

CASE III.—*Acute Hepatitis, in a Patient who could not take Ipecacuanha by the Mouth, Rapidly Cured by Emetine Hydrochloride Hypodermically.*

A European lady who had been suffering from fever and pain over the liver for ten days had had an attack of dysentery some two months before. Widal tests for typhoid and paratyphoid were negative. Ipecacuanha was now given by the mouth for three days, with the result that the hepatic pain became less and the temperature declined to a lower level.

On account of the great nausea and vomiting she now refused to continue the ipecacuanha, and during the next three days the temperature rose steadily to reach 103° F. in the evenings, and the hepatic pain recurred. At this period I was asked to see her in consultation, and injected one-third of a grain of emetine hydrochloride in the afternoon. The temperature fell steadily during the next twenty-four hours to 100° F., and the pain had also disappeared. I now gave a second injection of half a grain, equal to 45 grains of ipecacuanha. No vomiting, and practically no nausea, was caused by these doses, and her medical attendant reported to me that she was much better.

Four days later I was again asked to see her, as the temperature had once more risen to 103° F., and it was feared that liver abscesses would result if the disease was not quickly cured. I repeated the former doses on that and the following day, and the temperature declined steadily, to reach the normal in three days, when two more similar doses were given to guard against any recurrence, and no more fever or other trouble has occurred.

Emetine hydrobromide may also be given subcutaneously, but is not quite so soluble as the hydrochloride.

In view of the strikingly good results obtained in these three cases, which are illustrative of the most important types of amoebic disease, and in each of which the administration of ipecacuanha by the mouth was impracticable, I venture to think that no apology is needed for bringing this method of treatment to the notice of physicians in the tropics without delay. Should further results fulfil the great hopes raised by the successes above recorded, it will be difficult to exaggerate the boon which will be conferred on the numerous sufferers from the intractable and deadly amoebic form of dysentery and its very serious hepatic complication.

Memoranda :

MEDICAL, SURGICAL, OBSTETRICAL.

ON THE GENESIS OF THE VENOUS PULSE.

I AM sorry not to have replied earlier to the letters of Dr. Wilkinson and Dr. Verdon which appeared in the JOURNAL of May 4th, but my absence from home prevented my attending to them.

Dr. Wilkinson says that the *a* wave of the venous pulse ought to be greater in the vertical position, if my suggestion that it is an inertia wave be true, "for then the inertia of the column of blood in the vein is augmented by the effects of gravity." He forgets, however, that the amount of blood which comes down from the head depends on the amount which goes up, and gravity opposes its going up in the arteries quite as much as it encourages it to come down by the veins, and consequently has no resultant effect on the flow. The second part of Dr. Wilkinson's letter is probably correct, but I was not discussing in my communication what takes place in abnormal conditions, such as the instance he gives when the auricle and ventricle contract together, where, obviously, if the auricular contraction be forceful enough to effect anything it must be a regurgitation.

Dr. Verdon definitely states that the blood "stream is swifter" in the jugular vein in the upright position than in the recumbent. Whether this statement is based on observation or inference I do not know, neither can I judge whether Dr. Verdon means that more blood comes down the jugulars in the erect than in the horizontal position. A "swifter" flow may go with less blood if the jugulars are contracted. If more blood comes down more must have gone up, and it would seem on this supposition that a fainting person gains nothing by lowering the head, which is contrary to experience.

Whatever the origin of the *a* wave the horizontal position is likely to develop it, since the tone of the vessels relaxes, and oscillations in them are far more easily produced. Moreover, the acclivity and declivity of the *a* wave is not necessarily steep, as Dr. Verdon maintains it would

be if it be caused by inertia and the block be sudden. The steepness depends chiefly on the yield of the jugular, which is gradual, the oncoming blood being stored in it as it arrives.

The jugulars commonly dilate considerably on lying down, and are capable of much bigger oscillations, to which rather than to auricular regurgitation is to be attributed the exaggerated appearance of the *a* wave in the horizontal position.

Clyst St. George, Devon.

D. W. SAMWAYS.

REPEATED BREECH PRESENTATIONS.

I READ with interest Dr. Hott's letter, *re* breech presentation.

Last year I was called in to see a woman in labour (I had never seen her before), and on arrival I found her sitting on the edge of the bed suffering from a great fit of depression. On inquiring the cause, she informed me that her three previous confinements had been breech cases, the children dying immediately after birth; she also said she felt convinced that the coming child would be a breech presentation and would die like the rest, hence her depression.

On examination, I found that there was a breech presentation, and, to cut the story short, I delivered her of a male child, which, after some artificial respiration, took to life with great gusto, and is now as fine a baby as it is possible to find. The patient informed me that her first-born (now some 8 years old) was a normal head presentation, but that all the others were breech presentations.

Cosham, Hants.

H. TAYLOR MORGAN, M.D.

British Medical Association.

CLINICAL AND SCIENTIFIC PROCEEDINGS.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.

