

Her ninth pregnancy was normal and the child was healthy, but a few years later died from measles.  
Her last (tenth) pregnancy was normal in every way, and the child, now aged 10, is healthy.

Here there seems to have been a definite relationship between the extent of the jaundice in the mother and the jaundice and feeble health of the child. Again, it does not seem to have made any material difference to the child's condition whether it was fed with the jaundiced milk or not. The extreme orange colour of the milk, even when the mother's skin was free from discoloration, is rather remarkable.

I came to the conclusion at the time that the condition was an infective one, and that the child was infected *in utero* and not from the milk.

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### TRAUMATIC ASPHYXIA.

ON April 4th, 1910, whilst H. J., aged 50, was working in a seam 24 to 28 in. in height, he ceased hewing, turned round, and reached for some timber, when a stone 6½ ft. in length, 2½ ft. in width, 1½ ft. to 2 ft. in thickness, estimated weight 1 ton, slipped from the roof and pinned him prone on the small coal on the bottom. According to his mate, working in close proximity, his only exclamation was "Oh, dear!" Liberation of the body was a task of considerable difficulty, as the stone was lying on his back, leaving head, neck, shoulders, arms, and one leg and foot free.

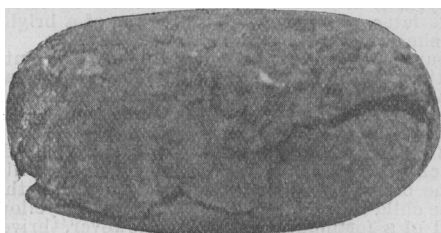
Inspection of the body about three hours afterwards revealed: (1) Numerous indentations (pittings), interspersed with bluish-purple discolorations, of the skin of the thorax and epigastrium, due to the pressure of corners of small coals under superincumbent weight of stone on the body. (2) Suffusion (a) of the skin of the front and sides of the face, neck, and upper part of the thorax, of rose-purple tint; and (b) of the skin of the back of the neck and head, of a bluish-purple hue. The mucosa of the lips and gums also showed a rose-purple suffusion. (3) No indications of fracture or any injury in head, trunk, or limbs.

Durham.

JOHN H. R. GARSON, M.B., D.P.H.

#### SPONTANEOUS PASSAGE OF GALL STONE.

A PATIENT, aged 69, had been under observation from time to time with gastric symptoms without local evidence of tumour to suggest malignant disease. His last illness was



Photograph of stone, natural size: Length, 2½ in.; breadth, 1½ in.

a typical attack of gall stones, with marked tumour. He was seen by Mr. Openshaw, who advised operation. Before this could take place acute haematemesis, melæna, and collapse set in, and the operation for the time being could not be done. Large doses of morphine with atropine were administered hypodermically, with the result that the patient rallied for a day or two, and the tumour vanished. Symptoms of acute obstruction set in, again with collapse. With almost poisonous doses of atropine, followed up by enemata and castor-oil, the patient passed the stone, and after a fortnight's convalescence went to Bournemouth to recuperate.

Hornsey.

AMB. ATKINSON.

UNDER the will of the late Mr. Samuel Leeming Haldane, a partner in a firm of Hull steamer trawlers, the Hull Royal Infirmary receives a legacy of £5,000 and the Hull and Sculcoates Dispensary a sum of £1,000.

### CARDIAC LESIONS RESULTING FROM ACUTE RHEUMATISM.

IN examining candidates for life insurance policies how frequently, owing to lesions discovered by auscultation, does one have to put the question, "When did you have rheumatic fever?" This fact has often caused me to ask whether we are, as a rule, treating acute rheumatism on really correct lines. Statistics, I believe, prove that the mortality in this disease is only 1 per 1,000. We have, therefore, not a fatal termination to fear, but do we in treatment recognize the very large percentage of cases (called cured) in which lesions are left which prove fatal in many cases, and in others cause endless pain, fear, misery, and shorten life? Looking these things fairly in the face, I think we cannot but look upon acute rheumatism as one of the most important and serious diseases that flesh is heir to.

I need not enumerate the various remedies in use, but I believe it has been proved that (1) the lactic acid circulating in the blood, whether from an excessive secretion of it, or from a decrease in elimination of a normal amount, due to liver inaction, "does not deposit itself in the white fibrous tissue (its special affinity) on the valves of the heart, while all the excretions of the body have an alkaline reaction"; (2) if the valves of the heart do become affected they do so during the first ten days of the disease. Acting on this I some years ago treated a number of cases on plain common sense lines. To neutralize existing acid in the blood I simply gave 3ss doses of potassium bicarbonate, freely diluted, every four hours. To eliminate the acid and keep the liver acting, I gave 3 grains of mercury subchloride two or three times a week for the first ten or twelve days. Of course, it is a great advantage to begin with a case at its commencement. A nourishing, easily-digested diet; sedatives, tonics, and local applications to relieve pain, if and when necessary.

