

circulation of nucleo-proteids derived from various organs.

Possibly the occurrence of various cerebral palsies in uraemia independent of haemorrhage is due not to vascular cramp effected by the entrance of renal substance into the circulation but is due to the coagulating properties of this fresh tissue or of some other organ involved in the disease. The action of kidney substance when once it has reached the circulation and produced a rise in pressure provides us with an explanation of the common occurrence of hypertrophy of the middle coat of the arteries and of the heart. There is no experimental evidence which would lead us to believe that mere elevation of blood pressure can cause degenerative change in the blood-vessels. Adrenalin, however, can cause widespread degeneration of the middle coat, development of atheroma, and even aneurysm. Though it is not possible to recognize any clinical correlative to the experimental production of atheroma in the blood-vessels by means of the injection of adrenalin or other suprarenal products, yet the fact that a substance derived from an organ like the suprarenal body can produce a disease so much like atheroma and so much like the earliest changes met with in the media in human pathology cannot fail to arouse our interest and stimulate further research on problems which have remained unsolved for so many years.

MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL.

TREATMENT OF COLIC.¹

IN May, 1905, I attended a Mussulman, aged 33, during the latter part of an attack of renal colic on the right side. It lasted, from beginning to end, seven days, and ended in the passage per urethram of two small, smooth, uric acid calculi. An interval of two months passed, during which he was quite well, and then a second attack began; it occurred to me, when I was called seven hours later, that its duration might be shortened by manipulation of the abdomen. Accordingly, having anaesthetized the patient deeply with chloroform, I put one hand behind and the other in front of the right kidney, and went through movements as if I were trying to roll it between my hands. This procedure was followed by the passage of the calculus and cessation of all pain within twenty-four hours. Two months later again he had a third attack, this time on the left side. I saw him within ten hours of its onset, and went through the already described procedure. When I called the next day he was still in pain, so I again manipulated, and less than five hours later, and within forty-eight hours of pain commencing, the stone was passed. Since then he has been taking lithon- triptics, and up to the date of writing, some ten weeks afterwards, he has remained quite well. I have never seen manipulation advocated in this condition, and it seems a plan of treatment worthy of more extended trial. For it will be noted that whereas during the first attack the calculi took seven days in passing from the kidney to the bladder and urethra, the second and third attacks—those in which manipulation was used—lasted respectively only one and two days. I do not think we need fear damage to the renal tissues of the ureter, because (1) the stones are generally small; (2) they are invariably smooth or finely tuberculated, (3) several structures intervene between the surgeon's hands and the calculus and thus disseminate the pressure applied by the hands without materially diminishing the rolling movement which is exercised and intended to dislodge the calculus from the sinus of the kidney.

The rapid passage of a calculus under manipulation can probably be ascribed partly to the rolling movements liberating it from recesses and partly to the chloroform counteracting spasm of the ureter.

DENHAM C. WOODS, L.R.C.P., L.R.C.S.Ed.,
Raichur, India. Senior Plague Medical Officer, Raichur.

¹ Condensed.

SUCCESSFUL VACCINATION.—Dr. Henry J. F. Badcock, Public Vaccinator for the Gillingham District of the Medway Union, has received the Government grant for successful vaccination.

REPORTS

ON

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

DUNDEE DISTRICT ASYLUM.

(By HENRY C. MARTIN, M.B., Resident Medical Officer.)

As an example of abnormally small viscera in the adult, I send you a few particulars of a case which recently came under my notice.

A woman, J. W., aged 28 years, died in this institution from exhaustion following acute mania on May 22nd. She was well developed, 5 ft. 3 in. in height, with no external deformity or malformation, and, although emaciated at the time of her death, was well nourished when admitted. She had enjoyed good health previously.

At the *post-mortem* examination the following facts were ascertained: The lungs, which were normal as regards the number of lobes, etc., were in size those of a child, the left weighing 7 oz. and the right 6 oz. The heart weighed 7 oz.; the lumen of the aorta was small, scarcely admitting the little finger.

The liver weighed 39 oz.; it showed no pathological change except some venous congestion. The spleen weighed 2 oz.; it was very distinctly divided into an upper and lower lobe; the small weight may partly have been due to the exhaustion. Each kidney weighed 3½ oz.—slightly below normal. The lumen of the small intestine was very small—not larger than the index finger.