Swansea, April 25th, 1912.

Dr. BIDDLE, President, in the Chair.

Plumbism.

DR. ARBOUR STEPHENS read a paper on plumbism. He said that, as appointed surgeon under the Factory Act for lead processes, he had had considerable opportunities of observing men employed at lead works, their dangers, and the consequences. The symptoms were more or less classical and fairly well known. One symptom he would draw attention to, because it was unreported but had been observed by himself, was a tenderness over the sciatic nerve in its lower third, the upper part being practically free from such tenderness. The difficulty was to decide in a large number of cases what part alcohol had played. *Mode of admission*: (1) *Skin*, said to have occurred by the use of cosmetics; (2) *lungs*, which Dr. Goadby has tried by experiments to prove is the main one, but with which Dr. Arbour Stephens could not agree; (3) *stomach*, into which lead got by eating food with dirty hands, chewing, cigarette smoking, and suchlike methods. The foremen and undermanagers never got plumbism. The test for KCNS in the saliva was interfered with if the man had been eating any sugary material. All persons working before furnaces developed a red line on the gum, and on this red line the lead was readily deposited. What was the origin of this red line? Was it inflammatory? Prevention could be brought about by cleanliness as to food and other habits. Cigarette smoking ought to be stopped, and chewing was most injurious. The rotten teeth should be removed, as they tended to give rise to gastritis. A preliminary gastritis by the accompanying increase of absorbing surface tended to produce absorption of lead, and so hastened an "attack." The plentiful supply of fruit last summer increased the number of cases of lead colic. The blue line was nearly always preceded by a red one, which was always found with furnace men. The best treatment for the early stages of plumbism was by means of the internal administration of calcium permanganate.

of Health for the district of Tottenham. A Tipperary man, he entered the medical profession in 1889 as a holder of the Scottish Conjoint diploma. But before this he had been a student in the Faculty of Arts of the Royal University of Ireland, receiving the B.A. degree in 1887, and his studies did not cease with his attainment of a medical qualification. Working in turn in Ireland, London, and on the Continent, he became D.P.H.Camb. in 1893, M.D.Brux. in 1894, LL.B. of the Royal University of Ireland in 1904, and then, some twelve years later, M.D.Durh. and LL.D. of his own university. Meantime, too, he had been admitted to the Bar as a member of Gray's Inn, and had obtained in Scotland and Ireland exhibitions in jurisprudence and hygiene. His official connexion with Tottenham commenced some ten years ago, and he served the district not only as Medical Officer of Health but also as Medical Officer to the Education Committee. At one time and another he published a good many papers and two or three books on subjects connected with his special department of medicine. He was a member and Fellow of many professional associations, including the British Medical Association, the Royal Society of Medicine, the Society of Medical Officers of Health, the Medico-Legal Society, the Association of School Medical Officers, and the Royal Sanitary Institute. The interment took place at St. Patrick's Cemetery, Leytonstone, on June 1st, a Requiem Mass being held at the Church of St. Francis de Sales on the same day. Dr. Butler-Hogan was married, and is survived by his wife and by five daughters.

Universities and Colleges.

UNIVERSITY OF CAMBRIDGE.

Degrees.

THE following degrees have been conferred :

- D.Sc. (*Honoris Causa*).—F. H. Marsh.
M.D.—R. L. Prenlen, W. W. Jendwine, M. Phillips, H. H. Riddle, A. E. Shaw.
M.B.—H. W. Barber, H. G. Boyens, G. G. Johnstone, A. W. Gaye, N. F. Lock, P. A. O'Pie.
B.C.—H. G. Boyens, A. W. Gaye, N. F. Lock.

Honorary Degree of D.Sc. for the Master of Downing.

The Public Orator, Sir John Sandys, spoke as follows in presenting Professor Howard Marsh, Master of Downing College, for the complete degree of Doctor of Science *honoris causa* on June 13th, 1912 :

Adest Collegii recentissimi Magister novissimus, quem hodie propterea inter benefactores nostros posuerim, quod ad Doctoris gradum perfectum iure dignitatis voluit accedere; qui honos non modo ipsi laudi est, sed etiam Academiae aliquatenus lucro et emolumento. Abhinc annos prope novem eundem, Chirurgiae Professorem auspiciis optimis electum salutavimus; virum ingenio vivo, iudicio subacto, rei chirurgicae denique scientia singulari praeditum laudavimus. Postea a Collegio Regali socium electum vidimus, atque abhinc annos quinque a Collegio illo Magistrum expetitum, quod olim fundavit Georgius Downing, baronetus. Ibi, adiutricis optima non sine auxilio, omnia Magistri munera comitate summa explevit. Idem, in oppido nostro et Magistratus et Universitatis nomine Consiliarius constitutus, ne Martis quidem munera neglexit, olim pro patria etiam proeliari paratus. Viro tali, ut vitae suae totius propositum verbis idoneis exprimat, licet fortasse locum quandam Tullianum celeberrimum mutuari et suos in usus mutare:—cara nobis est Chirurgia; cara Collegia nostra; cari propinqui et familiares; "sed omnes omnium caritates patria una complexa est."

