

depresses the heart, and would inhibit its capacity to recover from shock.

I think the hypodermic injection of morphine and atropine before the administration of the anaesthetic would be of great value, and I regret now that I did not adopt it in this case.

I believe the patient would probably have died even if the operation had been performed under local anaesthesia, whether hypodermically or introspinally applied.

It is on record that these cases have died under ether, and, although ether by the open method suggests itself as an alternative to the  $\text{CE}_2$  mixture I administered, I decided against it, owing to the length of time required to induce anaesthesia, and owing to the patient's very nervous and unamenable condition; I feel certain he would have been intolerant of ether.

It has been suggested to me that a dose of brandy given before the anaesthetic would have calmed the patient and strengthened his heart, and would have rendered his nervous system less susceptible to shock. I am inclined to endorse this view, and would value the opinion of the members of the Society upon the point. In my own opinion the heart, by its extreme agitation and excessive action, referred to above, tired itself out, and thus became incapable of withstanding shock, poisoned as it already was, in a measure, by nicotine.

In conclusion, I must thank Dr. Frankish for his kind permission to publish this case, Dr. B. H. Spillsbury for the *post-mortem* notes, and you, gentlemen, for your attention.

## MEMORANDA:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### A CASE OF DOUBLE DISLOCATION OF THE INNOMINATE BONES WITH FRACTURES OF THE LEGS.

THE following case is of interest as showing what grave injuries can be caused by a severe crush:

On the evening of Saturday, January 4th, a collision occurred near the mouth of the Thames between a steamer and a small sailing vessel. At the time of the collision the steamer was proceeding at the rate of nine knots per hour, and struck the sailing vessel end on. The master of the latter, seeing that a collision was imminent, summoned all hands on deck. The ship's cook, aged 17, was in the fore-castle, was coming up the hatch, and partly out, when the collision occurred. He was caught by the legs and middle of body, and pinned down between the coaming of the hatch and the windlass, the latter being driven on to him by the force of the blow. He was dragged clear before the vessel sank, but died a few minutes later.

I saw the body about 10 p.m. that evening. Both legs were fractured below the knees. There were some abrasions on the face, and considerable bruising all over the abdomen, hips, loins, and scrotum, and blood had issued from the external urinary meatus. On moving the legs, by grasping the thighs separately, the corresponding innominate bones moved with them.

The *post-mortem* examination showed that both innominate bones had been torn away from the sacrum, leaving a gap over an inch broad, and extending deeply on each side. The two sides of the symphysis pubis were separated by half an inch. In the pelvic cavity there was some effused blood, the bladder empty, and the urethra ruptured. The small intestines and liver were contused, but the other organs were uninjured.

What had happened was this: The man was partly out of the narrow companion when he was caught—his legs between the back coaming of the companion hatch and the ladder, his pelvis between the heavy windlass and the front coaming. The force of the crush, acting from behind forwards, would squeeze and flatten the pelvis, drive the innominate bones apart, and thus cause the sacro-iliac synchondroses and the pubic symphysis to give way, these parts being in a young person obviously the points of least resistance.

J. S. WARRACK, M.A., M.D. Aberd., D.P.H. Camb.  
Gravesend.

#### A RARE CASE OF SCURVY.<sup>1</sup>

A case of scurvy not having occurred in the navy for many years, except perhaps in polar expeditions, the following case, which came under my observation and treatment on board H.M.S. *King Alfred* on the China station, is of some interest at a time when much attention is being paid to the subject of dietetics, while the differences of opinion which exist as to the proper amount of carbohydrates, proteids, etc., which ought to be ingested, may be illuminated by description of the peculiar idiosyncrasy which undoubtedly gave rise to the symptoms from which the patient in this case suffered.

*History.*—The patient, a private marine, aged 23, presented himself complaining of much soreness of the mouth with a tendency to bleeding from the gums, and also of lumbar pain and weakness. He had always been healthy till quite recently. He had lived in the country till 16 years of age, when he entered the Royal Marines. As a boy in the country he lived entirely on milk, cheese, and bread. He had an extreme distaste for meat in any form, and a rooted objection to vegetables and fruit. Whilst serving on this station, where he has been for about eighteen months, his principal food consisted of bread and butter and cocoa; he very rarely touched meat and never used the ration of potatoes supplied. He occasionally supplemented his diet by cheese and sardines procured from the canteen.

