

TREATMENT OF FACIAL PARALYSIS DUE TO DIVISION OF THE FACIAL NERVE IN THE MASTOID OPERATION.

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IN the JOURNAL of May 8th a case of anastomosis of the facial nerve in the aqueduct of Fallopius is described by Dr. F. Sydenham of Walsall. It may interest him and other surgeons to know that a procedure similar in detail has been employed by me in two cases.

CASE I.

Mr. P. H. was operated on in 1900. The facial nerve had been divided by a splinter of bone when "the bridge" was being cut away with a chisel. The division was not noticed at the time, but the paralysis was complete on recovery from anaesthesia. As this persisted, the wound was reopened a fortnight later. The facial nerve was seen to be completely divided, and the proximal end frayed and everted by the gauze packing. At the suggestion of my colleague, Mr. Jordan Lloyd, who was present at both operations, the proximal end was teased into its normal position—coming almost in contact with the distal end; two or three strands of fine chromic gut were placed round the nerve, the ends being inserted into the bony canal, and the parts protected for a short time by gutta-percha tissue in the way described by Dr. Sydenham. Gentle galvanism was subsequently employed; slight return of power commenced in six weeks, and complete recovery resulted.

The case, though not published, has been related to several of my colleagues in the Midlands.

CASE II.

Miss H. F., aged 26. The facial nerve was divided on January 14th, 1908, in clearing a cholesteatomatous mastoid which had been operated upon twice previously, the relation of the parts being much altered by bone absorption. The division was recognized at the time, and the nerve ends were carefully approximated and protected for a few days with gutta-percha tissue. The operation cavity became rapidly covered with epidermis from the meatal flaps, under hydrogen peroxide and spirit treatment. As no sign of regeneration appeared in a month (February 13th) it was decided to reopen the cavity and examine the nerve ends. It was not easy to define these again in the cicatrized tissue and to be certain that no union had taken place, indeed it seemed both to me and to Mr. Seymour Jones who assisted me that there was continuity of a few of the deeper fibres. The ends were readjusted, and a strand of fine chromic gut was with difficulty inserted in each of the aqueduct openings. The post-aural wound was closed, and the cavity rapidly healed without suppuration. Gentle galvanism was continued, but it was not until the end of June—four months later—that signs of power commenced in the mouth muscles; the improvement steadily extended to the other muscles, and the power has now (May 7th) returned to all except the corrugators of the brow.

In this case it is difficult to estimate the value of the second operation; it seems not improbable that if more patience had been exercised the first adjustment would have been all that was necessary.

It, however, showed that the operation is more difficult when the post-aural cavity is completely cicatrized than when it is in a recent post-operative condition.

The cases themselves show:

1. That if division of the facial nerve is recognized at the time of operation, careful adjustment in the manner indicated will probably result in restoration of function.
2. That if division has not been recognized, the wound should be reopened and the nerve ends adjusted at the earliest possible opportunity.
3. That if a careful adjustment has been made a second operation should not be undertaken within three or four months.
4. That this method of adjustment should be tried before anastomosis with the hypoglossal or spinal accessory nerves is attempted, the results of which are not always gratifying.

UNDER the will of the late Mr. Frederick Gorrings, the draper and silk mercer of Buckingham Palace Road, the Clapham and General Provident Dispensary receives a bequest of £1,000. On the death of the testator's wife £5,000 is to be paid to the Bolingbroke Hospital, and the residue of the estate after payment of other bequests divided in equal shares between some eight institutions. Among these are St. George's Hospital and Westminster Hospital; each, it is calculated, will ultimately benefit in this way to the extent of some £50,000.

Memoranda: MEDICAL, SURGICAL, OBSTETRICAL.

DISTRIBUTION OF BILHARZIOSIS ON THE VICTORIA NYANZA.

DURING a visit in January, 1909, to Usukuma on the Southern Shore of the Lake Victoria Nyanza, German East Africa, I was astonished to find at Nassa (a little place some 60 miles east of Mwanza, and on the southern shore of Speke Gulf) a very high proportion of the natives suffering from the symptoms of bilharziosis. I was only able to stay two days in that place, but of 156 patients whom I examined exactly half had the symptoms of bilharziosis of the bladder. Three of these chosen at random were asked to pass urine, and a drop of the urine (not centrifuged) showed in each case enormous numbers of typical ova. One of them was the local king or chief. The briefness of my visit prevented me from investigating the percentage of the general population so affected, nor was I able to investigate the presence or not of ova in the stools. The interest of the observation lies partly in the following facts:

1. The natives obtain their drinking water from the lake, and this lake is the source of the Nile, on the banks of which bilharziosis is endemic. The water is stored, as in my own neighbourhood, in earthenware jars of large size, which are seldom if ever cleaned. The natives likewise (or certain classes of them) do a good deal of wading in the water to fish, though this would not be true of the chief and upper classes.

2. On the northern shore of the lake bilharziosis is comparatively rare. I am told that in Entebbe bilharzia is occasionally found, especially in the stools. But in our hospital at Mengo (with an in-patient attendance of about 1,600 patients per annum, and an out-patient attendance of about 13,000 new cases every year) we have during the past thirteen years seen only two cases of bilharziosis, and they were probably not endemic. Mengo itself is only eight miles from the lake shore.

Mengo, April 6th.

J. HOWARD COOK,
M.S., M.B., F.R.C.S., D.T.M.H.

FATAL HAEMOPTYSIS IN AN INFANT.