Duco ad vos et militem et magistratum et Magistrum optimum, virum scientiarum laude insignem, FREDERICUM HOWARD MARSH.

* Cicero, *De Officiis*, i, 57.

Examinations.

The following candidates have been approved at the examinations indicated:

FIRST M.B.—*Part I, Chemistry*: G. H. Bickley, J. M. Downie, A. G. Irving, E. G. Snaith. *Part II, Physics*: W. H. Blackburn, A. G. Irving. *Part III, Elementary Biology*: W. H. Blackburn, C. V. Braimbridge, F. T. Burkitt, A. E. Clark Kennedy, J. M. Downie, E. O. Goldsmith, A. G. Irving, H. J. T. Neilson, G. S. Taylor.

THIRD M.B.—*Part I, Pharmacology and General Pathology*: J. H. Baldwin, W. N. Child, M. Donaldson, H. A. Douglas, A. G. Evans, J. C. John, A. Kennedy, W. M. Lupton, E. L. K. Sargent, V. F. Soothill, D. L. Spence, H. A. Watermeyer.

M.C.—J. L. Austin, F. J. Cleminson.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

AN Ordinary Council was held on June 13th, Sir Rickman John Godlee, Bart., President, in the chair.

Diploma of Fellowship.

Diplomas were granted to twenty-five candidates found qualified for the above. Three further candidates passed the examination, but, being under age, diplomas were not granted to them.

Diploma of the Licence in Dental Surgery.

The diploma was granted to forty-three candidates.

Practical Anatomy.

A committee was appointed to inquire into the difficulties that have arisen with regard to obtaining bodies for purposes of examination and dissection and for the teaching of operations, with power to confer with the teachers of anatomy and with other bodies.

Communication from the Deans of Dental Schools of London.

The following communication was read:

On behalf of the four Dental Schools in London, we the undersigned ask the Royal College of Surgeons to so alter the regulations relating to the Diploma in Dental Surgery of the College that the Preliminary Science Examination shall be passed by all candidates before they commence any portion of the work required for the Second Professional Examination.

SIDNEY SPOKES, Dean, National Dental Hospital.

WILLIAM WRIGHT, Dean, London Hospital.

HERBERT L. EASON, Dean, Guy's Hospital.

W. H. DOLAMORE, Dean, Royal Dental Hospital.

The matter was referred to the Board of Examiners in Dental Surgery to consider and report thereon.

Addresses of Congratulation.

The President was requested to present an address of congratulation to Trinity College, Dublin, on the occasion of the bicentenary festival of its Medical School next month; and also an address of congratulation to the Royal Society on the celebration next month of the 250th anniversary of its foundation.

Election of Four Fellows into the Council.

A meeting of the Fellows will be held at the College on Thursday, July 4th next, for the election of four Fellows into the Council of the College in the four vacancies occasioned by the retirement in rotation of Sir Frederic Eve, Sir Anthony A. Bowlby, and Mr. Gilbert Barling, and by the death of Sir Henry T. Butlin.

The full list of candidates is:

- Sir Frederic Samuel Eve (Fellow, 1878).
Sir Anthony Alfred Bowlby (Fellow, 1881).
Harry Gilbert Barling (Fellow, 1881).
James Ernest Lane (Fellow, 1882).
D'Arcy Power (Fellow, 1883).
Louis Albert Dunn (Fellow, 1884).
Sir Berkeley Moynihan (Fellow, 1890).

Revised Synopsis in Dental Surgery.

The Board of Examiners in Dental Surgery report that in their opinion the time has now come when it is desirable that the synopsis of surgery and surgical pathology for the final examination adopted in 1905 should be revised. The Board have accordingly carefully considered the synopsis and have decided to recommend the Council to adopt the following revised synopsis, which adds very little to the scope of the examination, but arranges the subjects more systematically.

The Board further recommend that the revised synopsis should come into force on May 1st, 1913.

Surgery and Surgical Pathology.

Micro-organisms.—Elementary knowledge of in their relation to pathological processes.

Inflammation.—Causes. Vascular and structural changes. Clinical signs and constitutional symptoms. Terminations.

Boil. Abscess. Carbuncle.

Ulceration.—Nature of process. Chief varieties of ulcers of skin.

Sinus and Fistula.

Gangrene.—Causes. Varieties.

Erysipelas.—*Sapraemia. Septicaemia. Pyaemia.*

Tetanus.—Cause and symptoms.

Tuberculosis.—Modes of infection. Changes in the tissues. Terminations. General principles of treatment.

Tuberculosis of Lymphatic Glands and of Bone.

Actinomycosis.—Modes of infection. Signs and treatment when occurring in head and neck.

Syphilis.—Modes of infection. Stages, symptoms, and treatment of acquired and congenital forms.