The brain weighed 44 oz., thus being about the normal for the female.

According to *Gray's Anatomy*, the average weights of these viscera are:

Lung (right), 22 oz.; (left), 20 oz.
Heart (female), 8 to 10 oz.
Brain (female), 44 oz.
Liver, 50 to 60 oz.
Spleen, 7 oz.
Kidney (right), 4 to 5½ oz.; (left), 4 to 5½ oz.

British Medical Association.

CLINICAL AND SCIENTIFIC PROCEEDINGS.

NORTH OF ENGLAND BRANCH.

Stockton-on-Tees, April 25th, 1906.

Dr. FULTON in the Chair.

The Treatment of Heart Disease.—Dr. GEORGE MURRAY (Newcastle-on-Tyne) read a paper on some points in the treatment of acute and chronic heart disease. He emphasized the importance of (1) administering salicylate of sodium in acute rheumatism—10 gr. every hour until the urgent symptoms subsided—and the continuance of administration for six weeks; (2) the careful examination for pericarditis and endocarditis; and (3) for nodules. He drew attention to the frequent absence of joint lesions in children. For endocarditis he recommended the administration of iodide of sodium for four to six weeks and the application of a series of small blisters. In mitral stenosis digitalis not only did no good, but often did harm; experiments on dogs showed that digitalis dilated the left auricle; sodium nitrite sometimes did good. He related the case of a man who had mitral regurgitation at 20 years of age and lived until he was 90 years old, his condition being greatly relieved, when his heart became embarrassed, by taking blue pills. In order of merit for the treatment of rheumatic heart affections he would place, first, digitalis—fresh infusion, combination of tincture (m.v) with fresh infusion (3ij) or liquid extract (Parke, Davis), persevered with for a week, as the full effect is very often not produced until that time has elapsed; secondly, apocynum cannabinum 5 to 10 minims of the tincture (cannot be given for long periods as it produces vomiting); and, thirdly, tinct. strophanthus, 10 minim doses. Tincture of convallaria is more especially useful in the heart troubles of exophthalmic goitre; nux vomica

MEDICAL NEWS.

FRAÜLEIN LINDEN, M.D., has been appointed Second Assistant in the Anatomical Institute of Bonn.

DR. FRANCIS ALBERT SAW, Major, R.A.M.C. (retired), has been appointed Secretary of the Royal Institute of Public Health.

UNDER the will of the late Mr. Charles Edwin Trimmer, of Farnham, the Trimmer Cottage Hospital receives £3,000 and the Surrey County Hospital at Guildford £300.

AT the meeting of the London County Council on May 29th, Dr. R. M. Beaton, Dr. A. Salter and Sir Shirley Murphy were selected as the Council's Representatives at the National Conference on Infantile Mortality to be held at the Caxton Hall, Westminster, on June 13th and 14th, under the presidency of the President of the Local Government Board.

THE estate of the late Dr. Thomas Corbett, of Severn House, Droitwich, who died on April 22nd, has been sworn of the value of £388,729. Of this sum, some £61,000 is bequeathed to various hospitals and various charities in London and elsewhere. The balance of his estate, subject to a few general legacies, he left to his executors to spend upon such charitable objects and schemes as they may think fit. Among certain objects which the will states he would like them to consider are the building and endowment of a cottage hospital at Droitwich, of a convalescent home at Malvern, and of a sanatorium for the open-air treatment of consumption for the county of Warwick at Romsley. Dr. Corbett became M.R.C.S. in 1860 and L.S.A. in 1861. He joined the British Medical Association early in his career, and though he gave up practice some years ago, continued to belong to it to the time of his death. He was a brother of the late Mr. John Corbett, who was associated with the salt industry.

THE play *Raffles* at the Comedy Theatre is an excellent and amusing piece from the ordinary playgoer's point of view; it is full of movement and surprises, and the spectator never has a dull moment. But though it is a comedy verging on farce, it presents to people accustomed to look for such things a very interesting psychological study. We believe that it has been seen before in America, and we do not know how it was played there, but in the hands of Mr. Gerald du Maurier the part of the eponymous hero is a very remarkable performance. It is not quite certain that the actor realizes how very good and true his presentment of a particular type of aberration is. He gives a picture of an innate insane impulse cropping up in a character otherwise strong and even noble, which is enough to establish his position as one of the most brilliant of modern actors. The short scene in which he lets the insane impulse have full swing, describing his delight in his crime as a kind of sport, is either an extraordinary example of intuition or a very consummate work of art. If it is art and not accident, then no limit can be put to Mr. du Maurier's future achievements as an interpreter of character.