THE patient in the following case, an infant aged 3 months, was the child of a puny, young, phthisical mother. It was stated to have kept in good health for four weeks after birth, and then commenced to have fever and cough. For nearly two months the fever never left the child, its cough was very frequent. When I saw it for the first time, a couple of days before its death, the cough was almost incessant. One evening the child was brought to my surgery in great haste, as it was supposed to have vomited blood. It was pulseless, and blood was oozing from its mouth and nose. The coat of the father, who had brought it in his lap, was saturated in front with blood. On inquiry I found that just half an hour before the child was brought to me it had a violent fit of coughing, and blood began to run from its mouth and nose. The haemorrhage proved fatal. That this infant had caught tuberculous infection from its mother and that the violent cough ruptured the pulmonary blood vessels and brought on the fatal issue is clear; but the extreme youth of the patient, which had barely completed the third month of its life, makes the case worth reporting.

A week after the baby's death the mother died also.

E. H. THOMAS, M.B., L.R.C.P. and S. Edin.
Dehra Dun, India.

FACIAL PARALYSIS FOLLOWING EMOTIONAL SHOCK.

Mrs. B., aged 38 years, consulted me for complete facial paralysis of the left side. She gave the following history: On Monday morning she was in perfect health. At breakfast she opened the paper and was startled to find news of a terrible shipping disaster, the *Penguin*, a local steamer, had sunk causing a great loss of life. She says that while reading the account of the wreck, she felt a sensation of "clawing" in her left cheek. Two hours later the left side of the face was completely paralysed.

I saw her twenty-four hours later. On examination the whole side of the face was motionless, all the branches of

the nerve were involved, the sense of taste and of hearing being normal. There was no reaction to either galvanic or faradic currents. No reaction of degeneration was present.

The treatment was high-frequency currents, continuous current (anode placed behind the ear), and massage, potassium iodide being given internally.

Fifteen days later the patient wrinkled the forehead slightly, a few days after this the mouth could be lifted a little, and at the end of thirty days all the normal actions of the face could be performed.

I have never seen a case of facial paralysis from emotion, and I most carefully questioned the patient as to the possibility of having been in a draught or having had a blow, etc.

P. CLENNELL FENWICK, M.D.,
Surgeon to Christchurch Hospital, New Zealand.

Reports of Societies.

UNITED SERVICES MEDICAL SOCIETY.

Wednesday, May 19th, 1909.

Lieutenant-Colonel W. G. MACPHERSON in the Chair.

Antityphoid Inoculation.

MAJOR H. W. GRATTAN and Captain A. L. A. WEBB demonstrated the method of preparing antityphoid vaccine at the Royal Army Medical College. During the last twelve months they had prepared and issued 40,800 double doses for the use of the army both at home and abroad. The vaccine, they said, was prepared from a broth culture of the typhoid bacillus, some of the points on which they laid special stress being that the culture should not be overheated (a temperature over 53° C. had been found to have a deleterious effect on the immunizing properties of the vaccine), that the antiseptic (0.25 per cent. lysol) should not be added until the vaccine had cooled down, and that the vaccine should not be used later than three months from the date of manufacture. These conclusions had been reached by experimental work on the protective substances found in the blood of men and animals inoculated with vaccines prepared at different temperatures, and of different ages. They quoted the most recent statistics available, which had been compiled by Brevet-Lieutenant-Colonel W. B. Leishman, R.A.M.C., and published in the February number of the *Royal Army Medical Corps Journal*.

The total strength of the 16 units under observation was 12,083, and amongst the inoculated—5,473 in number—21 cases of enteric occurred with 2 deaths. The remaining 6,610 non-inoculated men served as a control, and amongst them occurred 187 cases of enteric with 26 deaths.

THE ROYAL SOCIETY.

Thursday, May 20th, 1909.

Sir ARCHIBALD GEIKIE, K.C.B., President, in the Chair.

The Urine in Diseases of the Pancreas.

DR. P. J. CAMMIDGE reported that in the course of a series of observations on the metabolic changes associated with diseases of the pancreas he had found that if the urine of a patient suffering from an inflammatory affection of the gland were boiled with hydrochloric acid, the excess neutralized with lead carbonate, and the freed glycuronic acid precipitated out with tribasic lead acetate, treatment of the filtrate with phenylhydrazin, after the excess of lead had been removed with sulphuretted hydrogen, yielded a crystalline product which varied in amount with the intensity and stage of the disease. Normal urines and specimens from patients suffering from diseases in which there was no reason to think that the pancreas was involved gave no reaction. Twenty-eight cases in which the urine had been examined during life were investigated *post mortem*, and the results of the urinary examination confirmed. The urine of three dogs with experimentally induced acute or chronic pancreatitis was found to give a characteristic reaction. A detailed examination of a large quantity of urine from each of eight patients giving a well-marked reaction showed that it was due to a sugar having the reactions of a pentose, and

yielding an osazone with a melting point of 178° to 180° C. Attempts to isolate the mother substance were not successful; it would appear to be derived from the pancreas, and was probably set free as the result of degenerative changes in the gland, passing into the blood, and being excreted in the urine.

Incidence of Cancer in Mice.

