

MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL.

TRYPSIN IN CANCER.

I was glad to see in the BRITISH MEDICAL JOURNAL of January 27th the details given by Dr. J. A. Shaw-Mackenzie of his method of treatment by trypsin in cancer, and with your permission I should like to accentuate the amount of care required in giving the injections in order to avoid pain and local inflammation, which otherwise disappoint both patient and medical man. The most careful attention to details is necessary—namely, the preparation of the skin surface by some antiseptic lotion, the sterilization of the fine needle and glass syringe by boiling, the avoidance of injection of a bubble of air and of the injection itself into muscle. The application of the ice before insertion of the needle, and the injection of the eucaine solution before the injection itself, will prevent all pain, and with the above careful details and handling I have never witnessed any pain, local or general trouble.

My excuse for writing thus is that I became thoroughly acquainted with Dr. Shaw-Mackenzie's methods in 1903-4, when he undertook with me treatment by injections of sodium oleate—the method of Mr. J. H. Webb, Melbourne—and also of Chian turpentine in two old soldiers suffering from inoperable cancer under my care in the Royal Hospital, Chelsea.

In 1904, the circumstance of diabetes and cancer alternating in two members of two different families under our immediate observation and care led Dr. Shaw-Mackenzie to consider the connexion between these two diseases, and directly to the inference that as in diabetes so also in carcinoma the pancreas might be at fault. Experimental investigation then led to the fact that trypsin, the proteolytic ferment of the pancreas, broke up glycogen.

In January, 1905, he commenced injections of trypsin, and in several of his cases I have noticed the most promising results and relief afforded, making me regret my retirement from the Royal Hospital, Chelsea, where I had such good opportunities of carefully watching cases of cancer.

I trouble you with these remarks as I feel anxious that Dr. Shaw-Mackenzie's method of treatment should not suffer from want of attention to details, having knowledge that such has been the cause of giving up the treatment in some cases in the practice of others.

THOS. LIGERTWOOD, C.B., M.D., F.R.C.S.E.,
Chelsea, Late Physician and Surgeon Royal Hospital, Chelsea.

THE experimental evidence brought forward by Dr. Beard on the cure of Jensen's mouse tumour by means of trypsin will no doubt lead to experimental treatment on human beings. Since the beginning of December, 1905, I have been treating a case of uterine cancer by means of trypsin, and for the guidance of those about to adopt the treatment I would like to state my own experience of the treatment.

The patient was a woman aged 43, married. She had been an out-patient at the North-West London Hospital under Dr. John Shaw for upwards of two years, suffering all that time from unremovable uterine carcinoma.

At the beginning of December, 1905, the patient was unable to get out of bed, and was very emaciated. A teaspoonful of glycerole of trypsin was then given by the mouth three times a day, and after a fortnight the dose was increased to a teaspoonful and a half three times a day. During the first fortnight of this treatment the patient improved in appetite, was brighter and suffered less from flatulence. Otherwise her condition remained as before. The uterine discharge grew greater about the middle of December, and a little blood also came away with the discharge. There had been no bleeding for several months previous. From the middle of December onwards the discharge continued very abundant, and the patient's strength got less and less, till she died on January 11th, 1906. No necropsy was obtained.

The increase of the discharge and the bleeding may have corresponded to the disintegration of the tumour in the case of the mouse. Along with this disintegration there would be a setting free of the products of the tumour, and these products in the weak condition of the patient proved too much for her and caused her death. The

inference is, begin the treatment early before the patient has lost much strength. Armour's preparation of trypsin was used in this case.

London, N.W.

A. HOWARD PIRIE, M.D., B.Sc.

QUILLAIA AS AN EMULSIFYING AGENT.

ALTHOUGH the emulsifying properties of quillaia are mentioned in every textbook, yet its advantages do not appear to be generally known or made use of. The following emulsions are easy to prepare, and remain permanent on the addition of either alkalies or acids:

Aq. Chloroform. Conc. (1 dr. to water 6 oz.).

℞ Chloroform. 9 dr.
Tinct. of quillaia 3 dr.
Water to 10 oz.

This is slightly altered from Sutherland's *Dispensing made Easy*.

Aq. Menth. Pip. Conc. (1 dr. to water 6 oz.).

℞ Ol. menth. pip. 4 dr.
Tinct. of quillaia 2 dr.
Water to 10 oz.

Aq. Cinnamom. Conc. can be prepared in the same way.

Aq. Camph. Conc. (1 dr. to water 6 oz.).

℞ Camphor 1 dr.
Rectified spirit 3 dr.
Dissolve, then add
Tinct. of quillaia 1½ dr.
Water to 3 oz.

Emuls. Ol. Santal.

