

- (h) Dark red with neutrals 1 and 2 was blank, no red being visible to the man when it was seen by myself.  
 (i) Dark red with ribbed glass, named green.  
 (j) Dark red with ground glass, named green.  
 (k) Orange, named green.  
 (l) Green, named correctly.  
 (m) Blue-green, called light blue.  
 (n) Blue, named correctly.  
 (o) Violet, called "mauve or blue."

TEST V.—The fifth test was the spectrum as seen in bright daylight through a small spectroscope. The only colours seen were three in number, and were called "red," "green," and "blue."

The chief points of interest in this case are:

Test I. The coloured lights, however small and clear or obscured, being named correctly, while obscured white was invariably called green.

In Test II, if decided shades were used as tests, the matching was good, and would undoubtedly satisfy many examiners. The best colour in Holmgren's wools to show the defect is probably a greyish-white, which is not one of the standard tests.

In Test III the failure to select orange, and the confusion of blue and violet, are important points, while blue-green must have been very imperfectly seen.

In Test IV the name green was applied to all neutrals, to orange, also to ground and ribbed glasses alone and with dark red, while the red given by neutrals 1 and 2 was called green. The fact that dark red with neutrals 1 and 2 was not seen shows that there must be some shortening of the red end of the spectrum, in addition to the other defects.

Test V, in which he stated positively that there were only three colours, considered along with the other tests, indicates that the case is one of trichromatic colour blindness with shortening of the red end of the spectrum, as described by Dr. Edridge-Green.

I have no doubt that this man is unfit to be entrusted with the care of life at sea; it is also evident that something more than the ordinary Holmgren tests in the hands of laymen is required to detect his deficiency.

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### HAEMORRHAGE FROM THE INTESTINAL MUCOUS MEMBRANE IN MEASLES.

A boy aged 7 years, whose father had died of pulmonary tuberculosis, had a typical attack of measles; the rash was well out, and there were slight bronchial symptoms, but the case seemed mild. I was informed on the fourth day of the attack that the child had had attacks of vomiting without relation to food (milk and soda water). Having already noticed that the epidemic which is raging here was occasionally ushered in by intestinal symptoms—vomiting and diarrhoea—I took no immediate notice of this symptom. The friends sent for me during the afternoon of the same day and showed me about two ounces of liquid blood, bright red in colour, not clotted, with shreds of mucus and typical sago-like masses of mucus, which they said the child had passed at stool. The child looked bright, but slight pain on pressure was elicited over the right iliac region. The patient complained of pain in the lumbar region of a colicky nature, and in front over the caecum. During the attacks the child would jump up in bed and demand the bed-pan. The haemorrhage continued in small quantities hourly for the next twenty-four hours in spite of treatment by an ice-bag to the abdomen and pulv. cretae aromaticus cum opii, grains iij every two hours. No sign of faeces was noticed in the discharge passed after each attack of pain; there had been no catarrh of the intestine before the haemorrhage occurred. I came to the conclusion that the haemorrhage was due to hyperaemia of Peyer's patches, sometimes met with in measles, especially the haemorrhagic form. Having made this diagnosis, and as the blood showed no signs of coagulation, I prescribed calcium chloride gr. v, tinct. hamamelidis ℥ iv, liquor morphinae hydrochloridi ℥ ij, every two hours. The haemorrhage gradually ceased during the next twelve hours, save for a slight discharge of blood-stained mucus which came away involuntarily on the bedclothes. The

child had a normal movement of the bowels on the third day from the commencement of the haemorrhage, of a natural colour but smelling badly. Prolapse of the rectum, brought on by straining during the attacks of colicky pains, ensued, but the boy made a good recovery.

JOSEPH STARK, L.R.C.P.,  
Winchburgh, Linlithgowshire. L.R.C.S. Edin.

THREADWORMS IN THE VERMIFORM APPENDIX. I HAVE read with interest the notes on "Threadworms in the Vermiform Appendix," by Dr. Wilson of Tunbridge Wells, in the JOURNAL of April 13th. The following notes of a case on which I operated on April 9th, and found in the appendix *Oxyuris vermicularis*, may be of further interest to your readers.