Haemorrhage.—Varieties. Arrest of haemorrhage.

Haemophilia.

Syncope. Collapse. Shock.

Wounds.—Classification. Process of healing. Treatment.

Fractures.—Causes, varieties, signs, and symptoms. Process of union. General principles of treatment. Signs and treatment of fractures of the bones of the face.

Joints.—General signs and treatment of dislocations. Special knowledge of dislocation of shoulder-joint and of temporomaxillary joint.

Blood Vessels.—Injuries of vessels and their consequences. Atheroma. Calcification of arteries. Causes and chief forms of aneurysm. Varicose veins. Thrombosis and embolism.

Nerves.—Results of injury to nerves. Common causes of paralysis. Neuritis. Neuralgia. Special knowledge of affections of the Vth and VIIth cranial nerves.

New Growths.—Meaning of terms "innocent" and "malignant." General structure and classification of tumours. Diagnosis and treatment of the more common tumours.

Cysts.—Varieties and classification. Diagnosis and treatment of cysts of the head and neck.

Diseases of Bones.—Periostitis, osteitis, osteomyelitis, caries, necrosis. Symptoms and treatment of diseases of the bones of the face.

Tumours of Bone.

Rickets.—Causes and signs. Changes in bone.

Scurvy.

Surgical Affections of the Head and Neck.—Wounds of head and neck. Cut throat. Foreign bodies in the air passage and in the food passage. Dysphagia. Dyspnoea. Laryngotomy and tracheotomy.

Diseases of the Lymphatic Glands in the Neck.

Diseases of Temporo-Mandibular Joint. Closure of Jaws.

Mouth and Lips.—Stomatitis—causes, varieties, symptoms, treatment. Salivary calculus. Ranula and other cysts of mouth. Hare-lip. Epithelioma. Herpes. Syphilis. Tubercle. Naevus. Papilloma. Cancrum oris. Oral sepsis; its influence in the causation of disease.

Tongue.—Glossitis, acute and chronic. Papilloma. Epithelioma. Ulcers. Gumma. Wounds of tongue.

Palate.—Cleft palate. Tumours of palate. Ulceration. Necrosis.

Tonsils.—Varieties of tonsillitis, diagnosis, consequences and treatment. Chronic enlargement of tonsils. Ulceration of fauces.

Gums.—Surgical affections, causes, diagnosis, and treatment.

Maxillary and Frontal Sinuses.—Surgical affections, causes, diagnosis, and treatment.

Nose and Pharynx.—Inflammatory affections. Ozaena. Polypi. Foreign body in nose. Lupus and syphilis of nose. Rodent ulcer of nose and face. Epistaxis. Adenoid vegetations.

Parotid and Submaxillary Salivary Glands.—Surgical affections.

Submaxillary Cellulitis.

Larynx.—Scald. Spasm of glottis. Oedematous laryngitis. Diphtheritic membrane in nose, throat, or larynx.

Neck.—Torticollis. Causes of stiff neck. Caries of cervical vertebrae. Cervical abscess. Bronchocele.

Eye.—Conjunctivitis. Iritis. Corneal ulcers and opacities. Ptosis. Strabismus.

Anaesthetics.—With special reference to their use in dental surgery. Preparation of a patient for the administration of an anaesthetic.

Artificial Respiration.

Admission to Fellowship.

The following candidates have been admitted to the Fellowship:

R. P. Wilson, Major I.M.S., L. Cook, Captain I.M.S., R. M. Carter, Captain I.M.S., G. H. L. Whale, E. D. Davis, H. F. Strickland, F. R. Flint, K. A. Lees, J. Everidge, R. W. Rix, C. C. Holman, A. L. Candler, A. C. Sturdy, G. G. Alderson, A. H. Richardson, D. Wood, E. G. Stanley, F. J. Cleminson, T. D. M. Stout, T. E. A. Stowell, J. P. I. Hart, E. E. Hughes, W. Phillips, A. L. Walker, and G. B. Warburton.

Three other candidates—namely, Messrs. T. T. Higgins, H. L. Martin, and A. L. Robinson—will be admitted so soon as they have attained the requisite age.

(a), and to ensure as far as possible the attendance of members of the constituent associations at the annual meetings as outlined in resolution (b). Attention was drawn to the forthcoming meeting of the Poor Law Medical Association at Bristol, on Tuesday, June 25th. The Committee expressed the hope that many practitioners holding part-time appointments will attend, when some important questions will be discussed. It was resolved that Dr. Major Greenwood be asked to bring up for discussion the desirability of establishing at Bristol a branch for the West of England.

Dr. Bott was again elected Chairman for the ensuing year, and Dr. Parkinson, of Wimborne, and Dr. D. A. Bellios were elected Honorary Treasurer and Honorary Secretary respectively.

THE ILFORD COUNCIL AND ITS M.O.H.