℞ Ol. santal. 1 dr.
Tinct. of quillaia ½ dr.
Water to 1 oz.

Emuls. Ol. Terebinth. (MacEwan).

℞ Ol. terebinth. } of each 20 min.
Tinct. of quillaia }
Water to 1 oz.

Emuls. Paraldehyde.

℞ Paraldehyde 1 dr.
Tinct. of quillaia 20 min.
Water to ½ or 1 oz.

Lewisham Park, S.E.

LAWRENCE F. HEMMANS, M.B.

ENTEROSPASM.

IN further illustration of Dr. Hawkins's article on this subject in the BRITISH MEDICAL JOURNAL of January 13th, the following case is of some interest:

The patient, a native of South India, aged 55, was admitted to the London Missionary Society's hospital in Travancore with a history of long-standing and most obstinate constipation. For years he had only been able to secure a motion of the bowels by the use of purges in increasing doses, till at last the strongest pills he could get produced little result. He had lost much weight.

He was a very unhealthy-looking man, ill-nourished and sallow, and intensely depressed. The abdomen was somewhat distended, but no dilated coils of intestine were distinguishable. He was in constant abdominal distress, and in the morning would sometimes sit over a vessel for fully an hour, and, by dint of great straining and much pressure over the sigmoid, expel a certain amount of semi-liquid faeces, but gain no relief. At times the discomfort became actual pain.

The case was regarded as dilated colon, completely exhausted by habitual purging. He was dieted carefully, and given strychnine and belladonna, with small doses of cascara. At first there was a slight improvement, but it was not maintained, and, as the man was obviously going downhill, operation was offered and accepted. It was proposed to short-circuit the bowel, inserting the ileum into the rectum as suggested by Mr. Arbuthnot Lane. In preparation for operation, an attempt was made to wash out the bowel, but it had to be given up, for, though it was easy to run the fluid into the bowel, it was impossible to get it out again. Even a large tube passed high up failed to siphon it off. When the abdomen was opened, the whole colon was found to be normal, or, if at all dilated, not nearly to a degree sufficient to account for the symptoms. The fault lay in the small intestine, four or five portions of which were atrophied, pale, and firmly contracted, being no larger than the little finger. Each contracted portion was about 5 or 6 in. long. The intervening parts of the small bowel were equal in size to the

colon. The contents of a dilated piece could be forced through the contiguous shrunken portion without much difficulty, but the latter at once relapsed to its contracted state. The abdomen was closed. The patient made a good recovery from the operation, and left the hospital in a fortnight in the same condition as on admission, but I was afterwards informed that the old symptoms gradually became worse, and the man died in about three months.

Raingate.

A. FELLIS, M.B., C.M. Edin.

A SERIES OF CASES OF ICTERUS NEONATORUM. DR. BUSFIELD (BRITISH MEDICAL JOURNAL, January 6th, p. 20) gives a series of cases of icterus neonatorum in one family. I have lately come across another.

Mrs. J. C., a fisherman's wife, a strong healthy woman, had had no illness since childhood, except four confinements; her family history was also good, showing nothing that could have any bearing on the cases. The father, also strong and healthy, had a good personal history in every way, but came of a very neurotic family on the mother's side. The first two children born are both alive and well, and have never shown any signs of jaundice.

The third child was born on May 13th, 1904, and seemed of a healthy nature, passing both urine and meconium of the ordinary colour. About thirty hours after birth it became jaundiced, and continued so till it died twelve days later. I was on that day called to see it, and found it bleeding from the umbilicus. The blood was very thin and refused to stop in spite of every possible form of treatment. It simply oozed up, and did not even coagulate after being shed. The child died a few hours later, no morbid condition in liver or gall bladder could be made out during life, and as no *post-mortem* examination was allowed, no explanation is possible.

The fourth child was born on November 26th, 1905, about 4 a.m. It seemed all right, but on returning some eight hours later I found it deeply jaundiced. The meconium was clay-coloured from the first, and the urine of the usual jaundiced type. It died on the sixth day. No morbid condition could again be made out, nor was any *post-mortem* examination allowed.

One other point is perhaps worth mentioning. About nine months before this last child was born the sister of the father had a child with a huge spina bifida and also a meningo-encephalocele. A cousin on his mother's side some four months before had a child with an imperforate anus, showing that there must be in the family some tendency to congenital malformations.

Buckie.

W. R. DUGAN, JR., M.B., C.M.

IDIOSYNCRASY TO MUSHROOM POISONING.

I WOULD like to record a case of poisoning by mushrooms which occurred in my practice a few years ago.