Miss A. G., aged 21 years, had suffered during the last eighteen months from repeated attacks of subacute appendicitis. The cardinal symptoms of all the attacks were so indefinite that I was in doubt as to the correct diagnosis, and therefore the call for operation, but as the patient had a more severe recurrence on April 1st, with marked pain and tenderness over McBurney's point and in the lumbar region, I decided to operate when the symptoms subsided, which they did on April 3rd, the patient being up and downstairs when I visited her. I would point out that in its shortness this attack was similar to the previous attacks, one of which only lasted a few hours.

On operating I found a very long appendix, measuring 6½ in., passing up behind the ascending colon, which showed signs of recent inflammation, there being excessive injection. On opening the organ I found, 3 in. from the apex, a threadworm ¾ in. long, embedded in faeces, which filled the interior, and at the apex five fine hairs. The mucous membrane was greatly thickened.

I find, on inquiring into the previous history from the patient's mother, that A. G., when a child, "had a habit of lying and sleeping with her right leg drawn up," and during her whole life has had frequently dull pains over her right side and in her back, with often acute pain for a few hours, which were relieved by hot fomentations and the recumbent position. These attacks were thought to be "indigestion."

Hawick. J. OLIVER HAMILTON, M.B., Ch.B.

#### HAEMOPHILIA IN AN INFANT.

MRS. C. was delivered normally of a female child, small but healthy. It passed no urine till it was thirty-six hours old, but took to the breast a few hours after birth.

Three days after birth there was very slight haematemesis; the next day, the mother said, a little blood was mixed with the faeces and urine, and the child appeared slightly jaundiced. Careful watch was kept for the next few days for further symptoms. When I called on the eighth day I was struck by the marked change since I saw the child the day before. Its face was now a deep lemon yellow, suggestive of intense anaemia. The "binder" was found soaked with blood, which had proceeded from the neighbourhood of the umbilical cord. No bleeding point could be found, but I transfixed and ligatured the remains of the cord, and applied a compress. The mother said she had noticed nothing wrong when she washed the baby half an hour before. The child was already comatose. Further bleeding occurred twice during the day from the same locality. The cord had practically come away.

At the necropsy, performed thirty-six hours later by Mr. W. J. Heslop, F.R.C.S., several bruises under the skin were found. All the organs were normal, but very pallid and bloodless. The ventricles were practically empty save for a little uncoagulated blood. The liver had not the yellow colour suggestive of icterus neonatorum. On opening the skull the space between the brain surface and the membranes was filled with thin uncoagulated blood, but the brain substance itself was bloodless, the blood evidently having oozed out from the vessels. The weight of the child was 4½ lb.

Mr. Heslop came to the conclusion that death was due to a true haemophilic condition. There was no fever and no suspicion of specific disease in the parents, who are both healthy. The case is thus differentiated from the haemorrhagic diseases of the newborn described by Osler.

Cheetham Hill, Manchester. S. DANZIGER, L.M.S.S.A.

an active cyclist, and on the morning of his death had gone out for a cycle ride, apparently in his usual health. He was found by passers-by leaning against the railings on the roadside, and died very quickly, without being able to communicate with those about him. Mr. Wrench had had two attacks of rheumatic fever, had long suffered from a defect of the mitral valve, and on two previous occasions had had attacks of heart failure.