AT a distribution of prizes to female pupils at the Battersea Polytechnic Gymnasium on May 19th, Sir Frederick Treves delivered an address on physical culture, in the course of which he expressed the opinion that the outlook in respect of physical degeneration was not as gloomy as was sometimes represented, any signs of it deserved attention, and gymnasia and physical training were steps in the right direction. Good physical development was as important for women as for men, and the value of physical culture for both sexes could not be exaggerated. To lead the strenuous life of modern times demanded excellent health, and there was scarcely any really successful man who was not physically strong. Sir Frederick Treves was followed by the President of the Local Government Board, who also took the view that the cry of physical degeneration was exaggerated. There were plenty of people who lacked robust health, but this in many cases was due to bad cooking and the injudicious selection of food, not to its insufficiency. As for gymnasia for girls, he liked to see young women graceful and active, but he liked still better that they should be able to wash, iron, and cook, and be fit to occupy the exalted position of mothers of families and to nurse a baby as well as swing dumb-bells.

THE half-yearly dinner of the Glasgow University Club in London took place at the Trocadero Restaurant on May 25th, and was very well attended. The Chairman, Sir Thomas McCall Anderson, Regius Professor of Medicine, in proposing the toast of the evening, sketched briefly the past and present position of the University. In respect of the number of students, facili-

ties for learning, and of income and expenditure, the progress, he showed, had been very great. Some forty years ago there were 1,242 students, 34 professors and teachers, and an income of £13,348. There were now, including 417 women, 2,272 undergraduates, 111 teachers, and an income which, when students' fees were included, overtopped £67,000. Moreover, during the last ten years £178,000 had been spent on improving and adding to the University buildings. To maintain, however, the existing degree of success further financial support was required in the way either of private generosity or of Government aid. The latter was equally difficult to obtain whatever party was in power, and at the present moment in particular it looked as if, after another million pounds had been given to primary schools, free meals arranged for the rising generation of scholars, pensions provided for their parents, the Chinese coolies repatriated, and salaries, free travelling, and postage furnished to Members of Parliament, there would not in any case be much left for higher education. Nevertheless, they must live in hope that Glasgow would obtain a portion of the sum due to Scotland in connexion with the Equivalent grant, and in the meantime bring the claims of the University to the notice of any generous and wealthy person they might happen to know. The toast of "The Guests," proposed by Sir William White, was coupled with the names of the Right. Hon. J. Parker Smith and Professor James Little, of Dublin, both of whom responded. The formal proceedings ended when the toast "The Chairman," proposed by Sir William Taylor, K.C.B., late Director of the Army Medical Department, had been duly honoured.

A PSYCHOLOGICAL INSTITUTE IN PARIS.—A General Institute of Psychology specially intended for the study of the phenomena of subconsciousness, the investigation of the causes of criminality, and the discovery of means of curing social evils will, it is announced, shortly be formally constituted in Paris. Among those to whom the initiation of the scheme is mainly due are Professors Brouardel, d'Arsonval, and Gariel, and MM. Boutroux, Giard, and A. Picard. In January last M. Dubief authorized a lottery of four millions of francs, the product of which will be applied to the purchase of a site for the proposed institute and the erection of a building containing a series of fully-equipped laboratories, a library, and a museum.

A MEDICO-HISTORICAL EXHIBITION IN LONDON.—Mr. Henry S. Wellcome is organizing an exhibition in connexion with the history of medicine, chemistry, pharmacy, and the allied sciences. It is his aim to bring together a collection of historical objects illustrating the development of the art and science of healing throughout the ages. The exhibition, which will be strictly professional and scientific in character, will not be open to the general public. For many years Mr. Wellcome has been engaged in researches respecting the early methods employed in the healing art, both among civilized and uncivilized peoples. In particular it has been his object to trace the origin of the use of remedial agents. There is a considerable amount of information scattered throughout the world in folk-lore, in early manuscripts, and in printed books, but the difficulties of tracing out and sifting the evidence are great. Mr. Wellcome will greatly value any information sent him in regard to medical lore, early traditions or references to ancient medical treatment in manuscripts, printed works, etc., and he undertakes that the greatest care shall be taken of any objects of historical medical interest lent for the exhibition.