A healthy young woman, aged 30, whilst preparing mushrooms for the family breakfast, ate some raw between 8 and 9 o'clock in the morning. The others were duly cooked and eaten by herself and the family (two daughters, father and mother). The mushrooms were of unquestionable repute. At 11.50 the same morning she felt sick and purged, did not complain of pain, and became unconscious at once. She was carried to bed: her arms and legs were rigid and the eyes "turned up." At 1.30 the same afternoon she died without having recovered consciousness, though she had groaned occasionally. Such was the history given to me by her sister. She lived five miles away from my house, and she was dead when I arrived.

The next morning at 9 o'clock I made a *post-mortem* examination. Decomposition had set in; the features were unrecognizable, and the body was covered with green patches of discoloration. In the stomach I found some twenty mushrooms; they were undigested, some in half, the others whole, and appeared to have been neither peeled nor masticated. Where the mushrooms lay was a zone of acute inflammation, as shown by redness of the mucous membrane of the stomach (cardiac end). The zone of redness was strictly limited to the area occupied by the mushrooms; the other organs of the body were quite healthy.

At the time of this occurrence there had been incessant rain for weeks, and the mushrooms were sodden with water. In the Pyrenees, where to my knowledge four

kinds of fungi are eaten, they are placed, before they are cooked, on a gridiron over a clear fire till all the liquids they contain have exuded. This precaution is always taken because those liquids are considered poisonous.

I may add that the other members of the family who ate the same mushrooms cooked suffered no ill effects.

EMILIEN E. FROSSARD, M.R.C.S., L.R.C.P.
Bishops Lydeard, Somerset.

ARTERIO-SCLEROSIS.

IN recent articles on this subject there is one very important aspect which has not been considered—that is, the beginning of the conditions that lead on to arterio-sclerosis. The case is generally considered when already the mischief is done, and the cause can usually be attributed to an agency that suits the particular fancy of the examining medical man.

While I can offer no opinion of the exact cause, the following experiences may indicate a line of observation which may be profitably pursued if the observer begins when he is young enough.

Twenty years ago I had a lady under my care who suffered from shortness of breath and palpitation on exertion, and whose pulse was very hard and rapid. The arterial walls were markedly thickened. Two years later she had a pulmonary apoplexy, and died fifteen years ago from cerebral haemorrhage in the 54th year of her age. There was no albumen when I first saw her, but there was a scant trace in the later years, and an eminent consultant on this account diagnosed cirrhotic kidney. After her death her sister came to superintend the household, and a dozen years ago she consulted me. I was struck with her resemblance to her dead sister, and she had the same rapid, hard pulse and at certain periods very marked shortness of breath on exertion. Her urine for many years was free from albumen, but during the past two years it shows occasional traces. She suffers from what she calls "colds," when she wheezes and coughs a great deal and is very short of breath. During these attacks the arterial pressure—always high—rises from 170 mm. Hg to 200 and over. Under potassium iodide it invariably falls, with immediate relief of all the symptoms.

A daughter of the deceased lady, and a niece of the last mentioned, has been under my care for the past two years. She is now 25 years of age, and suffers from that curious complaint when the hands become very cold—a mild form of Raynaud's disease. Her aunt tells me that she and her deceased sister suffered in exactly the same way when they were her age.

I have another lady, 40 years of age, who suffers from the same complaint. A few years ago she drove a pony on a cold autumn day, and her fingers became so benumbed that a small portion of the end of the right middle finger mortified. She is ruddy-faced, and resembles her father and uncles in facial appearance. The father died of cerebral apoplexy, and an uncle has lately had a similar seizure. This lady's daughter, aged 15, is now showing distinct symptoms of the same complaint as her mother, and has also the same ruddy face. The suggestion I make is—have we not here the beginning of a certain class of cases of permanent high blood pressure, arterial sclerosis, gouty kidney, etc.?

Regarding alcohol and diet as a cause, the following experience points a moral. An elderly man came to see me complaining of slight attacks of angina pectoris. His arteries were thickened and his pulse very hard, 210 mm. Hg. He is a brewer's agent. I said, "You must give up beer and spirits." He replied, "I'm a teetotaler." "Well, then, you must eat less butcher's meat." "I'm a vegetarian," was his reply!

Burnley.

J. MACKENZIE.

INTERNATIONAL CONGRESS OF APPLIED CHEMISTRY.—The International Congress of Applied Chemistry will hold its sixth meeting this year in Rome, on April 19th and following days. The work of the Congress will be distributed among eleven sections, of which one is devoted to chemistry in its application to medicine. This is divided into subsections as follows: Hygiene and Medical Chemistry (President, Professor Icilio Guareschi, Turin); Pharmaceutical Chemistry (President, Professor Luigi Balbiano, Rome); Bromatology, or the Chemistry of Alimentary Substances (President, Professor Arnaldo Piutti, Naples).

MEDICAL NEWS.

