

a slight dyspnoea on exertion. The quantities of albumen vary between mere traces and 0.5 per cent., and the cylinders from two to fifteen in a specimen.

After using sulphate water for three or four weeks both the albumen and the cylinders disappear completely, and at the same time the symptoms of plethora are removed. The course is an equally favourable one in the case of a combination of arthritis and gout with abdominal plethora. If the patient becomes exposed to the old injurious influences after the albuminuria has gone, there is a fresh onset, after some time, of the excretion of albumen and cylinders, but this promptly disappears if the sulphate water be taken afresh. I have had this typical condition under observation in a patient for sixteen years, without so far any permanent mischief resulting to the kidneys.

In spite of the fact that the albuminuria and cylindruria taken by themselves in subjects of plethora do not, in my opinion, represent any serious pathological factor, it is nevertheless important to abolish the abdominal circulatory disturbance in good time by the aid of sulphate waters, as permanent mischief to the kidneys is certainly likely to result from the onset of injurious influences coming from some other quarter.

REFERENCES.

- ¹ *Wiener klinische Wochenschrift*, 1911, No. 5. ² *Ibid.*, 1911, No. 10.
³ Kohler, *Wiener klinische Wochenschrift*, 1898; Wallenstein, *Zeitschrift für klinische Medicin*, Band 58. ⁴ Schütz, *Prager med. Wochenschrift*, 1912, No. 24.

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

THREE CASES OF ECLAMPSIA.

CASE I.—In June, 1906, I was called at 9 p.m. to Mrs. L., aged 39, about two miles in the country, for her fourth confinement. On arrival I found the child (a small girl, about eight and a half months) born, and the afterbirth just come away. There was no trouble with the labour. On putting the binder on, I was struck with the swelling of the legs, which seemed more than is frequently found in hard-working multipara. She told me they had been big for some time. She had had three natural confinements previously and three miscarriages. She had diarrhoea all the day the baby was born.

Next morning she complained of feeling sick and not sleeping. The oedema of the legs was less, but the face looked puffy. She had passed a fair amount of urine. The husband came to me in the evening and said she was better, but feeling sick still. I gave her a mixture with some bromide. I was called at 5 a.m. and found her unconscious, face flushed and puffy, pulse 120 and bounding. She had had fits at 9 p.m., 2 a.m., and 5 a.m. I gave her some chloroform and gr. $\frac{1}{4}$ of morphine, which quieted her. I left about an hour later, but was called again almost at once to hear that she had had another very bad fit. I gave gr. $\frac{1}{4}$ morphine, which caused a severe fit. I also gave 20 grains of chloral and potassium bromide by the rectum and drew off some urine, which was nearly solid with albumen. She had four fits during the day, and could not be roused at all. She had a succession of fits from 1.30 a.m. to 2.30 a.m., gradually became weaker, and died at 1 p.m.

CASE II.—I was called to a primipara, aged 24, at 7 a.m. on February 27th, 1909. She had fits at 6 a.m., 6.30, 7, 7.30, 7.45, 8.15, 11.20, 11.45, and 2.30. I gave her morphine gr. $\frac{1}{4}$ at once. At 9 a.m., under chloroform, I dilated the os with Hegar's dilators, and put in a Barnes's bag. At noon I removed the bag, under chloroform, got my hand in the vagina, and dilated the os with the fingers. I then passed a sound, punctured the membranes, seized a leg, and delivered. The baby weighed 3 $\frac{1}{2}$ lb., and did not live long. At 3 p.m. I gave her gr. iij of calomel and mj of croton oil. She had severe fits at 5 p.m. and 7 p.m., when I again gave morphine gr. $\frac{1}{4}$. She had a good night and no more fits. Next day she passed water freely, and gradually convalesced.

CASE III.—The patient was a primipara, aged 26, living about four miles away over the downs, to which I could only walk as there is no road. The confinement—on February 8th, 1913—was normal. Low forceps were

used and a few whiffs of chloroform given. This was at 10 a.m. I was called back at 2 p.m. and found the patient quite unconscious. From her mother's description she had evidently had a fit. I gave her morphine gr. $\frac{1}{4}$, and injected two pints of saline under the breasts; her pulse was 120. Next morning she was in the same condition except that she was paralysed down the left side. What little urine was in the bladder was full of albumen. She gradually became more feeble, and died early the next morning. The mother told me that her daughter had been quite well whilst carrying but her feet had been slightly swollen.