Drs. E. F. BASHFORD and J. A. MURRAY (Imperial Cancer Research Fund) stated that the relative frequency of cancer at different age-periods in female mice had been determined on animals bred for the purpose, the ages, sex, and parentage being carefully recorded. The diagnoses had been made by combining clinical observation with microscopical examination and transplantation of the tumours, and with *post-mortem* examination of the animals. Following Jensen, they had demonstrated in 1903-4 that cancer could be transmitted artificially from one individual to another of the same species by the implantation and continued growth of living cancer cells, and had shown that this form of transmission was not responsible for the great frequency of the disease. Other authors had since described "epidemics" of cancer in animals, especially mice. In the course of a year 19 cases of cancer had been seen in the mice under observation. This aggregation of cases corresponded to the "epidemics" adduced as evidence that the disease was infective. The cases had been analysed with reference to the age at which the tumours were first observed. The liability to cancer at different age-periods was as follows:

	6-7 months.	-12 months.	-15 months.	-18 months.	-21 months.	-24 months and over.
Total ..	135	119	94	21	6	...
Cancer ...	3	4	7	3	2	...
Per cent. ...	2.2	3.5	7.4	14.2	33.3	...

The progressive increase shown in the table presented a remarkable parallel with the age-incidence of cancer in the human subject, and confirmed the earlier statements of the authors (*Proc. Roy. Soc.*, January, 1904, etc.) that in animals, whatever their length of life, the recorded frequency of cancer varied, as in man, with the opportunity for examining a sufficiently large number of adult and aged individuals. The observations also added a statistical confirmation to the results of the comparative histological and biological studies of the Imperial Cancer Research Fund, which had shown the close parallel, amounting in many particulars to complete identity, between malignant new growths in man and other vertebrates. They demonstrated that the law of the age incidence of the disease held for the shortest-lived mammals as for man. Since the facts agreed with the less perfect data for other vertebrates, the general application of the law of age-incidence was probable, and therefore any explanation of the etiology of cancer must accord with the circumstance that when considered statistically cancer was a function of age, and when considered biologically a function of senescence.

Volume of the Blood.

Drs. J. O. WAKELIN BARRATT and WARRINGTON YORKE (Liverpool) described a method of estimating the total volume of blood contained in the living body. The principle employed was that of injecting into the blood stream a known amount of dissolved haemoglobin, and then determining the degree of the resulting haemoglobinaemia. This enabled the volume of the blood plasma to be calculated, and, with the aid of a haemocrit determination of the composition, by volume, of the blood, the total amount of blood present in the living body was ascertained. The haemoglobin employed was obtained from the red blood cells of the subject of observation. No ill effect had been observed after injection of dissolved haemoglobin. The estimation of haemoglobin was generally made with von Fleischl's haemoglobinometer, the scale of the instrument having been previously standardized by means of solutions containing known amounts of red blood cells. When the depth of the natural colour of the blood plasma before injection was markedly increased, as sometimes happened,

The author had intended to propose that Great Britain should be invited to call a conference of maritime States interested to draw up and ratify suitable regulations. In his absence, however, the motion was not proposed.

In the afternoon, following a paper read by Professor BASKERVILLE (New York), a motion was proposed for the appointment of an International Commission to establish uniformity in the control of the escape of noxious gases.

At the last session M. HENRI TAFPE proposed that milk sellers should be obliged to supply only a certain minimum percentage of dry extract and butter in milk, and at the same time that the presence of a centrifugal cream separator near a dairy, as indicating fraudulent intent, should be regarded as a penal offence.

Starch.

In the other sections there was no lack of similar material. In the Starch Industry Section papers were read on various processes for the bleaching and conditioning of flour. Mr. R. WHYMPER contributed a remarkable paper on the microscopic changes occurring in starch granules during the germination of wheat. The paper was based on a microscopic examination of grains extended over a period of growth of fourteen days. Inspection showed that thirty-six hours after the grain had become thoroughly moist the larger starch granules nearer the germ began to show signs of pitting. After three days the grains swelled, and in the centre of the flanks were considerably swollen, and in many cases were pitted by enzyme action. At this stage long oval starch granules, more resistant than the usual round form appeared, and by the ninth day the majority of the starch granules were of the oval form. As a result of these observations the author concluded that the larger and more mature starch granules were the more easily assimilated as plant food. On investigation by means of diastase and other reagents it was found that no general relation existed between their size and the ease with which they were attacked, but that it was almost universally true that the larger granules of any one starch succumbed more quickly to attack than the smaller granules of the same kind.

Oxidation of Atmospheric Nitrogen.

Saturday was the great day of the Electro-Chemistry and Physical Chemistry Section, when a full-dress debate was held on the possible means of the oxidation of atmospheric nitrogen, with an experimental demonstration by Professor BERNSTHEN. The room at the Central Technical Institute was crowded, and several members of the Congress were unable to gain admission. Other aspects of this important national problem were also dealt with by Messrs. N. CARO and C. WEISS. Throughout the week the agricultural chemists discussed various aspects of the same nitrogen problem, considering the value of the different nitrogen manures and the possibility of substituting biological for chemical methods.

Photography.

In the photo-chemistry department Mr. F. W. T. KROHN had a most sympathetic hearing when he argued in favour of the establishment of an international standard method of marking the speed of photographic dry plates and a definition of the standard conditions under which such speed tests should be carried out.

Other Sections.

To a certain extent the papers read in the Fermentation Section covered the same ground as those in Bromatology, for among the questions considered were various points in connexion with the analysis of brandy and of wines. Partly owing to the omnipresent influence of Dr. Wiley the question of standardization entered into the Section on the Industry and Chemistry of Sugar, where the standard temperature of 20° C. was recommended as the most suitable for taking all polarization readings of raw and refined sugars.

