

on large doses of ipecacuanha from April 26th to 30th on the supposition that there might be some latent amoebic dysentery in the upper part of the large bowel. On examining him again with the x rays, the right arch of the diaphragm was rather high, and moving less freely than the right, so on May 7th exploratory puncture was again performed but no pus was found. Except for occasional slight dragging pain on deep respiration, he remains quite well five weeks after the operation and is about to return to his work. The high leucocyte counts during convalescence were probably caused by absorption of the remaining pus in the abscess.

The main point of interest about this case is that it is such a very different type from the first one, being as chronic an abscess as the former was acute, yet the effect of the treatment was equally prompt and satisfactory.

REFERENCES.

¹ BRITISH MEDICAL JOURNAL, September 20th, 1902. ² BRITISH MEDICAL JOURNAL, November 11th, 1905. ³ Indian Medical Gazette, March, 1905.

A CASE OF PNEUMOCOCCIC ARTHRITIS.

By STANLEY RAW, M.D., B.S.DUNELM., F.R.C.S.EDIN.,
SUNDERLAND.

THE following case, which recently occurred in my practice, makes an addition to the interesting series of cases of pneumococcic arthritis compiled by Messrs. Wrangham and Secretan, and published in the BRITISH MEDICAL JOURNAL of April 21st, though unfortunately it was not attended by so happy a result:

A male, aged 40, first came under my notice during the last few days of August, 1905, when I was asked to see him, as he had for some time been complaining of perineal irritation, whilst for a longer period he had suffered from morning retching and vomiting. He was a well-made man, of no occupation, and had been accustomed to free drinking, his average consumption of liquor for at least a dozen years having exceeded four bottles of whisky a week, in addition to which he took beer to his dinner and supper. Up to this date he had been in good health, but on examination I found evidences of commencing peripheral neuritis, and the morning gastric disturbance was of an undoubtedly alcoholic character. With the exception of a small internal pile, and the marks of scratching to relieve pruritus, there was nothing of importance in the perineum, but on examining him again after an interval of three days I found that an acute abscess had developed in the right ischio-rectal fossa. This was opened on September 2nd, and the pus was characteristic of *Bacillus coli communis* infection. He made an excellent recovery, with the addition that, owing to his enforced incapacity and abstinence, he was in much better health at the end of his illness than he had been for years, and he had gained over a stone in weight.

I was again called to see him in March this year, when his landlady informed me that, after his previous illness, he soon lapsed into his former habits, but he had remained well until two days before I was sent for, when he had a shivering. Since that time he had felt generally unwell, and he had that morning complained of an acute pain in his chest. On first sight he was evidently very ill, and I found that his temperature was 104.2° F., pulse-rate 134, and respiratory rate 27. On the next day, April 1st, there were well-marked signs of double basal lobar pneumonia, with an increased pulse rate and respiratory rate, and a temperature ranging between 103° and 104° F. So events progressed until the evening of April 4th, when he was violently delirious, with a small, thready, radial pulse. I was convinced that the delirium was in great part due to his previous alcohol, and, acting on this opinion, I gave him 40 minims of tr. digitalis in a little whisky, and with most beneficial result. Thirty minutes after taking it he was quite calm, and he then slept for six hours, when he was given some nourishment. He again dozed until morning, when he was quite rational, and from that time to the end he was not again delirious.

On April 7th he had a definite crisis. He was extremely weak, but, contrary to my expectation, he had now every appearance of doing well, and he did so until the evening of the 8th, when he complained of acute pain in the right knee, which had commenced that afternoon. The knee was slightly swollen and tender, and, though I suspected a commencing pneumococcic arthritis, there was at that time no occasion for surgical interference, and the joint was fomented and immobilized with great relief to the patient. The condition, however, continued to progress, and on the morning of the 9th the joint was so swollen that the outlines of the synovial pouches were easily discernible, and on drawing off some of the fluid it was seen to consist of creamy "tuberculous" pus. The man was too ill for the administration of a general anaesthetic, so the same day I opened the joint under the local injection of eucaine and adrenalin, and let out 5½ oz. of pus. The joint was irrigated and drained, the operation being quite painless, whilst of course it was done with strict antiseptic precautions. The pneumococcus was obtained from the pus. The pain in the knee was at once relieved, and the patient had a refreshing

sleep, but, despite free oral, rectal, and hypodermic stimulation, he rapidly lost ground until the morning of the 10th, when his pulse rate was over 180, the pulse itself being small, thready, and easily compressible. As a last resort I determined to transfuse him, and to this end I opened his median basilic vein and infused 4 pints of sterilized normal saline solution. There was a marked rallying after this operation, but it was very transitory, and the patient again commenced to sink rapidly. He died the same day.

MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL.