Mr. Wrench, who was the son of the Reverend T. W. Wrench, Rector of St. Michael's, Cornhill, was born on July 1st, 1833. He received his medical education at St. Thomas's Hospital, and obtained the diplomas of M.R.C.S. and L.S.A. in 1854, in which year he went out to the Crimea; he was first placed in charge of the wounded from Inkerman, in the hospital in the Russian Military School, Balaklava, and was afterwards attached to the 28th Regiment, with which he served in the trenches during the attack of December, 1854. He had been gazetted Assistant Surgeon to the 34th Regiment in November, and joined it on its arrival in the Crimea. He served during the terrible winter of that year, and was present at the capture of the quarries, the successful assault on the Redan of June 18th, and the final capture of Sebastopol on September 8th, 1855. He was mentioned in despatches, and received the Crimean medal and clasp for Sebastopol, and the Turkish medal. Returning from the Crimea in 1856 he was transferred to the 4th Lancers, went to Madras with that regiment in the following month, and served with it during the whole of the Indian Mutiny. For his services in India he received the Indian medal and clasp for Central India. He returned to England in 1860, and married in 1861 his cousin, the daughter of Mr. William Kirke, of Markham Hall, Nottinghamshire, by whom he is survived. He retired from the army in 1862, and settled at Baslow on his appointment as surgeon to the seventh Duke of Devonshire. During his long connexion with Chatsworth he had the medical care of many notable and distinguished persons, and on one occasion attended the late King Edward VII professionally. The decoration of a Member of the Victorian Order was conferred upon him by King Edward on the occasion of his last visit to Chatsworth.

Mr. Wrench took the diploma of F.R.C.S. Eng. in 1870, and was Consulting Surgeon to the Whitworth Hospital, Darley Dale. In 1864 he joined the 3rd Battalion of the Derbyshire Volunteers, serving as Ensign and Lieutenant, until gazetted Surgeon in March, 1870. In 1892 he was promoted to Surgeon-Lieutenant-Colonel, and in the following year received the V.D.; he retired in 1900 with the rank of Lieutenant-Colonel. Mr. Wrench had held the office of President of the Midland Branch, and after the Annual Meeting of the Association at Sheffield in 1908 he conducted a large party over the park and house of Chatsworth. He was appointed a magistrate in 1898, and was a regular attendant at the Bakewell Sessions. As has already been said, Mr. Wrench was very highly esteemed, not only in his own immediate neighbourhood, but throughout the northern part of Derbyshire. He was deeply interested in archaeology, local history, and geology, was president of the Bakewell Naturalist Field Club, and was an authority on place names.

We regret to announce the death of one of the leading dental practitioners in the north of Scotland, who was also a member of the medical profession, Dr. W. H. WILLIAMSON; he died at Aberdeen on April 13th. He was born at Leicester fifty-nine years ago, but spent practically all his life in Aberdeen, where his father, the late Mr. Williamson, carried on a large dental practice for many years. He was educated at the Grammar School, Aberdeen, and afterwards studied medicine at Aberdeen University, taking the M.B. degree in 1874 and the M.D. in 1880. He proceeded to Edinburgh and became L.D.S. in 1881. Afterwards he went to Pennsylvania University, where he took the degree of D.D.S. Mass. On the death of his father he entered on practice on his own account, and in the course of his career as a dental surgeon attained to a high place in his profession. He was President of the British Dental Association in 1904-5. In Aberdeen Dr. Williamson was held in esteem by all with whom he came in contact. He was long a Member of the Council of the Aberdeen Artists' Society and was also an ex-President of the Aberdeen

Philosophical Society. For many years he acted as Dental Surgeon to the Aberdeen Royal Infirmary. Predeceased by his wife, he leaves a family of two daughters and three sons, the eldest of whom was associated with him in practice.

## Universities and Colleges.

### UNIVERSITY OF CAMBRIDGE.

THE following candidates have been approved at the examinations indicated:

D.P.H. (Both Parts).—R. A. Askins, \*S. A. Baillie, L. E. H. R. Barker, A. H. Brehaut, J. S. Byrne, A. Connal, Josephine Coupland, A. D. Cowan, G. H. Dart, F. C. Davies, Jessie G. Duncan, T. Evans, T. P. Fraser, M. F. Grant (Captain, R.A.M.C.), Dorothy C. Hare, H. C. Jeffreys, Elizabeth Knight, A. A. D. McCabe-Dallas, W. Macewen, J. MacMillan, P. R. McNaught, B. MacPhee, H. C. Manning, A. Robertson, L. J. Short, H. G. Smith, J. R. Sutherland, B. W. Telford, W. R. E. Unthank, S. B. Walsh, E. Wardman-Wilbourne.

\* Distinguished in Chemistry.