Whether my tried cases were accidental I know not, but I saw them all afterwards at different periods, and I can say that any one of them might have applied for a life policy without being asked, "When did you have rheumatic fever?"

Farningham, Kent.

W. HENRY HARRIS.

## Reports

ON

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

#### BRADFORD ROYAL INFIRMARY.

FURULENT MENINGITIS SECONDARY TO A LATENT APPENDIX ABSCESS.

(By SYDNEY HARTILL, B.M., B.Ch.Oxon., House-Physician).

A BOY, aged 8 years, was admitted on January 28th, 1910, in a semiconscious condition. The history (obtained from the mother) was that the child was quite well until January 21st, when, on arriving home from school, he complained of pain in the left knee. There was no redness or swelling, and the pain passed off in a few hours.

He remained apparently well until January 24th, when he complained of a severe headache, and stayed away from school. The headache became worse, and on January 26th he appeared to be drowsy, and shouted out when touched. From January 26th to 28th he gradually became more drowsy, and his general condition appeared to be worse. As far as the mother knew he never complained of pain in the abdomen. The bowels were regular and stools normal. There was nothing of note in the past or family histories.

When admitted at 4 p.m. his temperature was 103°, pulse 88, respirations 36. He was conscious, but very drowsy, cried out when touched, and strongly objected to being disturbed. The head was slightly retracted, and there was some stiffness of the muscles at the back of the neck. Tache cérébrale was marked. The pupils, moderately dilated and equal, reacted naturally. The discs were a little swollen, and the veins dilated. The mouth was covered with sordes, the lungs and heart were

Gosport that Dr. Hunter spent the greater part of his professional life, and despite his long partial seclusion he will be painfully missed in the public life of the district and by many old friends. He received his professional education at Anderson's College, Glasgow, becoming L.F.P.S. in 1875, and L.R.C.P. Edin. three years later. He became medical officer of health for Gosport and Alverstoke about twenty-two years ago, his tenure of the medical officership for the town district of the Union dating back to much the same period. Other appointments he held were those of Superintendent of the Isolation Hospital, erected at Elson in 1899, and the Surgeoncy of the Alverstoke Division of the Hants Constabulary. In addition, he carried on a large private practice, and acted as Surgeon to the Gosport Volunteer Fire Brigade, the foundation of which was largely due to his efforts. He was a member of the British Medical Association and a frequent attendant at the meetings of the local Division. Other professional societies to which he belonged were the Incorporated Society of Medical Officers of Health and the Royal Sanitary Institute. At the time of the creation of the Territorial Force he was an officer of long experience with the volunteers, and was naturally selected to organize and command the 5th Southern General Hospital with the rank of Lieutenant-Colonel and Honorary Surgeon-Colonel. He held the Volunteer Officer's Decoration, and during the South African war was in charge of the whole of the troops in the Gosport district. He was also appointed a Knight of the Cross of the Order of St. John of Jerusalem, in acknowledgement of his long and useful labours on behalf of the St. John Ambulance Association. He was Chairman of its Gosport and Alverstoke centre, Medical Officer to the Brigade, and for many years a lecturer and examiner. His professional relations with his colleagues were of the pleasantest character, his attainments and ethical views and practice being of a high order, while in disposition he was generous and kind-hearted. He was a man, in short, who thoroughly deserved the position in public and private esteem which he had attained and whose death spells in consequence a real loss to the district. He was predeceased by his wife, a daughter of the late Major-General Wyatt, of Horsted Keynes.

MR. ALFRED FORREST, M.A., M.B., M.C.Glasg., died on April 6th at the early age of 42. He was Medical Officer of Health and School Medical Officer for the borough of Bridlington, Yorkshire, and Medical Superintendent of the Sanatorium. On the staff of the Lloyd Hospital, and connected with various friendly societies, he was well known in his immediate neighbourhood. A quiet painstaking man of unassuming demeanour, he was much liked and highly respected. He will be greatly missed from his social and professional circle, and by the poor of the town. He leaves a widow and two young children to mourn his loss.