A FAMILY INFECTED WITH SYPHILIS.

IN July, 1904, a girl, who had contracted syphilis two years before and had but a few months' treatment, gave birth to an illegitimate female child, which developed universal pemphigus a few days after birth, but recovered. The girl returned to service, leaving the child to the care of her mother, who understood the disease and its contagiousness. Mercurial treatment was not continued more than about six months. In December, 1905, the child had some trouble around the anus and a sore mouth, but it did not come under treatment till January 11th, when condylomata were found around the anus and some stomatitis; there were no cracks around the mouth and the tonsils appeared clear. At the end of January the grandmother came under treatment for an indurated sore on the right side of the lower lip, a sloughing ulcer on the right tonsil, a mass of hard glands beneath the jaw, and bad stomatitis. The sore on the lip had begun about a fortnight before, and she was certain the sore throat had begun at the same time, perhaps before. Within ten days all doubt as to diagnosis was set at rest by the appearance of a universal copper-coloured rash inclined to scale. Upon this a daughter, aged 12, was brought up with a sore throat, which had continued for three weeks without improvement. On the left tonsil was an extensive ulcer with irregular edges, part of it covered with a wash-leatherlike slough, with a mass of glands beneath the sterno-mastoid. Within a few days she developed a rash in colour and extent exactly like her mother's. There was no other external sore.

When the girl's rash developed, a younger brother, aged 7, was sent up with a similar sore throat on the right side. In him also a rash developed at the end of February, but of much smaller extent, almost entirely confined to the chest and back in a few isolated patches. Except the tonsil, there was no other sore.

The baby had been lately fed by spoon, and, after the customary manner of primitive nurses, the food had first been tasted. This would be done more than once during a meal. Both the grandmother and girl had fed the child in this way; the boy had not, but there is the possibility that he used the spoon unwashed.

Each of these patients seemed to have primary sores on the tonsil—an unusual situation—the grandmother having also a coexisting one on the lip.

The point especially to be emphasized is the age of the child—nearly 18 months—when she infected others, and therefore the necessity for lengthened treatment in these children and increased watchfulness for the sake of others.

By the end of April all obvious signs of the disease in all three had disappeared.

St. Ives, Huntingdonshire.

W. R. GROVE, M.D.

ASEXUAL DEVELOPMENT OF THE *SPIRILLUM OBERMEIERI*.

TOWARDS the end of December, 1905, a series of cases of relapsing fever occurred in the 109th Infantry at Ahmedabad among recruits lately brought in from an outside district; from these infection spread till it was stopped by quarantine measures being enforced.

Numerous blood smears were taken at the time and stained in various ways. The *Spirillum obermeieri* was detected in every case, but only in certain of the slides were the following points observed: The spirilla were mostly lying clear of the red cells and outstretched; often semicircles, knots, or one or both ends forming a small circle were seen, sometimes one end adherent to the rim of a red corpuscle for a short distance, and some-

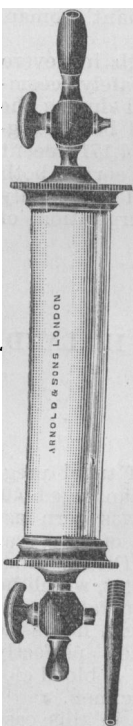
times one end, having pierced the rim of a corpuscle, was lying in the latter's substance for a greater or less distance of its length, and, lastly, a whole spirillum lying curled up unevenly and wholly within the body of a haemocyte. The stage succeeding this was that the self-imprisoned spirillum broke up into about a dozen sections, and the final appearance of the specimen—as stained by Romanowsky—was a pale green haemocyte with a dozen deep red dots, the remains of the *Spirillum obermeieri*. The further stages have not yet been worked out, but from the conditions under which the spread of the infection took place—reported in the *Indian Medical Gazette* of April, 1906—it is permissible to assume that at least a possible channel was through the mosquito which abounded to a certain extent at that time.

Ahmedabad, India.

W. H. Cox, Captain, I.M.S.

BLADDER AND URETHRA INJECTIONS.

WHEREVER instruments have to be used in connexion with the lower urinary organs it is always well to fill the urethra or bladder, as the case may be, with some antiseptic solution by way of obviating disagreeable results. There are, of course, various suitable solutions, but the one I prefer is a weak silver salt, while the syringe which I habitually use, and find extremely efficient, is the one here illustrated. As will be seen, it is a simple barrel, with a nozzle and tap at each end. Its strong point is that it has no piston to foul the solution in use or to drive home, and that it can be actuated with sufficient force to fill the bladder, even without a catheter, by applying any elastic ball to one or other of its ends. It can also be filled, if desired, before leaving the house, and the taps being turned, carried about like a bottle. By the use of another and larger instrument, made to stand, but of the same character, I am enabled to carry out the irrigation treatment of urethritis on scientific principles. This is rendered possible by means of a pressure gauge attached. The gauge shows the force employed in overcoming the resistance of the urethral sphincters. The absence of these desirable aids, and the abruptness of its action, rendered the old means prohibitive in some cases. It is not always justifiable to overcome the compressor muscle, for serious damage may be caused to the spongy urethra. It is well to know how far to go.