### UNIVERSITY OF EDINBURGH.

#### Honorary Degrees.

THE Senatus Academicus has resolved to confer the honorary LL.D. degree upon Professor J. Theodore Cash, M.D., F.R.S., Aberdeen University; Dr. Robert Munro, F.R.S.E., Largs; and Sir James Porter, Director-General, Medical Department of the Royal Navy.

### UNIVERSITY OF GLASGOW.

THE following were among the degrees conferred at a meeting of the Senate on April 22nd:

M.D.—C. A. Gourlay, M. Macnicol, C. K. Toland.  
B.Sc.—W. B. Wilson, S. S. Meighan, N. V. C. Lothian, B.Sc., J. B. Orr, T. Walmsley, J. C. Pyper, J. A. Gardner, J. A. Aitken, J. C. H. Allan, J. Angus, J. G. Becker, V. Borland, N. Cameron, G. W. Clark, G. Dalziel, A. H. Davidson, W. T. G. Davidson, K. Falconer, J. J. Gibb, L. Glushak, C. W. F. Greenhill, J. A. Harper, A. G. Henderson, A. J. Joubert, F. A. Kerr, T. J. Kirk, R. P. A. Kirkland, J. F. Lang, F. W. K. Lawrie, C. Lundie, D. Meek, M. J. Murray, A. Neilson, A. Rae, Lucy M. Ross, S. Rutherford, H. C. v. d. W. Smit, M. Sommerville, L. T. Stewart, T. Waterhouse, E. C. White, W. Whitelaw, H. G. Wilson.

D.Sc.—L. Findlay.

B.Sc. (in Public Health).—H. R. Sloan, E. Watt.

\* Commendation for thesis.

† Honours.

‡ Passed with commendation.

*Bellahouston Gold Medals* for eminent merit of a thesis for the M.D. have been awarded to Drs. Hugh Morton and Peter D. Strachan, the latter also obtaining the *Straits Settlements Gold Medal* in Tropical Medicine. Among the special class prizes of the same university is the Asher-Asher Gold Medal in Laryngology and Rhinology which has been awarded to Mr. J. S. K. Boyd.

#### Commemoration Day.

The proceedings at the Biennial Commemoration on Tuesday, June 25th, will include a meeting at 10.30 a.m. in the Bute Hall for divine service, an oration on Sir Joseph Hooker by Professor F. O. Bower, D.Sc., F.R.S., and the conferring of honorary degrees. At 3 p.m. the ceremony of presenting to the university a bronze medallion of Professor Wm. Stewart, D.D., LL.D., will take place, and tea will be served thereafter. At 7 p.m. a dinner will take place in the University Buildings, at which the honorary graduates and delegates attending the Congress of the Universities of the Empire will be entertained as guests. This function will be open to graduates and friends, including ladies. Applications for tickets for each and all of the meetings must be made to the Secretary of the University Court on or before June 12th.

#### Statistics.

Among statistics published in the minutes for the meeting of the General Council held on April 24th are the following:

*Comparison of the Number of Matriculated Students in Sessions 1908-9, 1909-10, and 1910-11, with the Average Numbers for the Three Quinquennial Periods ended 1903.*

	Average of Five Years ending			Year 1908-9.	Year 1909-10.	Year 1910-11.
	1898	1903.	1908.			
Medicine—						
Men ... ..		612	635	626	627	651
Women ... ..		72	61	83	71	78
Total ... ..	703	684	696	709	698	729

Comparison of Number of Degrees granted for 1908-9, 1909-10, and 1910-11, with the Average for the Two Quinquennial Periods ending 1908.

M.D. Honours ... ..	2	2	3	—	1
Commended ... ..	6	6	10	6	8
Ordinary ... ..	14	15	10	9	13
M.B., Ch.B. (or C.M.)					
Honours ... ..	2	4	6	3	3
Commended ... ..	9	11	16	7	8
Ordinary ... ..	84	82	106	84	87
Total ... ..	117	120	151	109	120

#### UNIVERSITY OF DUBLIN.

THE following were among the degrees conferred at a meeting of the Senate on April 18th:

M.D.—F. V. Agnew, J. Deckett, R. Morrow.  
M.B., Ch.B., B.A.O.—F. V. Agnew, T. Brook, F. A. Bourke, H. M. Fleming, R. E. Grandy, S. A. Lane, R. G. J. McEntire, J. N. G. Nolan, H. E. Williams, T. G. Harpur.