It used to be taught that eclampsia coming on after labour was usually mild and the patient mostly recovered. With me the opposite has been the case. Possibly in a hospital, with all the latest treatment at hand, they might have recovered, but I am rather doubtful of it. It is very difficult to have to treat a serious case several miles from home over the downs with only the next-door neighbour as midwife.

C. B. C. GERVIS,
M.D. BRUX., M.B.C.S. Eng., L.R.C.P. Lond.
Seaford.

APPENDICITIS COMPLICATING EXTRAUTERINE PREGNANCY.

On September 19th, 1912, I was called to see a married woman, aged 23, complaining of pain and swelling in the left iliac region, which two days previously had been sufficiently acute to make her faint. She looked pale; temperature normal, pulse 102, respirations 18 per minute. Great tenderness and a distinct swelling in the left iliac region fully an inch above Poupart's ligament. Menstruation had been regular, but at her usual period three weeks before it had been scant, and she had continued to see a little every day. Micturition had been more frequent and accompanied by pain, as was also every movement of the bowels. The breasts were fuller than usual, and a drop of clear fluid could easily be expressed from the nipple.

The previous history showed that the pain had existed for at least twelve months, lasting a few days at a time and then disappearing for some weeks, but she was always conscious of discomfort in that region. This was aggravated by taking food and when the bowels were moved. She had lost flesh. Vaginal examination revealed a large firm swelling in Douglas's pouch, extending into the left broad ligament, with great tenderness in that region. An early abortion was diagnosed, and the pain and swelling on the left side regarded as inflammatory.

She was kept in bed, and the pain became easier and the metrorrhagia lessened; but on September 24th she had another attack of severe pain, and when I saw her next morning the pulse was 120 per minute, temperature subnormal, and the discharge profuse and offensive. The following day the uterus was curetted under an anaesthetic. No membrane was seen, but the discharge ceased. The pain and swelling, however, persisted, and four days after the curetting milk could be expressed from the breasts. A diagnosis of extrauterine pregnancy was then finally adopted. Hence on October 3rd I opened the abdomen through the inner border of the left rectus and found in the swelling not only the expected sac, but also the appendix and a loop of small bowel, these both being inflamed. There was also a large clot of blood. I completed the operation by removing the sac, the left Fallopian tube, the appendix, and the clot, and by stitching up the loop of bowel, which had been slightly torn in separating it. The patient made an uneventful recovery.

What had happened was that an old-standing appendicitis (the appendix extending to the left side) had set up an inflammation and formed adhesions round the left broad ligament. An extrauterine pregnancy had then taken place in the Fallopian tube on the left side, and had ruptured about six weeks, causing the collapse and swelling from the resultant haemorrhage, which was limited by the adhesions formed as a result of the appendicitis.

The condition of the tissue, especially the friability of the broad ligament, added to the difficulty of the operation, more particularly with regard to the vessels. The sickness (which resembled the sickness of pregnancy after the

cureting, and persisted until the second operation) disappeared immediately afterwards, as did also the milk from the breasts.

Dr. Findlay examined the case and gave the anaesthetic on both occasions at the patient's home.

ROBERT STEWART, L.R.C.P. and S., D.P.H.
Nelson, Lancashire.

Reports

ON

MEDICAL AND SURGICAL PRACTICE IN HOSPITALS AND ASYLUMS.

TAUNTON AND SOMERSET HOSPITAL.

A CASE OF CARCINOMA OF THE DESCENDING COLON IN A MAN AGED 27.

(By CHAS. FARRANT, Surgeon to the Hospital.)

W. C. S., a baker by trade, and a heavy cider drinker, was first seen by Dr. Alcock, of Creech St. Michael, on February 7th, complaining of pains in the stomach and sickness—chiefly in the morning—and loss of appetite. The bowels were not confined.

He improved under a mixture containing bismuth and soda until February 16th, when he complained of a return of the pains, which were severe, he said, all day. He vomited milk, but retained beef-tea and broth. His tongue was very dirty. There was some slight abdominal tenderness and a little distension. His temperature was normal. The bowels acted at 10 p.m. He had a bad night, with pain and sickness, and on the following morning his tongue was dirty, and the distension had increased. He was given an enema which brought away a few scybala and much flatus; this was followed by great relief. On February 18th and 19th he was better; there was not so much distension, and not so much vomiting.