Finsbury Pavement.

JAMES MACMUNN.

MYCETOMA (MADURA FOOT) IN THE YEMEN.

I HAVE read with much interest the article by Dr. Frank G. Clemow on "Mycetoma in the Yemen" in the *BRITISH MEDICAL JOURNAL* of April 21st, page 918. When on plague duty at Sheik Othaman, nine miles from Aden, on February 2nd, 1905, I assisted my friend Dr. Young at a Syme's amputation for mycetoma. Dr. Young gave me the specimen, one of the black variety, and it is now in the Museum of the Liverpool School of Tropical Medicine. Looking up my notes on this case, I find the patient came from Hareeb, near Bathan, up the east coast of Arabia, and had not been out of the country, coming to Aden for the first time. Though I had spent many months in various parts of the Aden Hinterland, I do not recollect having seen a single case of the disease.

On talking over the question of the presence of this disease in Arabia, Dr. Young told me that during his fifteen or sixteen years' residence at Sheik, he had seen many cases of both varieties. It was this that prevented me from recording this case from Arabia.

The case recorded above, however, shows that the disease exists up the east coast of Arabia.

Madras.

W. S. PATTON, M.B., Captain I.M.S.

TREATMENT OF LOBAR PNEUMONIA.

THE common occurrence of lobar pneumonia, and the prominent position it holds in death statistics, render absolutely immoral any neglect to report advance in its

treatment, once that advance is seen to be real. My communication concerns medicinal treatment; and that the good results I claim for the combination of drugs I am advocating are due to these agents, and not to local treatment, is proved by the fact that in my last case, in which the disease seemed to shrivel, as it were, and come with rapidity to a tame crisis, the only local application used, for reasons I need not now enter into, was the old-fashioned linseed-meal poultice.

There is nothing new in advocating potassium iodide in the treatment of acute lobar pneumonia, though it is rare, perhaps, to use it except during convalescence. There is, again, nothing very novel in the use of creasote. But when these drugs are combined in about the proportions I am going to name they form a formidable foe to this disease—the creasote attacking it at its source, the iodide supporting the patient and putting the organism generally in the way of helping itself against the invasion already considerably weakened by sufficient doses of creasote.

The following prescription might be given to commence with:

Creasoti	...	...	℥xx
Sp. vini rect.	...	...	℥jss
Pot. iod.	...	...	℥j
Ext. glycyrrhizae liq.	...	...	℥ijj.
Aq.	...	...	ad ℥vj.
Misce.	...	...	℥ss q.q. hs.

But the dose of creasote should be increased to 30 or more minims in the second supply, the sp. vini rect. being also given in slightly increased dose (up to ℥ij). Each case must be treated on its merits, and it will nearly always be advisable to add ammonium carbonate to the mixture when signs of cardiac weakness supervene. It may be necessary, too, to add strychnine, and it may be considered advisable even to withhold the iodide after a time. I give no details of cases at present.

Pneumonia is so common that medical men interested may soon find out for themselves the value of this treatment in this very fatal disease. My object is to persuade the profession, especially members practising in hospitals, to try this combination with any local treatment suitable, and then case details may be supplied in profusion.

Wood Green, N., June 2nd.

ARTHUR J. MATHISON.

REPORTS

ON

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

ST. MARYLEBONE INFIRMARY.

CEREBRAL BASAL TUMOUR: DOUBLE WHITE ATROPHY:
DEATH AFTER SEVENTEEN YEARS.

(By JOHN R. LUNN, Medical Superintendent.)

THE patient in this case was originally a worker in a brass foundry. He was admitted to the Marylebone Infirmary on October 15th, 1887, and remained there until his death seventeen years later. On admission his age was 27. He stated that he had always enjoyed good health, had never had syphilis, gout, or any accident. His eyesight had been failing since Christmas.

State on Admission.—His sight on admission was very bad, having perception of light only in the right eye, the sight failing since Christmas, 1886. He had had severe frontal headaches, but no vomiting, no ocular paralysis or weakness of his body muscles. Both pupils were dilated and acted very slightly to light. The left eye was quite blind, and the optic disc was pale. The optic disc in the right eye was pale and showed well-marked optic neuritis dying away.