CREMATION IN ENGLAND.—The report of the Council of the Cremation Society of England for 1905 states that during that year the number of cremations carried out at Woking was 95, as compared with 138 in the previous year. The falling off is said to be due in some measure to the increased number of crematories now in operation throughout the country and the increasing activity of that at Golder's Green. The Council intends to take more energetic steps to make the advantages of cremation more widely known by advertising in various ways. The total number of cremations performed at Woking to the end of 1905 is 2,748. Among the well-known persons whose remains have been disposed of in this way during 1905 were Lady Diana Huddleston, Dr. George MacDonald, Dr. Barnardo, Sir Francis Drummond-Hay, and Sir Clinton Edward Dawkins. A memorial to the late Sir Henry Thompson, who took so active a part in the initiation and development of cremation in this country, has been erected in the chapel at Golder's Green. It is in statuary marble, and incorporates a marble bust of the late distinguished surgeon presented to the Society by his family.

John Bryant was essentially a sportsman in all he undertook, and in the world of practical sport was well known as a fine Rugby half-back, playing for Guy's, Surrey County, and Richmond. Rugby football was the game he loved and at which he excelled. He was, in addition, no mean sprinter in his day, and always took the keenest interest in, and officiated as judge at, the hospital sports.

He was Fellow or Member of the chief London medical societies; and the author of several important papers, amongst which was one on "Electro-therapeutics" in Hale White's textbook of *Therapeutics*, and one on "Diseases of the Abdominal Blood Vessels," in *Allchin's System of Medicine*. To *Guy's Hospital Reports* he contributed "Hyperpyrexia," "Suppurative Pylephlebitis," "Functional Pulmonary Regurgitation," etc., and other papers to the *Clinical Journal* and the *BRITISH MEDICAL JOURNAL*.

Dr. Bryant married in 1900 Miss Stella Beatrice Fry, the sixth daughter of Mr. R. H. Fry, of Norwood; and very keen sympathy is felt for that lady and their three young children in their sad bereavement.

The deceased was buried at Ilminster on May 26th, in the presence of his family, a few old friends, and members of the staff of Guy's Hospital.

WE regret to announce the death of Dr. TARNOWSKY, the distinguished Professor of Dermatology and Syphilography at the Medical Academy, St. Petersburg, which took place on May 18th at Paris, where he had been staying for a few days. Professor Tarnowsky was 78 years of age. His remains were taken to Yalta in the Crimea for burial.

BRIGADE-SURGEON-LIEUTENANT-COLONEL GEO. MASSY, I.M.S. (retired), died at Bath on May 14th at the age of 64. The deceased, who obtained the diplomas of M.R.C.S.Eng. in 1864 and L.R.C.P.I. in 1865, entered the service as an Assistant-Surgeon in October, 1865; he became Brigade-Surgeon-Lieutenant-Colonel in March, 1890, and retired some years later.

WE regret to record the death of Staff Surgeon O'REGAN, R.N., from pneumonia, at his residence, Essa Villa, Saltash. Staff Surgeon O'Regan was educated at Queen's College, Cork, and at Edinburgh, and entered the Navy in 1890. He served in the naval hospitals at Hong Kong and Bermuda, and for three years was in medical charge of the Naval Reserve drill ship at St. John's, Newfoundland. At the time of his death he was serving in H.M.S. *Trafalgar* at Devonport. He leaves a wife and three children to mourn his loss.

MAJOR HARRY WILLIAM ELPHICK, M.B., Indian Medical Service, died at Rugby, May 20th, aged 40 years. He joined the Bengal Medical Department as Surgeon-Captain, September 30th, 1889; and became Major, September 30th, 1901. He was placed on half-pay, March 6th, 1905. He took part in the Manipur Expedition in 1891, receiving a medal with clasp.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. S. Schreiber, formerly professor of anthropology in the University of Bucharest, and afterwards a leading neurologist of Budapest, aged 71; Surgeon-General A. von Kristopenko, Inspector of Russian Benevolent Institutions; and Dr. Hermann Obst, Extraordinary Professor of Ethnology and Anthropology in the University of Leipzig, and author of an atlas of anatomy which has gone through two editions, aged 69.

ROYAL NAVY AND ARMY MEDICAL SERVICES.