*State on Examination.*—He was sallow and cachectic-looking in appearance, and his gums were purple in colour, especially at the edges; they rose up between and around the teeth, and showed a tendency to bleed. The breath was offensive. Both legs were covered with petechial spots, and the left knee was somewhat swollen and bruised-looking, although there was no history of injury.

*Progress.*—In a few days an ecchymosis made its appearance over the left knee, and later on the neighbourhood of the right knee was affected in a similar way, and subsequently the left instep was affected. He also had some slight epistaxis. His temperature for fifteen days, during which time he was confined to bed, ranged between 99° and 102°.

*Treatment and Result.*—A microscopic examination of his blood revealed nothing abnormal, and a blood count was also practically normal. He was confined to bed at first, and a liberal diet of fresh vegetables, fruit, and lime-juice insisted upon. Fresh meat was also employed in small quantities. At first he had some difficulty in taking this diet, more especially the vegetables and fruit, but he gradually came to tolerate them, and now, convinced of its efficacy, he consumes regularly a fair amount of vegetable food. Under this dieting his condition rapidly improved, the condition of the mouth became normal, the petechial spots and patches of ecchymosis disappeared, and he became less sallow and cachectic-like in appearance. He was discharged to duty after twenty-one days' treatment.

*REMARKS.*—I am convinced that this was a case of true scurvy, and not a case of purpura, from the condition of the mouth, from the history of the patient's mode of dieting, and from the marked beneficial results of a liberal vegetable diet.

JOSEPH CHAMBERS, B.A., M.B., B.Ch. Dubl.,  
Fleet Surgeon, R.N.

#### FORMALDEHYDE IN ALOPECIA AREATA.

I was consulted, a little while back, by a young girl who had a circular bald patch of about 3 in. in diameter on the scalp at the side of the occiput. The patch was perfectly hairless, smooth, and shining.

The treatment consisted in painting it with a 20 per cent. solution of formaldehyde. This was done every day for the first week or two, until signs of inflammatory reaction appeared. The treatment was then suspended, and a sedative ointment applied. When the inflammation subsided the formaldehyde was again continued, stopping the application as soon as inflammatory trouble appeared. This routine of treatment was persevered in for about six or nine months. About this time a growth of hair made its appearance, continued to grow, and in every way corresponded with the surrounding hair.

I have seen the patient recently—twelve months after treatment—and the growth of hair is perfect.

I have looked up the medical books and literature on the subject of alopecia areata, and find no mention of formaldehyde in the treatment of this—very often—intractable and difficult disease. The treatment by formaldehyde has proved successful in my hands.

Abertillery.

J. J. McINERNEY, L.R.C.P. and S.I.

<sup>1</sup> Forwarded by the Director-General of the Medical Department of the Royal Navy.