Progress.—The patient was treated with large doses of iodide and mercury inunction until he was salivated, but his condition did not improve. Mr. Lang kindly saw the case in May, 1888, and he thought the patient might have effusion in the right optic nerve sheath, so CHCl_3 was given, and the external rectus was divided at its insertion and one suture passed through the conjunctiva at the cut insertion to rotate the eye inwards, and another through the muscle. A strabismus hook was then passed round the optic nerve, which could be felt with the fingers, and was found to be apparently the normal size; the sheath was punctured, but no fluid escaped; the divided muscle and conjunctiva were sutured, and the eye dressed with a dry compress. No bad results nor any improvement followed the operation.

WOMEN INSPECTORS.

Dr. SPOTTISWOODE CAMERON, in a paper on this subject, said that the Leeds Sanitary Committee appointed two women assistant inspectors in 1898; the number had since been increased to six, and during the past year in a district of the town containing a population of 34,000, in which infant mortality was highest, every death of a child under 2 years of age was investigated. During the period the family conditions in 1,221 cases had been inquired into after the death of a young child; it was ascertained that the number born to the same parents had been 5,208, whilst the number alive at the time of the inquiry was 2,582, or less than half. In addition, the same mothers had had 167 stillborn children. The investigations had not revealed a direct connexion between work before confinement and after confinement and high infantile mortality. The conditions which ought to be enforced with regard to women inspectors were, in his opinion, as follow:

1. That their salaries should be at least those given to the men doing corresponding work. Our women inspectors, who rank as ward inspectors, begin with a salary of 35s. a week, rising at the end of two years to 36s., and then to 38s. This is quite little enough. Our head inspector has the salary of one of our divisional inspectors.
2. That none of the women inspectors should devote her whole time to visiting babies. It is better for her own health that there should be some variety in her work. For this purpose these ladies take their share in house-to-house work and in workshops inspection and in both sets of duties, as well as inquiring into cases of infectious disease in schools and factories, and in dealing with nuisances in the latter they gain information useful to them in their work amongst infants and their mothers.
3. That they should have opportunities of comparing notes, and that they should work under a senior inspector of their own sex of some experience.
4. Lastly, that, as women are greedy of work, are self-sacrificing, and often over-estimate their own strength, it is desirable that they should work under medical supervision.

Dr. ROBERTSON, M.O.H. Birmingham, urged that health visitors should be paid and not voluntary workers. He feared that progress must be slow, as tradition had so large an influence in the feeding and rearing of children. Personally he felt that he would be satisfied if after ten years' work a tangible result was seen.

On the motion of Dr. MACKENZIE, seconded by Dr. CAMERON, a resolution was passed affirming that the appointment of qualified women specially trained in the hygiene of infancy was necessary as an adjunct to public health work. Subsequently the following resolution, moved by the LORD PROVOST OF GLASGOW and seconded by Mr. ANDERSON, was adopted:

That the Education Department be urged to add to their present scheme for systematically training girls in the senior classes in the practice and principles of personal hygiene, the elements of dietary, with special instruction in respect to the rearing of infants.

EPSOM COLLEGE.

At a meeting of the Council of Epsom College held on May 30th Sir Constantine Holman's letter to the Governors of Epsom College, dated May 14th, intimating his wish to resign the office of Treasurer, was formally presented. The following resolution was thereupon moved by the CHAIRMAN (Sir William S. Church, Bart.), seconded by Mr. JOHN A. BLOXAM, and passed unanimously:

That the Council of Epsom College accept with very great reluctance and regret the resignation of the treasurership by their valued colleague, Sir Constantine Holman, M.D., and beg to offer to him their warmest thanks for the untiring care and zeal with which he has watched over the affairs of the institution, and for the time and thought which he has devoted to its interests during the nineteen years of his treasurership. They desire to record upon the minutes that it has been under his guidance that the College and the institution have been placed in a satisfactory position, and to express their earnest hope that he will continue to give them the benefit of his wide experience for many years to come as a member of their body.

It was further resolved unanimously:

That a copy of the foregoing resolution, written on vellum and signed by all members of the Council, be presented to Sir Constantine Holman.

MEDICAL NEWS.

THE Secretary of State for War has consented to distribute the prizes of the London Hospital Medical College on Friday, July 13th.

PROFESSOR CHIARI, of Prague, has accepted an invitation to succeed Professor von Recklinghausen in the Chair of Pathology in the University of Strassburg.

DR. R. MURRAY LESLIE of London has, on the recommendation of M. Cambon, the French Ambassador, received the Order of "Officier d'Académie Française."

THE parasitological department of the Royal Institute of Public Health, 37, Russell Square, W.C., will be opened on Wednesday afternoon next.

THE annual garden party will be held at Guy's Hospital on Wednesday, July 4th, when Sir W. Cameron Gull, Bart., will distribute the medals and prizes to the successful students.