PROFESSOR BOUCHARD, of Paris, has been promoted to the rank of Grand Officer of the Legion of Honour.

THE second congress of the German Roentgen Society will be held at Berlin on April 1st and 2nd, under the presidency of Professor Eberlein.

THE foundation stone of the new wing now being built at the Bolingbroke Hospital, Wandsworth Common, will be laid by the Princess Royal, probably towards the end of April.

AT the meeting of the Linnean Society on Thursday next, at 8 p.m., Dr. H. Charlton Bastian will demonstrate developmental changes in zoogloea, and will illustrate his remarks with lantern slides.

AT the meeting of the Medical Officers of Schools' Association on Thursday next, Dr. W. P. Herringham and Mr. T. C. Horsfall will introduce a discussion on physical education in schools. The meeting takes place at the rooms of the Medical Society of London at 3.45 p.m.

DR. T. L. GENTLES attended the borough police court recently to take leave of the bench on his retirement from the post of one of the medical officers to the Derby Union. The Mayor complimented Dr. Gentles on the manner in which he had discharged the duties of his office.

AMONG subscriptions received on behalf of the Porth Cottage Hospital during January were Llwynypia Collieries workmen, £72; Lewis Merthyr Collieries workmen, £51 16s.; Workmen's Club, Cymmer, £21; Mr. W. J. Thomas, Ynishir, £20.

THE annual dinner of the Association of Medical Diplomates of Scotland will be held at the Trocadero Restaurant, London, W., on February 23rd, when the President, Dr. Claude St. Aubyn-Farrer, will take the chair at 7.30 p.m. The President of the Royal College of Surgeons of Edinburgh and the President of the Royal College of Surgeons of England have signified their intention of being present. The Honorary Secretary of the Dinner Committee, Dr. Féré, 12, Northampton Square, E.C., will be pleased to give any particulars.

DR. G. E. SHUTTLEWORTH commenced last week a course of eight lectures with practical demonstrations adapted for teachers of defective children. The last three lectures will probably be given at Ealing so as to secure practical illustrations from actual pupils. It is also hoped to arrange visits to special schools, and to an institution for imbeciles near London. Further particulars can be obtained from Miss Bertha James, 36A, Longridge Road, Earl's Court, S.W., the head quarters of the Society of the Crown of our Lord, founded on behalf of mentally afflicted children and adults by a benevolent lady.

LAST week, at a special meeting preceding the ordinary meeting of Fellows of the Royal College of Physicians of Ireland, the President, Sir William Smyly, congratulated Dr. James Craig, Fellow and Registrar of the College, on his approaching marriage, and referred to the signal services Dr. Craig had rendered to the College during his long term of office as Registrar. He concluded by presenting him with a cabinet of silver plate and an album containing the photographs of the Fellows of the College. Dr. Craig is one of the representatives of the Leinster Branch on the Central Council of the British Medical Association.

AT the fourth annual general meeting of the British Electro-Therapeutic Society, held on January 26th, Mr. J. Hall-Edwards, of Birmingham, was elected President, Dr. S. Sloan (Glasgow) and Mr. Chisholm Williams, Vice-Presidents, Dr. D. Baynes, Treasurer, and Drs. R. Morton and Kenneth Wills (Bristol), Honorary Secretaries. Fifteen members of Council were also appointed. The meeting was followed by a *conversazione*, at which a large number of manufacturers of electro-therapeutic apparatus had an opportunity of exhibiting their latest productions for expert inspection and comparison. Such an exhibition is a standing feature of the *conversaciones* of this Society, and on this occasion was specially interesting, improvement being shown all along the line, particularly in induction coils, and methods of measuring the energy of the radiation from x-ray tubes, and securing accurate dosage.

THE new House of Commons contains about 260 members who belong to one or other of the callings usually recognized as professions. This is rather more than one-third of the whole House, but the figures look very different if

the members of the legal profession are omitted; the lawyers number 139 (105 barristers and 34 solicitors), or more than one-fifth of the House. The *Observer*, from which we take these figures, points out that some of the barristers have never practised; but even when all due allowance is made for this, it appears that the law has a preponderance not only over every other profession, but over all other professions put together. It has more representatives than agriculture, which can be credited with less than 100 members. There are 2 naval and 44 army officers, 41 authors and journalists, 11 medical men, and 8 members who have won distinction as men of science. On the other hand, the new House will contain 213 representatives of the trade of the country.

FIRST AID IN TIME OF WAR.—President Roosevelt has appointed a Board composed of medical officers of the army and navy to consider improvements in the matter of first-aid dressings and the advisability of the adoption of a uniform equipment in the medical departments of the army and the navy.

