

system is endeavouring to throw off by the reaction, but which, if unsuccessful in accomplishing, the true puerperal state would rapidly follow.

Whether aspirin in such a state—because of its rapid action, together with the rest of the treatment through the bowels and douching with the corrosive sublimate lotion of course—is not the best treatment to adopt, is one for further opinion. At any rate, experience has shown that the salicine group of drugs is a very safe and sure remedy in the majority of such cases, and the earlier they are used in the treatment the better for the patient.

## Memoranda :

### MEDICAL, SURGICAL, OBSTETRICAL.

#### LIVING CHILD AND DEAD FETUS.

On December 20th, 1910, I was called by a midwife to a woman who had given birth to a living child and a dead fetus. The child seemed to be a full-term child. The fetus was partly macerated, the upper part of the head being a pulp, and some of the skin on the body had peeled off; it was probably a male child of five and a half to six months' development. There was one placenta, one half of which was decomposed and foul, the other half being apparently normal. There were two sacs of membranes. The next day the child smelt strongly of the same smell that came from the foul part of the placenta. Mother and child have both done well since and are doing well now.

Gosport.

S. G. HARRISON, M.R.C.S., L.R.C.P.

#### FRACTURE OF THE FEMUR AT BIRTH.

THE case of fracture of the femur at birth described by Dr. Cecil Johnson in the *JOURNAL* of December 17th, 1910, p. 1915, resembles closely one which fell to my lot eighteen months ago.

In my case the mother was a primipara, living some distance away, and when I arrived I found the breech presenting and tightly impacted, with the legs extended on the abdomen. Like Dr. Johnson, I was unable to bring down a leg or use finger or fillet as an aid to delivery, and so was compelled to have recourse to the blunt hook. Delivery was effected after vigorous traction for over an hour, while a colleague administered chloroform. At one moment during this proceeding the patient came round a little and twisted herself suddenly, with the result that the child's right femur was fractured at the junction of the upper and middle thirds. Although the end of the blunt hook was padded with rubber tubing, considerable bruising and subsequent sloughing took place in each groin. The child, a female, was a large one, and half an hour's artificial respiration was needed before she breathed satisfactorily.

The fracture was put up by means of a piece of stout millboard, with a broad end moulded to curve round the abdomen, where it was retained by a bandage. Thence it was carried to the knee and along the leg, where it was bandaged again, the thigh being left free and the leg being supported on a cushion, so that both thigh-joint and knee joint were kept flexed. The child was then placed and kept in a padded box. By this means the fractured ends were brought into good apposition. The limb was released in about five weeks, and appeared soon to be as freely movable as the other, a few manipulations being used to overcome stiffness, etc.

Mr. McAdam Eccles kindly examined the child a year later, and could find no appreciable difference between the two legs.

Hampstead.

J. S. MACKINTOSH.

THE Convalescent Homes Association has issued a list of convalescent and other homes receiving London patients with particulars as to the conditions of admission. The list is classified into homes for men, women, and children only, for patients requiring surgical treatment, for mothers and infants, for gentlewomen, and homes and sanatoriums for patients suffering from pulmonary consumption. The list will, no doubt, be found useful by medical men in London; it can be obtained at the office of the Association, 32, Sackville Street, W., price 6d.

## Reports

ON

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

#### CHRISTCHURCH HOSPITAL, NEW ZEALAND.

#### DISLOCATION OF THE OS CALCIS WITH PARTIAL DISLOCATION OF THE ASTRAGALUS.

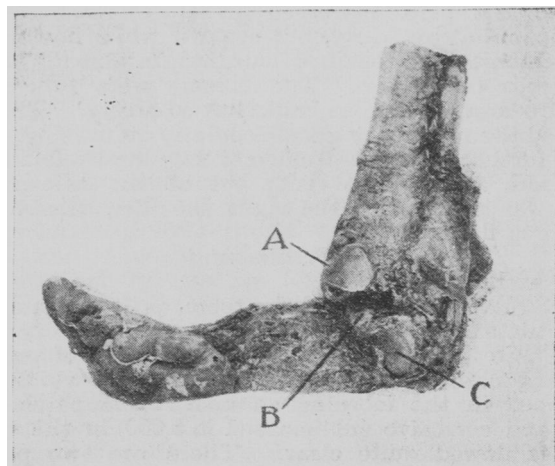
(Reported by P. CLENNELL FENWICK, M.B.Lond., M.D.N.Z.,  
F.R.C.S.E., Honorary Surgeon to the Hospital.)