## Universities and Colleges.

### UNIVERSITY OF GLASGOW.

THE following candidates have been approved at the examinations indicated:

FIRST M.B., CH.B. (B., Botany; Z. Zoology; P., Physics; and C., Chemistry).—G. K. Allan (Z., C.), J. M. Anderson (P., C.), R. Armstrong (Z., C.), G. F. Barr (Z., C.), A. D. Blakely (C.), A. Blashky (Z.), R. W. Brander (Z., C.), W. H. Brown (Z., C.), W. E. A. Buchanan (Z., C.), J. W. Burton (P.), James Campbell (Z., C.), John Campbell (B., P.), J. A. Chrystie (C.), A. La B. Clark (B., P.), A. Climie (Z., C.), G. G. Cooper (P., C.), J. P. Crawford (Z.), W. Cullen (B., P.), W. T. Currie (Z., C.), F. V. Daebnitz (B., C.), G. de Kock (B., P.), M. Devers (P.), T. I. Dun (B., C.), D. Ferguson (Z.), J. B. Fotheringham (C.), W. Gibson (Z.), T. Gilchrist (B., Z., C.), J. A. Gillfillan (Z., C.), P. Gordon (Z., C.), R. M. Greig (Z., C.), A. H. Hall (Z., C.), E. G. S. Hall (B., P.), D. C. Hanson (Z.), D. Hardie (Z.), F. L. Henderson (Z., C.), R. Isbister (Z.), W. Y. Jamieson (B., P., C.), A. C. Jebb (Z., C.), D. Johnston (Z., C.), D. R. King (B.), W. F. Kivichan (Z.), H. Lang (Z., C.), A. Lindsay (B.), R. Lyon (B., P.), D. M. Alpine (B.), D. S. M'Bean (Z., C.), G. M'Callum (Z., C.), A. M. M'Cutcheon (Z., C.), D. F. Macdonald (Z., C.), J. W. Macdonald (Z., C.), J. B. M'Dougall (Z., C.), G. J. M'Gorty (Z., C.), C. B. M'Intosh (Z., C.), D. M'Intyre (Z., C.), D. M. M'Intyre (B., P., C.), J. M. Mackay (Z., C.), D. Mackie (B., Z.), P. S. Mackie (Z., C.), N. MacLeod (B.), F. W. M'Millan (Z., C.), R. M. M'Ninn (B., C.), D. M'Neil (Z.), J. K. Manson (B., P.), W. Martin (Z., P.), W. M. Matthew (Z.), W. J. May (Z.), W. Meikle (Z., C.), A. D. Moffat (Z., C.), J. W. Moffatt (Z., C.), T. F. Noble (B.), T. A. O'Brien (C.), J. Paterson (Z., C.), W. L. Peacock (Z., C.), A. Picken (Z., C.), J. S. Prentice (Z.), F. P. Rankin (Z., P.), A. Rankine (P.), R. C. Robertson (Z., C.),

Stanley Robertson (Z., C.), Stuart Robertson (Z., C.), S. D. Robertson (Z.), G. W. Ronaldson (B., C.), H. Rowan (Z., C.), A. Scott (Z., C.), J. R. Sinclair (Z., C.), R. M. C. Smith (Z., C.), J. B. Stevens (Z., C.), J. S. Stuart (B., Z., P., C.), R. Tennant (Z., C.), C. R. T. Thompson (C.), E. M. Thomson (Z., P.), R. N. Thomson (Z.), J. Vallance (Z., C.), C. J. van Lingen (B.), J. Walker (Z., P.), R. B. Wallace (B., P.), H. C. Watson (Z., P., C.), J. A. White (B., P.), C. A. Whittingham (Z., C.), J. B. Williamson (Z., C.), R. H. Williamson (C.), J. G. Wilson (B., Z.), T. R. Wilson (P.), J. Wylie (Z., C.), T. W. Wylie (Z., C.), A. Young (B., Z., P.), J. M. Young (B., P.).

Women.—D. F. Curiel (Z., C.), M. M. Curtis (P.), E. W. Gompertz (Z., C.), L. B. Hardie (B., P., C.), F. S. Kirk (Z., C.), G. Montgomery (Z., C.), J. L. Munro (Z., C.), S. A. Watson (Z., C.), G. B. Whish (Z., C.), M. Wilson (Z., C.), M. F. Wood (C.).