FRENCH-SPEAKING MEDICAL CONGRESS IN CANADA.—The French-speaking practitioners of medicine in Canada will hold their third annual meeting this year at Trois-Rivières in the last week of June, 1906. The two preceding annual congresses were held at Montreal and at Quebec. Dr. L. P. Normand is the President and Dr. C. De Blois the Secretary of the Congress.

TRIVIAL HOSPITAL CASES.—During an inquest held recently at the London Hospital, Mr. Wynne Baxter, the coroner, remarked that the alien population of East London took their children to the London Hospital in hundreds; in some cases they only wanted a pill, and that was what was given. A jurymen observed that nowadays everybody rushed to the London Hospital, even if they had only a pain in their little finger. We seem to remember that the chairman some time ago expressed his anxiety to put a stop to these abuses.

HOSPITAL SUBSCRIBERS' LETTERS.—As already announced, a discussion on this subject will take place at a meeting to be held under the auspices of the Charity Organisation Society, at Denison House, Vauxhall Bridge Road, on Monday, February 12th. Sir Edward Brabrook, C.B., will take the chair at 4.30 p.m. Mr. Nelson Hardy will read a short paper. The discussion will be opened by Professor Tirard, M.D., and Dr. Arthur Latham. Medical men interested in hospitals are invited to attend. Denison House is close to Victoria Station, a little way down the Vauxhall Bridge Road.

THE WEST LONDON MEDICO-CHIRURGICAL SOCIETY.—The twenty-fourth anniversary dinner of the West London Medico-Chirurgical Society was held on February 7th, with the President of the Society, Mr. L. A. Bidwell, in the chair. After the usual loyal toasts had been duly honoured, Mr. J. G. Pardoe proposed "The Imperial Forces." He observed that it had been given to a member of their Society, Mr. Keetley, to inaugurate the Army Medical Civilian Reserve for the purpose of training civilian doctors to take the place of their brethren in the Royal Army Medical Corps in time of need. This toast was replied to by the Director-General of the Army Medical Service, who described how three years before he had remarked, at one of the anniversary dinners of that Society, on the indifference displayed by the medical profession generally towards the questions with which the Royal Army Medical Corps had to deal, and Mr. Keetley had asked him in what manner help was possible. He explained to Mr. Keetley that the medical profession could help by studying, in the hours of leisure, what was the nature of the work of the Royal Army Medical Corps and how it was carried on. Mr. Keetley suggested that the necessary instruction should be begun with the West London Medico-Chirurgical Society, and the Director-General accordingly arranged to supply officers to teach the members on Saturday afternoons. The Army Medical Service was anxious to secure a close connexion between medical men in the Army and those outside it. Sir Lauder Brunton proposed the toast of the "The West London Medico-Chirurgical Society," congratulating the members on the fact that it was now one of the largest in London, numbering being 600 and 700 men, and pointing out the value of the post-graduate teaching at the West London Hospital. Mr. Bidwell, the President, in replying, gave an interesting account of the rise and progress of the Society. The toast of "The Kindred Societies and Guests" was submitted by the President, and acknowledged by Dr. F. W. Cock (President of the Harveian Society) and by Mr. G. F. Marshall.

since its establishment. Some few years ago the Lord Lieutenant of the county added his name to the list of Justices of the Peace, an honour which he highly appreciated and richly deserved. Mr. Moreton, who was a member of the Altrincham Division of the Lancashire and Cheshire Branch of the British Medical Association, was for many years Local Secretary of Epsom College, in the success of which he always felt a warm interest, and at the close of his active association with this institution he, through his old friend and fellow-pupil, Mr. Reginald Harrison, one of the Vice-presidents, gave a very generous donation to its funds.

LIEUTENANT-COLONEL H. W. HUBBARD, R.A.M.C.

MANY of his brother officers and the old St. George's men of his time will learn with deep regret of the death of Lieutenant-Colonel H. W. Hubbard, R.A.M.C. He was born in India in 1856, and was the son of the late Rev. H. D. Hubbard; he received his early education at private schools in Plymouth and Switzerland. After some preliminary training at the Royal Albert Hospital, Devonport, he entered the medical school of St. George's Hospital in 1875. Whilst at St. George's he was a member of the famous football team which is often cited by authorities as the best ever turned out by any hospital, either before or since. He was, moreover, a racquet player and swimmer of some repute. After becoming M.R.C.S.Eng. in 1879 and L.R.C.P.Lond. in 1880, he entered the Army Medical Department in 1881, and was soon employed on active service, for in the following year he was present at the battle of Tel-el-Kebir, for which he was awarded the medal with clasp and the bronze star. In addition to that in Egypt he had considerable experience of foreign service both at Malta and in Bengal. But it was at home that Hubbard's services were to prove of signal advantage to the army in general and its Medical Corps in particular. At the time he was in charge of the Cambridge Hospital, Aldershot, the necessary changes rendered the introduction of greatly increased numbers of lady nurses imperative. In spite of opposition these changes were successfully carried out, in a large measure owing to Hubbard's acumen and tact, and he handed over the hospital to his successor in a most efficient condition. On January 30th last, feeling out of health, he left London for a ten days' holiday at Grindelwald with his close friend and fellow-student, Lieutenant-Colonel Cottell, who tended him to the last. During the journey he complained of illness, and the morning of arrival at their destination it was found that he had consolidation at the base of the left lung. Three days later consolidation supervened in the right lung as well, and he died of rapid cardiac failure, and is buried at Grindelwald. His quiet and courteous manner, his thoughtful earnestness, and his high sense of duty gained for Hubbard the respect and esteem of all associated with him, and his death is a distinct loss to the Army Medical Corps and to his numerous friends.