THE patient in the following case, a lad aged 18 years, was admitted with a severely crushed foot. While fishing from Lyttelton Wharf the foot was caught and crushed between the wharf and a 3,000-ton steamer.

On admission the left foot was merely a tense bag of blood, almost black. No pulse could be felt. I made multiple incisions to relieve the swelling and took an x-ray photograph.

#### *Apparent Condition.*

Next day the swelling had diminished sufficiently to allow examination. The projection of the heel was absent, and below the external malleolus could be felt a smooth rounded projection, evidently an articular surface. I



A, Head of astragalus. B, Facets for astragalus on os calcis.  
C, Os calcis articulating surface for astragalus.

thought that this was the head of the astragalus and from the appearance of the skiagraph I diagnosed fracture of the os calcis with dislocation of the astragalus.

The foot showed symptoms of gangrene and I amputated 3 in. above the ankle.

#### *Real Condition.*

On dissecting the foot I found the following unusual condition. The astragalus was partially dislocated, the head was tilted upwards and rested on the dorsum of the foot, overlying the scaphoid. The os calcis was twisted completely on its side as if it had been driven right through the foot. The smooth projection beneath the external malleolus which I had mistaken for the head of the astragalus was seen to be formed by the articulating surface of the astragalus. The dislocation was so extreme that the two facets for articulating with the neck of the astragalus were lying sideways, having been wrenched round to present just in front of the external malleolus.

#### *Remarks.*

In these circumstances I was astonished not to find any fractures. The tendons on the outer side of the ankle were greatly stretched. The photograph of the dissected foot shows very clearly the curious nature of the dislocations. I believe that dislocation of the os calcis is almost unknown, and certainly my diagnosis was quite wrong in this case, although I had a good skiagraph to assist me.

The honorary secretary reported that he and the other delegates of the association had been present at the first meeting of the Poor Law Conference held at Norfolk House on December 9th last. It had there been decided that each section of the Poor Law service should formulate through its respective association what reforms it considered necessary for the betterment of its particular service. He had forwarded to the conference all the resolutions that had been duly passed up to the present, but he thought it desirable that the various points of medical Poor Law reform should be put forward in more detail, especially as a Departmental Committee had been appointed by the Local Government Board to revise the General Orders. After careful consideration the council decided that the following recommendations should be put forward on behalf of the Poor Law medical officers of England and Wales.

1. That the provisions of the Metropolitan Dispensaries' Order, as far as possible, should be made to apply to the country generally, and that all appliances and drugs for the use of State patients shall in all cases be provided at the expense of the State.

2. That there should be a revision of the scale of payments for operations, and more facilities granted for obtaining assistance, and paying for the same. This specially applied to the provision of an anaesthetist. The medical officer should not be at the mercy of the Poor Law authority with regard to this assistance. It should be left entirely in his hands, with only some reasonable check to prevent abuse.

3. In all cases where called in to attend a confinement in his official capacity he should have an inalienable right to his fee. If the case be an improper one from a Poor Law point of view, the authority should be left to recover payment from the husband.

4. The Poor Law authority should be compelled to contract with the workhouse medical officer or superintendent of infirmary to vaccinate all infants in the workhouse or infirmary, and to carry out the Vaccination Acts generally.

5. The notification of measles and whooping-cough should be carried out in the same manner as has been recently adopted in the case of tuberculosis of the lungs.