#### CONJOINT BOARD IN ENGLAND.

THE following candidates have been approved at the examinations indicated:

FIRST COLLEGE (*Part IV, Practical Pharmacy*).—L. W. Barlow, R. E. Barnsley, P. N. Button, M. H. Cane, H. G. R. Canning, W. K. Churchouse, F. C. Cline, E. Coplans, D. H. Derry, E. G. Fisher, R. Hodson, F. C. Hunot, C. S. J. Kearney, G. Kinneir, H. B. Logan, P. E. Lones, W. U. D. Longford, O. D. B. Mawson, L. M. J. Menagé, L. Milton, A. V. Moberly, R. F. Quinton, J. M. Redding, J. E. Rivera, C. M. Ryley, J. T. Samuel, H. N. Sealy, B. L. Skeggs, K. V. Smith, W. J. D. Smyth, D. L. Spence, J. R. W. Stephens, W. A. Stewart, J. S. Strachan, W. F. Thompson, V. C. W. Vickers, W. G. Watson, F. L. Webster.

SECOND COLLEGE (*Anatomy and Physiology*).—C. H. P. Allen, E. Atkinson, F. E. Bendix, C. F. Beyers, S. V. Bhat, J. W. Bouwer, Isabel F. Buckle, E. Catford, E. J. Cooke, E. R. Dermer, M. Dia, M. K. El Kholy, A. Z. Elsayed, D. T. Evans, R. F. Fagan, H. Fernando, V. Fox, G. F. P. Gibbons, G. L. Grant, W. H. Harris, S. Hutchinson, E. L. Ivens, I. S. James, T. R. Kenworthy, N. H. Linzee, W. D. McDonald, F. O. MacGibbon, I. A. Malik, H. W. Maltby, G. W. Maw, B. R. Mayman, H. G. Moser, S. H. Paul, J. E. Pearce, A. C. Perry, D. J. Platts, L. H. Poh, G. W. Pool, H. P. Price, A. L. Robinson, G. F. Rowcroft, T. O. Shah, S. Simons, B. H. Singh, P. de S. Smith, J. W. G. Steell, W. B. R. Stower, P. W. Symons, H. B. Taylor, O. R. Unger, W. E. Wade, G. L. Wilkinson, M. U. Wilson.

\* Recommended for Begley Studentship.

#### SOCIETY OF APOTHECARIES OF LONDON.

THE following candidates have been approved in the subjects indicated:

SURGERY.—\*† L. K. Edmeades, † C. W. Jenner, \*† H. Robinson, \*† C. B. Welsby, \*† H. D. Willis.

MEDICINE.—† H. Cox, † E. B. Keen, † P. McGinnis, † C. B. Welsby, \*† H. D. Willis.

FORENSIC MEDICINE.—W. C. Himely, C. de C. W. Langdon, A. H. Macklin.

MIDWIFERY.—J. A. A. Boddy, R. B. F. Frazer, R. Jones, R. V. Martin.

\* Section I. † Section II.

The diploma of the Society has been granted to Messrs. L. K. Edmeades, E. B. Keen, P. McGinnis, C. B. Welsby, and H. D. Willis.

