

The condition of the arteries in shock requires a word. To state that these are either contracted or dilated is incorrect, for either statement needs qualification. In the pressor stage of shock they are contracted; in the depressor stage (when the stimulus is relaxed) they are neither contracted nor actively, nor passively, dilated. They preserve their normal tone independent of central control, unless in the last stages of experimental local visceral shock. In this case only the abdominal vessels are directly fatigued, so that a splanchnic stimulus reverses the phenomena we have noted; but we would point out that this condition does not obtain in surgery, with the possible exception of the kidney.

## Memoranda :

### MEDICAL, SURGICAL, OBSTETRICAL.

#### MELAENA NEONATORUM.

I NOTE in the JOURNAL of February 17th a case of malaena neonatorum, reported by Mr. James Dunlop, M.B., of Shettleston, N.B.

In March, 1911, I attended a primipara, a young healthy woman, who under chloroform was delivered with forceps of a female child. On the evening of the second day I was hastily summoned by the nurse. The baby had passed per rectum three large clots, followed by a large quantity of bright blood. This continued with varying severity several times daily for three days. The infant was extremely blanched, and it was difficult to keep it warm. On the fifth day the motions became normal and recovery took place. I gave mild astringents and small doses of liq. opii sed.

I could find no reports of similar cases, and during thirty years' general practice at home and abroad had never seen a similar condition.

W. MORRISON, M.A., M.D.,  
Senior Honorary Physician, Ballarat Hospital,  
Australia.

THREADWORMS IN THE VERMIFORM APPENDIX. With regard to threadworms and other *vermes* in the veriform appendix, it may interest Drs. Claude Wilson and Hamilton to know that recently I found a very fine specimen of *Trichocephalus dispar*—the whipworm—in the appendix of an adult male, but no ova were detected. There was no very clear history of acute attacks, but the patient was subject to much dyspepsia and distinct tenderness in the region of the appendix, which was very long and tightly kinked, and bound down.

Wallington. WALTER GRIPPER, M.A., M.B.Cantab.

#### ABDOMINAL ANGINA.

THE interesting description of this condition given in the joint paper contributed to the Royal Society of Medicine by Sir Lauder Brunton and Dr. W. E. Williams is very similar to that which applies to a case I have had under observation for the last two years. The patient, a man of 80, who is wonderfully active for his age, has for two years been subject at intervals of some months to severe attacks of pain situated in the umbilical region, on each occasion coming on after extra exertion, such as taking a longer walk than usual. During the first attack the pain was of a very severe character, and when I arrived at the patient's home he appeared to be in *extremis*, his body being covered with perspiration and his whole appearance such as to suggest that he had not many minutes to live. On examination, however, it was found that the pulse was not appreciably affected, and after the administration of morphine the pain subsided. This attack I at first considered to be due to indigestion brought on by over-exertion soon after a heavy meal, but subsequent attacks led me to suspect that the pain was very similar to that of angina pectoris, and suggested the treatment by nitrites, which has proved successful in giving relief. During the attacks there is a desire to defaecate, but no expulsion of faecal matter. I may add that there is evidence of arterial degeneration, but not more than advanced age would account for, and the urine is normal. There is no history of gout or plumbism.

Selby.

ARTHUR SOMERS, M.B., B.Ch.

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

### BRISTOL ROYAL INFIRMARY.

#### A CASE OF TRAUMATIC PNEUMOTHORAX.

(By RICHARD C. CLARKE, M.B., Ch.B. Bristol, M.R.C.S., L.R.C.P., House-Surgeon.)

DORIS M., a well-nourished child of 2, was brought into the casualty room at 3 p.m. on February 24th, 1912. The child had been playing in the road, and was run over by a baker's cart. She was brought straight up, and I saw her some ten minutes after the accident.

She was then very blue in the face, and was suffering from marked dyspnoea. Respirations about 80. On examination of the chest, except for marked retraction with inspiration, nothing abnormal was seen, neither did palpation reveal any evidence of fractured ribs. The apex beat of the heart was in the fifth space in the mid-axillary line. The chest was resonant all over, but the breath sounds differed considerably on the two sides. On the left side they were loud and harsh; on the right side, though by no means inaudible, the sounds were not half so loud. I failed to get the bell sound.