6. The salaries of Poor Law medical officers should be on a more liberal scale, due regard being taken of the average mileage in the case of visits to sick patients. That to meet exigencies of changes of population, the medical officer should always have a right to claim a revision of his salary when his work has been greatly increased by such change.

7. That an allowance should be made by the Poor Law authority for the carrying out of the Poor Law work of a medical officer during his annual holiday and during sickness.

8. That length of service, as in other public services, should constitute a ground for increase of salary, apart from other considerations.

9. That a common fund be instituted to receive all payments under the Poor Law Officers' Superannuation Act, so that the expense of pensions should not directly fall on a particular locality.

10. That in all cases where for public reasons the office of a Poor Law medical officer is determined, if he or she be not entitled to a pension, an allowance shall be made of a sum equal to the average emoluments derived from that office during the period of two years. Provided always that such determination be not due to misconduct on the part of the officer.

11. That in no cases shall it be lawful for the local Poor Law authority, by bargaining with individual medical officers, to reduce the amount paid at any time annually in medical salaries for attendance on its poor, unless it can be clearly shown that, owing to local changes, the sickness claims have very materially diminished in that area.

12. That in all cases where, owing to residence outside his district, a medical officer has only been appointed for a year, or a term of years, if the said appointment has been continued for a period of seven or more years, the said medical officer shall thereafter be entitled to hold office on the same terms as if he resided in his district.

The council directed that these recommendations should be submitted to the Conjoint Poor Law Conference at the meeting to be held that night at Norfolk House.

#### EXTRA FEES FOR SPECIAL SURGICAL OPERATIONS.

E. W. A., a district medical officer, writes that he has charged his board of guardians a guinea for operating on a pauper patient with hydrocele, and has been informed by the clerk that as this operation is not one which by Article 177 of the Consolidated Poor Order carries any extra fee, he is not entitled to be paid extra in respect of it. He asks how he can recover the fee charged.

\*.\* The clerk to the guardians was right in the opinion he gave, but notwithstanding this, if our correspondent can succeed in getting a resolution passed by the guardians to the effect that they wish this claim to be paid and a copy of this resolution is then forwarded to the Local Government Board with a request for it to be sanctioned, it is highly probable

that formal sanction for such payment will be given. Should this be the case the auditor will then pass the claim. Our correspondent will find useful information relating to the duties of Poor Law medical officers in Churchill's *Medical Directory* for 1911, pages 20-21.

## Universities and Colleges.

### ROYAL COLLEGE OF PHYSICIANS OF LONDON.

AN ordinary quarterly comitia was held at the College on Thursday, January 26th, the President, Sir Thomas Barlow, in the chair.

#### Lectureships.

Dr. Theodore Williams was appointed Harveian Orator for 1911, Dr. Graham Steell Bradshaw Lecturer for 1911, and Dr. F. A. Bainbridge Milroy Lecturer for 1912.

#### Membership.

The following gentlemen were admitted Members of the College:

John Hay Burgess, M.D.Lond., L.R.C.P., Capt. I.M.S.; Lancelot Stephen Topham Burrell, M.B.Camb., L.R.C.P.; Frank Clayton, M.B.Camb., L.R.C.P.; David McKay, M.B.Roy.Univ.Irel., Capt. I.M.S.; Bidhan Chandra Roy, M.D.Calcutta, L.R.C.P.; Ernest Edwin Waters, M.D.Edin., Major I.M.S.

#### Licences.

The Licence of the College was granted to seventy-five gentlemen.