coloured and models of taste beside the hideous things that go by that name to-day; to the silk skirts, again often brilliant; to the lovely heads, the sickest of eyes, and an appealing look that none but a boor could resist; to the stately physician taking the pulse as though he were dancing a minuet; to the rich Turkey rug, and the Cupid and the dog, and the patient's fond mother, and the other accessories. The Dutch painters laid a strong emphasis on the doctor as urologist. One gathers, indeed, from these pictures that the urine and the diseases of its organs were the chief practical concerns of the medicine of the day, and that diagnosis consisted in courtly feeling of the pulse and a wise look at a urinal. Steen and his brother painters did not overlook the quack. He is represented by Steen in some of his most characteristic but not his most finished paintings, exhibiting his wares or his skill in the open air. He often has a heavily-sealed diploma—preferably written in Hebrew—prominently displayed; and the crowd which has gathered to hear and to see him gives the artist a splendid chance to exhibit his skill in painting the odd Dutch types which appear in these pictures in such profusion. The same subject attracted Gerard Dou, who, without missing any of Steen's detail, attained a finish which the latter apparently deemed the theme unworthy of. To see, however, says Dr. Churchman, how the quack may be treated adequately and yet with exquisite elegance, one must turn to Hogarth's well-known picture in the "Marriage" series of the London National Gallery. There is a splendid portrait of a quack by Franz Hals the Younger in the museum at Rotterdam, in which the operator is represented as removing a small tumour from a patient's forehead; and this removal of glands, or sebaceous cysts, from various portions of the head and neck is a subject not overlooked by Steen. These pictures reflect a popular belief of the time; for there was a common saying in Holland in the sixteenth and seventeenth centuries which ran: "He has a stone in his head," and the meaning of which was, "The patient is crack-brained." "Cutting the stones from one's head" was therefore supposed to be curative for mental deficiency. The saying, which originated from the romance of King Arthur, was of common occurrence in the farces of the time; and it is little wonder that this reflection of it is to be found in the canvases of Steen. The dentist is the subject of one of Steen's rather good groups; of a curious outdoor scene by Victors; of a typical but uncanny interior by van Ostade, and of one of Don's wonderful candle-light scenes; but these pictures throw no particular light on the medicine of the time. Dr. Churchman gathers from the pictures of Steen and his school that in his day the doctor had become a gentleman, and his profession was, whether respected or not, at least respectable. He may indeed be, as we have seen, a wise-looking crier in the markets, with his Hebrew diplomas and all the vulgarity of the pedlar, or he may even be a coarse reprobate, leading his vulgar life within the pale of legitimate practice. But he is neither always nor characteristically these. He is, on the contrary, a courtly, mild-mannered, well-dressed gentleman. He moves about the sick room with grace. He has none too many scientific resources; but though he has little to depend upon beyond the finger on the pulse and a glance at the urine, he has made himself a place among his patients of honour, of dependence, and of affection. Medicine is, in a word, finding in him for its service a good type of man. If we go to Gerard Dou we find the same testimony. Titian, with his magnificent Parma physician, and Holbein, with his equally splendid portrait of Chambre, had indeed already shown us what type of man medicine could appeal to. According to Dr. Churchman, the message of the Dutch painters on this point is that as a matter of fact, and on the average, medicine in the seventeenth century did appeal to men whose intellects, manners, and bearing are worth study.

AN official reception was given on January 15th at the Metropolitan Asylums Board by Mr. J. T. Helby, its Chairman, and Mrs. Helby, the feature of the evening being an interesting display of furniture, brushes, clothes, and other goods, manufactured by the imbeciles in the Darent Industrial Colony and the feeble-minded girls at High Wood School.

## MEDICAL NEWS.

DR. ARTHUR NEWSHOLME, Medical Officer of Brighton, has been appointed Chief Medical Officer to the Local Government Board, in succession to Mr. W. H. Power, C.B., F.R.C.S., F.R.S., who is retiring under the age clause.

WE regret to announce the death of Mr. Charles James Wright, M.Sc., late Professor of Obstetrics in the University of Leeds, at the age of 65. We hope to publish an obituary notice in a later issue.

A BLOCK recently reconstructed at the London Fever Hospital, comprising four wards and four private rooms for female patients, will be opened by Lady Balfour of Burleigh on Monday next at 3 p.m.

A DISCUSSION on rivers pollution, with special reference to the Board proposed by the Royal Commission, will be opened at the Royal Sanitary Institute, Margaret Street, W., by Sir William Ramsay, K.C.B., F.R.S., at 8 p.m., on Wednesday, February 12th.

A MEETING of the Medical Officers of Schools Association will be held at 11, Chandos Street, W., on Thursday, January 30th, at 3.45 p.m., when Mr. Frederick Rose, Ph.D., will read a paper on The Physical and Educational Aspects of the Open-air School.

THE Brazilian Government has voted funds for the establishment of an experimental pathological institute at Manguinhos. The institute is intended for the study of the parasitic and infectious diseases of man, animals, and plants, and for the preparation of serums. A section of veterinary medicine will form an annexe to the institute.

A PUBLIC meeting of the newly-formed Income Tax Reduction League will be held at the Cannon Street Hotel on Monday next at 4 p.m., when the chair will be taken by Lord Avebury. The object of the League is to organize income-tax payers for purposes of self-defence, to obtain in time of peace a substantial reduction of the income tax and its restrictions to profits actually received by shareholders or individual traders, and to exempt depreciation funds from the operation of the tax. The League is not a party organization.