During the examination the child was becoming more and more dyspnoeic, so I sent for an exploring needle, and fitting a rubber tube on to it I pushed it into the chest on the right side in about the fifth space in the anterior axillary line. The end of the rubber tube was placed in a bowl of water. There was a continuous gush of air lasting about five minutes, with quite a miraculous effect on the condition of the child. The colour immediately became good and the respirations dropped to 50. The apex beat at the same time came back to the nipple line. When the continuous stream of air from the tube had stopped, with each expiration there was a gush with no intake of water from the tube at inspiration. After watching this for about half an hour I squeezed the rubber tube. This had the effect of causing dyspnoea with migration of the apex beat towards the axilla. On letting go, the rush of air was continuous and at high pressure. I then substituted for the exploring needle an ordinary intravenous cannula, on account of its larger calibre and blunt end, and the child was admitted under the care of Mr. Walters.

During the afternoon and evening some 2 oz. of blood was blown out of the tube and the child suffered considerably from shock. The respirations remained at 50. On the next day there was still a large amount of air coming out of the tube with each expiration, so it was decided to leave the tube in. The condition of the child had improved considerably.

On the next evening, as there was very little air coming out, the tube was removed. This was exactly fifty hours after the accident. The child seemed distressed at first but soon settled down. There was now some bronchitis on the left side with distant breath sounds on the right side.

From this time the recovery was uninterrupted and, when the child left the hospital three weeks after, there were no abnormal physical signs in the chest. I have lately seen her, and she is now quite healthy and getting stronger every day.

The point of interest in this case is the large amount of air which leaked out of the lung at each inspiration. This, I think, shows that the tear was most probably in one of the larger bronchi, as there was so little haemorrhage. Had the tear been in the substance of the lung, it would have to be so large to let out so much air, that death would have been caused by haemorrhage. Another point of interest is the extraordinary immediate improvement after letting the imprisoned air out of the chest.

I am indebted to Mr. Walters, assistant surgeon to the infirmary, for permission to publish this case.

proceedings, and that the suggestion that he was responsible for the hanging of the two women is not in accordance with the facts of the case as reported at the time.—I am, etc.,

London, E.C., May 4th.

MALCOLM LETTS.

## Universities and Colleges.

### UNIVERSITY OF LONDON. KING'S COLLEGE.

#### Special Lectures in Physiology: Heredity.

A COURSE of four lectures on heredity considered from the point of view of physiology and pathology will be delivered by Dr. F. W. Mott, F.R.S., in the Physiological Laboratory, King's College, London, at 4.30 p.m. on the following Mondays: May 20th, June 3rd, 10th, and 17th.

The following is a synopsis: Heredity, variation, and evolution. The morphological basis of heredity. The cell theory and reproduction. Cell growth and reproduction as studied in living organisms. Loeb's studies in parthenogenesis. Weismann's theory of the continuity of the germ plasm. The chromosome theory and its application to the inheritance of disease. Galton's law of ancestral inheritance. The Mendelian doctrine of inheritance. The transmission of acquired characters in relation to the inheritance of disease. Modes of transmission of heritable diseases. Sex limitation in transmission. Stability of the germ plasm and elimination of poor types.

These lectures are free to all members of King's College, London, to internal students of the University of London, to medical students at London medical schools, and to medical men on presentation of their visiting cards.

#### LONDON SCHOOL OF MEDICINE FOR WOMEN.

SCHOLARSHIPS of the value of £60 per annum for three or five years, and £30, will be awarded on the result of an examination to be held on May 28th and following days, for the course of medical study beginning October next. Forms of entry must be sent before May 21st to the Secretary and Warden, from whom all particulars can be obtained.

#### APOTHECARIES' HALL OF IRELAND.

THE following candidates have been approved at the examinations indicated:

FIRST HALL (all subjects).—J. A. Wilson.

SECOND HALL (all subjects).—C. E. R. Norman.

THIRD HALL (Practical Pharmacy only).—D. McLaughlin, T. J. Magill, P. O'C. White.

FINAL (all subjects).—C. E. R. Norman, L. A. Hynes, T. J. Magill. (Medicine only): J. Boyce, M. Keogh. (Midwifery and Gynaecology only): M. Keogh.