## Medico-Legal.

#### SECRET REMEDIES.

BEFORE Mr. Hedderwick at North London Police Court on April 17th, John James Huggins and George Douglas Buchanan, both of 67, Isledon Road, Holloway, were summoned at the instance of the Commissioners of Customs and Excise for selling Jap's Pills and Jap's Balm, preparations liable to duty, without an Inland Revenue licence. Mr. Simpson, who appeared for the Commissioners, said that the defendants carried on business as "Jap and Co.," and manufactured and sold these pills and ointments at one penny a box. They were for so doing liable to a licence duty, and the Commissioners contended that each box should be stamped with a three halfpenny stamp. The defendants, in the notice printed on the pill boxes, said that the pills were prepared from the formula of Beecham's Pills, and that the balm was prepared according to the formula for Zam-Buk. The penalty for selling such medicines without a licence was £20, and for selling the medicines without being properly stamped, £10. Mr. Huggins, one of the defendants, admitted the sale, but submitted that there was no secret about the process of manufacture, the formula in each case having been taken from a book, *Secret Remedies*, and as they were both recognized and published formulas there was no necessity to pay a licence duty or a stamp duty. He quoted the *Chemists' Diary* to show that the law had been complied with. Mr. Simpson said that the exemption referred to applied only to medical men and qualified chemists and druggists who made up and sold remedies such as were known to and recognized by the

British Pharmacopoeia. The defendants seemed to think that because they got these formulas from the book, *Secret Remedies*, they were protected; but the defendants were not qualified chemists recognized by the law, and the remedies mentioned in the book were not approved. The sole object of the book was to expose frauds on the public. Mr. Hedderwick, in giving his decision, said he thought the defendants had been under an honest misapprehension, and had believed that because the prescriptions of these articles had been published in *Secret Remedies* they were protected, but that was not what the Act contemplated. The case had drawn attention to the very remarkable work, *Secret Remedies*, published by the British Medical Association for the protection of the public. From this it seemed that Zambuk, which was said to be identical with Jap's Balm, cost one farthing per box to make, and that Beecham's Pills, which were said to be worth a guinea a box, cost no more than a farthing for a boxful. The defendant was ordered to pay fines and costs amounting to £20 6s. Mr. Huggins, on hearing the decision, said that he would not waive his objection to the summonses, which were not in order. Ultimately the summonses were dismissed, the magistrate intimating that if fresh summonses were taken out against both partners and the cases were proved, he would fine both.

#### NURSE'S FALSE TESTIMONIAL.

*Prosecution by the London Hospital.*

ON April 13th, at the Eye Borough Petty Sessions, Evelyn McCoy was charged with having presented a false certificate of training, purporting to be a certificate of the London Hospital, with a view to obtaining a post as nurse under the Hartismere Board of Guardians. The certificate stated that she had been three years in the service of the London Hospital, whereas she had never been in that institution.

The prisoner pleaded guilty.

Mr. A. G. Whitting, on behalf of the London Hospital, briefly explained the facts. The prisoner had sent in a copy of a testimonial purporting to be a certificate of training signed by the officials of the hospital who usually signed such certificates. A discrepancy was, however, noticed which prompted the clerk to the guardians to write to the authorities of the London Hospital with a view to verifying the certificate. It was found that no such person had ever been trained at the London Hospital.

The prisoner expressed deep regret for what she had done.

The Mayor, in sentencing, stated that, as there was nothing previously against the prisoner, the Bench were inclined to be lenient with her. They fined her £1 and costs, or, in default, fourteen days' hard labour. They thought that very lenient for a serious offence.

#### WORKMEN'S COMPENSATION ACT.

*Grease and Dirt getting into a Cut.*

IN *Chandler v. Great Western Railway* (Court of Appeal, March 12th) the applicant was a fireman. On July 8th, 1910, he cut his finger with a table knife while having his dinner at his lodgings. Applicant was then living in South Wales. Applicant went to work on his engine, but later blood poisoning supervened and the finger had to be amputated. The county court judge found that the blood poisoning, which was the cause of the lost finger, was due to an accident arising out of and in the course of the employment. The Court of Appeal held that as infection might have got into the man's hand in a number of ways there was no evidence that he was the victim of an accident arising out of and in the course of his employment. The appeal was therefore allowed.

*Medical Referees as Witnesses.*

ENQUIRER asks whether a medical referee appointed under the Workmen's Compensation Act can give evidence in a case in the same court in which he acts as referee.