THE Secretary of State for the Colonies has appointed Dr. W. J. Simpson, Professor of Hygiene at King's College, London, and Lecturer in Tropical Hygiene at the London School of Tropical Medicine, to proceed to the Gold Coast to assist in combating the present outbreak of bubonic plague at Accra. Professor Simpson left for the Gold Coast on January 18th, accompanied by Dr. J. A. Haran, of the Medical Service of the East Africa Protectorate, who has been selected on account of his experience in dealing with plague in that dependency. Professor Simpson will probably also visit other towns in West Africa, with a view to advising in regard to questions of sanitation.

MR. W. W. WAGSTAFFE, who, since his retirement from his position on the surgical staff of St. Thomas's Hospital, has devoted much attention to collecting meteorological data in the neighbourhood of Sevenoaks, has supplied us again this year with a summary of his observations. These show that in Kent the special feature of 1907 was scarcity of sunshine except in the months of March and September, and variations in weather of unusual rapidity. The general temperature was low throughout the year, with the exception of March, which was somewhat above the average. On the other hand, wind movements were less marked than usual, the air moving at a rate equivalent to a gale only on twenty-seven days, as compared with forty-one in the previous year. In spite of the weather throughout the year being of a character which is commonly regarded as bad, there was a shortage in the rainfall of 4.68 in.; while every bank holiday brought a very fine day.

THE BROWN DOG.—A correspondent of the *Times* writes that a petition to the Battersea Town Council is being prepared for signature by the undergraduates of the University of London with reference to the Brown Dog Memorial. Medical students, he says, will not be asked to sign this petition, which embodies a request that the name of University College be omitted from the inscription on the memorial, on the grounds that every university in England carries on the practice of vivisection, and that therefore London University should not be singled out from among the others. The Battersea Town Council, at a meeting on January 22nd, decided to retain the inscription. The petition above referred to has, however, yet to be considered by the Council.

## UNIVERSITIES AND COLLEGES.

## UNIVERSITY COLLEGE, OXFORD.

## RADCLIFFE TRAVELLING FELLOWSHIP, 1908.

AN examination for a Fellowship of the annual value of £200, and tenable for three years, will be held in Hilary Term, 1908, commencing on Tuesday, February 25th.

Candidates must have passed all the examinations required by the University for the degree of Bachelor of Arts, and for the degree of Bachelor of Medicine. They must not have exceeded four years from the time of passing the last examination required for the degree of Bachelor of Medicine.

The successful candidate must before election declare that he intends to devote himself during the period of his tenure of the Fellowship to the study of medical science and to travel abroad with a view to that study. The Regius Professor of Medicine and the Examiners, two months before the expiration of the second year after the election of each Fellow, present a report on the work done by him to the electors, who may, if they think the report unsatisfactory, declare the Fellowship forfeited.

The examination will occupy four days. Papers will be set in Physiology, Pathology, and Preventive Medicine, and a subject will be proposed for an essay. There will also be a practical examination in Pathology. Any candidate desiring to offer in addition a special branch of either Medicine or Surgery must send notice of this to the Regius Professor of Medicine.

All intending candidates should send their names, addresses, qualifications, etc., to "The Regius Professor of Medicine, University Museum," on or before Saturday, February 8th.

## UNIVERSITY OF CAMBRIDGE.

THE following degrees have been conferred:

M.C.—E. W. Sheaf, Downing.  
M.B., B.C.—F. O. Arnold, Trin.  
B.C.—J. E. Ryffel, Pet; B. F. Campbell, Cla.; E. Slack, Femb.;  
D. W. A. Bull, Govv. and Cal.; B. A. T. Peters, Jes.; H. N. Coleman, Chr.; N. W. Ferguson, Magd.; W. G. Parkinson, Emm.

The Gordon Wigan Prize for Physics and Chemistry for 1907 has been awarded to F. Buckney, B.A., of Sidney Sussex College.

## ROYAL COLLEGE OF PHYSICIANS OF LONDON.

AN extraordinary Comitia was held at the College on Friday, January 17th, the President, Sir R. Douglas Powell, in the chair.