## The Services.

### ROYAL NAVY MEDICAL SERVICE.

#### NEW MEDICAL SCHOOL AT GREENWICH.

THE new Royal Naval Medical School at Greenwich College was opened on May 1st by Admiral H.S.H. Prince Louis of Battenberg, G.C.B., G.C.V.O., K.C.M.G., the Admiral-President of the college. The Medical-Director-General, R.N. (Admiral Sir John Durnford), and members of the committee and the teaching staff of the Dreadnought Seamen's Hospital and the London School of Tropical Medicine, who are giving material and most valuable assistance in the work of the school, were also present.

Prince Louis congratulated the newly entered acting surgeons, and said that it was most necessary to the efficiency of the service that they should fully avail themselves of the increased advantages now afforded by this school.

It owes its inception to the recommendations of the recent Durnford Committee. The central idea underlying the scheme is that naval medical officers should be enabled to keep more closely in touch with all that is best in professional life in London.

The new pathological laboratory occupies the Queen Anne block of Greenwich Hospital buildings. This has been completely and carefully rearranged with a view to efficiency and convenience. The fittings and appliances leave nothing to be desired, and the laboratory as a whole is a most satisfactory and up-to-date establishment. The private research rooms, the museums, and the well lighted and perfectly equipped class room, with accommodation for twenty-six students, particularly attracted attention. There is ample room for all kinds of research work. The extensive and well known chemical and physical laboratories already existing at the college are, of course, ready to hand and will be fully utilized. The possibility of future expansion has also been fully considered and provided for.

MESSRS. SUMNER AND CO., of Liverpool, have issued a new catalogue which is exceptionally comprehensive, inasmuch as it includes drugs, pharmaceutical products, surgery sundries, instruments, laboratory appliances, and a series of vaccines and serums.

## Obituary.

### JAMES CHALMERS CAMERON, M.D.,

PROFESSOR OF OBSTETRICS AND DISEASES OF INFANTS, MCGILL  
UNIVERSITY, MONTREAL.

THE death of Dr. James Chalmers Cameron, Professor of Obstetrics and Diseases of Infants, McGill University, which occurred suddenly on March 16th, produced a profound sense of regret throughout the profession in Montreal, and, indeed, in every part of Canada to which the graduates of McGill penetrate. He had been for some time aware that his blood pressure was unduly high, and had somewhat moderated his daily work, but on the night before his death he visited a patient during a heavy storm then prevailing, and on his return home died almost instantaneously from cerebral haemorrhage. Dr. Cameron was the son of the late Rev. James Y. Cameron of Niagara Falls and was born in 1852. He received his early education at Upper Canada College, and in 1874 graduated in medicine at McGill University, where he was a Final Prize man. After serving as House-Surgeon at the Montreal General Hospital until 1877 he attended the Rotunda Hospital at Dublin, and afterwards studied in Berlin, Paris, and Vienna. He first occupied the Chair of Obstetrics at Bishop's College and became a Professor of Obstetrics and Diseases of Children in McGill College in 1886. He was accoucheur-in-chief of the Montreal Maternity Hospital, and saw it grow under his direction from very restricted quarters to its present condition as one of the largest and most important institutions of the kind in Canada. He was President of the Section of Pediatrics at the Pan-American Congress in Mexico in 1886, a Fellow of the American Gynaecological Society and a member of the Royal College of Physicians of Ireland. He was an accomplished physician and as a lecturer he was remarkable for fluency of speech and lucidity of statement. He made many contributions on obstetrics and medical jurisprudence especially to the *Montreal Medical Journal* and to the *Journal of the Canadian Medical Association*. He was always genial and never failed in generosity to the young practitioner. He was an accomplished German scholar and acted as medical examiner for the German army in Canada. He was himself surgeon to the Prince of Wales's Fusiliers. He held a high rank in Masonry and was Master of a lodge in connexion with McGill which was to have been dedicated on March 29th. He leaves a widow and one son.