THE annual dinner of the British Electrotherapeutic Society is to take place at the Criterion Restaurant on June 22nd, following the thirty-seventh ordinary meeting at 7 p.m. the same day.

THE Institute for the Experimental Investigation of Cancer at Heidelberg is now complete. As already stated, Professor Czerny is the Director. Freiherr von Dungern, M.D., has been appointed head of the scientific department, and Privatdocent von Wasielewski head of the department of parasitological research.

THE annual general meeting of the Poor-law Medical Officers' Association of England and Wales will take place at the Trocadero Restaurant, Regent Street, W., on Tuesday, June 26th, at 6.30 p.m. As already announced, the members and their guests will dine together at the same place at 7.30 p.m., under the chairmanship of Surgeon-General Evatt, C.B., President. Members wishing to be present at the dinner are requested to communicate with the Honorary-Secretary, Dr. Major Greenwood, 144, Stoke Newington Road, N. All Poor-law medical officers are invited to be present.

NEXT Sunday, June 17th, is Metropolitan Hospital Sunday, and on this occasion over 2,000 places of worship in and around London will unite in collecting contributions for the purposes of the Fund, which now includes assistance to District Nursing Associations employing fully trained nurses as well as aid to hospitals and dispensaries. A supplemental collection is now being made in the City, which will be paid to the credit of the Fund, and contributions can also be sent direct to the Mansion House by those unable to attend a place of worship next Sunday. As for many years past, Mr. George Herring has promised to add to the Fund 25 per cent. of the total amount collected up to £100,000.

DR. CARRON DE LA CARRIÈRE, 2, Rue Lincoln, Paris, gives notice that the next *voyages d'études médicales* will be to the watering places of Savoie and Dauphiné; the places to be visited are Hauteville (Sanatorium), Evian, Thonon, Saint-Gervais, Chamonix, Annecy, Aix, Marlioz, Le Revard, Challes, Salins-Moutiers, Brides, Pralognan, Allevard, Bouqueron, La Motte, and Uriage. The party, which will as usual be led by Professor Landouzy, will start from Lyons on September 1st, separating at Uriage on September 12th; the total cost between these two places will be 300 francs, and the French railway companies will issue tickets at half price from the frontier to Lyons and from Uriage back to the frontier.

PAN-HELLENIC MEDICAL CONGRESS.—The fifth Pan-Hellenic Medical Congress was recently held at Athens, under the patronage of the King of the Hellenes, and presidency of Dr. Spyridon Manginas, Professor of Clinical Surgery in the University of Athens. It was formally opened on April 23rd by His Excellency M. Stephanopoulos, Minister of Public Instruction. Professor Manginas, in his presidential address, said that Greek physicians were in the van of scientific progress, and their scientific work justified the brightest hopes for the future of medicine in Greece. The work of the Congress was divided among two sections, pathology and surgery. The General Secretary, Dr. J. Cardamatis, reported that 5,000 invitations had been sent out. The number of practitioners who had inscribed their names was 353, of whom 145 belonged to Athens, 92 to the Greek provinces, while 116 came from abroad. The attendance included all the leaders of Greek medical science.

thirty years. He was created a K.C.M.G. in 1885, and received many distinctions and marks of signal favour from the Emperor of China.

Sir Halliday Macartney's long official connexion with China had made him almost a Chinaman in feeling. This was shown by the action he took in the kidnapping of a Chinese reformer in London. The man, who was a member of the medical profession, escaped deportation and execution only by the energetic intervention of Lord Salisbury at the instance of Mr. Cantlie and Sir Patrick Manson, whom the prisoner contrived to acquaint with his perilous situation.

Sir Halliday Macartney married a Chinese lady during his residence in the Celestial Empire; in 1884 he married a French lady, Mlle. du Sautoy. In 1902 he was left a widower with three sons and one daughter.

Sir Halliday Macartney was a man of remarkable ability. As a diplomatist he could hold his own with the best in Europe, while his retention of the confidence of the rulers of his adopted country for so long a period is of itself a striking proof of his capacity. Probably none of the British officials who have served the Chinese Government had more influence than the ex-army doctor who combined the native shrewdness of the Scot with the acquired talent for negotiation of the Chinese.

