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Readers in search of a particular subject will find it useful to bear in mind that the references are in several cases distributed under two or more separate but nearly synonymous headings—such, for instance, as Brain and Cerebral; Heart and Cardiac; Liver and Hepatic; Renal and Kidney; Cancer and Epithelioma, Malignant Disease, New Growth, Sarcoma, etc.; Child and Infant; Bronchocele, Goitre, and Thyroid; Diabetes, Glycosuria and Sugar; Light, Roentgen, Radium, X Rays; Status Lymphaticus and Thymus; Eye, Ophthalmia and Vision; Bicycle and Cycle; Motor and Automobile; Association, Institution, Society; Paris, France; Berlin, Prussia, Germany; Vienna, Austria, etc.

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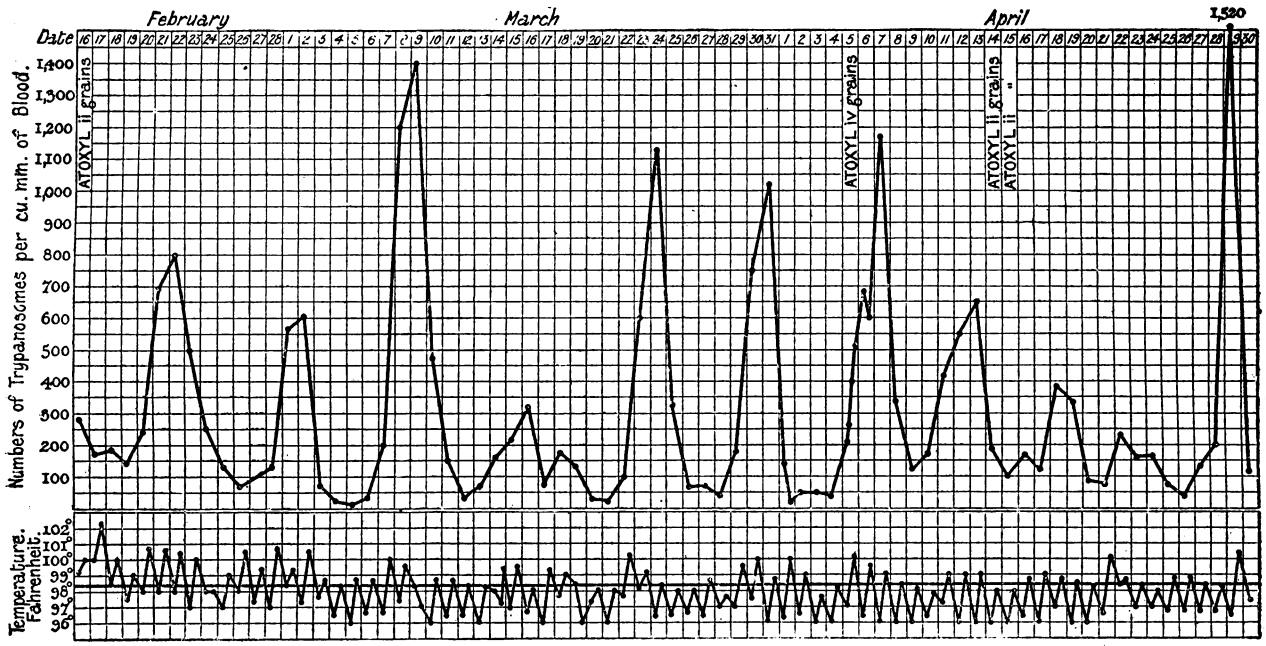

counts in measured quantities of blood as "unreliable." Thomas and Breinl[3] showed that in three cases of sleeping sickness the numbers of trypanosomes found in "fresh cover-slip preparations" varied irregularly from time to time. Koch, Beck, and Kleine (1909) remark on the irregularity of the appearance of *T. gambiense* in African natives, and state the parasites are present for two to five days, and absent for two to three weeks. Salvin-Moore and Breinl[4] show a graph with two undulations and a final premortal rise in two heavily infected rats, and give a detailed description of corresponding changes in the parasites. Apparently, hitherto, only irregular variations in the numbers of the parasites seem to have been recognized; probably the large error due to inadequate methods of counting has disguised the regular periodicity of the variation shown by more exact counts in the eleven successive undulations observed in our case.