In the Explosives Section several important papers were read on the subject of mining explosions, dealing, for the most part, with the old question of the explosibility of coal dust mixed with air. Among the chief recommendations were the watering of the mines liable to be affected, the replacing of the normal floor in patches by concrete, and the liberal distribution of hygroscopic

salts about the mines. Evidence was brought to show that as a result of proper precautions being taken in the Westphalian district the number of mining disasters had very greatly decreased in recent years.

Several papers touching on matters of medical interest were brought before the Section on Inorganic Chemistry and Allied Industries. Mr. G. HARKER described a method for fire extinction and disinfection in ships and in other enclosed places. Briefly, his proposal is to utilize the gases from the ships' funnels, to pump this in large quantities into the holds of a burning vessel, and so to starve the fire of the oxygen necessary for combustion to continue. In support of Mr. Harker's claim that he has invented a suitable apparatus it may be mentioned that a Select Committee of the New South Wales Parliament has investigated the apparatus and recommended that it should be fitted to the salvage steamer used for dealing with outbreaks of fire on ships lying in Sydney harbour. Mr. Harker described some of the very stringent tests applied while his method was still in the experimental stage.

A sensational debate took place on the ionic theory and on how far it could be legitimately applied to explain chemical phenomena. Professor ARRHENIUS spoke energetically in favour of the theory, and Professor ARMSTRONG subjected it to a fire of vigorous criticism.

(To be continued.)

Medical News.

A MEMORIAL to Theodor Schwann, whose name is intimately associated with the conception of the living cell, is to be unveiled at Neuss, his birthplace, on June 6th.

THE annual dinner of the British Balneological and Climatological Society is fixed for Friday, June 11th, at the Piccadilly Restaurant, the President, Dr. Ernest Solly, of Harrogate, being in the chair.

THE Bowman Lecture of the Ophthalmological Society of the United Kingdom is to be delivered by Mr. Nettleship, at 5 p.m. on Friday, June 11th, at 11, Chandos Street, Cavendish Square. Mr. Nettleship will deal with some diseases of the eye illustrating heredity.

THE annual meeting of the Royal Medical Benevolent Fund Society of Ireland will be held in the Royal College of Physicians, Dublin, on Monday, June 7th, at 4.30 p.m. The chair will be taken by Dr. Andrew Horne, President of the College.

THE summer dinner of the West African Medical Staff will take place on Monday, June 21st, at the New Gaiety Restaurant, London. Members of the staff desirous of being present should communicate without delay with Dr. Prout, C.M.G., 78, Rodney Street, Liverpool.

THE East Suffolk County Education Committee has issued two leaflets from the school medical officer, one on vermin in the heads of children and the other drawing attention to the importance of cleansing the mouth, and particularly the teeth, of children.

IT is proposed to establish a medical school in China under the auspices of Harvard University. This step is being taken in response to invitations of the Chinese themselves, among them being His Excellency Tuan Fang, Viceroy of the Kiang Soo. The approval of other Chinese officials has been obtained. A Board of Trustees, which includes such well-known names as those of President Charles W. Eliot and Drs. A. T. Cabot and W. Councilman, has been formed to administer the endowment fund. Ten medical graduates of Harvard are preparing to go to the East to work in the school.

A DINNER of the Glasgow University Club was held at the Trocadero Restaurant, London, on May 25th, when the chair was taken by the Lord Advocate, Mr. A. Ure, M.P. A gift to the club from Dr. C. O. Hawthorne of a silver snuff-box for use in the old Scottish style and fashion at the club dinners was gratefully accepted. The chairman, in proposing the toast of "The University and the Club," described the successful career of the club and its present satisfactory condition. Sir Donald MacAlister, in proposing a toast to "The Guests," referred to Sir Patrick Manson's important services in the sphere of public health work in the tropics. The toast was duly acknowledged by Sir Patrick Manson. After Mr. C. S. Dickson, M.P., had given "The Health of the Chairman" and that gentleman had replied the proceedings terminated.

man must be placed in the same class. Of interest in this connexion is Darwin's remark that "if a flower is accustomed to open at sunrise it will open none the less punctually if transplanted to a dark cellar. A residue of the stimulus remains in the cells so that opening at a given time becomes part of its being."—I am, etc.,

Lightcliffe, nr. Halifax, May 29th.

ASHINALL MARSDEN.

Obituary.

SIMEON HOLGATE OWEN, M.D., M.R.C.P.,

CONSULTING PHYSICIAN, MANCHESTER NORTHERN HOSPITAL.

FEW men of a retiring disposition will be so much missed by a large circle of friends as Dr. Simeon Holgate Owen, who died suddenly from heart failure, after doing an ordinary morning's work, on May 19th, at his residence, Whalley Range, Manchester. Dr. Owen was in his 65th year, and for some years had suffered occasionally from pains in the chest which were apparently regarded as dyspepsia, so that his death came with quite unexpected suddenness. He was the son of the late Mr. Henry Owen, Dental Surgeon, and obtained the diplomas of M.R.C.S. and L.S.A. in 1869. He graduated M.D. at Queen's College, Belfast, in 1872, and obtained the M.R.C.P.Lond. in 1888. For some years before the incorporation of Moss Side, Manchester, he was M.O.H. for that district, and was a Fellow of the Royal Institute of Public Health. At that time he took special interest in sanitary science, and frequently lectured on public health subjects for the Manchester and Salford Sanitary Association, of which he was an active member. Two of his lectures on Fevers, their Nature and Prevention, and Work and Recreation in their Relation to Health, were published, and were very favourably received. He had held the posts of Assistant Physician to the Manchester Royal Infirmary and House Surgeon to the Manchester Southern Hospital for Women and Children. He was best known, however, as Physician to the Manchester Northern Hospital for Women and Children, a post which he held for some years and where he endeared himself to a large number of patients by his careful, painstaking, and sympathetic treatment. On his retirement from the active work at the Northern Hospital he was elected consulting physician, his services to the hospital being as much appreciated by his colleagues and the Board of Management as by the patients under his care.