On February 20th he was admitted to hospital on Dr. Alcock's advice. He vomited some green mucus, which had no faecal smell. He did not look ill; the tongue was dry, and the abdomen moderately distended. There was no tenderness or rigidity. Repeated enemata brought away some scybala and much flatus, and the distension was diminished.

For the next few days he remained very much the same. The bowels were kept open with enemata, and there was no increase of distension.

On February 24th, as there was no improvement in his condition, he was anaesthetized and examined with the sigmoidoscope, but nothing was found.

The abdomen was then opened to the left of the middle line by an incision about 4 in. long, with its centre below the umbilicus. A constriction was found in the descending colon. The wound was enlarged, and an attempt made to bring the affected gut outside, when unfortunately it burst just above the constriction, causing an escape of faeces. The hole was quickly clamped and everything mopped clean. The mesentery was then perforated and two pairs of intestinal clamps applied above and below the growth, which was then removed. An end-to-end anastomosis was made and the abdomen closed.

The patient left the table in a very feeble state, and, never rallying from the operation, died three hours after.

The growth was flat, about the size of a florin, with a depressed centre and thickened rolled edges. A piece was removed and examined by the Clinical Research Association, which reported as follows:

This growth is a columnar-celled carcinoma composed of very irregular alveoli lined by proliferating columnar epithelium. These are infiltrating the submucous and muscle coats, and contrast very clearly with the normal mucous membrane.

ON May 6th Dr. Woodrow Wilson, President of the United States of America, received a representative joint delegation from the American Medical Association and a Committee on the Conservation of Health of the American Academy of Sciences, which urged the expediency of the establishment of a Cabinet department of public health. The delegation consisted of Professor Irving Fisher, Dr. A. Jacobi, Dr. G. H. Simmons, Dr. Harvey W. Wyley, Dr. Favill, and Dr. John B. Murphy.

Reports of Societies.

ROYAL SOCIETY OF MEDICINE.

SECTION OF OBSTETRICS AND GYNAECOLOGY.

At a meeting on June 5th, Dr. AMAND ROUTH, President, in the chair, Dr. R. H. PARAMORE, in a paper on the *Intra-abdominal pressure in pregnancy*, said that his measurement of the pressure in the rectum in 24 cases of pregnancy showed that such pressure increased in pregnancy. This was the case whether the patient was standing or lying. It had been thought by those who had previously investigated the pressure in the rectum that this increase was due to an increase in the visceral weight, and that the pressure above the pregnant uterus was not increased. Hörmann, who made many investigations in all sorts of cases, came to this opinion. That authority's conclusion was, however, untenable, since the rectal pressure did not vary merely with increase of visceral weight, nor, indeed, with increase of visceral volume. The speaker, from a consideration of the intra-abdominal pressure in the non-pregnant, held that the visceral weight played some part in the production of the pressure, but that the compression of the visceral mass caused by the concerted reactions of the abdominal wall, thoracic diaphragm, and pelvic floor was much more important. That this compression was greater in pregnant than in non-pregnant women was shown by the change in musculature. It was in the well-developed women who became pregnant that higher pressure values were obtained, and it was in these that the toxæmia of pregnancy was so liable to occur. Dr. GRIFFITH said he was satisfied that Dr. Paramore had proved that intra-abdominal pressure was increased in pregnancy with primigravidae. But he had offered no evidence in the case of multigravidae with lax abdominal walls, and in them it was highly improbable that there was any similar increase except that directly due to the increased weight of the uterus and its contents. The author appeared to think that there was something wonderful about the ascent of the uterus, but he (the speaker) did not think it differed from ascent of the bladder due to distension—that is, the base of the organ remained at the same level. The PRESIDENT did not think that Dr. Paramore had sufficiently proved his first point to advance his main theory that the toxæmias of pregnancy were due to exaggerated increase of intra-abdominal pressure. The preliminary point now brought forward, that the increase of intra-abdominal pressure observed by him and others in pregnancy was due to the increased tone or tonic contractions of the muscles of the abdominal wall and thoracic diaphragm when at rest, had not been proved by him. Mr. GLENDINING said that the only reliable method of estimating intra-abdominal pressure was by a manometer introduced into the peritoneal cavity; the author had measured the intravisceral pressure, which was not at all the same thing. Dr. EDEN said that although the author's conclusions were not in themselves unreasonable, his paper failed to carry conviction because it consisted of too little fact and too much theory. The absence of control observations on non-pregnant women, and upon other common forms of abdominal distension such as ovarian and fibroid tumours, greatly weakened the case. Again, the conclusions he drew from the association of muscularity and corpulency—namely, that the abdominal muscles became hypertrophied as the result of an increase of intra-abdominal fat, did not appear sound; it was quite feasible that these persons were unusually muscular before they became corpulent. The author would find it very difficult to establish a mechanical theory of toxæmia, in view of the careful scientific work of recent years which pointed so strongly to biochemical causes.