ANGIOLO FILIPPI, M.D.,

PROFESSOR OF FORENSIC MEDICINE, FLORENCE.

PROFESSOR ANGIOLO FILIPPI, who died on December 30th, 1905, was the leading medico-legal authority in Italy. Born at Florence in 1836, he studied at Pisa, where he graduated in 1858. He took part as a volunteer in the campaign of Lombardy in 1859-60 under Garibaldi. In 1865 he worked among the cholera patients at Ancona, San Severo, and Apricena. In 1866 he again went campaigning, and after the battle of Custoza was awarded the bronze medal for valour. On cholera breaking out in Apulia he once more did yeoman service in ministering to the sick; he gave up a considerable part of his nights to pathological researches which afterwards served as material for the investigations of Pacini.

In 1867 he was appointed Assistant to the Chair of Pathological Anatomy in the Institute of Higher Studies at Florence. In 1875 he qualified as Private Lecturer in Medical Jurisprudence, and in the following year he was appointed Assistant to the Chair of that subject, then occupied by Professor Ranieri Bellini. On the sudden death of his chief in 1878 he was called upon to discharge the duties of the Chair; in 1880 he was appointed Extraordinary, and, finally, Ordinary Professor, in 1884.

Filippi's first work was a treatise on the surgery of war. In 1889 appeared his *Manual of Forensic Medicine*, which has gone through several editions. It was the first systematic treatise on the subject written by an Italian expert, and he was the first who gave criminal anthropology a place in a treatise on forensic medicine. Filippi founded a school of medical jurisprudence in Italy, and pupils of his now occupy Chairs in the Universities of Genoa, Palermo, Modena, and Cagliari; at two others, Catania and Siena, the professors are pupils of his pupils. Filippi's fame as a teacher was so great that two years ago Dr. Nuscimento Silva, Professor of Forensic Medicine in the University of Rio de Janeiro, came to Florence to work under his direction.

DR. SWAN M. BURNETT, of Washington, who died suddenly on January 18th, was born at Newmarket, Tennessee, in 1847. In 1866 he entered the Miami Medical College of Cincinnati, and in 1869 he migrated to the Bellevue Hospital Medical College of New York, where he graduated in 1870. In 1873 he married Frances E. Hodgson, the author of *Little Lord Fauntleroy*, *That Lass o' Lowrie's*, and other works of fiction. In 1876 he settled in Washington, where he founded the Eye and Ear Clinic at the Central Dispensary in 1878. He established a post-graduate school of ophthalmology in 1881. Dr. Burnett was the author of several important works on his special department of medicine.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. Ercole Pasquali, Professor of Obstetrics and Gynaecology in the University of Rome, aged 80; Dr. Lehman H. Dunning, Professor of Diseases of Women in the Medical College of Indiana, aged 55; Dr. August F. Lemke, sometime Associate-Professor of Medicine in the Chicago College of Physicians and Surgeons, aged 32; Dr. Cnopf, Director of the Children's Hospital at Nuremberg; Dr. J. A. Amann, Extraordinary Professor of Gynaecology in the University of Munich; Dr. Emmet Cooper Dent, Superintendent of the Manhattan State Hospital for the Insane, author of many writings in which he advocated the use of hydrotherapy almost to the exclusion of medicines in the treatment of insanity, camp life for the acutely insane, and operative procedures (especially on female patients), aged 48; Professor J. V. Wichmann, Lecturer on Diseases of Children in the University of Copenhagen, and Director of the Queen Louisa Children's Hospital in that city, aged 53; Dr. Louis Wecker, the well-known ophthalmic surgeon of Paris, aged 83; Dr. Aliprando Moriggia, sometime Professor of Histology and General Physiology in the University of Rome; Dr. Johannes Kolaczek, Extraordinary Professor of Surgery in the University of Breslau, aged 63; Dr. Jerofey W. Kostenitsch, sometime Professor of Ophthalmology in the University of Warsaw, and afterwards in the Helena-Pauloffna Clinical Institute, St. Petersburg, aged 51; and Dr. Victor A. Worobieff, Lecturer on Pathological Anatomy in the University of Moscow.