We should add that our methods enable us to detect parasites when they are in numbers so small that their detection by the ordinary methods would be exceedingly laborious. Hence, if our case had been studied by the ordinary methods, probably only the crests of the rises would have been visible in the chart, and it would have been said that the parasites had disappeared in the intervals.

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[1] *Lancet*, January 10th, 1903, and *Thompson Yates Reports*, vol. v, Part I, 1903. [2] BRITISH MEDICAL JOURNAL, May 30th, 1903. [3] *Memoirs of the Liverpool School of Tropical Medicine*, vol. xvi, 1905. [4] *Annals of Tropical Medicine, Liverpool*, vol. i, No. 3, 1907.

Memoranda:
MEDICAL, SURGICAL, OBSTETRICAL.

A *POST-MORTEM* REPORT OF A CYSTIC SPLEEN.

ON Friday, May 20th, I was called to view the body of a Portuguese, aged 48 years, who had been working—coaling a ship that day, and had complained of feeling sick. He had retired to his bunk, was given a little stimulant, and a few minutes later had died. I found the body lying partially on the left side. There was a considerable amount of foaming at the mouth. On inspection he was found to have a double inguinal hernia, easily reducible. The abdomen was moderately distended, and on the left side, slightly below the costal arch, was a swelling extending to a level with the umbilicus and across the middle line for about 1½ in. There were no marks of violence, and the body was just warm. I was unable to certify the cause of death, and by direction of the coroner made a *post-mortem* examination the following morning. An incision was made from the suprasternal notch to the pubis, and the parts exposed.

Thorax.—The pericardium contained some clear fluid, and on opening it the heart showed signs of fatty degeneration. The ventricles and auricles were filled with dark clotted blood; there was no valvular insufficiency, but there were a few calcareous deposits at the base of the aorta, and the muscular walls were much thinner than normal, and friable. The right lung was typically anthracosed, but otherwise normal. The left lung was also anthracosed, pushed up to about the lower margin of the sixth rib, and extremely adherent at all points, apically, towards the root, at the base and sides. The pleura was not visibly thickened.

Abdomen.—The first thing that presented itself was a large tumour about the size of a large melon, larger at the free border, and tapering slightly to its attachment below the ribs; about one-fifth of the tumour was underneath the costal arch and resting against the diaphragm, and the remaining four-fifths below the level of the costal margin. The tumour wa extremely adherent to the surrounding tissues and organs, except the stomach, which was pushed away to the right, occupying a position below the liver against the gall bladder. On attempting to remove the tumour, which was evidently the spleen, it was ruptured at its lowest margin, and a quantity of thick whitish-yellow fluid, of the consistency of custard, escaped. With a pair of scissors I opened the tumour in its entirety, and found a clear fluid in which were floating globules of various sizes, from the size of a Tangerine orange to that of a hazel nut or almond. These floating bodies consisted of a clear, translucent membrane containing a fluid similar to that in which they were suspended. The cavity in which they floated was unilocular. The thickness of the walls of the tumour was about half an inch. The stomach was very small, and measured about 5 in. in length and 3 in. in breadth. It was not further examined. The kidneys were congested. The liver was enlarged, and extended for 1 in. below the costal margin, and was congested. The gall bladder appeared normal.

Diagnosis.—I took specimens of the cystic bodies to the Sanitary Commissioners' Laboratory, where there were kindly examined for me by Mr. Abrines. Hooklets were found, and the diagnosis of *Taenia ecchinococcus* made.

An examination of the literature of *Taenia ecchinococcus*, or hydatid, shows that of 1,862 collected by Davaine, Cobbold, Finsen, and Neisser, the liver was affected in 953, the intestinal canal in 163, the lung and pleura in 153, kidneys, bladder, and genitals in 186, the brain and spinal cord in 129, bone in 61, blood vessels in 62, and other organs in 158. Of 50 cases treated by Mosler, the liver was affected in 36, the lungs in 10, the kidney in 3, and the spleen in 1.