The *Ilford Recorder* of June 14th reports an incident at the meeting of the Ilford urban district council which the information so far made public leaves very mysterious. At the ordinary meeting of the council on June 11th a minute adopted by the council in committee was confirmed. It was to the effect that during last month Dr. C. F. Stovin, the medical officer of health, had caused a builder employed by him to lop or cut down a tree on certain premises of which Dr. Stovin was the owner, that the council had interviewed Dr. Stovin, and had thereafter passed a resolution stating that he had forfeited the confidence of the council and asking him "whether he is prepared to tender his resignation forthwith; failing which, a deputation apprise the Local Government Board of the full facts of the matter, with a view to determining his appointment as medical officer of health, school medical officer, and medical superintendent of the isolation hospital." Dr. Stovin, when informed of this resolution, stated that he would resign if required to do so by the Local Government Board. It appears from the report that a letter had been received by the district council from the Local Government Board asking to be furnished with a statement in writing of the full facts of the case. The chairman of the public health committee, who had not been present at the previous meeting, protested that the matter ought to be cleared up, and desired to know definitely whether the purpose was to hold an inquiry into all that was going on in the public health department. No definite public answer was given to this inquiry, but it would appear that the council afterwards considered the matter in committee. The *Ilford Recorder*, in commenting on the case, says: "It certainly is not usual in English public life to disclose to an uninformed public a piece of evidence so completely condemnatory of a man as to suggest the very worst, while withholding the actual data upon which the impressions of the censors have been based"; and every one will agree that whatever reasons the district council may have for inviting the resignation of its medical officer should be made public without delay. As Ilford has grown to be a big place with some 80,000 inhabitants, and Dr. Stovin is a whole-time officer, the seriousness of the position is obvious.

REPORTS OF MEDICAL OFFICERS OF HEALTH.

Borough of Dudley.—In the report for 1911 of the Medical Officer of Health for the Borough of Dudley (Dr. J. H. Wilkinson) the death-rate from all causes is estimated at 15.69 per 1,000, being a slight increase on the figures of the previous year. The increase was due to an epidemic of measles, which caused the deaths of 33 children and young persons. The birth-rate was slightly higher than in the previous year, being 27.5 per 1,000. During the year most valuable work has been done in extending the water-carriage system. The work of improving the cleanliness, dryness, and general sanitary condition of certain dwelling-houses has been attended with much difficulty at times, owing to the existence of much old and badly constructed property in the town, but many valuable improvements have been effected. An improvement scheme is much needed for dealing with some of the streets and courts in the centre of the town. A large proportion of the town consists of small cottages, originally bad in construction and design, and many of them are grouped in narrow streets and courts, without any sort of orderly method or arrangement. On the other hand, there are few back-to-back houses and practically no congested areas. The sanitary conditions of the schools have been much improved. A public abattoir would be of great benefit in protecting the people against diseased meat, but, in the opinion of the medical officer of health, it would be useless unless the council had the power to close all private slaughterhouses. The town council has not provided or assisted in providing any accommodation or treatment of consumption.

A NEW edition of the *Souvenir of Royal Tunbridge Wells* has been issued. It is now adorned by some admirable pictures of the town and its neighbourhood in colours as well as by reproductions of ordinary photographs. The text gives a good account of the attractions of the place both for visitors and residents. Copies can be obtained on application to the Town Clerk, post free in return for two penny stamps.

Public Health

AND

POOR LAW MEDICAL SERVICES.

JOINT COMMITTEE OF MEDICAL OFFICERS' ASSOCIATIONS.

WE are informed that a meeting of the above Committee was held at the Holborn Restaurant on Friday, June 14th. Owing to the unavoidable absence of Dr. Bott, Dr. Owen Fowler was voted to the chair. The Honorary Secretary submitted the two following resolutions from the Association of Medical Officers of Health:

- That the conjoint committee of the several associations of medical officers holding part-time appointments be requested to consider the advisability of organizing as quickly as possible local branches throughout the country of medical practitioners holding part-time appointments under Government and local authorities to work in conjunction with the central committee.
- That the conjoint committee be requested to consider the best means of securing at the annual general meetings of the constituent associations the attendance of members of other associations.

After a full discussion it was unanimously decided to take steps to organize branches as outlined in resolution

qualified medical man; but if you think he has told you the honest result of eighteen years' work after he had himself abandoned operation, and if you come to the conclusion that, as he says, he has not been making money by it at all, but rather the contrary, and he is a poorer man, of course you will be of opinion that there is no ground whatever for calling him a quack.