YEOMANRY MEDICAL CERTIFICATES OF UNFITNESS. VOLUNTEER.—The Yeomanry are distinct from the Volunteers and more nearly allied to the Militia. The commanding officer of a Yeomanry regiment can order the arrest of any Yeoman who does not report himself at the commencement of the annual training. In the case of unfitness from sickness the commanding officer relies upon his regimental medical officer, on whose certificate alone exemption is granted. In some Yeomanry regiments any men who claim exemption from training (camp) on the ground of ill-health

can be seen by the regimental medical officer at the head quarters of the regiment on some specified day before camp. In the particular case under consideration the best procedure would probably be for the medical practitioner to communicate directly with the medical officer of the regiment, stating his reasons for considering that attendance in camp (even for a day or two) might be detrimental, and asking that the Yeoman might be examined before the commencement of the camp.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF OXFORD.

Appointment of Examiners.—At a Convocation held on Tuesday, May 22nd, the following appointments were confirmed: James Ritchie, M.A., B.Sc., Fellow of New College, Professor of Pathology, to serve as Examiner in Preventive Medicine for the 1906, 1907, and 1908 examinations; Henry A. Miers, M.A., D.Sc., Fellow of Magdalen College, Waynflete Professor of Mineralogy; and Gilbert C. Bourne, M.A., D.Sc., Fellow of New College, Lecturer in Comparative Anatomy, to act as Examiners for the Burdett-Coutts Scholarship in Michaelmas Term, 1906.

Degree in Science.—The degree of B.Sc. has been conferred on Herbert Henry Thomas, B.A., Balliol College.

Public Lectures.—The Romanes Lecture has been postponed until Michaelmas Term, owing to the illness of the lecturer. The Herbert Spencer Lecture will be delivered on Thursday, June 7th, by the Hon. Auberon E. W. M. Herbert, D.C.L., St. John's College.

UNIVERSITY OF CAMBRIDGE.

At the congregation on May 24th the recommendations of the General Board of Studies was confirmed to institute a Readership in Hygiene, and that Dr. H. F. Nuttall, M.A., of Christ College, be appointed at an annual stipend of £250.

The following degrees were conferred:

M.B., B.S.: S. A. Henry, Trin.

B.C.: G. L. Webb, Gonv. and Cai.

At the voting on Friday and Saturday, May 25th and 26th, the recommendations of the Studies and Examinations Syndicates, the Placets numbered 241, and the Non-Placets 746.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

THE following candidates have been approved at the examinations undernoted:

First Fellowship.—H. Greene, R. V. Khedkar, J. W. Killen, O. St. J. Gogarty, J. P. Grainger, C. Greer, W. E. Hopkins, S. W. Hudson, H. B. Sherlock, C. J. W. Tierney, P. J. Timoney.
Final Fellowship.—C. M. Benson, P. J. Byrne, A. N. Crawford, P. L. Crosbie, W. L. Murphy, W. J. Niblock (Captain I.M.S.), G. Sheppard, R. A. Stoney.

Messrs. D. J. Coffey and E. L. Ledwich have been appointed Examiners in Physiology and Histology.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE COMING COUNCIL ELECTION.

THE Council is at present constituted as follows:

President.

Mr. J. Tweedy; C, (1) 1892, (2) 1900 (substitute for Mr. Davies-Colley till 1904, but retains his seat, being President).

Vice-Presidents.

Mr. H. T. Butlin; C, (1) 1895, (2) 1903.
Mr. Edmund Owen; C, (1) 1897, (2) 1905.

Other Members of Council.

Mr. J. Langton; C, (1) 1890, (2) 1898.
Mr. F. Howard Marsh; C, (1) 1892 (substitute), (2) 1894, (3) 1902.
Mr. H. Morris; C, (1) 1893 (substitute), (2) 1898.
Mr. A. W. Mayo Robson; C, (1) 1893, (2) 1901.
Mr. R. J. Godlee; C, (1) 1897, (2) 1905.
Mr. W. Watson Cheyne, C.B.; C, (1) 1897 (substitute), (2) 1901.
Mr. F. Richardson Cross; C, 1898.
Mr. Herbert W. Page; C, 1899.
Mr. A. Pearce Gould; C, 1900.
Mr. J. Ward Cousins; C, (1) 1895 (substitute), (2) 1897 (substitute), (3) 1900.
Mr. R. Clement Lucas; C, 1901.
Mr. J. H. Morgan, C.V.O.; C, 1902.
Mr. H. H. Clutton; C, 1902.
Mr. C. W. Mansell Moullin; C, 1902.
Mr. Clinton T. Dent; C, 1903.
Mr. G. H. Makins, C.B.; C, 1903.
Mr. F. S. Eve; C, 1904 (substitute for Mr. T. R. Jessop until 1907).
Mr. A. A. Bowlby, C.M.G.; C, 1904.
Mr. Gilbert Barling; C, 1904.
Mr. C. H. Golding-Bird; C, 1905.
Mr. W. Harrison Cripps; C, 1905 (substitute for Sir Alfred Cooper until 1908).
Thus Mr. Langton, Mr. H. Morris, and Mr. Richardson Cross retire, having held their seats for eight years since election or re-election in 1898.