SECTION OF LARYNGOLOGY.

At a meeting on June 6th, Mr. HERBERT TILLEY, President, in the chair, the following were among the exhibits: The PRESIDENT: A case shown in illustration of the effect of time in obliterating extensive frontal scars. Dr. LAMBERT LACK: A *Nasal osteoma* recurrent in the region above the inferior turbinal of a woman aged 31. Nine

Universities and Colleges.

UNIVERSITY OF CAMBRIDGE.

THE following degrees have been conferred:

M.D.—L. S. T. Burrell, M. F. Grant, A. F. MacCallan, S. V. Pearson.
M.B., B.C.—J. H. Pendred, H. C. T. Longdon, S. H. Rouquette, C. Warner.
M.B.—W. C. Hodges.
B.C.—A. F. R. Wollaston.

Examinations.

The following candidates have been approved at the examinations indicated:

PRELIMINARY SCIENCE (Part I, Chemistry).—G. E. Birkett, R. C. S. Bowker, A. D. Coates, B. M. Coates, F. C. Cozens, H. T. Cubbon, R. W. M. Dandy, A. W. R. Don, F. N. V. Dyer, R. H. Emmett, C. W. S. Fernando, J. B. Foster, R. French, C. I. C. Gill, W. N. Goldschmidt, N. B. de M. Greenstreet, E. W. Hall, J. Harbord, L. B. Hartley, W. E. Heath, L. G. Higgins, C. R. Hind, N. Hoole, S. M. M. Jabir, R. W. Jackson, A. V. Johnson, J. S. La Fontaine, H. C. Langdale, F. G. Laurie, J. G. Lawn, E. E. Llewellyn, R. Lumsden, G. Lyon Smith, J. W. MacKenzie, J. H. Massey, T. H. McCall, C. S. Millard, H. J. T. Neilson, A. V. Pegge, A. S. Richardson, J. A. W. Robertson, G. M. Shackel, G. H. Shakespeare, H. F. Squire, H. J. R. Surrag, A. Swann, A. P. Thompson, G. D. Thomson, H. M. Tulloch, M. D. Vint, W. M. Wallace, Y. S. Wan, A. Winfield. (*Part II, Physics*).—H. R. Bickerton, C. L. P. Biggar, G. E. Birkett, A. D. Coates, C. T. Cobbold, H. T. Cubbon, R. W. M. Dandy, F. N. V. Dyer, R. H. Emmett, T. Fernandez, C. W. S. Fernando, J. B. Foster, R. French, W. N. Goldschmidt, E. F. S. Gordon, N. B. de M. Greenstreet, W. B. Hathorn, W. E. Heath, H. P. D. Helm, L. G. Higgins, N. Hoole, S. M. M. Jabir, R. W. Jackson, A. V. Johnson, F. G. Laurie, J. G. Lawn, P. C. Livingston, E. E. Llewellyn, A. G. F. McArthur, T. H. McCall, B. S. Martin, J. H. Massey, J. R. Mitchell, J. W. McK. Nicholl, J. Norman, C. E. V. Porter, E. A. Raimes, A. S. Richardson, J. A. W. Robertson, G. H. Shakespeare, A. T. Spoor, H. F. Squire, H. J. R. Surrag, A. Swann, A. P. Thompson, G. D. Thomson, O. G. Tindall, N. J. Tuck, A. C. Walker, W. M. Wallace, W. T. Williams-Green, A. Winfield, J. M. McC. Wright. (*Part III, Elementary Biology*).—H. R. Bickerton, R. W. M. Dandy, R. H. Emmett, S. L. Higgs, S. M. M. Jabir, J. G. Lawn, T. H. McCall, Y. S. Wan, A. Winfield.

THIRD M.B. (under old regulations) (Part I, Pharmacology and General Pathology).—R. Hodson, G. H. Maw, J. H. Newmarch, M. W. Paterson, A. S. Seabrooke, J. Ll. M. Symms.

VICTORIA UNIVERSITY OF MANCHESTER.

DEGREES.