WE regret to announce the death of Dr. JOHN WYMAN, of 22, Nottingham Place, W., which took place on May 1st at the age of 66. He leaves a widow, a son, and a daughter. He was educated at Epsom College, and subsequently entered as a student at St. Bartholomew's Hospital; he obtained the M.D.Lond. in 1873, and was later resident physician at the West London Hospital. Dr. Wyman volunteered for the English ambulance in the Franco-Prussian War, and saw much active service. He had all the qualities necessary for the attainment of a high position in his profession, but, owing to his inheritance of John Wyman's wholesale druggist business, he turned to a more lucrative occupation. Nevertheless, Dr. Wyman always maintained a keen interest in the advancement of medical science, and showed a sound judgement and an analytical mind in the discussion of medical questions of the day. He was a keen lover and connoisseur of art in its higher form. In religion the late Dr. Wyman was a Positivist, and was averse to all mysticism, form, and ceremony. Sincerity was the keynote of his character. A service was held in the chapel of the Crematorium at Golder's Green on Saturday afternoon, May 4th, and was attended by a large number of medical and other friends.

WE regret to record the death of Dr. WILLIAM VALENTINE BIRD, a medical man who at one time was a frequent contributor to the medical journals, and reproduced work of this order in a volume entitled *Contributions to Practical Medicine*. He received the M.D. of King's College, Aberdeen, in 1855, and four years later became M.R.C.S.Eng., L.R.C.P.Lond. He was also a Member of the latter college, being admitted thereto in 1878. In the early part of his career Dr. Bird was in practice in the North of England,

where he held office as Physician to Bootle Infirmary. Later on he established himself at Brighton, and finally at Kew. During his work in the metropolis he held office on the staff of the Infirmary for Children at Sydenham. Since his retirement from practice, which took place a good many years ago, he had lived in Kensington, and there died at an advanced age on May 1st.

Dr. WILLIAM COULTER of Calcutta died at his residence, Highwick, near St. Albans, on April 22nd, at the age of 64, after a long illness. He was the son of Rev. George Bartlay Coulter, vicar of Frankford, Castleblayney, Ireland, and was educated at Belfast and at Trinity College, Dublin. He took the degrees of M.D., M.Ch., Royal University of Ireland, in 1870, and became a member of the Royal College of Surgeons of England in 1871. He went out to India in 1873, and for seven years practised in the tea district in Cachar. He then returned to London and spent three years in strenuous post-graduate work at St. Thomas's Hospital and the Moorfields Hospital. In 1884 he started in practice at Calcutta. At that time there was no well known non-official doctor there, and it was uphill work for an unknown man to acquire a practice. In a few years, however, Dr. Coulter was doing well. He subsequently took into partnership Mr. Arnold Caddy, and when Dr. Coulter retired from practice in 1903 he was doing one of the largest practices, if not the largest practice, in Calcutta. He had a very large circle of friends, and his retirement was much regretted. He had unbounded energy, and never shirked hard work. His geniality and Irish humour contributed to his success no less than his professional skill and ability. He was a man of keen intellect, and of an open and frank nature. He was always straight and honourable in all his dealings with his fellow men. He has left a widow, and one son, Mr. W. H. Coulter, who has recently been gazetted to the Fifth Lancers.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. Elie Lambotte, one of the leading surgeons of Belgium, who had been Surgeon to the Bon Pasteur Hospital, Brussels, for more than twenty-five years, author of several monographs on the treatment of diseases of the stomach by operation, and other surgical works, and an Honorary Fellow of the Royal College of Surgeons of England, in his 56th year; Dr. Louis Lande, Professor of Forensic Medicine in the Medical Faculty of Bordeaux and President of the French Medical Association, in his 69th year; Dr. Adolph Sieligmüller, Extraordinary Professor of Neurology and Psychiatry in the University of Halle, and author of numerous monographs and other contributions to the literature of his special province of practice, aged 75; Dr. Leopold Thumim, a well-known gynaecologist of Vienna, formerly assistant to Leopold Landau; Dr. Unverricht, sometime Professor of Clinical Medicine in the University of Dorpat; Dr. Paul G. Freer, Director of the United States Scientific Bureau in the Philippine Islands and Dean of the Philippine Islands Medical School, aged 50; Dr. L. N. Warneck, Surgeon-in-Chief to the Pirogoff Municipal Hospital, Moscow, and a well-known gynaecologist; Dr. Theodor Gies, Extraordinary Professor of Surgery in the University of Rostock, in his 67th year; and Dr. Sigmund Mirabeau, of Munich, a well-known gynaecologist.