I am not going to read the article again, but I will only make three observations about it. It is not denied by Dr. Bashford, and he has been consistently fair about that, that he did mean to accuse Dr. Bell. He says, "I meant to make the charge that he was trading on the credulity of the public in order to make money. My charge is that he meant to frighten people so that they should come to him and pay him money." A more disgraceful charge against a medical man it is impossible to conceive. If it is justified then Dr. Bashford is to be commended for having the courage to make it. If you think that what has been written and published of Dr. Bell is fair comment, and that he did it for that purpose, do not hesitate to find for the defendants. With regard to Dr. Bashford's attitude, there are men and men. There are men who take such a view that they will say almost anything, but it was very sad indeed for Dr. Bashford to decline to say that he believed what Dr. Bell said, and to volunteer the statement: "I still believe he wrote the books for personal gain from fees that people would pay him, but it may have been from vanity or sheer ignorance." If the case justifies that language, of course Dr. Bashford is right; but whether it is or is not fair comment is entirely for you.

Of course, gentlemen, you must not forget that this action is not only brought against Dr. Bashford, but is brought against the paper, the *BRITISH MEDICAL JOURNAL*, and that they, as you remember, on page 1290, practically endorse everything Dr. Bashford had said: "Dr. Bashford's paper on cancer is the most damning exposure of the vilest and most cruel form of quackery that has appeared since Spencer Wells's 'Cancer and Cancer Cures.'" Gentlemen, I am not going to read the libel, as I said, except for two or three observations. One is, unless it be to intensify the effect of comment and criticism, one does not understand why these terrible stories of Sir Spencer Wells should have been introduced. You, of course, have seen the article with its photographs of quack notices, and with its pictures showing quacks; but, after all, from the point of view of what we are considering, perhaps the most important thing is the introduction of those stories, and the statement, twice repeated, in different words, "Were it not for the overwhelming evidence that Dr. Bell, formerly of Glasgow, is the modern representative in London of some of the practitioners referred to in Sir Spencer Wells's publications."

Gentlemen, if it be justified and is fair comment say so without hesitation. If it be not it is one of the most serious libel actions I have ever had to try. A competent medical man, practising in London, is held up to contempt, and said to be a medical man so ignorant that he is the modern representative of two such men as were capable of the gross and wicked conduct spoken to by Sir Spencer Wells in his stories.

Gentlemen, if you find this not to be a fair comment, and if you consider this article goes beyond fair comment and is a libel and a serious libel upon the plaintiff, you will have to assess the damages. That is entirely for you. I say no more to you than the two things which I am obliged to say in these cases. You have to consider the position of the plaintiff and the possible effect of such an article by the *BRITISH MEDICAL JOURNAL* upon him; and you have also to consider this, that up to the moment of your giving your verdict that article is justified as being fair comment. I have to say it. Not infrequently juries consider and are entitled to consider the case up to the moment the verdict is given. The defendant has not, of course, apologized. That would be quite inconsistent with his evidence. He had not said, now he has heard Dr. Bell's history, that he regrets any of the particular passages; but he comes to you to justify every word of that article. If you consider it is not fair comment, you will be good enough to say what damages you award to the plaintiff against the defendant and the proprietors of the paper, because both are responsible, and the paper itself has endorsed every word that Dr. Bashford has written. Gentlemen, will you be good enough to consider your verdict?

The jury retired from court.

On their return they found a verdict for the plaintiff, with £2,000 damages.

Applause in court was immediately suppressed.

Judgement was entered accordingly.

On the application of Mr. Holman Gregory, a stay of execution for ten days was granted on condition that the money was brought into court.

[Dr. T. Young Simpson (Plymouth) requests us to state that he is not the Dr. Simpson of Plymouth who gave evidence in the case.]

RECEIPTS AND EARNINGS DURING INTRODUCTION.

OCTAGON writes that he is buying a practice with a year's introduction, and it is agreed that during that year "the vendor and self are to equally divide the receipts." He wishes to know whether the vendor is entitled to share in bills sent out but not paid during that year.

* * It would seem that strictly speaking, according to the wording of the agreement, the vendor would not be entitled to a share in anything beyond money received during that year,

and the buyer would also be entitled to share in money paid for work done before he purchased the practice if any old bills were paid. But this is very unusual. In the circumstances detailed, the vendor and buyer should share equally in the proceeds of all work done during the year of partnership, and the buyer has no claim to any part of the book debts paid during that year for work done before he bought the practice, unless he has purchased the same.

Medical News.

THE King, who is patron of the Seamen's Hospital Society, will visit the Branch Hospital, Royal Albert Dock, on July 17th, and will lay the foundation stone of the new wing of the London School of Tropical Medicine.

LORD ROSEBERRY, Chancellor of the University of London, will distribute the prizes at the London Hospital Medical School on Monday, July 1st.

ON Friday, June 14th, H.R.H. Princess Louise formally opened at Merton, S.W., the new Nelson Hospital, which takes the place of the old Cottage Hospital in Merton Road, South Wimbledon.

THE annual garden party will be held in the grounds of Guy's Hospital on Thursday, July 11th. The wards, school buildings, and museum will be open for the inspection of visitors from 2.30 p.m. During the afternoon the prizes will be distributed by the Marquess of Salisbury.