THE following candidates have been approved at the examination indicated:

M.D.—D. Dougall, *H. Heathcote, *C. B. Marshall, *A. B. Smallman, A. G. Bryce, F. M. Rodgers, A. Wharton.
† Awarded a gold medal. * With commendation.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

An ordinary meeting of the Council was held on Thursday, June 12th, Sir Rickman J. Godlee, Bart., President, in the chair.

Diplomas.

Diplomas of Fellowship were granted to twenty-nine candidates found qualified at the recent examinations as follows:

H. H. Broome (Capt. I.M.S.), D. C. Taylor, A. E. Iles, H. G. Frean, H. C. R. Darling, R. H. Mawhood, C. E. Shattock, S. Hoyte, A. C. Palmer, C. D'O. Grange, H. Neame, D. D. Pinnock, A. H. Todd, J. E. P. Watts, C. V. Anderson, J. A. Davis, N. F. Lock, S. Ritson, M. E. T. D. Vlasto, G. C. Chubb, C. E. S. Jackson, W. M. Oakden, W. S. Perrin, R. Ferguson, W. Gemmill, J. Kennedy, C. F. M. Saint, F. G. N. Stephens, J. Thompson.

Diplomas for the Licence in Dental Surgery were granted to forty-nine candidates found qualified at the recent examinations.

Examiners.

Mr. William Thorburn was elected on the Court of Examiners for the period of five years, subject to the provisions of the Charter.

The President reported that the vacancy on the Board of Examiners in Dental Surgery, occasioned by the retirement of Mr. Sidney Spokes, would be filled at the next ordinary meeting of the Council.

The following were elected:

In Elementary Biology: G. P. Mudge, W. G. Ridewood. In Anatomy: J. Cameron, J. E. S. Fraser, A. M. Paterson. In Physiology: C. F. Myers-Ward, E. H. Starling. In Anatomy for the Fellowship: C. H. Fagge, R. W. Reid, J. Sherren, G. Taylor. In Physiology for the Fellowship: E. W. W. Carlier, J. S. Edkins, F. Gotch, H. W. Lyle. In Midwifery: H. R. Andrews, W. B. Bell, G. F. Blacker, G. D. Robinson. For the Diploma of Public Health: R. T. Hewlett (Part I), R. D. Sweeting (Part II). For the Diploma in Tropical Medicine: J. W. H. Eyre (Bacteriology), C. L. Daniels (Diseases of Tropics).

Votes of Thanks.

The thanks of the Council were given to Sir Henry Morris as Visitor to the Examinations of the Egyptian Medical School at Cairo; and to Mr. Ernest J. Wilde, on his retirement as Solicitor to the College.

THE ROYAL COLLEGES IN IRELAND.

DEFICIENCY IN GENERAL EDUCATION.

A RESOLUTION was recently passed by the Royal Colleges of Physicians and Surgeons in Ireland: "That our Colleges instruct their examiners at all professional examinations to report all cases of deficient general education to the Committee of Management; and in any case where the deficiency is such as to reflect discredit on our Colleges, to reject the candidate in the professional subject in which he presents himself, and to enter the cause of his rejection, 'deficiency in general education,' on the result sheet."

THE ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

PORTRAIT OF DR. LOMBE ATTHILL.

ON June 6th a meeting of the Royal College of Physicians of Ireland was held, at which the President received, on behalf of the College, a portrait of the late Dr. Atthill. Dr. Little, Senior Fellow of the College, made the presentation on behalf of the Rev. William Atthill and the Misses Atthill, who were anxious that a picture of their father should be preserved in the College. Dr. Atthill was admitted a Licentiate of the College on February 12th, 1857, and elected a Fellow on May 1st, 1861, and subsequently served in every office of the College, being elected President in 1888 and again in 1889. Dr. Little said that during his long connexion of 53 years with the College, Dr. Atthill was its constant friend and wise adviser, and the high position which the College at present occupied was in no small measure due to the way he worked for the promotion of its interests. The portrait, which is the work of Miss Purser and an excellent likeness of the late Dr. Atthill, was accepted by the President, who expressed the great pleasure with which the Fellows received the gift, and the assurance that it would be preserved as one of the greatest treasures of the College.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

THE following officers have been elected for the ensuing year:

President: Mr. Richard D. Purefoy. **Vice-President:** Mr. F. Conway Dwyer. **Secretary:** Sir Charles A. Cameron. **Council:** Mr. William Stoker, Sir Charles A. Cameron, Sir Lambert H. Ormsby, Mr. Henry Gregg Sherlock, Sir Charles B. Ball, Mr. John B. Story, Sir Thomas Myles, Sir John Lentaigne, Sir Arthur Chance, Mr. F. T. Porter Newell, Mr. Shepherd M'C. Boyd, Mr. Robert H. Woods, Mr. Richard Lane Joynt, Mr. R. Bolton McCausland, Mr. Edward H. Taylor, Mr. William Taylor, Mr. R. Charles B. Maunsell, Mr. Trevor N. Smith, Mr. William Ireland Wheeler.