MEDICO-LEGAL AND MEDICO-ETHICAL.

A SKIN SPECIALIST.

WE learn from the *Lancaster Observer and Morecambe Chronicle* that an inquest was held recently by Mr. Neville Holden with respect to the death of Mrs. Ralph, who died while under the care of an unqualified practitioner. It appeared that the woman had suffered from acute dermatitis, and that under the treatment of Dr. Baldwin the condition of the skin greatly improved, but the patient remained in an extremely weak condition. She then dispensed with the services of Dr. Baldwin, and placed herself under the care of Mr. James Wolfenden, of Scotforth, who described himself as a farmer and skin specialist for both human beings and animals. In his evidence he stated that the deceased was suffering from weeping eczema, and he gave her a simple ointment to apply externally. He afterwards gave her a lotion composed of olive oil and spirit of tar. The ointment contained the same ingredients, the quantity of tar being increased, and arrowroot. Another "healing" ointment was said to contain olive oil and beeswax, and there was an ointment for "taking out inflammation," composed of lard and herbal extract. Asked what precautions he took to make the lard antiseptic, witness said he simmered it in the oven, and then put in a herb known as

MEDICAL EVIDENCE AT INQUESTS.

DR. W. H. ROWTHORN (Rotherham) writes: I thoroughly endorse everything stated in the reply to "D. O. D." in the BRITISH MEDICAL JOURNAL of February 3rd, p. 298. At the same time it might be pointed out to your inquirer that if he refers to the *Medical Directory* he will see under the heading "Recovery of Fees and Charges from Private Patients and Public Authorities" in the "Principal Laws affecting the Medical Profession" the following statement: "If a deputy overseer, or even a mere stranger, direct a surgeon to attend a poor man, such person is liable for the surgeon's bill." Your inquirer is probably acquainted with the person who came for him to attend the injured man or is able to find him out, and, having done so, should send his account to him.

ROYAL NAVY AND ARMY MEDICAL SERVICES.

ROYAL NAVY MEDICAL SERVICE.

Prospects in the Service.

A FORMER NAVAL SURGEON writes: In the BRITISH MEDICAL JOURNAL of January 13th, 1906, p. 117, there appeared a letter by "Hope," which I read with much interest. I had the honour to belong for some years to the Naval Medical Department, and have only retired within the last six weeks, so am naturally well acquainted with the feeling of the naval medical officers. It appears to me that, to say the least, "Hope's" statements are exaggerated. I for my part have not had to submit to contemptuous treatment from executive officers, nor have I heard complaints from others on this subject. Nevertheless, I am not less emphatic than he in advising young men thinking of entering the service to pause long and think hard before they do so.

Putting aside the reputed intention of the Admiralty of abolishing the branch and of introducing civil servants, there is a very real and present grievance to be considered. The candidate is promised that after eight years' full-pay service as surgeon he shall be granted the rank of staff surgeon, provided always that he passes a certain examination.

This examination covers five subjects—namely, medicine, surgery, pathology, general hygiene, and naval hygiene; it is entirely theoretical in nature. It is held twice yearly, and in the last two years about three out of every four have been "ploughed." Nor is this all; for of those who failed some are men known to be clever and hard-working, one failing in a subject in which he had specialized. This examination, the injustice of which has become a byword in the service, is conducted by the civil Advisory Board (naval hygiene excepted).

It may be objected that, after all, this examination is comparable to that which R.A.M.C. officers have to pass after a certain period in the service, but these officers have six months' study time in London immediately before, which puts them on quite a different footing, as regards these prospects of passing an examination, from the naval surgeon, who may just have arrived from a three-years' commission abroad.

My object in writing this letter is not to enter into a general discussion, but to warn young graduates that after eight years' service they may find their promotion and increase of pay blocked by an examination, for the passing of which fair ability and hard work appear to be no guarantee.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF OXFORD.

Degrees.—The following medical degree was conferred in a Congregation held on Saturday, January 27th: *Bachelor of Medicine and Surgery.*—H. D. Davis, B.A., Balliol College.

UNIVERSITY OF CAMBRIDGE.

On February 1st the report of the Special Board for Medicine on "Dissertations in Absentia" for Doctors and Bachelors of Medicine residing abroad passed the Senate.

The following degrees were conferred:

M.D.—C. D. Henry, Joh.; O. F. Paget, Gonv. and Cai.
M.B., B.C.—S. Gooding, Joh.; M. A. Cassidy, Cla.
B.C.—F. M. Smith, Christ.