\* \* By Section 10 (1) of the Workmen's Compensation Act:

"Where a medical referee has been employed as a medical practitioner in connexion with any case by or on behalf of an employer, or workman, or by any insurers interested, he shall not act as medical referee in that case." Provided there is no infringement of this clause, a medical referee has the same liberty of action as any other practitioner.

#### BOOK DEBTS AND LATER FEES.

M.B. writes that he has recently come into a partnership without buying any of the book debts. His partner claims fees for confinements and operations in payment of his outstanding bills. He wishes to know if this is correct. He thinks that such fees, being definite payments for definite services, and commonly paid as cash, should be credited to the firm, and not to his partner.

\* \* Our correspondent is entitled to his share of all moneys paid for professional work done after his entrance into the firm. Fees paid for confinements and operations at the time could have no reference to old outstanding accounts, and would belong to the firm. It is only where credit is given, and accounts are periodically rendered, that payments made by the debtor, unless he directs otherwise, are presumed to be for the satisfaction of debts in the order of their priority.

## Medical News.

THE Fourteenth International Congress of Anthropology and Prehistoric Archaeology will be held at Geneva this year in the first week of September.

THE Gresham Professor of Medicine will give four lectures on the use and abuse of alcohol at the City of London School, Victoria Embankment, E.C., on May 7th, 8th, 9th, and 10th, at 6 p.m. on each day.

THE summer course of post-graduate demonstrations at the Manchester Royal Infirmary will begin on Tuesday, May 7th, when a medical demonstration will be given, to be followed by a surgical demonstration on Friday, May 10th. These demonstrations will be held at 4.30 p.m. on each Tuesday and Friday throughout the summer session, with the exception of Whit-week.

IN the *Nyasaland Protectorate Sleeping Sickness Diary*, Part XVI, 1912, further details are given of the spread of trypanosomiasis in that region. Since the issue of the last number of the series, when the cases of sleeping sickness reported up to October 12th, 1911, numbered 55, 8 further cases had been recorded. During the month of November no fresh cases were observed. The patrols who are looking for cases report, however, that natives frequently hide their sick, and that more severe measures will be necessary for dealing with offenders in this respect. Of the previously reported cases large numbers have now died, but the course of the disease would seem generally to be very slow, in this way differing very materially from the recent Uganda epidemic.

THE Warren Triennial Prize, founded by the late Dr. J. Mason Warren, of Boston, U.S.A., in memory of his father, is awarded every three years for the best dissertation considered worthy of a premium on some subject in physiology, surgery, or pathological anatomy, the arbitrators being the physicians and surgeons of the Massachusetts General Hospital. The subject for competition for the year 1913 is on some special subject in physiology, surgery, or pathology. Dissertations must be in English, French, or German, and must be typewritten and suitably bound, so as to be easily handled. Work that has been published previously will not be considered in competition. The name of the writer must be enclosed in a sealed envelope, on which must be written a motto corresponding with one on the accompanying dissertation. The amount of the prize for the year 1913 will be £100. Dissertations will be received until April 14th, 1913. A high value will be placed on original work.

A DINNER in connexion with the special appeal recently launched by the authorities of St. Bartholomew's Hospital is to take place at the Mansion House towards the end of the first week in June. We pointed out some years ago the difficulties in which this great hospital was likely to find itself before very long, since the income from its landed property was falling while it was receiving little in the way of donations and bequests from the public. At that time the balance on the wrong side between income and expenditure was quite small, but the overdraft at its bankers has now reached £57,000, and in default of material assistance must almost inevitably go on increasing at the rate of between £7,000 and £8,000 per annum. In addition the structural alterations and rearrangements of the various blocks, long recognized to be necessary, have still to be completed; the expenditure on what has been achieved so far in this direction has been provided mainly by governors of the institution, old students of its medical school, and others closely connected therewith.