#### Diplomas in Public Health.

In conjunction with the Royal College of Surgeons Diplomas in Public Health were granted to the following gentlemen:

S. C. Adam, M.B., Ch.B., Glasg. and Durh.; C. J. E. Bennett, L.R.C.P., M.B.O.S., Westminster and King's Coll.; H. Boulton, M.B., B.C.Camb., L.R.C.P., M.R.C.S., Major, I.M.S., St. Bart's and Royal Army Med. Coll.; H. M. Brown, M.D., Ch.B., Edin. and Royal Inst. of Public Health; P. N. Cave, M.B., B.Ch., Oxford, St. George's and St. Mary's; R. A. Clapham, M.D., B.C.Camb., L.R.C.P., M.R.C.S., Lond.; A. Dawson, M.B., Ch.B., Aberd., Captain, Royal Army Med. Coll., R.A.M.C.; K. C. Dube, L.M.and S., Punjab, Univ. Coll., Lond.; J. H. Jones, L.R.C.P., M.R.C.S., Guy's, Haslar, and King's Coll.; \*Miss C. A. King, M.B., B.S.Lond., Royal Free and Middlesex; J. F. Martin, M.B., Ch.B.Edin., Captain, R.A.M.C., Edin.; L. Pick, L.R.C.P., M.R.C.S., St. George's and Royal Inst. of Public Health; A. M. Pryce, M.B., Ch.B.Edin., Univ. Coll.; T. E. Pryce, M.D., B.S. Lond., Univ. Coll.; N. E. H. Scott, M.B., Ch.B.Glas., Univ. Coll., Lond.; S. F. S. Steadman, L.R.C.P., M.R.C.S., Char. Cross and Univ. Coll.; S. J. Steward, M.D., B.C.Camb., L.R.C.P., M.R.C.S., St. Thomas's and Univ. Coll.; C. H. Straton, L.R.C.P., M.R.C.S., St. Mary's and Royal Army Med. Coll., Captain, R.A.M.C.; \*Miss May Thompson, L.R.C.P.and S.Edin., L.F.P.and S., Glasgow, Edinburgh School of Med. for Women; S. A. Tucker, M.B., B.S. Lond., L.R.C.P., M.R.C.S., St. Bart's and Univ. Coll.; C. W. Vining, M.B., B.S.Lond., St. Mary's and St. George's.

\* Under the Medical Act, 1876, 39 and 40, Vict., cap. xli.

#### Communications.

The following communications were received:

1. From the Secretary of the Royal College of Surgeons, reporting proceedings of the Council of that College on December 8th, 1910, and January 12th.
2. From the Director-General of the Medical Department of the Navy, reporting the award of Sir Gilbert Blane's Medals to Fleet Surgeons G. T. Collingwood, M.V.O., and A. R. Bankart.
3. From the Assistant Secretary to the Marine Department, Board of Trade, inviting the College to nominate a representative on a committee for revising the scales of medicines, etc., for merchant ships. Dr. Tirard was appointed.
4. From Mr. Alfred Parsons, asking permission to have a reproduction made of the late Dr. Payne's portrait.
5. From Professor Osler, on behalf of Dr. Harvey Cushing, asking permission to have the portrait of Vesalius photographed. Both these requests were granted, subject to the usual restrictions.
6. From the University of St. Andrews, inviting the College to send a delegate to the celebration of the five hundredth anniversary of the University in September next. On the motion of the Senior Censor, seconded by the Second Censor, the President, Sir Thomas Barlow, was appointed to represent the College.
7. From the Royal Sanitary Institute, inviting the College to send delegates to their congress at Belfast in July next. Lord Ilkeston was appointed.
8. From the British Medical Association, concerning diseases of the eye as a compulsory subject for the curriculum and examination. The matter was referred to the Committee of Management to consider and report to the College.

#### Council.

Lord Ilkeston, Sir H. Bryan Donkin, and Drs. R. Caton and J. Phillips were elected councillors in the room of Drs. Herman, Finlay, Tirard, and Herringham, who retired by rotation.

#### Queen Victoria's Jubilee Institute for Nurses.

Sir Dyce Duckworth was re-elected as the representative of the College on Queen Victoria's Jubilee Institute for Nurses.

#### Central Midwives Board.

Sir Francis Champneys was re-elected as the representative of the College on the Central Midwives Board.

