddington, July 20th and 21st. No cards.
 PRESTON-CAIRNS. At University Road Methodist Church, Belfast, on June 1st, Charles Edward Preston, B.A., M.B., Ch.B., to Elizabeth Cairns.

DEATH.

IVES.—On May 31st, at 61, Belmont Road, Portswode, Southampton, Robert Ives, M.R.C.S.Eng., L.R.C.P.Edin., second son of the late Dr. Charles James Ives, and grandson of Dr. Thomas Ives, both of Quertsey, Surrey.

DIARY FOR NEXT WEEK.

TUESDAY.

Royal College of Physicians of London, 5 p.m.—Dr. J. Rose Bradford: On Bright's Disease and its Varieties (Croonian Lecture III)
 Medical-Legal Society, 20, Hanover Square, W., 8.15 p.m.—Mr. E. Henslowe: Hospital Suicides and Temporary Insane—Falcay, Dr. W. McCulloch: A Note on Legal Procedure in Lunacy. Earl Russell: The Limitations of Medical Evidence.
 Royal Medical and Chirurgical Society, 20, Hanover Square, W., 8.30 p.m.—Dr. Arthur Newsholme: Protracted and Recrudescing Infection in Diphtheria and Scarlet Fever.

THURSDAY.

Royal College of Physicians of London, 5 p.m.—Dr. J. Rose Bradford: On Bright's Disease and its Varieties (Croonian Lecture IV).

POST-GRADUATE COURSES AND LECTURES.

Charing Cross Hospital Thursday, 4 p.m.—Demonstration of Medical Cases.
 Hospital for Consumption and Diseases of the Chest, Brompton, Wednesday, 4 p.m.—Lecture on Aortic Dilatation, its Causes and Treatment
 Hospital for Sick Children, Great Ormond Street, W.C., Thursday, 4 p.m.—Lecture on Infant Deformities in Children.
 Medical Graduates' College and Polytechnic, 22, Chenies Street, W.C.—Demonstrations will be given at 4 p.m. as follows: Tuesday, Medical; Wednesday, Surgical; Thursday, Surgical; Friday, Ear Lectures will be delivered at 5.15 as follows: Monday, the Relation of Fibrosis to Tubercle; Tuesday and Wednesday, Diseases and Injuries of the Female Bladder and Uterus; Thursday, Some General Principles of Local Treatment in Dermatology.
 Mount Vernon Hospital for Consumption and Diseases of the Chest, 7, Fitzroy Square, W., Thursday, 5 p.m.—Lecture on Aortic Stenosis (Illustrated by cases).
 National Hospital for the Paralyzed and Epileptic, Queen Square, W.C.—Lectures will be delivered at 3.30 p.m. as follows: Tuesday, Diagnosis of Tumours of Spinal Cord; Friday, Syringomyelia.
 North-East London Post-Graduate College, Tottenham Hospital, N., Wednesday, 4.30 p.m.—Lecture on the Various Types of Eczema and their Treatment.
 Post-Graduate College, West London Hospital, Hammersmith Road, W.—Lectures will be delivered at 5 p.m. as follows: Monday, The Summer Diarrhoea of Children and its Treatment; Tuesday, Pelvic Suppuration; Wednesday, Practical Medicine; Thursday, Practical Surgery; Friday, The Administration of Anaesthetics.
 St. John's Hospital for Diseases of the Skin, Leicester Square, W.C.—Thursday, 6.15 p.m., Lecture on Syphilis.
 St. Peter's Hospital, Henrietta Street, W.C., 3.30 p.m.—Lecture-Demonstrations will be given as follows: Tuesday, Surgical Diseases of the Kidneys; Saturday, Diagnosis in Urinary Disease.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 2, 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 *Artiology, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulate, London*.
 TELEPHONE (National):—GENERAL SECRETARY AND MANAGER, EDITOR, 2631, Gerrard.

QUERIES.

DISINFECTANT AFTER DIPHTHERIA.
 M.D. asks: What steps ought to be taken to disinfect a cottage or that part of a cottage occupied by a case of diphtheria where there are several children in the house?
 ** Fumigation with sulphur or formic aldehyde is the usual practice. Probably spraying the walls, floors, etc., with chloride of lime (1 to 2 per cent.) or formalin is preferable. Thorough cleansing is also essential.