By the death of Mr. FRANK SAMUEL GOULDER, M.R.C.S., L.R.C.P., which occurred recently, there has passed away one of the best-known and most-respected practitioners in the town of Dudley. Mr. Goulder received his medical education at University College, London, and obtained the diploma of M.R.C.S.Eng. and L.R.C.P.Lond. in 1877, and had held the post of House-Surgeon to the Royal Free Hospital, London, before being appointed House-Surgeon to the Guest Hospital. Subsequently he commenced private practice in Dudley as a partner of the late Mr. Alfred Jones. He was a most capable and successful practitioner, possessing in a marked degree the power of winning the confidence and affection of those whom he was called upon to attend professionally. Mr. Goulder occupied the position of Honorary Surgeon to the Guest Hospital for many years, his work there being characterized by the same extreme carefulness, method, and conscientiousness that he devoted to his private practice. As an operating surgeon he was bold, skilful, well versed in surgical technique, sound in his judgement, and successful in results. The esteem and love in which he was held by his patients was great; doubtless it was largely attributable to his intense power of sympathy, the self-devotion which he displayed always in his work, the keen insight into character which he possessed, and his extraordinary power of inspiring confidence. Mr. Goulder's exceedingly sympathetic and generous nature will long be remembered by those who were privileged to know him well, and his untimely death at a comparatively early age is a loss indeed to the profession locally, and is deeply regretted in the district where he was so well beloved. Mr. Goulder came of an old Norfolk family which has produced for the profession of surgery some of its best-known representatives.

We regret to report the death, at Minto Street, Edinburgh, on May 25th, of Dr. JAMES MOWAT. His is the third death in the medical profession in the Newington District of Edinburgh within the present year. Dr. Mowat graduated M.B., C.M. in the University of Edinburgh in 1887. He had acted as non-resident clinical assistant in various departments of the Edinburgh Royal Infirmary. He was Surgeon-Captain to the 9th Volunteer Brigade (Highland Brigade) Royal Scots, he was a Freemason, and Surgeon to the High Constables of Edinburgh. He had, by diligent work and close and careful attention, built up a considerable practice. His death, from nephritis, at the age of 43, is a grievous loss to his wife and three young children, to whom deep sympathy will be given.

ROYAL NAVY AND ARMY MEDICAL SERVICES

THE AFRICA GENERAL SERVICE MEDAL.

THE King has approved of the Africa General Service Medal, with clasp, inscribed "S. Nigeria, 1904-5," being granted to the military forces under the command of Brevet Major H. M. Trenchard, Royal Scots Fusiliers, who patrolled through the

unsettled portion of the Ibibio and Kwa country between November 15th, 1904, and February 27th, 1905, both dates inclusive.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

Appointments.—Dr. Nuttall has been appointed Reader in Hygiene for five years. Dr. Humphry has been reappointed University Lecturer in Medicine for five years. Professor Woodhead has been appointed to represent the University at the dedication of the New Buildings of the Harvard Medical School on September 25th and 26th, 1906.

Degrees.—The following degrees were conferred on June 7th:

M.B.: G. O. Lambert, Joh.; J. L. Timmins, Emm.
M.C.: W. M. Mollison, King's.
M.B.: G. H. U. Corbett, King's; J. R. Draper, Joh.; A. B. Howitt, Clare; J. C. L. Roberts, Clare; F. J. Thornton, Gonv. and Cai.; C. J. Wilson, Christ's; W. H. Robinson, Down.
B.C.: G. H. U. Corbett, King's; A. B. Howitt, Clare; E. C. Hughes, Clare; F. J. Thornton, Gonv. and Cai.; C. J. Wilson, Christ's; C. F. Fothergill, Emm.; W. H. Robinson, Down.

UNIVERSITY OF LONDON.

THE report of the Principal for the year 1905-6 made on the presentation day, May 9th, is published in full in the *University Gazette* of June 6th.

Finance.

The total receipts of the University, which had increased from, in round numbers, £30,000 in 1901-2 to £72,000 in 1904-5, further increased last year to £94,000. This was mainly due to receipts on behalf of Goldsmiths' Company, which exceeded the corresponding sum for the previous year by £18,000. The expenditure of the University increased *pari passu*, but there was still a small balance of income over expenditure.

Matriculation.

The number of persons who entered as undergraduates by passing either the matriculation examination or a school examination of the same standard showed a considerable decrease, falling from 3,287 to 2,868. The number of entries, however, was slightly higher, the falling-off in the number entering the University being due to the higher percentage of failures—57.8 per cent., as against 50.7 per cent. The number of candidates excused the matriculation examination rose from 115 in 1904 to 237 in 1905, owing largely to the operation of the scheme agreed upon between the three universities of Oxford, Cambridge, and London for the mutual recognition of entrance examinations and their equivalents. From the year 1899-1900, the last before the reorganization of the University, the number of actual entries into the University increased from 1,854 to 3,105, or by 67 per cent. The number of candidates at the various examinations is shown in the following table; it appears to throw a very ominous light upon the regulations of the University, since only about one candidate out of eight who entered obtained a degree; while of those who passed the preliminary and intermediate examinations only about one in three finally graduated. The report does not call attention to this disquieting feature of the returns, but it does comment on the falling-off in the number of candidates for the higher degrees.