For many years he took a very active part in the work of the various medical societies in Manchester. In 1891 he was President of the Clinical Society, and in 1893-4 Vice-President of the Manchester Medical Society, of which he was elected Honorary Treasurer in 1908. He also held the position of President of the Medico-Ethical Association on two separate occasions, having been elected for the second time shortly before his death. For some time he made diseases of the heart a special study, and wrote various articles on the subject, among which may be mentioned Mitral Disease in Children, The Prognosis of Mitral Disease in Children, and Cardiac Thrombosis after Abortion. He was also the author of numerous reviews and articles on general literary subjects. He was an enthusiastic Unionist, and a member of the Manchester Constitutional Club, and worked hard, if unostentatiously, for his party.

As a member of the British Medical Association he took no active part until comparatively lately, but as a member of the committee recently appointed by the Joint Divisions of Manchester and Salford to consider the ethical relations between consultants and general practitioners in Manchester he showed an amount of fair-mindedness and sympathy with both branches of the profession that augured well for the success of the committee in its difficult task. Shortly before his death he was elected Chairman of the Manchester West Division, and the Honorary Secretary of that Division writes as follows: "As one who has enjoyed the privilege of frequent personal intercourse with the late Dr. Holgate Owen, and has often benefited by his ever ready sympathy and help, I feel, and all who knew him will agree with me, that his Division has lost in him an ideal chairman and a true friend. Although in the past

he had been unable to take any active part in the work, he was keenly alive to, and showed much interest in, what was done, and he was ever willing to aid with well-considered advice. Dr. Owen was unanimously elected to the chairmanship of the Division for the ensuing year at the annual meeting on May 11th, and a day or two later wrote accepting the position and expressing his pleasure at the prospect of active work in the interest of the Association. He promised to attend the first meeting of the Executive Committee, but he died on the afternoon of the day previous to the meeting. The news of his sudden and unexpected death came as a rude blow to the hopeful anticipations of a year's pleasant labour under his able leadership, and added to the bitterness of the personal loss felt by those who reckoned him among their friends. The geniality and earnestness so characteristic of him, his courtesy, tactfulness, and common-sense methods of dealing with difficulties, and his general popularity—he had no enemies—all tend to make the loss of such a man seem wellnigh irreparable, alike to his Division, his profession, and his personal friends."

MR. JOHN MASON WILLEY died at his residence in Leicester on May 20th after a prolonged illness. He was born in 1852, and received his medical education at St. Bartholomew's Hospital. After obtaining the diploma of M.R.C.S.Eng. in 1876 he spent several years in resident appointments. He was House-Surgeon successively to the Jessop Hospital for Women, Sheffield, the Sheffield Public Hospital and Dispensary, and the Royal Isle of Wight Infirmary, Ryde. In 1883 he became L.R.C.P. and L.M. Edin., and in 1890 he settled in Leicester and was engaged in busy general practice until failing health compelled his retirement in 1908. Of quiet and retiring disposition, Mr. Willey's kind, unassuming manner made him very popular among a large circle of patients. For several years he held the post of Surgeon to the Leicester Provident Dispensary. Mr. Willey leaves a widow, but no family.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are: Professor Guddstadt of Berlin, a well-known medical statistician, aged 70; Dr. Vicente de Figueiredo Saboia, formerly Professor of Clinical Surgery in the Medical Faculty of Rio de Janeiro; Dr. Paul Cavaillon, *agrégé* Professor at the Medical Faculty of Lyons, and founder of the *Lyon Chirurgicale*, aged 32; Dr. Ernest Besnier, Member of the Paris Academy of Medicine, one of the most famous dermatologists in Europe, sometime head of the Dermatological School of Saint Louis Hospital, founder of *Annales de Dermatologie*, author of numerous works on general medicine and hygiene, as well as dermatology, and translator of Kaposi's *Lectures on Diseases of the Skin*, with copious notes; Dr. Manuel Amador, first President of the Republic of Panama, and at one time the leading physician on the isthmus, aged 74; and Dr. Ferdinand Klug, Professor of Physiology in the University of Budapest, aged 64.

THE LATE PROFESSOR GERALD YEO.—In the obituary notice of Professor Gerald Yeo, published in the JOURNAL of May 8th, it should have been stated that Professor Yeo left only one son, who is a second lieutenant in the Devonshire regiment.

Medico-Legal.

HERBALISTS AND THE PEOPLE.

AN inquest was held in Sowerby on May 17th on a woman whose death would appear to have been due to internal strangulation, which being unrelieved was followed by peritonitis. She fell ill on May 6th, and died a week later. Two days after she began to be ill a herbalist named Culpán was called in to attend her, and continued to do so until she died. Late on the night before her death a medical man was asked to see her, but sent a message to the effect that he would be unable to come that night. The jury returned a

verdict of death from natural causes. Culpan was not present at the inquest, but subsequently wrote a letter to the *Halifax Guardian* saying that on the morning of the day he first visited the deceased he was asked for a mixture to stop "bilious vomiting," but declined to give it until he knew more particulars. In the afternoon he diagnosed the case as one of inflammation of the bowels, probably complicated by peritonitis. The following day he confirmed his diagnosis and suggested that other advice should be summoned, but the patient declined and asked him to continue to treat her. This letter was written subsequent to the holding of the inquest and to the medical evidence as to the nature of the disease and the cause of death.