Medico-Legal.

IMMUNITY OF TRADE UNION FUNDS.

A CASE decided by Lord Cullen in the Court of Sessions, Edinburgh, on June 14th, possesses some interest for the medical profession in view of the disposition to establish medical unions registered under the Trade Union Acts. The earlier parts of the judgement are in accord with what has generally been understood, but the concluding sentences raise possibilities which have not been present in the mind of every one.

The action was brought by an ex-official of the National Sailors' and Firemen's Union of Great Britain and Ireland against the union and its officials and the trustees of the union for alleged slanders in the *Clyde Seamen's and Firemen's Gazette*. Damages (£1,000) were sought, and an interdict against the continued publication of alleged defamatory statements.

The Court dismissed the action with expenses. Lord Cullen, according to the report in the *Times*, said that the conclusion for damages was directed only against the trustees of the union. Under Section 4 (1) of the Trade Disputes Act, 1906, no action lay against a trade union in respect of any tortious act alleged to have been committed by or on behalf of the trade union. The pursuer, however, contended that the action, so far as it concluded for damages, might be brought against the trustees of the union, so that a decree might be got which would give recourse against the union's funds. Before the Trade Disputes Act, 1906, a trade union could be sued in respect of such tortious acts as were here alleged. The Act, however, gave trade unions an immunity from such suits. This immunity would be worthless if actions falling within it could be prosecuted against the trustees of a union and recourse had against its funds and property to the same extent as if the union itself had remained exposed to action. Therefore, the pursuer's case, so far as it concluded for damages against the trustees, was irrelevant. As to interdict, his lordship said it was not suggested that the alleged slanders were actually perpetrated by the trustees, and the reason given for combining them with the union in this conclusion was that the *Gazette* was the property of the union vested in them. He did not think that this presented any relevant ground for an interdict against the trustees. There remained the conclusion for interdict against the union itself. Reading Section 4 (1) of the Act of 1906, he did not see how the action could be said to be other than one brought in respect of tortious acts alleged to have been committed. The pursuer was not left without a remedy. He had his action for damages, if he had been defamed, against the individual officials of the union responsible for the publication of the defamatory matter, and similarly he might seek to have them interdicted from repetition of their acts.

of the council of the Bristol and Gloucestershire Archaeological Association. He was a member of the British Medical Association, and a few years ago was president of the Gloucestershire Branch.

To the affairs of the District Nursing Society he devoted much energy, and this body shortly after his death held a special meeting for the purpose of recording its profound regret at its death and

Its lasting gratitude for the intense interest he had ever taken in the conduct of the business and in the efficiency of the society, in the general management of the home, and in all things pertaining to the comfort and welfare of the superintendent and her staff.

A man of wide culture, Dr. Clark was much interested in the Oxford Extension Lectures in Gloucester, and was the first chairman of the committee in charge of them. In private life he devoted much of his spare time to literary pursuits, the early English poets being his special study; he was also an enthusiastic and highly skilled photographer. Dr. Clark was married, and is survived by his wife and several daughters. His remains were cremated at Birmingham.

JOHN WILLIAM FAWCITT, L.R.C.P., L.R.C.S. EDIN., BROUGHTON-IN-FURNESS.

THE sudden death of Dr. Fawcitt, of Broughton-in-Furness, has robbed his patients of the services of one who was a notable example of the very best type of country doctor, and will be much missed by a large circle of friends; for to know John Fawcitt was to be his friend.

He was a Yorkshireman, and was brought up in Thirsk. His school days were passed in York, and he then went to the University of Edinburgh, where he qualified in 1884. After serving as assistant at Slough and Castleford, he settled in Broughton in 1887, and in that charming country he has lived and laboured for more than a quarter of a century, endearing himself to the whole countryside by his painstaking work and ready sympathy. There was no man, woman, or child in his district that he did not know personally and for whom he had not a kind word.