SECOND M.B., CH.B. (Anatomy; P., Physiology; M., Materia Medica and Therapeutics).—W. L. Anderson (P.), J. Angus (A.), R. A. Barlow (A., P.), J. G. Becker (A., P., M.), S. Blumenfeld (A., P., M.), V. Borland (A.), A. Brown (A., P., M.), R. A. Brown (P.), W. Brown (P., M.), J. S. Buchanan (A., P., M.), W. M. Buchanan (M.), E. T. Burke (P.), J. J. Burke (P., M.), J. Cameron (P.), N. Cameron (P.), W. L. Cassels (A., P.), J. A. J. Conway (A., P.), R. Craig, M.A. (A., P.), D. A. Cush (P.), G. Dalziel (A., P.), A. H. Davidson (P., M.), W. C. Davidson (A., P.), W. T. Davidson (A., P., M.), J. H. Dible (A., P.), J. Dickie (A., P., M.), W. B. Drummond (A., P., M.), R. Findlay (A.), J. M. Forsyth (P.), W. Forsyth (A., P., M.), J. E. Fyfe (A., P., M.), A. R. H. Geyer (A.), J. J. Gibb (A., P., M.), A. M. Gibson (A., P., M.), A. Glen (A., P., M.), L. Glushak (P.), J. M. F. Grier (M.), J. P. M., J. A. Harper, M.A. (A., P., M.), D. C. Hayes (A., P., M.), J. W. Hewitt (P., M.), A. J. Joubert (A., P., M.), F. A. Kerr (M.), C. J. Kirk (P.), R. P. A. Kirkland (A., P., M.), J. A. Kruger (A., P.), N. V. Lothian, B.Sc. (M.), C. Lundie (A., P.), J. R. M'Curdie (P., M.), C. A. M'Guire (A., P., M.), G. D. M'Lean (A., P., M.), J. M. Macpherson (A., P., M.), J. H. Magoveny (P.), M. Manson, M.A. (M.), T. Martin (A., P., M.), J. Mitchell (A.), W. Montgomery (P., M.), M. Murphy (P., M.), H. L. Neil (M.), J. B. Orr, M.A. (A., P.), R. Parker (M.), A. Peden (P.), J. C. Pyper (A., P., M.), J. E. Quigley (Lambhill) (M.), D. W. Reid (A., P.), J. R. B. Ritchie (A., P.), A. L. Robertson (A., P.), J. G. M'G. Robertson (P.), J. H. Robertson (A., P.), J. I. Robertson (A., P., M.), A. W. Russell (A., P.), S. Rutherford (A., P., M.), T. Sherar (P., M.), J. F. M'G. Sloan (P., M.), J. Smith (A.), A. R. B. Soga (A., P., M.), M. Somerville (A.), G. Stevenson (A., P., M.), J. A. Stewart (A., P., M.), B. Stewart (A., P., M.), W. P. A. Stewart (P., M.), W. Taylor (A., P.), W. R. Taylor (A., P.), J. C. T. Teggart (A., P., M.), E. G. Y. Thom, M.A. (A., P.), A. Walker (A., P.), J. C. Walker (A.), T. Walmisley (A., P.), T. Waterhouse (A., M.), G. M. Whish (A., P., M.), M. White, M.A. (A., P.), W. H. N. White (P.), W. Whitelaw (A., P., M.), W. B. Wilson (A., P., M.), W. F. Wood (P.), W. P. Yates (A., P., M.).

Women.—C. E. T. Anderson (P.), J. M. Davidson (A., P.), M. L. Kirkwood (A., P.), B. Macgregor (M.), H. B. Orr (M.), L. M. Ross (M.), I. J. Stark (M.), P. Stewart (P.), J. M. Walker (A.).

THIRD M.B., CH.B. (P., Pathology; M., Medical Jurisprudence and Public Health).—J. W. Anderson (P., M.), C. Averill (P., M.), T. S. Barrie (P., M.), W. E. H. Beard (P.), J. Bower (M.), C. Brash (M.), D. S. Brough (P., M.), A. H. Brown (M.), J. T. Brown (P., M.), D. A. Buchanan (M.), C. Cameron, M.A. (P., M.), J. Campbell (P., M.), R. C. Corbett (P., M.), R. Drummond (P.), A. M. Dunlop (M.), K. Falconer (P., M.), J. Findlay, M.A. (P.), H. Forrest (P., M.), A. Fraser (P., M.), T. L. Fraser (P.), L. L. Fyfe (P., M.), A. Gardner (P., M.), A. Garvie (P., M.), J. Gibson, M.A. (P., M.), W. G. Goudie (P., M.), J. E. Grice, M.A. (P., M.), C. H. Haddow (P.), J. S. Hall (P., M.), A. S. Hannay (P.), J. Hendry, M.A., B.Sc. (P., M.), J. R. Herbertson (P., M.), J. Johnstone (P.), W. Johnstone (P., M.), T. J. Kirk (P.), G. Kirkhope (P.), J. M'C. Lang (P., M.), N. M'Farlane (P., M.), J. D. Mackinnon (P., M.), M. Mackinnon (P.), W. MacMurray (P., M.), W. W. MacNaught (P., M.), S. A. MacPhee (M.), G. H. M'Robert (M.), J. P. M'Vey (P., M.), M. Manson, M.A. (P., M.), F. W. Martin (P.), F. Matheson (P., M.), J. Matheson (P., M.), D. Meek (M.), S. M. Meighan, B.Sc. (P., M.), A. Muir (P., M.), A. Murray (P., M.), S. Naismith (M.), H. L. Neil (P., M.), E. Paterson (P., M.), J. F. Quigley (Rutherglen) (P., M.), A. Rae (P.), H. Y. Riddell (M.), J. L. Scott (P.), W. L. Scott (P.), J. F. Smith, M.A. (P., M.), W. Sneddon (P., M.), R. A. Steven (P.), L. T. Stewart (P.), J. A. H. Telfer (P., M.), W. Tudhope (P.), A. Valentine (P., M.), A. G. Waddell (P., M.), J. D. Walker (P., M.), A. G. S. Wallace (M.), H. F. Watson (P.), A. S. Wilson (P., M.), D. Wilson (P.), H. G. Wilson (M.), F. H. Young, M.A. (P., M.).