*Library.*

Books and other publications presented to the Library during the past quarter were received, and thanks returned to the donors. Special mention was made of gifts by Drs. Crawford, Osler, and Ormerod, and by Mr. Fleming.

*Examinations for the Licence.*

The annual return by the examiners of the results of the examinations for the licence in the year 1910 was received.

## Obituary.

GEORGE BIRT, M.B.LOND., M.R.C.S., L.S.A.,  
FORMERLY OF STOURBRIDGE.

We regret to announce the death, which occurred at Teignmouth on January 25th, of Mr. G. Birt, the second son of the late Dr. T. Birt of Leamington, at the age of 64. He matriculated at the London University, and entered the Birmingham Medical School. He obtained the Diplomas of M.R.C.S. and L.S.A. in 1868. After being Resident on the surgical side of the General Hospital, Birmingham, he continued his studies at University College, and graduated in medicine at the University of London, gaining honours in anatomy and organic chemistry. He settled in Stourbridge, and up to the time of his retirement was engaged in a large and widespread general practice in that district. He held the post of Honorary Surgeon to the Stourbridge Dispensary. His strenuous life, which did not permit of relaxation, recreation, or even an annual holiday, began to imprint its mark in 1903. Glycosuria and signs of arterio-sclerosis made their appearance. With dogged perseverance and courage he continued work, ignoring all danger signals. At length in 1908 the incessant strain, unrelieved by rest, overcame him. He retired to Teignmouth an invalid. Two months ago cardiac compensation broke down, hydrothorax developed and required frequent paracentesis. Uraemia closed the scene. He married, in 1877, the daughter of the late Dr. Campbell of Stourbridge, by whom he is survived. He leaves a son and two daughters. He was a member of the British Medical Association for forty-three years.

LIEUTENANT-COLONEL JOHN ADAMS CUNNINGHAM, M.D., of the Indian Medical Service, died of cholera on December 31st, after a few hours' illness. His death occurred at Calcutta where he was spending the Christmas holidays. Lieutenant-Colonel Cunningham, who was 52 years of age, joined the Bengal Medical Department as Surgeon, April 1st, 1881, and became Lieutenant-Colonel, January 17th, 1901. He served in the campaign on the North-West Frontier of India in 1897-8 with the Tirah Expedition, receiving a medal with clasp. Latterly he held several civil surgeoncies, and has served as Superintendent of the Lunatic Asylum at Lahore, as Professor at the Government Colleges, and as Professor at Lahore Medical College. He was also Medical Officer of the Punjab Light Horse Volunteers and of the North-Western Railway Volunteers.

CROYDON has recently lost another of its most distinguished and respected townsmen in the person of Dr. PARSONS SMITH. For a long time he had been in very indifferent health and had consequently been compelled to curtail his professional work. At the time of his death he was a J.P.; he had held for some years the Chairmanship of the School Board; in that capacity he did excellent service and anticipated by several years the plan of inspection more recently formulated in the interests of elementary school children, and, indeed, on his advice was the first oculist ever appointed to a school board. With characteristic foresight he made it distinctly understood that the officer appointed should exercise all possible tact and discharge his duties so as not to inflict any unnecessary hardships on the profession or on parents. The result met with general approval. Dr. Parsons Smith was an Irishman by birth and belonged to one of the best Irish families. He was singularly unobtrusive and so transparently genuine, sympathetic, and courtly, that to know him was to respect and trust him, and the long obituary notices in the local papers of every political and religious creed afford striking evidence of the high regard in which he was so justly held. He was attended through his illness by his partner, Mr. Gervase Newby, F.R.C.S. Eng.