The following list shows the proportional representation of metropolitan medical schools and of the provinces :

St. Bartholomew's	...	...	4
Charing Cross	...	...	1
Guy's	...	...	2
King's College	...	...	1
London	...	...	2
Middlesex	...	...	2
St. George's	...	...	1
St. Mary's	...	...	2
St. Thomas's	...	...	2
University College	...	...	2
<hr/>			
Total number attached to London			
Schools	...	...	19
London member unattached to			
any hospital	...	...	1
Provincial members (Birmingham,			
Bristol, Cambridge, and Southsea)	...	...	4
<hr/>			
Total	...	...	24

MEDICO-LEGAL AND MEDICO-ETHICAL.

THE CHRISTIAN SCIENCE CASE.

IN the BRITISH MEDICAL JOURNAL of May 19th it was mentioned that Mr. George Robert Adcock had been charged at Westminster Police Court with feloniously causing the death of Major J. N. Whyte, D.S.O., by wilful neglect between January 26th and April 29th. The hearing was resumed on May 19th. Mr. Bodkin, who, with Mr. Williamson, prosecuted on behalf of the Treasury, said that defendant was a properly qualified medical man, and for his attendance on Major Whyte was receiving payment at the rate of a guinea a week. The defendant gave instructions from time to time, but no remedial agents were used for deceased's terrible bedsores, and the result was a shocking condition of septic poisoning. The negligence of defendant was a conscious omission to take the usual and ordinary precautions and adopt ordinary remedies which the accepted knowledge of the day required from those claiming to be skilled in the treatment of the sick.

Dr. Freyberger gave evidence as to the results of the *post-mortem* examination, which left no doubt that death was due to general blood poisoning. The accused was further remanded in custody, and the hearing was resumed on May 27th.

Sir Victor Horsley, who took the Scotch oath, deposed that he saw Major Whyte at Hinckley in February, 1903, suffering from a fractured spine through a hunting accident. There was complete paralysis of the lower part of the body. An operation was performed to relieve the pressure of bones driven into the spinal cord. Three months later Major Whyte was brought to London and taken to a nursing home at Westbourne Gardens. Mr. Huxley was also in attendance. Deceased's condition had by this time improved. Major Whyte remained at the home six or eight months, his improvement being maintained. Miss Robson, at the home, did a great deal for him. While in the home he had a bed sore; it was a very serious one, and it healed very slowly. The sore was properly treated. In May, 1904, the deceased proceeded to Osborne, and he saw him no more until called in on April 29th this year. The Major was then dying at Eaton Terrace. Deceased was suffering from an enormous bed sore and abscess which must have existed for months. Had there been a continuance of the antiseptic treatment which deceased had had at the nursing home, the wound would not have been in the terrible condition witness found it. In all probability it would have healed, and Major Whyte's life would have been saved. The ordinary and recognized proper professional methods were not adopted to save the deceased from blood poisoning. An ordinary zinc oxide powder dusted over purulent wounds—said to be defendant's only treatment—would have no antiseptic effect.