*The Admission of Women.*

The consideration was resumed of the petition from the London School of Medicine for Women praying for the admission of women to the examinations of the College.

The following position had been reached when the College adjourned at the preceding Comitia:

It had been moved by Dr. Herringham and seconded by Dr. West:

That the petition of the London School of Medicine for Women be granted.

To this an amendment had been moved by Dr. Starling, seconded by Dr. Halliburton, and carried by 59 to 33 votes, as follows:

That it is desirable that such alterations be made in the By-laws as to allow the admission of women to the examination for the Licence only of the College.

On this being put as a substantive motion, an amendment was moved by Dr. Herringham and seconded by Dr. Phear, namely:

That the word "only" be omitted.

Before this was put from the Chair, it being past 7 o'clock, the adjournment of the meeting was moved by Sir W. H. Alcock, seconded by Dr. Norman Moore, and carried.

On the resumption of the debate, Dr. Herringham's amendment was discussed by the proposer, and Drs. Luff, Moore, Semon, Hunter, Champneys, and Bradford, and was carried by a large majority, the numbers not being taken. On being put as a substantive motion, Dr. Bradford moved an amendment, and Dr. Griffiths seconded:

That it is desirable that such alterations be made in the By-laws as to allow the admission of women to the examinations of the College.

After a short discussion this was carried by 74 to 33, and on being put as a substantive motion it was carried *nem. con.*

On the motion of the Registrar it was further resolved:

That it is not intended that any action should be taken under the resolution just adopted inconsistent with the agreement between the two Colleges, under which the Licence of the one and the Membership of the other are only granted conjointly.

*Communications.*

The following communications were received:

1. From the Secretary of the College of Surgeons, reporting proceedings of the Council of that College on November 14th and December 12th last.

2. From the Marine Department of the Board of Trade, enclosing a letter from the Governor of St. Helena, forwarding

a report by Dr. Arnold, the Colonial Surgeon, on the necessity of issuing further instructions respecting the treatment of beri-beri, and asking the views of the College. This was referred to a Committee consisting of Sir Wm. Church, Dr. Payne, Sir Patrick Manson, and Dr. Hewlett to consider and report to the College.

3. From the Royal Sanitary Institute, inviting the College to appoint delegates to the Annual Congress of the Institute, to be held at Cardiff, July 13th to 18th next. It was left to the President to nominate delegates at a future comitia.

4. From the Oxford University Press, asking permission to photograph the portrait of Linacre, in possession of the College, for reproduction in the first of a series of volumes of historical portraits to be edited by Mr. C. R. L. Fletcher, Fellow of Magdalen College. Permission was granted.

5. From the Dean of the Faculty of Medicine, University of Edinburgh, announcing the award of the Murchison Scholarship (1907) to James Sutherland Edwards, M.B.

*Representative of the College on the Council of Queen Victoria's Institute for Nurses.*

Sir Dyce Duckworth, who retired by rotation, was re-elected as the representative of the College.

*Report.*

A report was received from the Committee of Management, dated December 4th, 1907, recommending that the Municipal Technical School, Accrington, be added to the list of institutions recognized by the Examining Board in England for instruction in chemistry and physics, and that the Borough of Devonport Small-pox and Fever Hospitals be added to the list of fever hospitals recognized by the Examining Board in England. The report was received and the recommendations adopted.

## ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE Quarterly Council was held on January 16th, Mr. Henry Morris, President, in the chair.

*Annual Meeting of Fellows and Members, held November 21st, 1907.*

The following action was taken by the Council in regard to the resolutions passed on the above occasion:

1. That the President and Council of the Royal College of Surgeons be asked to use their moral influence with hospital authorities to recognize members of the College (who are also in almost all cases licentiates of the Royal College of Physicians) as having equal rights with provincial, Scottish, and Irish graduates to become candidates for hospital appointments.

The answer to this proposition is still under consideration.

2. That this twenty-third consecutive annual meeting of Fellows and Members again reaffirms the desirability of admitting Members to direct representation on the Council, which as now constituted does not represent the whole Corporation.

It was directed that the mover and seconder of this resolution should be informed that the resolution had been laid before the Council, and that the views of the Council upon the question referred to therein will be found in the last annual report of the Council.