## The Services.

### INDIAN MEDICAL SERVICE.

THE following candidates were successful at the recent examination for fourteen commissions, for which there were twenty-one candidates:

	Marks.		Marks.
Scott, J. ... ..	3691	Brook, G. S. ... ..	3203
Alexander, A. R. S. ... ..	3502	Goss, E. S. ... ..	3118
Hay, F. W. ... ..	3362	Morgan, J. F. H. ... ..	3111
Singh, I. ... ..	3357	Pandalai, K. G. ... ..	3105
Hepworth, S. M. ... ..	3284	Sen, J. L. ... ..	3035
Cormack, H. S. ... ..	3240	Wood, C. A. ... ..	3012
Tate, G. ... ..	3203	Connellan, P. J. ... ..	2914

### TERRITORIAL FORCE.

#### SCOTTISH COMMAND LECTURES.

THE fourth of the series of special lectures for officers and non-commissioned officers will be given in the headquarters of the R.A.M.C. (Glasgow units), on February 7th, at 8.45 p.m., when Major J. P. Silver, R.A.M.C., will deal with the subject of "Improvisation of Transport for Medical Units." This is one of the Scottish Command lectures delivered in Edinburgh Military Hospital, and as all medical officers are invited to attend, an opportunity is thus afforded to Glasgow and district officers to hear the special lectures organized for the regular officers of the R.A.M.C. in the Scottish Command.

The fifth and last lecture will be given in the same place on March 7th, when Colonel Gordon Hall, R.A.M.C., will take up the subject of "Tactics for Medical Units." This also forms one of the special series for the Scottish Command.

#### GLASGOW UNITS, R.A.M.C.(T.F.).

THE annual gathering of the Glasgow Units, Royal Army Medical Corps, Territorial Force, took place on the evening of January 23rd in St. Andrew's Hall, Glasgow. During an interval, Colonel Sir George T. Beatson, K.C.B., Administrative Medical Officer, Lowland Division, presented the prizes to the winning members of the five units, Mounted Brigade Field Ambulance, 1st and 2nd Lowland Field Ambulances, and 3rd and 4th Scottish Hospitals. He congratulated the units on being practically at full strength as the small shortage of nineteen men due to retirements would be made up when the drill season began. The new drill hall had now been sanctioned by the War Office, a site had been secured and plans passed, and he hoped that the new building would be got ready as soon as possible. A staff officer had also been appointed for the Lowland Division. Sir George also referred to the work of the Scottish Branch of the British Red Cross Society in providing a number of voluntary aid detachments to fill the gap at present existing in the Territorial Medical Service, between the field units and the base hospitals. Glasgow was now taking steps for active work in connexion with the formation of detachments for the County and the City, and he was sure that success would attend the efforts now being made.

## Medico-Legal.

### SPIRITS OF NITRE.

JUDGEMENT has been given by the stipendiary magistrate in a prosecution by the inspector appointed by the local authority to administer the Sale of Food and Drugs Act against a Glasgow doctor. The charge was that on November 15th, 1910, in the dispensary carried on by him, he sold, by the hands of an assistant, 3 oz. of sweet spirit of nitre which contained only 1.38 per cent. of ethyl nitrite, whereas the *British Pharmacopoeia* prescribes that it should be at least 1.75 per cent. The accused was defended by Mr. William Findlay on behalf of the Medical and Dental Defence Union of Scotland, who pleaded that the purchaser was not prejudiced, that there was no absolute standard under the *Pharmacopoeia*, and that it did not state clearly the composition of the article. The evidence led for the accused was to the effect that spirit of nitre is extremely volatile, and evaporation takes place even with the utmost care. The stipendiary magistrate found the respondent not guilty.

### ACTION FOR ALLEGED MEDICAL NEGLIGENCE.

IN the Bow County Court on January 20th, before Judge Smyly, James John Darkins, a clerk, of Milton Avenue, East Ham, sued Dr. H. de B. Nelson, of Canning Town, for negligence. Mr. Medcalf appeared for the plaintiff, and Mr. Matthew, on behalf of the London and Counties Medical Protection Society, for the defendant. Mr. Medcalf said that the case was a serious one, involving the character and reputation of a medical man, but there was no desire on the part of the plaintiff to obtain damages for himself. He simply wanted the recoupment of extra expenses, amounting to between £40 and £50, caused, it was alleged, by the negligence of the defendant. During her confinement in March last the plaintiff's wife was attended by Dr. Nelson, and it was alleged that he left behind pieces of the placenta. After several attacks of hæmorrhage an operation was performed by Dr. Kennedy. Septic poisoning set in, and she died early in May. The alle-