L. H. GILL, L.R.C.P. and S.Edin., L.F.P.S.Glasg.
Gibraltar.

adorned and to all the friends of the higher education of women. It is the barest truth to say that those who knew her best and who were associated with her in her capacity of teacher and surgeon are those who most greatly appreciate the fineness of her character and the value of her work.

Mrs. Boyd began her career as a medical student in the early eighties, but did not immediately qualify because she gave up her work for a time to nurse a brother through his long and fatal illness. In 1888 Mrs. Boyd became Licentiate of Medicine and Surgery at the Royal Colleges of Physicians and Surgeons in Ireland, and also took the M.D. degree of Brussels. In 1889 the New Hospital for Women was moved from its old home in the Marylebone Road to the new buildings in Euston Road, and very shortly after Mrs. Boyd was appointed a member of its surgical staff. It is only the members of that staff who can do full justice to the splendid accuracy and thoroughness with which Mrs. Boyd discharged her duties to the hospital and the patients. As an operator Mrs. Boyd's skill and conscientious attention to detail went far to command success; her powers of diagnosis were excellent, and her knowledge of the more purely medical side of her profession contributed greatly to the comfort and ultimate welfare of her patients. Fortunately, both for herself and for her profession, Mrs. Boyd was modern enough to have a really competent knowledge of pathology, and every case was made to increase her knowledge and extend her usefulness.

During the twenty years of her hospital career Mrs. Boyd had the opportunity of teaching generations of students—an opportunity of which she availed herself to the full. Her informal clinical lectures were models of what such instruction should be—clear, concise, and practical—and when later she was appointed to the Chair of Gynaecology at the London (Royal Free Hospital) School of Medicine for Women the students reaped the benefit of her wide acquaintance with gynaecological literature and her ripe experience. Fortunately for herself and her students, Mrs. Boyd had travelled much, and had visited the chief European clinics. She spoke and read both French and German easily—a great advantage to the scientific student of surgery and pathology.

Of the higher qualities of her moral and spiritual nature, those can speak best who knew her as intimately as did the writer of this appreciation, who owed more than she can express to Mrs. Boyd's splendid loyalty during the early and troublous days when they both began their work as Senior and Junior on the surgical staff of the New Hospital. Among Mrs. Boyd's leading characteristics was courage and a love of truth so great as to make her absolutely indifferent to the criticisms that might be made. She was fearless and straight to a degree not common in the human race, and probably still more rare amongst women. Mrs. Boyd's religion in some ways greatly resembled her conception of professional duty: she was devout without affectation, and God-fearing without narrowness.

Originally possessed of a powerful physique, and a woman who thoroughly knew the *joie de vivre*, the last eighteen months of her life must have been peculiarly trying to her. She died before completing her 55th year in the midst of a career of remarkable value and usefulness, and it is difficult even for one who loved and respected her as much as the present writer to express the loss that her premature death has inflicted on her family, her friends, her patients, and the profession.

THE death, after a brief illness, on June 2nd, of Dr. J. T. W. BAIRD, of Congleton, has been the cause of very great regret in the district, where he was well known and had won for himself a leading position. James Thomas Wilson Baird was the son of the late Mr. John Baird, of Blackford, Dumfriesshire. He was educated at the High School, Edinburgh, and studied medicine in the University of Edinburgh, taking the degrees of M.B., C.M., in 1867. After holding resident appointments under the late Professor Laycock and Dr. Maclagan, he settled in practice, first at Upton, near Birkenhead, and then at Salford. In 1870 he removed to Congleton, and for some years subsequently acted as deputy coroner for Mid-Cheshire. At the time of his death he was a justice of the peace for the borough of Congleton, honorary surgeon to the Congleton Cottage Hospital, certifying factory surgeon for the district, and medical officer to the Post Office. Dr. Baird is survived by his wife, daughter of the late Joseph Carter Fearon, of Gilcrux, Cumberland, and by six children, his only son being a major in the Indian Medical Service. At the first meeting of the bench after Dr. Baird's death sympathetic references were made to the loss which the borough had sustained. The Mayor proposed that a letter of condolence should be sent to Mrs. Baird and family, expressing the magistrates' deep sympathy with them in their sudden bereavement. The resolution was seconded by Mr. W. Farrington, senior magistrate, and supported by Alderman Maskery, who paid a tribute to Dr. Baird's kindness of heart. After the magistrates' clerk had added an expression of his sympathy, the vote was carried in silence.