Women.—A. B. Auchencloss (P., M.), M. A. A. Beard (M.), L. E. Dodge (M.), I. Inglis (M.), J. W. Jones (P., M.), K. S. Macphail (P., M.), B. G. Rutherford (P., M.), B. Sutherland, M.A. (P., M.).

FINAL.—T. Adam, M.A., D. R. Adams, A. Aitchison, C. Auld, J. B. Baird, B.Sc., E. Barnes, M.A., C. S. Black, J. Broadfoot, W. B. Clark, J. T. Dick, J. Dunlop, M.A., R. Gilchrist, P. Giuliani, A. B. Hamilton, S. H. Harris, J. W. Jones, H. S. Keer, A. Macaulay, I. Macdonald, M. A. Macdonald, D. M'Dougall, W. Macewen, W. M. M'Kie, T. Mackinlay, D. Mackinnon, Agnes M. Michael, A. Millar, Margaret Muir, Mary A. Pilliet, Olive Robertson, J. H. N. F. Savy, J. M. A. Scott, M. A. J. M. Scott, M.A., W. W. Scott, G. B. Spence, E. E. Stewart, A. E. Struthers, B.Sc., C. L. Sutherland, D. M. Taylor, A. G. W. Thomson, Jemima Wallace, W. S. Waterhouse, H. E. Whittingham, W. R. Wiseman, M.A., B.Sc., Marion A. Wylie, M.A., D. Young.

\* Passed with distinction in one or more subjects.

### UNIVERSITY OF LIVERPOOL.

DIPLOMAS in Tropical Medicine have been awarded to the following candidates:

R. Dowden, W. R. W. James, Vishnu T. Korke, J. W. S. Macfie, M. W. Manuk, Kishavali B. Nanavati, R. W. Naus, Thiruchelvam Sabastian, H. T. Shaw, A. B. de Souza, M. F. White.

### NATIONAL UNIVERSITY OF IRELAND.

#### UNIVERSITY COLLEGE, CORK.

THE University College of Cork has just concluded its first series of medical examinations. The arrangements have been carried out admirably, and great satisfaction has been given locally by the change. The extern examiners as well as the intern regard the innovation as most successful.

## QUEEN'S UNIVERSITY, BELFAST.

## FIRST MEETING OF CONVOCATION.

The first meeting of Convocation of the new university was held in the large Examination Hall on April 16th. The Chancellor (Lord Shaftesbury) occupied the chair, and four to five hundred graduates attended.

Dr. John Campbell, M.A., F.R.C.S., was appointed vice-chairman of Convocation, and Dr. William Calwell and Dr. Richard W. Leslie were appointed members of a committee to deal with the question of standing orders and regulations.

Professor Benjamin Moore formally moved a resolution urging upon the Senate the pressing need for greater development of post-graduate teaching and research. This resolution was unanimously passed. Dr. R. W. Leslie had given notice protesting against the disability imposed on the university by the statutes, Chapter 35, Clause (1), which prohibited the conferring of honorary degrees in the Faculty of Medicine; but owing to the lateness of the hour this resolution was adjourned.

The main business of the meeting was the discussion of a resolution, proposed by the Right Honourable Thomas Sinclair, seconded by Professor Benjamin Moore, which practically condemned the introduction of the teaching of 'scholastic philosophy into the university as sectarian, and protesting vigorously against any further developments on the same lines. The debate was keen and vigorous and at times warm. Finally a vote was taken, and the resolution was carried by 238 against 56. Several members had left the hall before this hour, or did not vote.

All the profession—and, indeed, all friends of the new university—regret that such a discussion was necessary. It has, however, aroused an interest in the new university. Formerly the difficulty was to get a quorum for the Convocation meeting of the late Royal University in Dublin, and men were canvassed and begged to go up and attend. On April 16th, in Belfast, the large Examination Hall was barely sufficient to accommodate the numbers.

It can scarcely be hoped that so large an attendance will be common in the future, but there seems little doubt that four years hence, when Convocation is given the right of electing some eight members of Senate, the power will be fully exercised, and that through this means Convocation or the main body of graduates who take an interest in higher education will exercise considerable sway in matters academical.

## ROYAL COLLEGE OF SURGEONS OF ENGLAND.

## QUARTERLY COUNCIL.

A MEETING of the Council was held on April 14th, Mr. H. T. Butlin, President, in the chair.