gation was that the defendant was negligent in his attendance and also in his treatment, consequent on which the plaintiff was involved in extra expense in engaging doctors, nurses, etc. The plaintiff gave evidence in support of his counsel's statement. His Honour, in summing up, directed the attention of the jury to a letter written by the plaintiff after his wife's death, in which he appealed to the generosity of the defendant to enable him to meet the debts which had been incurred in consequence of the illness. They had to say whether that was a letter which one man would write to another whom he believed to have been the cause of his wife's death. The jury, after a lengthy hearing, returned a verdict for the defendant. Judgement was given accordingly, with costs.

## Medico-Ethical.

*The advice given in this column for the assistance of members is based on medico-ethical principles generally recognized by the profession, but must not be taken as representing direct findings of the Central Ethical Committee, except when so stated.*

### THE OBLIGATIONS OF A SUBSTITUTE.

KAPPA.—A. attends Mrs. C. as substitute for B. on being informed that B. is away and that the case is urgent. Before leaving, C. asks him to continue in attendance, saying that B. has neglected her, and that in any case she would not send for B. again. Would A. be wrong in continuing the case, of course stipulating that B. is first informed?

\*. If A. acted as a substitute for B. at B.'s request, he ought under no circumstances to take the case, but if he was called in by C. in B.'s absence, and without any request from B. or his representatives, the case would be different; but A. must ensure that Mrs. C. first definitely terminates B.'s relations with her as her medical attendant.

### SUPERSESSON.

KAPPA.—A. and B. are in practice in the same neighbourhood. B. is asked by C., a wealthy local employer of labour, to attend his employees, their wives, and families at his—thatis C.'s—cost. Many of them are already patients of A., and do not wish to change their doctor. Is B. ethically wrong in doing this without informing A.?

\*. B. should tell C. that, while willing to attend any of his employees and their families who wish to consult him, he would not like any pressure put upon them to induce them to leave A., as by the offer of their medical attendance being paid for them, and that in any case he could not attend any of A.'s patients, unless they voluntarily gave up A.'s services and inform him of the fact. It would be better if A. and B. could be associated in the work, and the employees allowed to choose their medical adviser.

## Medical News.

MR. E. HURRY FENWICK will deliver a lecture on a method of the accurate measurements of the movements of the human kidney before operation and its bearing on renal surgery at the London Hospital on February 7th at 1 p.m.

At the meeting of the Royal Society on Thursday next Dr. V. H. Veley, F.R.S., and Dr. W. L. Symes will read papers on Certain Physical and Physiological Properties of Stovaine and its Homologues, and on The Effect of some Local Anaesthetics on Nerve.

THE title of the Dermatological Society recently formed in London is the New London Dermatological Society.

THE annual dinner of the West London Medico-Chirurgical Society will be held at the Wharncliffe Rooms, Hotel Great Central, Marylebone Road, N.W., on February 22nd.

By a gift of £4,500 by Mr. Ralph C. Forster, the sum of £25,000 required for the purchase of the site of the new chemical laboratories for University College, London, has been completed.

THE Gresham Professor of Physic, Dr. F. M. Sandwith, will give four lectures on Plague at the City of London School, Victoria Embankment, on February 14th, 15th, 16th, and 17th.

THE charter day dinner of the Royal College of Surgeons in Ireland will take place on Saturday, February 11th. His Excellency the Lord Lieutenant has accepted the invitation of the President and Fellows to be present at the dinner.