Universities and Colleges.

UNIVERSITY OF OXFORD.

Radcliffe Travelling Fellowship, 1911.

AN examination for a Fellowship of the annual value of £200, and tenable for three years, will be held in Hilary term, 1911. Candidates should make application to the Radcliffe Examiners, Radcliffe Library, University Museum, from whom all particulars can be obtained.

Radcliffe Prize, 1910–11.

The next award for this prize will be in the year 1911. The prize, which is of the value of £50, is awarded by the Master and Fellows of University College every second year for research in any branch of medical science comprised under the following heads: Human Anatomy, Physiology, Pharmacology, Pathology, Medicine, Surgery, Obstetrics, Gynaecology, Forensic Medicine, Hygiene. The prize is open to all graduates of the university who shall have proceeded or shall be proceeding to a medical degree in the university. Candidates must not have exceeded twelve years from the date of passing the last examination for the degree of B.A., and must not, at the date of application, be Fellows on the foundation of Dr. John Radcliffe. Candidates must send in their memoirs to the University Registry on or before December 1st, 1910. The award will be made in March, 1911. No memoir for which any university prize has already been awarded is admitted to competition for the Radcliffe prize, and the prize will not be awarded more than once to the same candidate.

Rolleston Memorial Prize, 1912.

This prize, which is of the value of about £60, will be awarded in Easter or Trinity term, 1912. The prize is open to such members of the Universities of Oxford and Cambridge as will not have exceeded ten years from the date of their matriculation on March 31st, 1912, and is to be awarded for original research in any subject comprised under the following heads: Animal and Vegetable Morphology, Physiology and Pathology and Anthropology, to be selected by the candidates themselves. Candidates wishing to compete are requested to forward their memoirs to the Registrar of the University of Oxford before March 31st, 1912. The memoirs should be inscribed "Rolleston Memorial Essay," and should each bear the name and address of the author. They may be printed or in manuscript, memoirs already published being admitted to the competition.

UNIVERSITY OF CAMBRIDGE.

THE following candidates have been approved at the examinations indicated:

FIRST M.B. (*Part I, Chemistry*).—P. H. Allen, B. S. Bland, H. R. Buttery, H. F. Edmonds, C. C. Goodall, C. Grantham-Hill, A. H. Little, R. A. Mansell, E. W. Mason, B. Mountain, G. B. Selwood, E. W. L. Sharp, H. W. Spicer, G. S. Trower.

FIRST M.B. (*Part II, Physics*).—P. H. Allen, H. R. Buttery, W. H. Edgar, C. H. Gow, L. H. James, A. H. Little, R. A. Mansell, R. H. Marten, B. Mountain, H. W. Spicer, H. N. Stafford.

FIRST M.B. (*Part III, Elementary Biology*).—A. C. Ainsley, P. H. Allen, A. B. Bratton, A. O. Courtis, H. F. Edmonds, H. Gardiner-Hill, C. C. Goodall, C. Grantham-Hill, J. B. Hunter, L. H. James, W. Lambert, J. B. Leather, A. H. Little, R. A. Mansell, R. H. Marten, K. Masson, B. Mountain, A. V. O'Keefe, W. Raffle, J. C. Russell, E. W. L. Sharp.

SECOND M.B. (*Human Anatomy and Physiology*).—M. Avent, W. F. Bensted Smith, W. G. Bigger, J. Brewer, R. St. L. Brockman, G. d'R. Carr, L. B. Clarke, K. B. Dickson, A. T. Edwards, A. N. Garrod, H. H. M. Gould, A. R. Jennings, J. D. Jones, F. G. Lescher, H. A. Lucas, G. R. D. McGeagh, H. G. Oliver, D. S. Page, V. C. Pennell, W. A. Pocock, R. N. Porritt, A. N. Rushworth, A. P. Saint, L. E. S. Sharp, A. G. Shera, G. D. Sherwood, L. R. Shore, A. C. S. Smith, P. Stocks, H. Walker, H. F. W. Warden, H. G. Wiltshire, E. Wordley.