Mr. Kingsbury (for the prisoner) asked the witness whether he could say with absolute precision that the classical treatment of the sores would have resulted in his recovery? Sir Victor Horsley: I am quite prepared to say that I think the sore would have healed up. Under treatment for a long period there had been no set-back. Mr. Kingsbury: The standard of adequate treatment varies with medical men. There is no fixed standard? The Witness: I cannot say that. There is a standard of disinfection which we all perfectly understand. In further cross-examination, the witness said the danger from bedsores, particularly in cases of fractures of the spine, was sepsis. Notwithstanding the strictest antiseptic precautions, there was always a great risk. Of course, they knew a great deal more of antiseptic precautions now than they did ten years ago. Mr. Kingsbury: Am I right in saying that there was much divergence of opinion as to the benefit of antiseptics in early days?—Yes. And that some early surgeons never adopted the antiseptic treatment?—Yes. But still obtained very good results?—I cannot accept that at all. From the time I was a student I have seen both lines of practice, and the result of not using antiseptics was disastrous. Of course, everybody carries out the antiseptic treatment now. Answering other questions, the witness said that when he saw

Major Whyte on the day of his death the extent of septic poisoning was such that a fatal issue dated from many weeks—possibly six or eight, even twelve, perhaps.

Mrs. Whyte (mother of Major Whyte) said that in March last she had an interview with the defendant which turned on the point whether he would treat her son as a medical man; he said he would, and at subsequent interviews expressed his willingness to meet any other doctors in consultation. From first to last the prisoner had done nothing and said nothing to indicate he was treating her son otherwise than as an ordinary medical man. In cross-examination she said that her son wished to try Christian Science, as the doctors could do little more for him. After being under Christian Science treatment for some time he said that he was better and had lost his pain: her son had told her that Adcock had abandoned his practice to become a Christian Scientist.

The accused was again remanded.

AN ACQUITTAL.

At the May Liverpool Assizes Dr. Charles John Holtom, formerly of Stretford, was tried on three charges. The first was one of murder in respect of the death of a girl who a few days after entering his service as a servant was delivered by him of a child; the second was one of performing an illegal operation in connexion with the same patient, and the third of performing a similarly illegal operation at an anterior date on another woman. He was acquitted on all three charges.

PROFESSIONAL SECRECY.

PERPLEXED writes: I am in attendance upon one of the parties in a divorce case now pending (my patient being the defendant). I am subpoenaed to give evidence by the petitioner against my wish, as the evidence I should be called upon to give would be distinctly damaging to my patient's character and reputation. Am I compelled to give this evidence if put into the witness-box, or can I decline to do so without the previous consent of my patient? If I refuse to do so what is the penalty?

* * If summoned as a witness, our correspondent must attend and answer such questions as the judge may direct; he may decline to answer each question subject to that direction. If he refused to answer when directed to do so by the judge he would commit a contempt of court, the punishment for which is at the discretion of the judge. English professional opinion accepts the position that the practitioner is absolved from the obligation of professional secrecy regarding those matters which he is expressly directed by the judge to disclose in the witness-box.

VALUE OF A PRACTICE.

FESTINA LENTE asks on what basis the value of a "mixed practice in a nice seaside place" ought to be calculated; and whether during the last two years the receipts in most practices have fallen off.

* * The value of such a practice should probably be calculated in the same way as other practices—that is to say, by taking the average receipts for the last three years. It would further be desirable to note whether the receipts tended to rise or fall and the amount of the necessary expenses in carrying on the practice. It is impossible to say whether during the last two years the receipts in most practices have fallen off.

THE USE OF NON-REGISTRABLE DEGREES.

M.D. BRUX. writes to say that he fears "Varsity" has not gone into the facts. He claims to be the oldest Doctor of Medicine of the University of Brussels in England, and he assures "Varsity" that the examination was "much more thorough, practical, and stiff than the M.R.C.S., L.S.A., and L.R.C.P. put together," and that he believes at the present time it is "stiffer than the M.D. Durh. or M.D. Glasg. or the M.D. St. And." He thinks the whole system is wrong, but until that happy time comes when all the various examining boards will be unified he regrets that this matter should be made a perennial source of petty jealousies and heart-burnings, which he thinks constitute a great obstacle to the fraternal union of our noble profession.

VARSITY writes to complain that our answer to him under this heading is "very unsatisfactory" but we do not profess to sympathize with the opinions he expresses. He desires to set up a new rule which is opposed to courtesy and custom.

THE CORONER'S COURT.

"NUNQUAM" is the medical officer to a workhouse, and admitted a sick child, who died there; he certified the death as arising from natural causes. He accidentally discovered that the body had been removed by order of the coroner to the public mortuary, and that an inquest was going to be held. He was present at the autopsy, which was made by another medical man, the cause of death being as certified by himself. At the inquest the cause of death was con-