The case in its essential features is merely one more unfortunate instance of a person dying owing to causes which could probably have been removed had medical attention been received, but the action of the jury on the occasion lends it a certain special interest. The foreman and other members of the jury kept on arguing with the coroner as to why the inquest should have been held at all, and evidenced a strong desire to defend Culpan—who was mentioned as "Dr." Culpan—from any kind of blame. They had known him for thirty or forty years and had every confidence in him. He was not a mere quack—not a person continually coming and going—but one who had been brought up among the people, and a very respectable man. The chivalry thus displayed is a pleasing feature which might well be emulated by juries elsewhere; but, on the other hand, the jury's general attitude towards the matter did little credit to their heads. The only excuse that can be made for them is that subsequent events seem to show that they were under the influence of an egregious body calling itself the National Association of Medical Herbalists. Its members wish the people to believe that an elementary knowledge of herbs administered by rule of thumb is all that is required for success in the treatment of sickness, and to conceal from them the fact that when they consult a medical man they receive advice founded not only on a complete knowledge of herbs, but of the human body and its diseases as well. As Yorkshiremen have the reputation of being canny, one would not have imagined that these Sowerby people would have been thus deceived, or have failed to see for themselves that the cheapest goods to buy are those into which the most labour has been put.

It is to be feared, however, that nothing will prevent the occurrence of preventable deaths of the same kind until the Legislature places a penalty on the practice of medicine by persons who have no scientific knowledge of it.

WORKMEN'S COMPENSATION CASES.

Refusal to Undergo an Operation.

ALTHOUGH a workman may be justified in refusing to undergo an operation, the county court judge has it in his power to reduce compensation if the workman will not submit to reasonable treatment. In a case at Barnsley, a man who had sustained an injury to his right finger was awarded compensation at the rate of 15s. 10d. a week. It was suggested by the employers that an operation would enable him to work. The man, however, refused to undergo the operation, as his medical adviser recommended him not to. He had neglected, however, to have the hand massaged. The county court judge held that while the refusal to be operated on was justifiable, the workman had not done all that he could to get his hand better. He therefore reduced the compensation to 12s. 10d. a week.

Carbolic Acid Poisoning.

It is for those who make claims under the Act to prove that the death or injury was caused by accident. In a case at Manchester a cloth presser died of carbolic acid poisoning. It was proved that this fluid was used in the works, that the deceased was in the habit of drinking his tea out of mineral water bottles, and that a bottle containing traces of carbolic acid was lying near where the deceased lay. Upon this it was suggested that he must have been killed by drinking something which he thought was harmless. The judge held that no case had been made out.

Probable Future Incapacity.

The fact that a workman may at some future time suffer incapacity as the result of an injury is a matter which the court will take into account when asked to make a declaration that liability is at an end. In a case heard in Scotland a man had sustained a rupture while lifting a derailed hutch. He returned to work in three weeks at full wages. In a claim for compensation he only asked for three weeks' wages, but he also sought a declaration of liability. The sheriff decided, on the medical evidence, that as there might be incapacity at some future time in consequence of the injury, the workman was entitled to have his right to prefer a claim kept alive.

Medical Notes should be Taken.

At Merthyr, during the hearing of a claim, it was pointed out that the number of claims that went into court was very small compared with the number with which doctors had to deal. The judge remarked that he would look with some suspicion on the evidence of medical men who made no notes on such cases. It was almost impossible for them to remember one case out of a hundred, and it would only take a minute to make a note at the time.

Universities and Colleges.

UNIVERSITY OF CAMBRIDGE.

THE following degrees were conferred on May 27th:

M.D.—R. E. French, King's; J. C. L. Roberts, Cla.; F. W. M. Palmer, Jes.
M.B., B.C.—F. C. Trappnell, King's; J. W. B. Bean, H.-Selw.
M.B.—N. MacLaren, Trin.; F. Worthington, Joh.; G. H. Davy, Gonv. and Cai.

UNIVERSITY OF LONDON.

THE following candidates have been approved at the examinations indicated:

FINAL M.B., B.S.—*A. H. G. Burton (c), Guy's Hospital; *R. R. Elworthy (a), Westminster Hospital; *A. P. Fry (d), St. Bartholomew's Hospital; *M. D. D. Gilder (d), University College Hospital; *C. A. Joll, B.Sc. (a, b, c, d), University Medal, University College, Bristol; *D. A. Powell (a), Charing Cross Hospital; L. T. Baker, S. J. A. Beale, T. L. Bomford, R. H. Bott, K. Bremer, C. H. Broomhead, J. P. Buckley, Elsie M. Chubb, L. Croft, S. J. Darke, H. C. R. Darling, T. B. Davies, N. C. Davis, G. V. Deshmukh, Irene C. D. Eaton, A. E. Evans, T. Evans, C. H. S. Frankau, W. L. E. Fretz, Janet M. Fiske, H. S. Furness, C. J. Galbraith, H. Gooch, A. E. Gow, F. W. Hogarth, E. R. Holbrow, M. J. Holgate, A. W. Holthausen, H. F. L. Hugo, Matilda Hunt, J. L. Johnston, E. J. G. Jones, R. P. Jones, W. B. Jones, J. D. Judson, H. C. Lucey, G. R. Lynn, J. C. Lyth, H. E. H. Mitchell, M. H. E. R. Montesole, H. L. Morgan, W. P. H. Munden, W. H. Palmer, O. B. Parry, J. R. Perdrau, Ellen M. Pickard, Laura G. Powell, T. E. Pryce, W. P. Purdom, R. A. Rankine, H. A. Robson, J. E. Scudamore, Florence Stacey, Marion Stocks, St. J. A. M. Tolhurst, S. A. Tucker, J. O. D. Wade, H. G. Willis, C. A. Wood.