THIRD M.B. (*Part I, Pharmacology and General Pathology*).—H. W. Barber, F. S. Bedale, A. C. Clifford, A. E. Cullen, J. W. Dew, S. Dixon, J. V. Fiddian, N. Garrard, J. R. Griffith, J. R. Heath, D. W. John, H. Lee, D. N. Macleod, A. J. McNair, Q. Madge, W. C. D. Maile, J. R. Marrack, T. H. Oliver, J. H. Pendered, D. V. Pickering, L. C. Rivet, F. A. Roper, F. G. Rose, L. M. Routh, F. D. Saner, H. J. S. Shields, G. A. Smythe, C. Strickland, A. L. Sutcliffe, C. H. S. Taylor, M. H. Watney, A. M. Zamora.

Degrees.

The following degrees have been conferred:

M.D.—F. Shufflebotham, H. W. Wiltshire, J. B. Mennell.

M.B., B.C.—B. Wallis, J. Walker, H. B. Ellison, R. E. V. Hale, A. Carter.

M.B.—K. Comyn.

Medical News.

IN consequence of the death of His late Majesty King Edward VII the annual meeting and dinner of the Cambridge Medical Graduates' Club will not be held as usual in July, but are postponed until November.

DURING the World Missionary Conference which has been held this week in Edinburgh, a special conference on the medical aspects of missionary work was held. Discussions took place on the training and preparation of medical missionaries and mission nurses, on the medical training of natives, and on elementary training in medicine for foreign missionaries. Among those who introduced these subjects were Dr. J. W. Ballantyne, Dr. C. F. Harford, Dr. G. Basil Price, Dr. W. J. Wanless of India, and Dr. D. D. Main of China.

AT the second Accession Court held at St. James's Palace on June 22nd, King George received a number of addresses offering him respectful sympathy on the loss which the Royal Family has sustained by the death of King Edward VII, congratulating him on his own accession, and assuring him of the loyal devotion and affection of the memorialists. Among the bodies presenting addresses were the Universities of Oxford, Cambridge, Dublin, London, Manchester, Leeds, Bristol, and Wales, the Royal College of Physicians of London, the Royal College of Physicians of Edinburgh, the Royal College of Surgeons of Edinburgh, and the Royal Institute of Public Health.

THE *Magazine of the London (Royal Free Hospital) School of Medicine for Women* for June contains a protest against the proposal which it appears has been made to open the London Hospital to women medical students. The protest states that there is no general demand among the women medical students of London for such a change, that the large majority of the students of the London School of Medicine for Women would be opposed to it, and that, as it would inevitably damage the school, since the removal of ten or twelve students yearly to another would be a serious financial loss, it would undoubtedly diminish efficiency. It is added that the school and hospital provide more clinical material than the students can fully use during the course; and that for those who have already qualified most of the special hospitals are available for post-graduate study. The protest goes on to express the more general opinion that although the practice of men and women students working together is not wholly to be condemned, it is more desirable that women should be trained apart from men. Judging from the articles and illustrations in the magazine it would seem that there is a healthy collegiate life in the school, and that on this account alone it would be undesirable to weaken the present institution.

ON June 18th the members of the Irish Medical Schools' and Graduates' Association journeyed to Bath to hold their summer meeting, and the attractions—historical, antiquarian, and scientific—induced a large number to accept the hospitality of the local medical profession and to receive the welcome of the civic authorities. The members were received by the Bath doctors at a garden party in the institution gardens, and a large number of guests were asked to meet them, including the Mayor and Mayoress and the Dowager Countess of Granard. In the evening the dinner of the association was held in the Empire Hotel, and was presided over by Sir Alfred Keogh, President, supported by the Mayor and Mayoress, Sir Charles Hunter, Bart., M.P., and Prebendary Boyd, Rector of Bath. In proposing the health of "Our Bath Hosts" Dr. MacNaughton Jones referred gracefully to the Mayor's connexion with the 18th Hussars, and to his combining with the Mayoralty of Bath the historic position of Master of the Ceremonies, which had formerly been held by Beau Nash. He then alluded to the meeting of the British Medical Association in Bath in 1878, and said that the names of many Bath physicians were intimately associated with the progress of medicine. Sketching the history of Bath, he said that the Roman temples and marvellous baths still existed, and the present baths, though unsurpassed in the present day, were mere pigmies beside those whose remains were the wonder of Bath. After dinner a reception was held in the old Roman Promenade by the Mayor and Mayoress, and was very largely attended. On Sunday there were special services at the Abbey and Catholic churches. In the afternoon the party journeyed to the far-famed Cheddar Gorge and Caves.