3. That this meeting regrets that the Council has omitted from their report any reference to the opinion of His Majesty's Government on the question of the representation of Members, and requests the President to supply the omission by communicating the same forthwith.

As this resolution contained a request to the President which the President dealt with at the annual meeting, the Council consider it unnecessary to make any further reply.

4. That this meeting notes with satisfaction that the Council intends to take a poll of the Fellows and Members on the whole question of admitting women to the diplomas of the College, and this meeting further urges that a similar course be taken with regard to the proposal for direct representation of the Members upon the Council.

It was directed that the mover and seconder of this resolution should be informed that the Council saw no reason to adopt the suggestion that a poll of the Fellows and Members should be taken upon the proposal for the direct representation of Members upon the Council.

5. That this meeting requests the Council to add a hood to the gown already worn by Fellows and Members.

As the hood was generally understood to be distinctive of a degree, and in this sense it formed part of the academic costume of a University, it was considered that it would not be appropriate for a College. For this reason, and as hoods did not appear to be in general use among colleges of similar standing to the Royal College of Surgeons of England, the Council did not see its way to comply with the request contained in the resolution.

6. That this meeting of Fellows and Members of the Royal College of Surgeons wishes the Council to report as to their willingness to join the Royal College of Surgeons and its work with the University of London (so as to form an Imperial University of London), and whether they will approach the Royal College of Physicians for a similar conjoint action.

The answer of the Council with reference to this resolution is that this matter, which has been much discussed in the past, still occupies the attention of the Council.

*Hunterian Oration.*

The President was appointed to deliver the Hunterian Oration for 1909.

*The London Ambulance Service.*

The President reported that he gave evidence upon this subject on December 29th, 1907, before the Home Office Committee. The evidence concerned a variety of topics, comprising (1) ambulances available for infectious cases; (2) ambulances available for non-infectious medical, surgical, and mental cases other than accidents and sudden illnesses occurring in the streets; (3) ambulances for cases of accident or sudden illness happening in the streets. The evidence also contained information upon the systems adopted in Paris, Berlin, and Boston (U.S.A.). The thanks of the Council were given to the President for his action.

*Queen Victoria's Jubilee Institute for Nurses.*

Mr. Thomas Bryant was re-elected a Representative of the College upon the Council of the above institute for the ensuing three years.

*The Admission of Women to the Examination of the Royal Colleges.*

In anticipation of the decision of the Royal College of Physicians being favourable to the admission of women to examination for the licence of the Royal College of Physicians, the Council proceeded to appoint a Committee to prepare a circular to the Fellows and Members asking their opinion as to whether or not women should be admitted to examinations for the diplomas of the Royal College of Surgeons of England.

*Tea.*

It was arranged that during the next three months tea should be served for readers in the library, or in the common room for readers who are Fellows or Members of the College.

## UNIVERSITY OF BIRMINGHAM.

The following candidates have been granted the diploma in Public Health:

T. W. Beazeley, W. H. Davison.

## OBITUARY.

J. ROBERTS, M.D., J.P.,

CHESTER.

THE medical profession in Chester lost on January 9th, in the person of Dr. John Roberts, one who until recently was among its most prominent members, and Chester a man whom it had long held in the highest esteem and affection. Dr. Roberts was born at Blaenau Festinlog in 1843, and was one of a large family, five of whom became medical men. His medical education he received partly at Glasgow and partly at Aberdeen, becoming M.B. of the former university in 1865 at a time when he had already acquired the diplomas of the College of Physicians of Edinburgh, and of the Faculty of Physicians and Surgeons of Glasgow. Later on he proceeded to the M.D. of his own university. His official connexion with Chester commenced almost immediately after the termination of his career as an undergraduate, and at the date of his decease had been maintained uninterruptedly for over forty years. During this time he acquired a large practice, from which he only retired at the end of last year. Amongst professional offices he filled that of Surgeon to the Chester Lying-In Charity and retained it until the last, and for a considerable period was Surgeon to the Festinlog Hospital. Professionally he took much interest in dermatology, and in 1890 was instrumental in securing the establishment of the Chester and District Skin Dispensary, while within the last few years he had thrown his influence into the scale in favour of the crusade against tuberculosis started by the Chester Association for the Prevention and Cure of Consumption.