DR. F. G. BUSHNELL, whose name was mentioned in our issue for June 15th as that of one of the three candidates for the appointment of County and School Medical Officer in the Isle of Wight who were interviewed by the County Council, desires us to state that his application for the appointment was only conditional, and that he was not prepared to accept the post on the terms advertised.

THE annual general meeting of the Research Defence Society will be held this day, Friday, June 21st, at 5 o'clock, at the Royal College of Physicians, Pall Mall, S.W. The President will give a short address and the annual report will be presented by Mr. Sydney Holland. Other speakers will be Sir William Ramsay and Professor Starling. The society has now more than 5,000 members and associates.

THE annual report of the Children's Country Holiday Fund shows that last year over 45,000 children were sent to the country for a fortnight's holiday under its auspices. They were selected by workers and visitors connected with sixty-three London and local committees, and were received at cottages chosen for the purpose by one or other of over a thousand voluntary workers in the country who undertake to make all the arrangements required. As the moral and physical benefit accruing from these holidays must no doubt be very great, the fund seems to deserve support. Donations may be sent to the Earl of Arran, the Honorary Treasurer of the fund, at 18, Buckingham Street, Strand.

PROFESSOR LANFRANCHI, Director of the Medical Clinic of the Higher School of Veterinary Surgery of Parma, lately contracted trypanosomiasis from a dog on which he was investigating the results of infection with the *Trypanosoma brucei*. The diagnosis was confirmed by Professors Bertarelli and Castellani and by the Pasteur Institute of Paris. This, says *Il Policlinico*, from which we take these particulars, is the first known case of transmission to man of the parasite which causes such ravages among cattle in South Africa. We are pleased to be able to add that Professor Lanfranchi is said to be on the way to recovery.

THE Insurance Commission in England has issued a notice stating that a preliminary meeting of every provisional insurance committee will shortly be held on a date to be fixed by the Commissioners, and that this meeting will be attended by one of the officers appointed by the Commissioners who will be ready to give advice and assistance. The meeting will elect a temporary chairman and will then proceed to elect representatives of the two sections of insured persons not yet represented on the committee—namely, those who belong to any county, local, or small friendly society not included in the sections of friendly societies already represented, and deposit contributors.

THE University of London, through the board appointed to promote the extension of university teaching, has authorized the holding of a summer school of town planning. The rapid progress of the town planning movement and the coming into force of the Town Planning Act have made it necessary for those engaged in the offices of architects, municipal engineers and surveyors, to possess a knowledge of the subject. This, however, is at present

difficult to acquire, since university and other courses on the subject are only available in one or two places, and in ordinary architectural and engineering textbooks the question is hardly discussed at all. The school will be held at the Hampstead Garden Suburb from August 3rd to August 17th. This place has been selected because in itself it represents an object lesson in careful town planning, and the 240 acres already laid out and occupied by about a thousand houses are about to have added to them 400 other acres, the laying out of which will be in active progress at the time the school is held. The various lectures arranged include two by Dr. G. F. McCleary, M.O.H. for Hampstead, on the public health aspect of the town planning movement, and one on the ethics of suburb planning by Mrs. S. A. Barnett. On the opening day the students will be received at the Institute Library of the Garden Suburb by Mrs. Barnett and Sir Henry Miers, Principal of London University, while later on in the evening a meeting will be held under the chairmanship of the Right Hon. Alfred Lyttelton, to hear an inaugural address from Lord Crewe.

THE fourteenth annual dinner of the West London Hospital and Post-Graduate College took place on June 11th, under the chairmanship of Dr. Arthur Saunders. The guest of the evening was Sir W. L. Gubbins, K.C.B., Director-General of the Army Medical Staff, who, in acknowledging the toast proposed in his honour and that of the other guests, mentioned, as a satisfactory example of the increased importance now attached to science, the fact that Sir David Bruce had been specially promoted to the rank of Surgeon-General as a recognition of his work in relation to sleeping sickness. Mr. Bidwell said that since both the Army Medical Department and the Royal Naval Medical Service now had their own arrangements for the post-graduate instruction the college would no longer be recruited from these services to the extent that had formerly been the case. On the other hand, it was becoming the practice for officers in the West African Medical Staff to put in their study leave at the college; so that if the college was losing in one way it was gaining in another. In any case, the entries for the current year were larger than last year. In regard to the hospital, both Dr. Saunders and Mr. C. F. Marshall expressed some anxiety. It was doing excellent work, but it was impossible to feel certain as to the circumstances in which it was to continue to do that work. The speeches were interspersed by music, and the evening ended with a toast to the Chairman, which was proposed by Dr. Shuter and duly acknowledged.