Letters, Notes, and Answers.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 429, Strand, London, W.C.; those concerning business matters, advertisements, non-delivery of the JOURNAL, etc., should be addressed to the Office, 429, Strand, London, W.C.

☞ *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.

MEMBER asks for information on the subject of heating dwelling houses by means of hot air.

TUBERCULIN.

TUBERCLE desires to know the amount of tuberculin which should be used in a case of tuberculous glands in a child aged 6 years, how often the injection should be made, and how many injections in all should be used. He also inquires where the most reliable preparation is to be obtained.

ANSWERS.

DENTAL HYPOPLASIA.

E. S. R.—So far as we are aware, the suggestion that there is any danger to the teeth of infants who are vaccinated during the first few months of life—that is to say, owing to any interference with the germs of the permanent teeth, has never been entertained by medical men. During the course of an inquiry into the causes of hypoplasia (that is, bad formation) of teeth, including many hundreds of cases, the suggestion did not arise. Such injury could only occur in consequence of general infection; if a child were seriously ill from vaccination, whether from sepsis or true vaccinia, for any considerable length of time, the teeth might bear a permanent record of the fact in the form of a horizontal band of hypoplasia. For a discussion of this form of hypoplasia of teeth see BRITISH MEDICAL JOURNAL, November 23rd, 1907, p. 1488, et seq., "Etiology and Pathology of Defects of the Teeth in Children."

HYPNOTISM.

DR. BERNARD MYERS.—Dr. Milne Bramwell's *Hypnotism and Treatment by Suggestion* (Cassell and Co., London, 1909); or Dr. H. G. Wingfield's *Introduction to the Study of Hypnotism, Experimental and Therapeutic* (Baillière, Tindall, and Cox, London, 1910), would probably meet our correspondent's requirements.

URTICARIA.

DR. JOHN W. S. MCCULLOUGH (Alliston, Ont.) writes: For chronic urticaria I have found the following mixture give good service: ℞ Quinin. hydrochlor, acid. mur. dil., liq. arsenii hydrochlor., liq. strych. hydrochlor., pilocarp. mur. (gr. ¼ to ½); in suitable dose three times daily after food. "New Zealand M.D." might find it useful in the case he mentions in the JOURNAL of May 28th.

LETTERS, NOTES, ETC.

MEDICAL PARLIAMENTARY ROLL.

DR. CLIPPINGDALE adds the two following names to the lists of medical M.P.'s already published in the JOURNAL: Goddard, Jonathan, M.D.Oxon., M.D.Cantab., F.R.C.P. (Oxford University, 1653). The Parliament in which Dr. Goddard sat is known as the "Barebones Parliament," because a gentleman named "Praise God Barebones" represented in it the City of London. Its members were nominated by Cromwell himself, consequently they are not mentioned in the official Blue Book. A list of them, however, will be found in Browne Willis's *Notitia Parliamentaria*. Paddy, Sir William, M.D. Oxon., F.R.C.P. (Thetford, 1603). Sir William Paddy was one of those physicians who attended, in his last illness, King James I (see BRITISH MEDICAL JOURNAL, June 4th), and from whom he received his knighthood, July 9th, 1603.

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THE

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SUPPLEMENT

CONTAINING

PROCEEDINGS OF COUNCIL

REPORTS OF STANDING COMMITTEES

MEETINGS OF BRANCHES AND DIVISIONS

PROGRAMME OF ANNUAL MEETING

MEDICAL BILLS IN PARLIAMENT

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