DR. MARSHALL PHILIP, Medical Officer of Health, Colombo, mentions in his annual report that a municipal dispensary was opened in February, 1910, with a staff of one medical officer, one dispenser, one lady health visitor, and one orderly. The object of its establishment was to enable the health department to get into closer touch with the sick poor, and it was expected that the information so acquired would be of special value in connexion with the prevention of infantile mortality and diseases such as enteric fever, dysentery, and phthisis. The results were most encouraging, no fewer than 6,179 patients being treated, representing an aggregate of 12,462 visits; 506 cases were discovered and referred to the dispensary by the health visitor. The medical officer visited 106 cases of illness in their homes, and 64 cases of confinement were attended by the municipal midwife. Dr. Philip has recommended the development of the system by the establishment of two more dispensaries.

## Letters, Notes, and Answers.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone unless the contrary be stated.

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AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Office, 429, Strand, W.C., on receipt of proof.

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

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.

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is *Articulate, London*. The telegraphic address of the BRITISH MEDICAL JOURNAL is *Articulate, London*.

TELEPHONE (National):—  
2631, Gerrard, EDITOR, BRITISH MEDICAL JOURNAL.  
2630, Gerrard, BRITISH MEDICAL ASSOCIATION.  
2634, Gerrard, MEDICAL SECRETARY.

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.

E. S. W. W., who has tried many remedies, asks for advice in the treatment of a case of excessive axillary perspiration.

CUMNOR wishes to hear of an institution in Cheshire, Lancashire, or North Wales where a woman of 37 of weak intellect (uncertified), of the farming class, can be received. Her means allow of her paying about a guinea a week.

### RISK OF INFECTION.

F.R.C.S. writes: A bedroom in my house has recently been painted, the walls distempered, the ceiling papered. I find now that the painter has a cough and is suffering from tuberculosis. Would one of your expert readers inform me how I can render that room free from danger to its occupant without spoiling the walls or ceiling?

### THE ADMINISTRATION OF CHLOROFORM.

LETHEON writes: If Junker's inhaler for chloroform uses a vapour such that every press of the ball evaporates 1 minim, and this minim is diluted with 6,000 times its volume of air, how does this compare with Vernon Harcourt's dosimetric machine, which gives 2 per cent. chloroform vapour in the atmosphere breathed? Or, what is the strength with Junker's inhaler?

\* \* The assumption that 1 minim of chloroform is volatilized and so commingles with a given amount of air, is not borne out by experiment. The amount of vapour varies according to the force with which the air is pumped, and this varies with the depth of liquid in the bottle, the temperature of the bottle and that of the air, and the shaking and splashing of the contents of the bottle. The whole question was examined experimentally by Dr. Waller (BRITISH MEDICAL JOURNAL, April 23rd, 1898, p. 106, and *Lancet*, July 9th, 1904, p. 77) and Dr. Paul Chapman (BRITISH MEDICAL JOURNAL, vol. i, 1906, p. 615); the latter showed that a percentage of vapour of 5 or higher could be delivered from this apparatus. See also articles on Junker's inhaler and Vernon Harcourt's inhaler in the Report of the Special Chloroform Committee of the British Medical Association, price 1s., post free, 1s. 3d.

### ANSWERS.

#### ASPARAGUS.

DR. R. ACKERLEY (Llandrindod Wells) writes: B. B. G. asks "for information as regards the eating of asparagus by the gouty, and whether its use is likely to prolong a gonorrhoeal discharge." There is good reason for thinking that in many cases of gout asparagus is distinctly harmful. I have suggested (*Transactions of the Royal Society of Medicine, Balneological Section*, vol. iii, 1910, page 66) that the harmful ingredient is the common salt, of which cooked asparagus contains 27 to 35 parts in 1,000 (H. Strauss; *Zeitschr. f. Phys. und. Diet. Therap.*, Leipzig, 1908-9, vol. xi, page 14). Asparagus not only contains a large quantity of NaCl, but is generally boiled in water containing a good deal of NaCl and is served with salt butter or sauce containing NaCl. This percentage of common salt would also act as an irritant to the urinary tract, especially if already inflamed.

#### TWINS.

DR. ELLA SYNGE (Dalles, Oregon, U.S.A.) writes to suggest that the explanation of the case related by "Pastor" in the JOURNAL of March 23rd, p. 708, would be uterus didelphys or uterus septus bilocularis and not hour-glass contraction.