* Honours.

(a) Distinguished in Medicine. (b) Distinguished in Pathology.
(c) Distinguished in Forensic Medicine and Hygiene.
(d) Distinguished in Surgery.

FINAL M.B., B.S. (Group I only).—E. W. Archer, R.Sc., Ella M. Barker, A. Burrows, D. F. Dobson, T. S. Lukis, W. N. Pickles, G. R. Strong, B. R. Vickers, G. R. Ward, H. O. Williams.

FINAL M.B., B.S. (Group II only).—Anne Borrow, V. F. Bowen, C. G. Galpin, W. S. Hughes, J. E. L. Johnston, D. Loughlin, P. D. F. Magowan, J. H. Meers, D. G. S. R. Oxley, A. H. Penistan, N. G. H. Salmon, F. C. Searle, R. R. Smith, W. R. M. Turtle, A. L. Weakley, H. O. West, R. T. Williams.

UNIVERSITY OF DURHAM.

MEDICAL GRADUATES' ASSOCIATION.

Increase of Council.

AN extraordinary meeting of the association was held on May 28th at 11, Chandos Street, London, W., when Dr. R. A. Bolam's motion to increase the number of the Council from 12 to 18 was carried unanimously.

Annual Meeting.

At the annual meeting which followed, with Mr. Bruton Angus in the chair, it was decided that the auditors shall not be *ex officio* members of council.

The Treasurer's report was agreed to after some criticism on the way it was drawn up.

Dr. Braithwaite proposed that the method of voting for the election of officers should be entirely by ballot papers. It was agreed to refer the question to the Council for consideration, and the following officers were then elected: Wm. Rawes, M.D., F.R.C.S., President; T. Beattie, M.D., B.S., M.R.C.P., and M. G. Biggs, M.D., Vice-Presidents; Wm. Martin, M.A., M.D., B.S., and J. Inglis Parsons, M.D., M.R.C.P., Honorary Secretaries; eighteen members of Council, and three Auditors, Dr. Wm. Rawes, the President, and Drs. Wm. Martin and Allison were elected Representative Governors of the Court of the Durham College of Medicine. Dr. Edridge-Green's motion that "Four members of Council shall form a quorum" was carried by a majority. The report of the Subcommittee on the University Bill was approved. Sir T. Lauder Brunton and Dr. W. F. Mott were unanimously elected honorary members of the association.

Annual Dinner.

The members and their guests dined together the same evening at the Café Royal. Dr. William Rawes, the new President, in the chair. The "University of Durham" was proposed by Mr. Bruton Angus, and responded to by Sir George Hare Philipson. "The Association" was proposed by Dr. F. W. Mott, and responded to by Dr. Inglis Parsons. The toast of "The Guests" was proposed by Dr. F. M. Sandwith, and responded to by Sir James Barr in humorous terms. Some excellent music was provided by Mr. A. E. Godfrey, and a most enjoyable evening was passed.

QUEEN'S UNIVERSITY OF BELFAST.

STATUTES MADE BY THE COMMISSIONERS.

THE statutes made by the Commissioners appointed under the Irish Universities Act, 1908, for the government of the Queen's University of Belfast were issued on May 22nd.

There are four Faculties—Arts, Science, Law, and Medicine. In Medicine there are six degrees; the usual ones of Bachelor of Medicine, of Surgery, and of Obstetrics (M.B., B.Ch., and B.A.O.) constitute the primary degrees of the Faculty, and require five years' registration as a student of medicine and attendance in Belfast on the prescribed course of studies for three academic years at least. The degrees of M.D., M.Ch., and M.A.O. will not be conferred until the expiration of at least

three more academic years, or in the case of graduates of the university in Science and Arts, of two years. These latter degrees will be conferred after examination or submission of a thesis.

No mention is apparently made of State medicine or public hygiene, and considering the enormous importance of these studies, the great number of Belfast students that seek a degree or qualification in them from Cambridge, Dublin, and elsewhere, and the general public interest, this must be regarded as a grave omission. Neither is there any mention of dentistry, nor in the arts and science faculties is there word of commerce. The Commission may, of course, have found that these last two departments are not a success elsewhere.

Only the main outline or skeleton appears in these statutes, but there is a certain feeling of disappointment that when a new university was thus being forged red hot, the opportunity should not have been seized of beating the yet malleable form more into the state anticipated by the leading thinkers of the day. The old division between physician and surgeon is fading; gynaecologists are both, and answer the demand of facts. The day when the young surgeon will be taught asepsis and how to perform intestinal anastomosis and other abdominal operations in the veterinary wards and theatre seems not far distant.

The whole classification of medical science and art is changing. Every medical ward in a hospital seems to require a surgeon, and every surgical one an immunizer. It is to be hoped that the statutes are not final, and that liberty of expansion in both faculties and degrees may be given to the Senate. As at present drawn they offer no recognition of the great changes that are fast taking place in what may be called the very constitution of medicine.

UNIVERSITY OF BIRMINGHAM.

The Ingleby Lectures.