It was not, however, only as a private practitioner that Dr. Roberts assisted his fellow citizens; he served them more extensively, perhaps, and much more permanently through his association with the Public Health Committee of the city, of which body he was chairman for a great many years. During his tenure of office a great number of sanitary improvements were carried through, one result being that in the thirty years elapsing between 1874 and 1904 the death rate of Chester diminished by some 33 per cent. Dr. Roberts's connexion with public affairs commenced as early as 1886, and he served on a great many of the municipal committees, including the Housing, Town Hall, Parliamentary, Markets, and Baths Committees. The extent to which he won the approval of the citizens of Chester in his public capacity is sufficiently evidenced not only by the length of time for which he was invited to

serve them, but from the fact that besides being an alderman he in turn filled the office of Sheriff and Mayor. He occupied the latter office for two consecutive years, on the second occasion as the deputy of his successor.

Dr. Roberts was a very loyal Welshman and an excellent Cymric scholar. The Chester Welsh Society, indeed, has in him lost a tower of strength. He held a Commission as Justice of Peace for the city, and was at one time President of the Chester Medical Society, remaining to the last a member of the Chester Division of the Lancashire and Cheshire Branch of the British Medical Association.

THE medical profession in Wrexham and district has lost one of its kindest and most loyal members in the death of Dr. J. LLEWELLYN WILLIAMS, of Holt Street House, which occurred somewhat suddenly on December 13th, 1907, from heart disease. Dr. Williams was the son of the late Dr. Edward Williams, who died in 1893, after many years of extensive practice in Wrexham and the surrounding neighbourhood. Many recall the handsome face and kindly manner of the "dear old doctor" when they now have to mourn the loss of his son. Dr. Llewellyn Williams, like his father, was an ideal family doctor. His gentle voice, honest, grave eyes, and kindly manner did much to cheer and help those in suffering and sorrow, always patient and ready to hear and sympathize with their minor troubles and worries, and he never left a bedside without a cheery word of help and comfort. Dr. Williams studied at Edinburgh University, where he took the degrees of Bachelor of Medicine and Master of Surgery in 1867; he also studied at St. Bartholomew's Hospital and obtained the diplomas of M.R.C.S. and L.S.A. He was a Justice of Peace for the County of Denbighshire, and took a keen interest in his magisterial work. In 1876 he was elected Honorary Surgeon to the Wrexham Infirmary, a post which he held until 1881. During this period he gave his time, experience, skill, and encouragement to the suffering poor under his care, and there the kindly acts and unostentatious aid rendered to so many in a humbler sphere, although unrecorded, will not be forgotten. When a vacancy occurred later on the staff of that institution he was urged by some of his colleagues to again apply for that post, but could not be induced to do so. He was for some years Medical Officer of Health for the Borough of Wrexham, and rendered valuable services in the advancement of sanitary science and public health. He was a former President of the North Wales Branch of the British Medical Association, and his year of office was a most successful one. He had high ideals of medical ethics, and his advice was always in consonance with the best traditions of the duties of members of the profession to the public and to one another. If he had a fault, it was his modesty and unassertiveness. To all who knew him, he was the embodiment of uprightness of conduct, and he lived and died a pattern, not only of a good physician, but of an English gentleman.

## PUBLIC HEALTH

AND

## POOR-LAW MEDICAL SERVICES.

## ATTENDANCE OF POOR-LAW MEDICAL OFFICERS AT BOARD MEETINGS OF GUARDIANS.

A. J. J. writes saying he has been directed by a resolution passed by his Board to attend all their meetings. He asks whether they can compel him to do this.

\*\* No resolution of this character passed by a Board of Guardians is binding on a medical officer. When they require the attendance, they must make a special request for such attendance. They have no power to order him to attend all meetings.

## CLAIM ON GUARDIANS UNDER SUPERANNUATION ACT AFTER VOLUNTARY RESIGNATION.

A. B. writes that after thirty years' service as medical officer and the usual deductions from salary he, from unforeseen causes, resigned, and now lives elsewhere. If later on he becomes infirm, what claim would he have on the Board of Guardians under the Act?

\*\* We cannot see that after voluntary resignation any claim could be established.