## Medico-Legal.

### A DEBT COLLECTING AGENCY.

A CASE, justly described by the prosecuting counsel, Mr. H. C. Dickens, as of considerable importance to the medical profession, was heard at the Wandsworth County Court on April 30th. The plaintiff was Dr. Ritchie, of the Greys, Cavendish, Suffolk, and the defendants were the South-West London Tradesmen's Provident Society, Ltd., whose registered office is in Balham High Road, Balham. The claim, Mr. Dickens said, was to recover 4 guineas which had been received by the defendants on behalf of plaintiff and for an account. The case would not be defended. The South-West London Tradesmen's Provident Society carried on business by very grandiloquent methods of advertising and under a grandiloquent title; but, as a matter of fact, their registered office proved to be over a small jeweller's shop, and the busi-

ness was carried on by two gentlemen named Rackham and Cook. These people had apparently been successful, by means of advertisements, in obtaining a considerable amount of money from various persons throughout the country. The promises they made in return for a guinea were very generous indeed. Those who paid the guinea were entitled for the rest of their lives to advice on any matter free of charge; to solicitor's advice on all legal matters, etc. A bait was held out to medical men—particularly those resident in remote parts of the country—in the form of appointments as medical officers for the society. There was a further branch of the society in which the plaintiff was more especially concerned, and that was the debt-collecting department. Not only did the society collect debts, but it did not hand them over. An enormous number of complaints had been received against the society. There had been warnings about it in the medical journals and in *Truth*. Dr. Ritchie, who practised at Cavendish, Suffolk, got in touch with the society in 1910. He placed in their hands a list of debts he wished to have collected, amounting to £17 19s. 6d. Later he heard the society had recovered certain debts, and he wrote on several occasions for the money that had been collected. He received no answer, however, until March 17th, 1911, when they admitted having collected the sum of four guineas. He wrote again and again for the four guineas, and then placed the matter in the hands of the Medical Defence Union, of which he is a member. The Union wrote several letters, and, receiving no satisfactory reply, placed the matter in the hands of their solicitors, Messrs. Hempson, who wrote both to Cook and to Rackham, and received a reply to the effect that it should receive prompt attention. The defendants sent in what they called a statement of accounts, showing that £4 17s. had been collected, and claiming commission on £17 4s. 6d., which they said had been withdrawn by the plaintiff. The Registrar had made an order for interrogatories and another for discovery, but neither had been complied with, and the defendants had placed themselves open to attachment for contempt of court. The defendants evidently had no intention of coming into court, and had done their best to prevent publicity, for on Saturday Rackham came to the court with four guineas and the costs of the summons. They did that to avoid publicity, which he (counsel) hoped the case would bring upon them. It was impossible to say what had been collected on plaintiff's behalf.

His Honour agreed the defendants had done all they could to prevent the matter coming into court. They seemed to rely on the fact that probably it would not be worth while for people from whom they had obtained money, or on whose behalf they had received money, to commence proceedings against them. He would therefore give judgement for the plaintiff for the amount paid into court and for an account, also an order for an injunction restraining the defendants from collecting further debts on plaintiff's behalf, and for a mandatory injunction ordering the defendants to return to the plaintiff all papers of his in their possession. He (the judge) would award costs on Scale C.

## Public Health AND POOR LAW MEDICAL SERVICES.

### REPORTS OF MEDICAL OFFICERS OF HEALTH.

*City of York.*—The population of the City of York at the last census was 82,297, or about 6,000 less than the estimate of the Registrar-General. The birth-rate in 1910 was 24.1 per 1,000, the death-rate from all causes 12.7 per 1,000, and the infantile mortality-rate 94 per 1,000 births. In the preface to the report Dr. Edmund Smith refers to the delay in its issue, which he states is partly due to the fact that the first six months of the year are in many ways the busiest part of the year in a public health department. It is convenient that new schemes and new methods of administration should come into being at the beginning of a calendar year, but it would be an advantage if a longer notice were given of such schemes and methods. The Housing, Town Planning, etc., Act, for example, came into operation on December 3rd, 1909, with all its vital alterations, and, as a consequence, many of the proceedings in connexion with insanitary dwellings had to be recommenced *de novo*.