	1899-1900.	1905-6.
Matriculation and registration ...	4,084	7,036
Preliminary and intermediate ...	2,037	2,609
First degree ...	863	992
Higher degrees ...	148	122
Diplomas ...	7	67
Total ...	7,139	10,825

Medical Education.

The report refers to the munificent gift of £10,000 to the Institute of Medical Sciences received from the Goldsmiths' Company, and recalls the fact that a General Committee to promote the objects of the fund has been formed, and adds that there is every reason to hope that a site will be provided for the institute at South Kensington so soon as the amount of money received justifies the commencement of the building. Mention is also made of the further step towards the concentration of the teaching of preliminary and intermediate subjects by the arrangement under which students of St. George's Hospital now take these subjects either at University or King's College. Reference is likewise made to the establishment of a university professorship of protozoology, to which Professor E. A. Minchin, F.R.S., of University College, has been appointed. An endowment of £750 a year for five years has been provided at the instance of the Colonial Office partly

from funds in the hands of the Rhodes trustees, partly by a grant originally made to the Royal Society for the Tropical Diseases Research Fund and partly by a grant of £200 a year made by the University. The authorities at the Lister Institute have placed at the disposal of the Chair rooms and other facilities estimated to be equivalent to £450 per annum, and the Senate at its meeting on May 23rd duly returned thanks to the Institute.

Dr. George Oliver's gift of £100 for the Physiological Laboratory is noted, and it is added that the work in that laboratory is progressing steadily.

Congress of School Hygiene.

The Senate has nominated Dr. E. C. Seaton and Dr. Sydney Monckton Copeman to be members of the General Organizing Committee of the second International Congress on School Hygiene, to be held in August, 1907.

UNIVERSITY COLLEGE.

School of Advanced Medical Studies.

THE foundation stone of the School of Advanced Medical Studies, Nurses' Home, and Maternity Students' House in connexion with University College Hospital was laid by the donor, Sir Donald Currie, on June 11th. The buildings, which are in course of construction, cover an area of about 18,000 square feet, and front on to Gower Street opposite the University College Hospital. The entire length of frontage in Gower Street is occupied by the library and the museum, above them being the more important laboratories and histological lecture theatre. The basement of the School of Advanced Medical Studies contains rooms for lectures in medicine, surgery, and gynaecology. The ground floor is occupied by various rooms for administration purposes and a special suite of rooms for the use of students; the remaining space is occupied by the library and museum. The first floor is devoted to demonstration theatres and the laboratory. The second floor is occupied by rooms for lectures, research, and bacteriology, and by a chemical laboratory for class work and research. The third, fourth, and fifth floors contain demonstration rooms, private research rooms, and storage apartments. The nurses' home forms the south-western part of the building, and is designed to meet the requirements of the private nursing staff connected with the hospital as well as a certain number of nurses belonging to and engaged in the nursing of the hospital patients. The maternity students' house is entered by a doorway to the right of the main entrance, and provides accommodation for two obstetric assistants and six students carrying on the maternity work of the hospital.

Sir EDWARD BUSH, in the absence of Lord Rosebery, opened the proceedings, and said that the magnificent gift of Sir Donald Currie had launched a new scheme which, but for that gift, might not have been initiated for some years.

Lord FITZMAURICE, representing the Council of University College, London, read a letter from Lord Reay stating that Sir Donald Currie's name would always occupy a prominent place in the history of the University College Hospital.

The Duke of BEDFORD, President of University College Hospital, also acknowledged the gift.

Sir DONALD CURRIE, in replying, suggested that the burden of the maintenance of hospitals, instead of being thrown upon a few people, should be borne by the ratepayers or taxpayers. He hoped that Parliament would pay attention to the matter, and recommended the Labour members of the House of Commons to give the subject their attention.

Before the actual ceremony of laying the foundation stone was performed, Dr. J. S. RISEN RUSSELL, the Dean of the Faculty of Medicine, read out the following inscription on the stone:

"This Stone was laid by Sir Donald Currie, G.C.M.G., through whose munificence the School of Advanced Medical Studies, Nurses' Home, and the Maternity Students' House were erected in connection with University College Hospital, Monday, 11th June, 1906."

ROYAL COLLEGE OF SURGEONS IN IRELAND.

Annual Report.

AT the annual meeting of the Fellows of the Royal College of Surgeons on June 9th, the President, Sir A. Chance, occupied the chair. The report showed that the receipts amounted to £4,142 5s. 9d and the expenditure to £3,640 19s. 5d., leaving a balance of £501 6s. 4d. to credit in bank. The investments stand at £9,347 3s. 1d., producing £365 16s. 3d. for the year. Nineteen candidates were admitted to the Fellowship, 64 received the conjoint diploma, 32 the conjoint diploma in public health, 5 the licence in dental surgery, and 62 certificates of having passed the conjoint preliminary examination. There are at present living 13 Honorary Fellows, 459 Ordinary Fellows, 2,881 Licentiates, 6 Honorary Diplomates, and 218 Ordinary Diplomates in public health, and 515 Licentiates in dental surgery. Three Fellows and 41 Licentiates died during the year.