*Anaesthetics Bill.*

A letter dated April 3rd was read from the Clerk of the Privy Council transmitting, by direction of the Lord President, a copy of a letter from the General Medical Council communicating the following resolution of the Executive Committee of that body adverse to the proposals of this College to omit certain words from the conclusions adopted by the General Medical Council in regard to the Anaesthetics Bill, 1909, namely:

That the Lord President be informed that the words proposed to be omitted were inserted advisedly by the Council, and in the opinion of the Executive Committee it is desirable in the public interest that they should be retained. The Executive Committee would point out that cases may occur in which, during the course of medical or surgical operations, commenced under anaesthesia produced by nitrous oxide or other "specified" preparation, it is found necessary at a later stage to resort to more potent anaesthetics such as chloroform or ether. In such a case it might endanger the patient's safety, and the success of the operation, were the anaesthetist unqualified to administer the latter, as under the legislation proposed an anaesthetist possessed only of a dental qualification would be.

The following resolution was adopted in connexion with the foregoing:

"That the receipt of the letter from the Privy Council, communicating the resolution of the Executive Committee of the General Medical Council, be acknowledged, and that the Lord President be informed that the Council of the Royal College of Surgeons of England do not regard the contingency put forward by the Executive Committee of the General Medical Council as likely to arise. The Council of the College does not contemplate, and their experience as operating surgeons does not lead them to suppose, that dentists will be asked to administer an anaesthetic in general surgical practice other than in slight operations and on rare occasions; but they do think it will be opposed to the advantage of the public and prejudicial to the convenience of medical practitioners, especially in country districts, if it is made illegal for dentists to administer nitrous oxide gas (and the other anaesthetics, if any, to be specified as employable by them) for operations performed by duly qualified medical practitioners.

"The Council desire to draw the attention of the Lord President to the fact that their body consists of surgeons actively engaged in operative surgical practice, whereas the Executive Committee of the General Medical Council, which dissented from the alteration proposed by the Council of the Royal College of Surgeons, consisted, with only two exceptions, of members not engaged in the practice of surgery."

*Jacksonian Prize.*

This prize for the year 1909 was awarded to Mr. W. Girling Ball, F.R.C.S., the subject being "The Treatment of Surgical Affections by Vaccines and Antitoxins."

The subject selected for the year 1911 is "The Diseases of the Pancreas, with Special Reference to their Surgical Treatment."

*Triennial Prize.*

The subject chosen for the next prize was "The Anatomy and Physiology of the Pituitary Body, and the Relationship with Disease of its Abnormal and Morbid Conditions."

*Fellows Elected.*

The two following gentlemen, as Members of twenty years' standing, were elected Fellows: John Reuben Lunn, St. Mary-lebone Infirmary (date of diploma, November 13th, 1878); Andrew Melville Paterson, 21, Abercromby Square, Liverpool (date of diploma, July 17th, 1883).

*The Honorary Medal of the College.*

This was awarded to Dr. Robert Fletcher, M.R.C.S., of Washington, U.S.A., in recognition of his labours in connexion with the *Index Medicus* and the *Index Catalogue* of the Library of the Surgeon-General's Office, Washington.

Dr. Fletcher, who is now 84 years of age, was born in Bristol, and educated professionally at the Bristol Infirmary.

*The Egyptian Medical School.*

A report was submitted by Mr. R. J. Godlee, the visitor to the examinations of the Egyptian Medical School for the year 1909, stating that the examinations of the school were in every way satisfactory.

## ROYAL COLLEGE OF SURGEONS IN IRELAND.

THE following is a list of the winners of prizes in the subjects of study during the winter session. The first prize in each subject was a medal and £2 in money; the second prize, a certificate and £1 in money.

*Descriptive Anatomy*.—W. I. Adams and D. J. Flanagan. *Practical Anatomy (First Year)*.—W. Morrow and R. A. Austin. *Practical Anatomy (Second Year)*.—G. C. Sproule; W. T. Adams and G. E. Pepper equal for the second prize. *Practice of Medicine*.—J. T. Duncan, T. M. Thomson. *Surgery*.—J. T. Duncan, F. Warren. *Midwifery*.—J. T. Duncan, M. S. Moore. *Physiology*.—J. D. Cherry, A. F. Patterson. *Chemistry*.—J. Lanigan, L. E. Wigoder. *Pathology*.—V. J. White, T. T. Buckley. *Physics*.—A. Merrin, L. E. Wigoder.

The summer session commenced on April 4th.

## Medical News.

THE King has conferred the Volunteer Officers' Decoration upon Dr. C. A. Owen Owens, late Brigade-Surgeon-Lieutenant Colonel, Norfolk Volunteer Infantry Brigade.

THE King of the Belgians has given £500 to the Liverpool School of Tropical Medicine.

THE Chelsea Hospital for Women has received from the trustees of the Zunz Bequest a grant of £2,000 to name a ward the Annie Zunz Ward.