*City of Coventry.*—The population of Coventry at the last census was 106,377, an increase of 36,399 on that recorded in 1901. The birth-rate in 1910 was 26.2 per 1,000, and the death-rate from all causes 11.4 per 1,000. Dr. Snell points out that if the death-rate recorded in 1900—namely, 17.5 per 1,000—had prevailed in 1910 there would have been no less than 622 more deaths in the latter year. Taking these lives at the low value of £150 each, which was the value placed upon the life of an agricultural labourer by the late Dr. Farr, there had been a gain to the city of Coventry of a capital value equal to £93,330 through the reduction in the death-rate due to the improved sanitary conditions which had been brought about. In no part of the city was the death-rate in 1910 unduly high. The highest rate—15.7—was in the Cheylesmore ward, while in Stoke it was 10.0 and in Hearsall only 7.0 per 1,000, both of these districts having a rapidly growing population.

## Medical News.

QUEEN ALEXANDRA has appointed Dr. Harold R. D. Spitta, D.P.H., to be bacteriologist to Her Majesty's household.

PRINCE DAMRONG, Minister of the Interior in Siam, has recently founded a Pasteur Institute in memory of his daughter who died of hydrophobia.

THE lectures and demonstrations for the summer term at the Hospital for Consumption and Diseases of the Chest, Brompton, will commence on Wednesday, May 22nd, at 4 p.m., and continue weekly until Wednesday, July 24th.

FOR the present session of the London School of Tropical Medicine fifty students have entered, including ten for the advanced courses in protozoology, entomology, and helminthology.

THE Cavendish Lecture of the West London Medico-Chirurgical Society will be delivered by Professor Karl Pearson, F.R.S., at the Kensington Town Hall, on June 21st. The subject will be Darwinism, Medical Progress, and Eugenics.

DR. CARMICHAEL (Boddam), on the occasion of attaining his semi-jubilee as a medical practitioner, was, on April 26th, presented with a purse of sovereigns; at the same time he, along with Mrs. Carmichael, was presented with a silver rose bowl.

THE annual general meeting of the Asylum Workers' Association will be held at 11, Chandos Street, W., on Wednesday, May 22nd, at 3.30 p.m. Among the speakers will be Sir William J. Collins, M.D., and Sir Robert Jardine, K.C.I.E., M.P., president and president-elect of the association respectively.

MR. HENRY HOLDEN, a member of the firm of Holden Brothers, 3, Harewood Place, W., has published a seventh edition of a pamphlet by himself on the nature, causation, and treatment of splay-foot, in which the subject is interestingly set forth from the point of view of an instrument maker.

DR. EMMA SLATER, 33, Chepstow Villas, W., informs us that applications for the Dr. Edith Pechey Phipson Post-Graduate Scholarship for medical women, value £40, should be sent to her by the end of this month, and that information concerning it can be obtained by prospective candidates on application to her.

THE following official correction of a passage in the Final Report of the Royal Commission on Vivisection has been sent to us for publication: At page 17, line 44, for "We now see a marmot, the spinal cord of which had previously been divided by a vivisector," read, "We once saw a marmot, the spinal cord of which had previously been divided, bite a vivisector."

AS the question of petrol consumption is one of importance to medical men, we may note that at the recent Herts County A.C. trial the first and second prizes were won by the De Dion Bouton cars driven by the owners. The cars had been in use—in the case of the first prize four years and in the second eight years. The consumption of the first was at the rate of 48.7 miles per gallon.

WE have received from Messrs. Wratten and Wainwright, of Croydon, a sample of their new "London" x-ray gelatine plates. They are, we are informed, the final result of a series of experiments made with the object of increasing the speed of the emulsion, and the claim is made for them that they give not only good density and contrast but an appreciable increase in sharpness of definition in fine detail. A trial exposure with the plates certainly seems to bear out these claims. The plates are remarkable for their fastness; they give good contrast, and are easy to work.

A VERY successful nursing and midwifery conference was held at the end of April in the Technical Institute of the London County Council in Vincent Square, the proceedings lasting four days, and including papers by Dr. Jane Walker and several other well-known members of the medical profession. In connexion with the conference an exhibition of preparations and appliances specially intended to facilitate nursing was also held, its most interesting feature being the stall of our contemporary the *Nursing Times*. On this were exhibited about a hundred appliances devised by nurses, which had been sent in competition for certain prizes and medals offered by the publishers of the journal in question.