It is difficult to speak of his characteristics, so wide were his interests. Professionally he was very sound, keeping in touch with the latest developments of medicine. He joined the British Medical Association in 1903, on the formation of the North Lancashire and South Westmorland Branch, of which he became President in 1910.

He was a great admirer of the beautiful in Nature, and few knew the Lake District better than he. Whilst he was interested in all sport, and entered with zest into the amusements and pursuits of his neighbours, his chief pastime was fly-fishing, and he was an adept in this gentle art. All his too brief holidays were spent in the exercise of his favourite sport among the becks, tarns, and lakes of the north country, the burns of Galloway, the lochs of Ireland, the glacier-fed streams of Norway, or the great salmon rivers of Scotland. Whilst he enjoyed to the full a week or two of salmon fishing, he used to say that, after all, there was nothing to equal a day on a good trout stream with a little 11-ft. rod and the trout on the feed. He made a special study of the habits and life-history of the Salmonidae, and took a great interest in the work of the Duddon and Windermere Fishery Board, of which he was a member. He was a capital teller of stories, and had a full store of yarns, fishing and otherwise. He was a most interesting companion, and could talk well on a wide range of subjects, and was, moreover, a good listener. As becomes a Yorkshireman, he was a great lover and an excellent judge of a horse, and always prided himself on keeping at least two rattling good cobs and on having them turned out well. A touching sight at the funeral was to see his favourite old dun cob "Prince" led behind his dead master to the churchyard.

He was a good Churchman and a strong Conservative, and died beloved by his friends and respected by all.

WE regret to have to record the death, on June 10th, of Dr. G. H. ROQUÉ DABBS at his residence in Westminster. Dr. Dabbs had been for some years in failing health and had suffered from a distressing malady, which, however, he had not allowed to interfere with his professional avocations. More recently he had experienced several attacks of angina pectoris, and his death was no doubt due to the accidental inhalation of an overdose of chloro-

form taken to alleviate his sufferings. Dr. Dabbs, who was born in January, 1846, was the son of a staff surgeon in the Royal Navy and of a Basque lady. He was educated at the Royal Naval School, New Cross, and at King's College, London. In 1867 he took the diplomas of M.R.C.S. and L.S.A. and the degrees of M.B., C.M. at the University of Aberdeen. In the following year he graduated M.D. in the same university. After some years spent in visits to France and Spain, during one of which, we believe, he served as surgeon with the Spanish army, he settled in practice in the Isle of Wight. Dr. Dabbs had strong literary tastes, and it must have been a peculiar pleasure to him to have been the medical attendant of Tennyson when the poet resided, as was his custom for a part of every year, in the Isle of Wight. In the memoir of the poet by his son it is stated that according to Tennyson's manuscript notes *The First Quarrel* "was founded on an Isle of Wight story; Dr. Dabbs was the doctor." Dr. Dabbs attended Tennyson in his last illness, and wrote an account of the passing of the great poet beyond the bar. Dr. Dabbs wrote a good many books in prose and verse, among which *Ugly, a Hospital Dog*, was probably the most successful. He also composed several plays, and for some time edited, and we believe for the most part wrote, a small periodical which he called *My Journal*. In 1903 he left the Isle of Wight to become medical officer to the managers of the Stock Exchange. He had recently taken a partner, but retained the position until the time of his death.