THE annual meeting of the Invalid Children's Aid Association will be held at Sunderland House, Curzon Street, Mayfair, W., on Wednesday next, at 3 p.m.

A DISCUSSION on the teaching of sanitary and domestic science in schools will be opened by Mr. G. N. Woollat, Ph.D., Principal of the Science and Technical School, Worcester, at a meeting of the Royal Sanitary Institute to be held in that city on Friday next. On the following day visits will be paid to some manufactories and historical buildings.

THE list of accessions to the library of the University of London during the first three months of this year has been issued as a supplement to the *University of London Gazette*. The list is classified under general headings, and those books which are available only for reference and cannot be taken out of the library are indicated by an asterisk.

AN extra-biennial dinner of the Brussels Medical Graduates' Association will be held at the Trocadero Restaurant, London, on Friday next, at 7 for 7.30 p.m. Tickets, price 5s., not including wine, can be obtained from the honorary secretary, Dr. Arthur Haydon, 23, Henrietta Street, Cavendish Square, W. All graduates of the University of Brussels will be welcome, and invited to bring ladies.

THE Association Générale des Médecins de France held its fifty-first annual meeting in Paris on April 10th. Professor Lande, of Bordeaux, was in the chair, and more than 250 delegates from the central society and from the provincial associations were present. Pensions were awarded to fifteen doctors over 70 years of age who had been members of the Association for thirty-five years, and increased pensions to eight other members. Several questions concerning the relations of the profession with commercial societies were discussed, and the meeting was brought to an end by a dinner.

THE opening lectures of the new session at the Hospital for Sick Children, Great Ormond Street, London, will be given by Dr. Poynton, on Thursday, May 5th, on pericarditis, and on Thursday, May 12th, by Mr. Arbuthnot Lane, on fractures. The lectures, which will be given at 4 p.m., are free to practitioners. The post of clinical clerk for three months is open to both qualified and unqualified persons for a fee of one guinea.

IT is announced that the conditions obtaining at Bad Gastein have been to some extent altered within the past year. The railway communication to the South is now complete, and the spa is thus linked up with the main lines, rendering it more readily accessible. Extension of the electric light works has served to supply the place with better illumination, and some 140 new rooms have been added to those previously at the disposal of the visitors. It is thought that these and other improvements will make Bad Gastein more popular not only during the usual season, but also as a winter resort.

AN Exhibition of Fractures will be held in Brussels at the time of the meeting of the third Congress of the International Surgical Society in September, 1911. The exhibition will comprise specimens of various types of fractures, especially rare forms; radiographs, drawings, and models of fractures; apparatus for immobilization, extension, etc.; specimens and reports of cases illustrating osteosynthesis. Exhibits should be sent to Dr. A. Depage, general secretary, 75, Avenue Louise, Brussels, from August 20th to 31st. The President of the Congress is Dr. J. Lucas-Championnière. Reductions of freight charges to the amount of 50 per cent. on objects intended for the exhibition have been granted by the German, Austrian, Belgian, Spanish, Portuguese, French, Dutch, Hungarian, Italian, Servian, Swedish, and Swiss Governments, and by the Anglo-Belgian (Ostend and Tilbury) Line and the Anglo-Continental Agency.

A LONG-CONTINUED struggle with regard to the conditions of service in the Cologne sick clubs (*Krankenkassen*) has now reached a stage in which some outside medical men have been imported for the purpose of accepting posts on terms which are deemed wholly unsatisfactory by the profession in Cologne. Naturally these "blacklegs" are not popular with the established practitioners of the town. Last year the Municipal Academy of Medicine again arranged to allow a post-graduate course, organized by the Medical Society, to be held, and Professor Hochhaus was announced to deliver the lectures. The first lecture was fixed for November 18th, and eighty-four members of the Medical Society inscribed their names. Two of the "blacklegs" also entered for the course. Before the lecture began the members of the Medical Society declared that they would not sit in the same hall as the "blacklegs," and as the latter claimed the right as registered practitioners to follow the course, and refused to give way, the eighty-four members left under protest. Professor Hochhaus did not consider that an audience of two was sufficient to justify the delivery of a lecture, and therefore also withdrew. The Mayor of Cologne, to whom this matter was referred, considers that the professor behaved quite constitutionally and courteously, and took no part in the quarrel, but he condemns the attitude of the Medical Society. On the other hand, the profession applauds its action.