DR. W. T. GRENFELL, C.M.G., superintendent of the Labrador Medical Mission of the Royal Mission for

Deep Sea Fishermen, will give a lecture entitled "Midst Ice and Snow in Labrador," at the Queen's Hall, London, on Monday next, at 8.30 p.m. The lecture will be illustrated by lantern slides, and the chair will be taken by Sir Ernest Shackleton. Tickets can be obtained at the Queen's Hall box office or through the usual agents.

DR. AUGUSTUS W. DALBY of Frome, who has had at a comparatively early age to relinquish his practice on account of the effects of a serious illness, was on Friday, January 27th, the recipient of a handsome testimonial. It was subscribed for mainly by the townsfolk of Frome and neighbourhood, but reinforced by several of the members of the Trowbridge Division and friends throughout the Bath and Bristol Branch of the Association. The testimonial consisted of an illuminated address of sympathy and appreciation of his work in Frome, together with a cheque for £290.

MOST motorists whose cars are not fitted with detachable wheels carry a spare wheel as the readiest remedy for a puncture on the road, and hitherto the Stepney wheel has held the field. But when a tyre has been on for some time the application of the Stepney wheel may be a troublesome, dirty, and difficult operation, as it involves separating the bead of the tyre from the rim in order to admit the clips. The Hall spare wheel does away with this difficulty, as it clips sideways on the exterior and interior beads of the metal rim, and does not involve any manipulation of the tyre; it is much easier to apply single handed. Moreover, it can be put on when there has been no puncture so as to act as a non-skid, and its attachment is perfectly secure.

THE trustees of the Carnegie Hero Fund met at Dunfermline last week, and had under consideration an act of heroism displayed during the attack upon the house in Sidney Street, Stepney, in which certain anarchists had taken refuge. The trustees awarded to Dr. N. Johnstone a medallion and a sum of £25. Dr. Johnstone, who was acting as assistant to Dr. J. W. Fordham, of Mile End Road, was called to attend Detective Sergeant Leeson, who had been shot in Sidney Street; while firing was going on he had to climb over the roofs of outbuildings to where Leeson was lying on a couch in a room. The wounded man was got on to a stretcher and was being lifted along the coping when the party drew fire, and a bullet hit the wall very near Dr. Johnstone's face. The party succeeded in accomplishing their task without loss, and Leeson was safely removed to the London Hospital.

THE usual monthly meeting of the Executive Committee of the Medical Sickness, Annuity, and Life Assurance Society was held at 429, Strand, London, W.C., on January 20th, Dr. de Havilland-Hall in the chair. As is usual at the first meeting of the year, the Committee received special reports on the chronic cases, those members who are drawing sick pay, and of whom there is little hope that any will ever be able to resume professional work. There are now nearly fifty such cases, and the amount of sick pay disbursed to them is nearly £100 a week. This sick pay is payable without any deduction until the age of 65. The Committee has always considered this branch of the work as one of the most important features of the society's operations, and the letters received from the recipients of these annuities show clearly what an immense boon these pensions has been to them. At each quinquennial valuation of the business of the society a large extra reserve is made for the chronic cases. Prospectuses and all further particulars on application to Mr. F. Addiscott, Secretary, Medical Sickness and Accident Society, 33, Chancery Lane, London, W.C.

A Tuberculin Dispensary League has been established in order that a system of tuberculin dispensaries for the poor may be placed upon its trial. It is estimated that 40,000 persons in London alone suffer from consumption and cannot for or obtain treatment in sanatoriums, which can only deal with about 10,000 cases a year at a cost of about £30,000. The president of the league is the Countess of Mayo; the chairman of the executive committee is Dr. Camac Wilkinson. The committee appeals for £500 a year for three years in order that a preliminary trial may be made. For that sum 200, it is estimated, could be treated every year. The honorary treasurer of the league is Mrs. Creasy, 36, Weymouth Street, W., and the honorary secretary Mrs. Steuart Erskine, 10, Ovington Gardens, S.W. The chief dispensary at 263, Kennington Road, S.E., near the Westminster Bridge Road station of the Baker Street and Waterloo Tube, is open on Tuesdays and Fridays from 9 to 12.