UNIVERSITY OF LONDON.

LONDON HOSPITAL MEDICAL COLLEGE.

A COURSE of four lectures on the X-Ray and Light Treatment of Diseases of the Skin was commenced by Dr. J. H. Sequeira on February 6th, in the Physiological Theatre at the London Hospital Medical College. The lectures, which are intended for advanced students, will be continued on February 13th, 20th, and 27th, at 1 p.m. Members of the profession and any member of a London school of medicine may attend the course.

ST. BARTHOLOMEW'S HOSPITAL.

Luther Holden Research Scholarship.

MR. HAROLD W. WILSON, F.R.C.S. Eng., late House-Surgeon to St. Bartholomew's Hospital, has been elected to the Luther Holden Research Scholarship in Surgery for one year. The Scholarship is of the annual value of 100 guineas, and was founded by the bequest of the late Mr. Luther Holden, formerly Surgeon to St. Bartholomew's Hospital, and President of the Royal College of Surgeons. The holder of the Scholarship must carry out such research work in surgery as may be approved by the Electors, either in the United Kingdom or abroad. Mr. Wilson proposes to carry on research work in urinary surgery.

APOTHECARIES' HALL OF IRELAND.

THE following are the results of the January examination for the Diploma:

W. Shaw-Stewart passed in Chemistry and Junior Anatomy, and completed First Professional. J. E. McDonogh passed in Chemistry and Physics. M. Moody passed in Senior Anatomy, and completed the Second Professional. J. Gillespie passed in all subjects, and completed the Third Professional. D. J. Boyle and J. Hartigan passed in Pharmacy, and completed the Third Professional. N. J. Murphy passed in Hygiene, and completed the Third Professional. M. Moody passed in Hygiene. D. J. Boyle passed in Medicine, Surgery, and Midwifery. J. Gillespie and J. Hartigan passed in Medicine, Surgery, Midwifery, and Ophthalmology, and completed the Fourth (Final) Professional, and have received the Diploma of the Society.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

MEDICAL OFFICERS' DEPUTIES.

WE learn from the *Poor-law Officers' Journal* that at a recent meeting of the Lambeth Guardians the question cropped up as to whether Dr. Alice Johnson, the medical officer to the schools, could reasonably be expected to incur the liability of any possible expense for medical attendance on emergent cases during her own absence from duty, if Dr. Adams became her deputy by appointment of the Board.

The guardians, after reconsidering this question, appeared to think that, as Dr. Johnson when appointed was not engaged to give her whole time to the duties of her office, any such liability as that which she objected to ought not to be enforced upon her.

The Clerk to the Board gave as his opinion that it would not be possible for the guardians to enforce payment for the services of a deputy from one of their own staff, and suggested that application should be made to the Local Government Board to allow them to appoint a deputy to attend emergency cases on a fixed scale of payment, this expense to be borne by them.

We are glad to see that the plan first devised by the guardians—namely, to provide medical attendance on emergency cases when their own appointed medical officer was not available, but not at their own expense—was with little or no opposition annulled, and the clerk's advice taken to procure the requisite medical attendance by a different procedure, which will relieve Dr. Johnson of the responsibility she objected to. As the plan the guardians have finally decided upon appears to be in every respect reasonable, we have no doubt the Local Government Board will at once fall in with their views and grant them the necessary powers to carry them out. We are very pleased to note that Dr. Alice Johnson's claim has been so readily met by the Lambeth Guardians.

PREVENTION OF INFANTILE MORTALITY.

DR. COLLINGRIDGE, Medical Officer of Health for the City of London, in his report for the first fortnight of this year states that Miss Pole, one of the Women Sanitary Inspectors, who has had previous experience of this work, has undertaken the duty of visiting all houses where births have been notified by the registrars, and also those where deaths of children under one year of age have occurred. The main object of these visits is to impress upon mothers the great advantage of breast-feeding as compared with hand feeding. It has been shown that in some large towns the mortality during the first year of life among breast-fed infants was only about one-third of that among hand-fed children. It is impossible to overstate the significance of these figures, which clearly indicate a great loss of life from a preventable cause. While improved sanitation has reduced the death-rate in London from 34.7 per 1,000 in 1881 to 16.6 in 1904, the deaths of children under 1 year of age per 1,000 births, which were 148 in the former year, reached almost the same high proportion, namely, 144, in 1904. It is now well recognized that this heavy infantile mortality is due to ignorance on the part of the mothers as to the danger incurred by injudicious feeding, and the efforts now being made in the direction of educating women, especially those of the poorer classes, in the proper manner of rearing their offspring during the first twelve months of their existence will, it is hoped, remove what is now undoubtedly a blot upon our civilization.