THE General Council of New Caledonia has, we learn from the *Australasian Medical Gazette*, passed a new decree providing for the notification by doctors of all cases of leprosy they meet with in their practice. If the person infected is unable or fails to isolate himself to the satisfaction of the authorities, the decree enjoins his compulsory isolation in an institution, which the Government is given the power to establish. A Commission of Examination is established, composed of two doctors, nominated by the Government on the recommendation of the Director of Public Health. The sole duty of this Commission is to state whether or not the person presumed to be infected is really leprosy. One or more doctors are to be appointed by the Governor, in order to inquire and make a first examination of every person who is presumed to be infected with leprosy. Within twenty-four hours of this examination the doctors must make a report and transmit the documents to the Government, which will in turn transmit them to the Commission of Examination. A second Commission is to be appointed for the regulation and maintenance of any establishment or building in which leprosy subjects are placed, and the interests of those presumed to be infected by the disease are safeguarded by certain rights of appeal. If the leper escapes or refuses to be transferred to the lazaretto, the decree gives the Governor authority to have him taken there by force.

## Letters, Notes, and Answers.

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.

AITCHEN asks for some remedy that will lessen the irritation, itching and formation of disseminated sclerosis. He has tried everything that his experience suggests, and that his books recommend, with practically no alleviation.

HEADACHE asks whether eye symptoms have been noticed during the administration of aspirin. One of his patients who is taking gr. v every four hours for rheumatic headaches with relief informs him that soon after taking the powder (dry, by mouth) she has some aching in the eyes, together with a "film," which interferes with her sight, but passes away in a few minutes. He inquires whether there would be any risk to the eyesight in continuing administration of these moderate doses.

### TREATMENT OF ULCERATIVE COLITIS.

H. S. asks for suggestions for the non-operative treatment of a case of ulcerative colitis with daily hæmorrhage and discharge of mucus. Two consultants have been visited, many drugs, enemata, and diets tried without result.

### BOOKS FOR PART II LONDON UNIVERSITY MEDICAL EXAMINATION.

A CORRESPONDENT asks for the best books to read for the Second Medical Examination, Part II, of the University of London.

\* \* The following list contains works which would probably answer our correspondent's requirements:—Anatomy: Quain's *Anatomy*. Eleventh edition (in course of publication). In four vols. (London: Longmans, Green and Co. 1910.) Gray's *Anatomy, Descriptive and Applied*. Edited by R. Howden. Seventeenth edition. (London: Longmans, Green and Co. 1909. 32s.) Or Cunningham's *Textbook of Anatomy*. Third edition. (London: H. Frowde, and Hodder and Stoughton. 1909. 31s. 6d.) Practical Anatomy: Cunningham's *Textbook of Anatomy*. Embryology: Keith's *Human Embryology and Morphology*. (London: E. Arnold. 1904. 12s. 6d.) Physiology: Halliburton's *Handbook of Physiology*. Eighth edition. (London: John Murray. 1907. 15s.) Or Stirling's *Elements of Human Physiology*. Eighth edition. (London: J. and A. Churchill. 1907. 12s. 6d.) Practical Physiology: Hill's *Manual of Human Physiology*. Second edition. (London: E. Arnold. 1907. 6s.) Alcock's *Textbook of Experimental Physiology*. (London: J. and A. Churchill. 1909. 5s.) Or Stirling's *Outlines of Practical Physiology*. Fourth edition. (London: C. Griffin and Co. 1902. 15s.) Chemical Physiology: Halliburton's *Essentials of Chemical Physiology*. Seventh edition. (London: Longmans, Green and Co. 1909. 4s. 6d.) Histology: Schäfer's *Essentials of Histology*. Seventh edition. (London: Longmans, Green and Co. 1907. 10s. 6d.) Materia Medica: Mitchell Bruce's *Materia Medica and Therapeutics*. Seventh edition. (London: Cassell and Co. 1905. 7s. 6d.) Or Hale White's *Materia Medica, Pharmacy, Pharmacology, and Therapeutics*. Eleventh edition. (London: J. and A. Churchill. 1909. 6s. 6d.) Pharmacology: Dixon's *Manual of Pharmacology*. (London: E. Arnold. 1906. 15s.)

### ANSWERS.

#### PUERPERAL INSANITY.

TWELVE.—Regarding the matter solely in its medical bearings, it is a hard saying, but true, that pregnancy should be avoided in the case mentioned. There are other bearings—ethical, religious, etc.

#### RINGWORM.

J. K. B. writes in reply to "Inquirer": When I was first in practice in London (1879) I several times heard patients say that Erasmus Wilson said the only cure for ringworm was beef and beet—meaning thereby that feeding up the youth who was the sufferer was of more importance than any local treatment. I well remember patients being under the leading specialists in those days taking three years to effect a cure. The only case I ever saw cured quickly was a boy, not very bad, taken in hand by the late Dr. Frank Hall of Lewes. He attended to the boy himself, using simply spirits of turpentine daily by gentle inunction. As a rule, in private practice, ringworm always seemed to thrive in poorly-fed, poorly-clothed children of weakly constitution. I am quite sure that good food and fresh air would cure those cases quite as quickly as the prolonged local medication of the 1880-90 period.