THE Society of Tropical Medicine and Hygiene held a very interesting laboratory meeting at the Royal Army Medical College, London, on March 15th. The *Transactions* of the society for April, 1912, gives an account of the specimens shown there. Dr. Carr described an ulceration noticed in Persia in the discharge from

which spirochaetes were abundant; Dr. Cropper a rapid method of diagnosis in malaria; and Fleet Surgeon Bassett-Smith, C.B., *Schistosomum japonicum* infection in a European. Dr. Carnegie Brown showed specimens of human entamoebae, and Dr. G. C. Low showed a series of sections demonstrating the development of the *Filaria emmisis* in the Malpighian tubes of the *Anopheles maculipennis*. Further demonstrations were given by Dr. Kerr, Sir William Leishman, the President; Captain Kennedy, Major Harrison, and Captain Bousfield. A feature of the meeting was the excellence of the specimens exhibited, some of these being unique and of the greatest interest.

WE are informed that a medical reference bureau in Berlin, under the management of a medical director and a staff of thirty medical men, is prepared to supply the profession with information in regard to publications on medical subjects. The practitioner can obtain extracts of articles, the titles of all articles on specified subjects, with or without a brief summary of the contents, translations, and similar assistance. The bureau has been in existence for about a year. The fees appear to be moderate, and while we are not in a position to state whether the work is well done or not, the scheme appears to us to be one which ought to be useful. The bureau is prepared to deal with medical men of all countries. Applications for terms, etc., should be made to Oberstabsarzt D. Berger, Medizinisch-literarische Zentralstelle, Berlin-Friedenau, Knaustrasse 12.

AT an inquest which took place in Stockport on May 6th the death of the deceased was shown to be due to a scratch in the nostril received from a hatpin protruding from the bonnet of another lady. The precise cause of the scratch was that both ladies stooped simultaneously to pick up a child which had fallen. The coroner took occasion to address to the jury certain remarks on the "deadly hatpin." There must be undoubtedly, he thought, a large number of cases in which such pins had caused injury, including loss of sight. Possibly the Legislature should endeavour to stop the danger by a statute imposing fines on people who used excessively long and unprotected hatpins; or possibly local authorities should secure the passage of a by-law to prevent their use. In any case, women should take the greatest care that no one was injured by anything they wore in their hats. The hatpins now in use varied from 8 to 15 in. in length, and it was no uncommon thing to see the extremity of one protruding three or four inches from the hat. They were very dangerous, especially in trams and trains, and when people were crowded together in any circumstances. In several cities in America injuries from hatpins had resulted in legal proceedings, and in Hamburg ladies were compelled by law to cover the points of hatpins by shields. The present case was an object lesson which showed that something of the kind should be done in Great Britain.

JUDGING from a report recently published by the British Fire Prevention Committee, the crusade against inflammable flannelette has not hitherto met with any marked success. No doubt mothers and children's nurses are somewhat more alive to the fact that flannelette catches light with facility and burns with great rapidity, but there seems to be a tendency on the part of certain manufacturers to endeavour to increase the sale of their goods by assigning doubly misleading names thereto. The report in question deals, for instance, with two samples of flannelette forwarded by the National League for Physical Education and Improvement and carefully tested by the Fire Prevention Committee. In both instances the tissue was flannelette of the "fine finish" variety, one a red twill and the other a plain blue flannelette. They were sold at somewhat high prices, and were put forward under titles indicating that they were safe to use. As many as 78 yards of these flannelettes were tested one by one, but in every single case the specimens caught fire when a flame was held beneath their lower edge for a few seconds, and as many as fifty-six of the samples were entirely consumed during the minute that each test lasted. In fact, the largest proportion of flannelette that remained in any instance at the end of one minute was one-third of the original length. In view of the fact that the fluffed-out cotton stuff known as flannelette affords something of the warmth of real flannel so long as it is comparatively new, and yet can be obtained at a relatively low figure, the Legislature could probably not altogether abolish its use even if this were desirable. It might, however, prevent the use of a word which gives a false idea of the constitution of this material, and should certainly authorize the establishment of a standard of inflammability, and make the sale of any flannelette as a "safe" flannelette an offence if such tissue failed to come up to the standard of inflammability.