SIR THOMAS BARLOW delivered the first of the Ingleby Lectures on May 27th in the Medical Lecture Theatre at the University to a very large audience. The subject of the lectures is Raynaud's disease and erythromelalgia, a summary and a review.

Public Health

AND

POOR LAW MEDICAL SERVICES.

URBAN DISTRICT COUNCILS AND THEIR MEDICAL OFFICERS.

THE answer returned under this head in the JOURNAL of May 22nd, p. 1275, was given under a misapprehension. It was thought that the inquiry referred to an appointment under the Poor Law, whereas it referred to an appointment of medical officer of health. As Dr. Butler-Hogan has pointed out, and as is, of course, well known, the General Order of the Local Government Board as to Medical Officers of Health and Inspectors of Nuisances (Urban Sanitary Authorities), dated March 23rd, 1891, contains the following, Article (3):

An appointment shall not be made unless an advertisement specifying the district for which such appointment is to be made, together with the amount of salary proposed to be assigned, and the day fixed for such appointment, shall have appeared in some public newspaper or newspapers circulating in the district of the sanitary authority at least seven days before the day so fixed.

REPORTS OF MEDICAL OFFICERS OF HEALTH.

Surbiton Urban District.—Based upon an estimated population of 18,747 persons, the birth-rate in 1908 was 20.5 per 1,000, the death-rate from all causes 10.4, and from zymotic diseases 0.4 per 1,000. The infantile mortality-rate was equal to 70 per 1,000 births. The medical officer of health (Dr. Owen Coleman) points out that it is important to correct the crude death-rate by excluding non-residents who die in public institutions within the district and including residents who die outside the district. He appears to have been at some pains to make these corrections in his mortality tables, and complains of the difficulties which attend the gathering together of the necessary data. He expresses the opinion that there should be devised some machinery for forwarding the necessary information to the medical officer of health, and considers that the registrar is the person to whom the duty should be entrusted. We would point out that arrangements are already made by many medical officers of health under which the registrars supply the information desired by Dr. Coleman. It is true it is no part of the registrar's duty to make out the necessary returns, but as a rule he is willing to furnish them upon being paid by the sanitary authority the usual fee of 2d. for each entry and for each return. Since 1898 the Surbiton Council have had power under a by-law to require the owner of a dwelling-house to pave a yard or open space in connexion with the house if it is necessary for the prevention or remedying of insanitary conditions. It is satisfactory to find that this regulation is being enforced, and that already nearly 500 houses have been satisfactorily dealt with. Many observers have commented upon the relation between outbreaks of diphtheria and unpaved back yards. It would be of interest to know whether the activity of the district council in the manner indicated in any way accounts for the lessened incidence of the disease in the town of Surbiton.

Letters, Notes, and Answers.

BRITISH MEDICAL ASSOCIATION AND BRITISH MEDICAL JOURNAL. THE offices of the British Medical Association and of the BRITISH MEDICAL JOURNAL are at 429, Strand, London.

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2630, Gerrard, BRITISH MEDICAL ASSOCIATION.

2634, Gerrard, MEDICAL SECRETARY.

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CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

CORRESPONDENTS not answered are requested to look at the Notices to Correspondents of the following week.

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In order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL, and not at his private house.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

QUERIES.

DESIGN OF SURGERY.

T., who is about to put up a surgery to be attached to his house at a cost not exceeding £60, would be glad to know what other medical men have found most suitable.

DENTAL FEES.

CARIES asks what would be a fair fee for a qualified dentist in a small town to charge an ordinary patient (clergyman) for refilling an incisor with gold, the time occupied being one hour and a half?

* * The question is difficult to settle, so much depending upon the class of practice and the standing of the practitioner. For protracted and difficult operations a dentist in high-class practice in London would charge a fee of 2 guineas an hour, and in some provincial towns fees nearly as high are obtained, though as a rule probably about half this fee would be regarded as a good one. It is to be remembered that the longer the operation the more gold is used, and the cost of the gold may be considerable.

LETTERS, NOTES, ETC.

"A CHRISTIAN SCIENCE LECTURE."

WE have received a letter from Mr. Frederick Dixon, who writes from the office of the District Manager of the Christian Science Committees on Publication for Great Britain and Ireland relative to a paragraph under this heading, which appeared in the JOURNAL of May 29th. It is too long to publish in full, but we give what seem to us the essential parts. After saying that our correspondent speaks of the cough of a lady beside him who had not attained sufficient faith to overcome it, he goes on:

Now, supposing this to be the case, what does it prove? Really nothing at all, since, for aught he knows, in order to overcome the cough, the lady might have had to overcome something very much more serious than a cold, and no Christian Scientist pretends to be able to overcome every phase of sickness instantaneously. But, as a matter of fact, how does he know that the lady was a Christian Scientist? The probabilities are distinctly against it. So many people had been turned away from Dr. Pluno's first lecture that Christian Scientists were largely conspicuous by their absence at the second, having left the hall mainly to the outside public.

Passing on now to his argument, why, if Christian Scientists are engaged in ignoring the evidences of sin, sorrow, and suffering around them, is there so much criticism of them for their efforts to heal the sick and preach the Gospel? The critics of Christian Science might at least endeavour to be consistent.

Because Christian Scientists deny the absolute reality of the existence and power of evil, it no more follows that they deny the relative sense of its reality to the human consciousness, than because the philosophical idealists of to-day deny the actual reality of matter they deny its existence as a phenomenon. For centuries the world has been face to face with the problem of evil, and for centuries the effort has