AT the annual meeting of the Society for the State Registration of Nurses on June 6th, it was mentioned that its membership now numbered 3,187, and that the number of States in America which had adopted registration of trained nurses had now risen to thirty-four. An address was delivered by Dr. W. A. Chapple, M.P., who said that he had been invited to speak because of his experience in New Zealand, and was aware of the beneficial result which had accrued in that country from the introduction of the Nurses' Registration Act. That Act was introduced not for the benefit of nurses, but as a safeguard for the public. It obliged every registered nurse to wear a badge, and the public soon learnt to expect its appearance on the uniform of any woman offering her services as a nurse. In this way a large proportion of persons possessed either of little knowledge of nursing or of no knowledge at all were gradually winnowed out. It seemed the duty of every Government to assume ignorance on the part of the average layman as to what constituted an efficient nurse, and to protect his interests in similar fashion. Among various resolutions passed at the meeting was one protesting against the exclusion of nurses from direct representation under the Insurance Act. There was a danger in the fact that the only members of the nursing profession nominated by the Commissioners to seats on the Advisory Committee were three officials of a charitable institute which recognized and inspected midwives acting as nurses through county nursing associations under lay control. This was a dangerous abuse which had crept in all over the country, and provided very cheap contract practice to the real poor. As a charity, it was argued that this was better than nothing; but under the Insurance Act the sick had a distinct right to receive their nursing from thoroughly trained persons. To ensure such nursing the privilege of representation on the Advisory Committees in England and Wales should be accorded to nurses not less than to certified midwives and to chemists. It was probably the fact that so far a legal status had been denied to the nursing profession which was responsible for this failure to accord nurses a rightful position in the administration of the National Insurance Act.

Letters, Notes, and Answers.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

QUERIES.

H. A. L. desires to place a patient in a home or house in the country near London. He is blind, but otherwise in fair health, and can pay 30s. a week.

ALPHA asks what district is likely to be beneficial for residence for a case of so-called muscular rheumatism, or, as some would call it, gout, which is worse in cold damp, and also in hot weather, but better in ordinary medium cold weather.

INCOME TAX.

Depreciation of Motor Cars.

MOTORIST and others complain that the surveyor of taxes has refused to allow any sum for depreciation of a motor car used for professional purposes, although an allowance under this head has been made in the past.

Hitherto there has been a divergence of practice in different localities on this point, but it appears that common action is now being taken by surveyors of taxes in the direction of refusing such allowances. The ground of refusal is that the special Act granting the allowance of wear and tear of "machinery and plant" applies in terms only to a "trade, manufacture, or concern in the nature of trade." From an income tax point of view, the practice of medicine might well have been regarded as falling within this general description, but the Inland Revenue has ruled otherwise, and on a strict interpretation of the words it might be difficult to resist its reading. The allowance for depreciation is regarded as a yearly contribution towards the expense of renewing the car when the time comes for renewal, so that where the depreciation allowance is refused the practitioner should take care to see that in due course when he has to replace the car by a new one full credit is given in his accounts for the cost of renewal. If during the past three years the cost of renewal has been incurred, but not allowed by the surveyor of taxes, application should at once be made to him for an adjustment of the current year's assessment.

ANSWERS.

TREATMENT OF TRACHOMA BY CO₂ SNOW.

MR. C. DEVEREUX MARSHALL (London) writes to refer "T. W.," who asks for directions as to the treatment of trachoma by CO₂ snow, to a paper by Mr. Leonard J. C. Mitchell, formerly house-surgeon at Moorfields Ophthalmic Hospital, now of Melbourne, read in the Section of Ophthalmology of the annual meeting of the British Medical Association at Birmingham last year, and published in the BRITISH MEDICAL JOURNAL of November 4th, 1911, p. 1176.

LETTERS, NOTES, ETC.

A WARNING.

THE Greenwich police have issued the following "description of a man who is calling upon doctors in South East London, and informs them that they have been appointed President of the local branch of the Boy Scout's Ambulance Brigade, and then solicits a subscription to the funds of the brigade; if successful gives a printed receipt for same, signed W. T. Rogers, Captain and Instructor. Age 21, height 5 ft. 5 in., clean shaven; dress, brown suit; wears button badge of St. John Ambulance Association. A revolver was seen in his possession when calling on a doctor in this district." The police ask to be informed should the man call.

ERRATA.

IN the article by Sir John Byers on "The Evolution of Obstetric Medicine," published in the JOURNAL of June 15th on p. 1345, for "Orisabius" read "Oribasius"; on p. 1347 for "Groningen" read "Groningen," and for "Madam de la Villière" read "Madame," and on p. 1350 for "anaesthetics" read "anaesthetics."

SCALE OF CHARGES FOR ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL.

	£	s.	d.
Eight lines and under	0 4 0
Each additional line	0 0 6
A whole column	2 13 4
A page	8 0 0

An average line contains six words.

All remittances by Post Office Orders must be made payable to the British Medical Association at the General Post Office, London. No responsibility will be accepted for any such remittance not so safeguarded.

Advertisements should be delivered, addressed to the Manager, 429, Strand, London, not later than the first post on Wednesday morning preceding publication, and, if not paid for at the time, should be accompanied by a reference.

NOTE.—It is against the rules of the Post Office to receive *postes restantes* letters addressed either in initials or numbers.