Election of Officers.

At a meeting of the Fellows, held on June 11th, the following were elected for the ensuing year:—*President:* Henry R. Swanzy; *Vice-President:* John Lentaigne; *Honorary Secretary of the College:* Sir Charles A. Cameron, C.B.;

Council: Edward Hallaran Bennett, William Stoker, Sir Charles Alexander Cameron, C.B., John B. Story, Sir Charles B. Ball, Sir Thomas Myles, Sir Arthur Chance, Richard D. Purefoy, Sir Lambert H. Ormsby, Henry G. Sherlock, R. Bolton M'Causland, John S. M'Ardle, Robert H. Woods, Thomas Donnelly, William Taylor, Edward H. Taylor, G. Jameson Johnston, R. Charles B. Maunsell, William Ireland Wheeler.

MEDICO-LEGAL AND MEDICO-ETHICAL.

MEDICAL TESTIMONIALS IN TRADE ADVERTISEMENT.

WE have received an advertisement of Stowers's pure lime-juice which we are sorry to see contains the names of eight medical practitioners who attest its value, not only as a pleasant beverage but in one case at least as a remedy in disease. The advertisement is accompanied by a letter addressed to a medical practitioner offering to forward a sample case for his personal consumption. There should be no objection to any citizen receiving a sample of wares which he may possibly desire to purchase, so long as he does not regard the present as a corrupt inducement to recommend the article in question; but it can certainly be said against such gifts that they have the appearance of evil. Their acceptance gives colour to the charges against the profession which were repeated when the question of secret commissions was discussed in Parliament, and the fact that eight medical men have given such testimonials as those to which we have referred indicates that the system of free samples has its evil side.

FALSE REGISTRATION.

AT the Kingston Police Court, on July 11th, two women were charged with an offence under the Births and Deaths Registration Act by registering the birth of an illegitimate child in such way as to make it falsely appear that its father was Dr. Albert Max Sully, of Claygate. The women had some years ago endeavoured to annoy Dr. Sully, and on that occasion had given him a written apology. As regards the present incident, they stated that they had no intention of annoying him, and that the father of the child was another Mr. Sully altogether. They were fined 40s. each, with the alternative of twenty-one days' imprisonment.

THE CORONER'S COURT.

NUNQUAM.—In answer to our correspondent's second letter we can only say that if the coroner selected a pathologist to make the *post-mortem* examination and the jury were satisfied of the cause of death, it is presumable that no further evidence was required, otherwise both the coroner and the jury have power to call for it. The suggestion of "collusion between the coroner and his pathologist to the disadvantage of a possibly rival practitioner" is certainly unjustifiable, unless positive proof is obtainable. Under all circumstances, if "Nunquam" requires any further information on the subject, we would refer him to the coroner himself who held the inquest.

MEDICAL ADVERTISING.

J. W. H. sends us a card, which he says is a form of competition by advertisement which is actively carried on in the Yorkshire district in which he lives. It is headed:

The Vaccination Acts 1867 to 1898.

PRIVATE VACCINATION NOTICE.

Dr. ——— continues to carefully vaccinate children according to the provisions of the above Acts, with Pure Vaccine Lymph, either at their homes or at his, Dr. ———'s, residence, ——— House, ———, daily, at the usual charge of 1s.

X. Y. Z.

M.D., M.R.C.S., L.S.A. Eng. (registered).

*** This is a matter which might well be brought before the local Division of the British Medical Association, for even if the offender is not a member it may be not impossible to bring to his notice the disapproval with which his professional colleagues regard such practices.

FEEES IN ACCIDENT CASES.

SENNACHERIB asks whether he has any means of enforcing a claim against the employer or anybody else in the two following instances of injury which have come under his care: (1) A steady, respectable workman, who has been in the service of a stonemason and contractor twenty-one years, is loading a heavy lorry with scaffold poles, etc., when the horse, a big, excitable animal, takes fright and bolts. In pulling him the man gets run over and is hit on the head by scaffold poles. He is attended by the nearest doctor, who stops with him nearly two hours, and binds up a freely bleeding wound among the muscles near the anterior superior spine of the ilium and plugs the cavity with gauze. He is eventually taken to the hospital, declines admission, is taken home, and in time appears to be making a perfectly satisfactory recovery under the care of our correspondent, who wishes to know whether he must look to the patient himself for remuneration for this attendance, as the employer has