DR. LOUIS ADOLPHUS DUHRING, of Philadelphia, whose authority on questions of dermatology was recognized throughout the medical world, died on May 8th in his 68th year. He took his degree at the University of Pennsylvania in 1867. After studying for two years in Paris, London, and Vienna, he returned to Philadelphia, where in 1870 he opened a dispensary for skin diseases. In 1871 he became a lecturer in the Faculty of the University of Pennsylvania, and in 1876 he was appointed professor. In 1911 he retired with the title of Emeritus Professor. He was one of the founders of the American Dermatological Association. Of his numerous works on dermatology, the principal are a *Practical Treatise on Diseases of the Skin*, which appeared in 1887, and was translated into French, Italian, and Russian. Of the others, his *Atlas of Skin Diseases* (1876) and his *Textbook of Cutaneous Medicine* (1898) may be mentioned.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the profession in foreign countries who have recently died are: Dr. Theophile Anger, formerly surgeon to the Paris hospitals; Dr. E. Bennecke, lecturer on surgery in the University of Jena; Dr. Cl. Bernoud, of Lyons, a well-known rhinologist and laryngologist, aged 43; Dr. A. A. Bliss, for more than twenty years laryngologist and otologist to the German Hospital and Mary Drexel Home, Philadelphia, a former president of the American Laryngological Association, aged 53; Dr. Bochenek, professor of anatomy in the University of Cracow; Dr. David Coggin, consulting ophthalmologist to the Salem Hospital, Massachusetts, aged 69; Professor Ernesto Ferrantini, of Rome, a well-known specialist in diseases of children; Dr. Frederick Forchheimer, professor of paediatrics and for some time Dean of the Medical College of Ohio, author of works on the prophylaxis and treatment of internal diseases, the therapeutics of internal diseases, president of the Association of American Physicians in 1910, aged 59; Dr. Edward Garceau, gynaecologist to the out-patient department of St. Elizabeth's Hospital, Boston, author of a textbook on tumours of the kidney, aged 40; Professor Raimondo Guiata, founder of the Children's Hospital of Milan; Dr. Francis Parker Kinnicutt, professor of clinical medicine in the New York College of Physicians and Surgeons, and in 1907 president of the Congress of American Physicians and Surgeons; Dr. Charles Hunton Knight, of New York, for many years professor of laryngology in Cornell Medical College, in his 64th year; Professor Antonio Marro, Director of the Public Asylum, Turin; Dr. George H. Powers, of San Francisco, Emeritus Professor of ophthalmology in the University of California, aged 72; Dr. Ernest L. Shurly, one of the founders and Emeritus Professor of laryngology and clinical medicine in the Detroit College of Medicine,

aged 67; Professor Willy Thorn, head of the gynaecological department of the Magdeburg Municipal Hospital, aged 56; Dr. Camillo Verdelli, lecturer on medicine in the Medical Faculty of Parma; Dr. P. Vergely, professor of histology and afterwards of pathology and general therapeutics in the University of Bordeaux, author of numerous medical monographs, just before completing his 74th year; Dr. Alcibiades Vicencio, extraordinary professor of obstetrics in the University of Santiago (Chile) and director of the School of Midwives in that city, a strenuous advocate of puericulture and initiator of a boy-scout movement in Chile; and Dr. Theodor Weyl, lecturer in the Technical High School of Charlottenburg, and well known as a hygienist, author of many writings on subjects connected with his speciality, aged 62.

The Services.

GLASGOW TERRITORIAL FORCE ASSOCIATION. THE Army Council has approved of Colonel Donald J. Mackintosh, M.V.O., etc., Assistant Director of Medical Services, Lowland Division, being appointed to a seat as a military member of the Territorial Force Association for the city of Glasgow.

Medical News.

THE annual general meeting of the Research Defence Society will be held on Tuesday, June 24th, at 5 o'clock, at the Royal College of Physicians, Pall Mall. The chair will be taken by Sir David Gill, K.C.B., F.R.S., President of the Society. The report will be presented by the Hon. Sydney Holland, Chairman of Committee. Other speakers will be: Sir William Osler, Regius Professor of Medicine at Oxford; the Right Rev. Dr. Frodsham, sometime Bishop of North Queensland; and Mr. Waldorf Astor, M.P., and Sir Hugh Bell.

ON March 29th the Texas Senate rejected, by a vote of 14 to 11, a bill providing for the sterilization of defectives in the State institutions.

AMONG the members of King George's suite who received decorations on the occasion of His Majesty's recent visit to Berlin was Sir James Reid, on whom the German Emperor conferred the Order of the Red Eagle (First Class).

THE New York Academy of Medicine has issued an appeal to the public for funds to enable it to erect a new building. The Fellows of the Academy have promised £25,800.

SURGEON-GENERAL JOSEPH E. GODFREY, chairman of the Local Government Board of British Guiana, has been reappointed a member of the Executive Council of that colony.

THE Hamburg Cancer and Tuberculosis Research Institute has received from an anonymous benefactor a gift of £1,000 to be applied towards the erection of a department for investigation of fungi. Dr. H. C. Plaut has been appointed director of the new department.

AT the meeting of the Royal Society on Thursday next a paper on light sensations and the theory of forced vibrations will be read by Dr. G. J. Burch, and another on the luminosity curve of a colour-blind observer by Mr. W. Watson.

THE authorities of the institution known as the Caterham Sanatorium and Surrey Hills Hydropathic celebrated by a luncheon party, on May 30th, the tenth anniversary of its establishment. It is conducted, we are informed, on the same lines as the Battle Creek Sanatorium, Michigan, U.S.A.

THE annual prize distribution at the medical school of St. Thomas's Hospital is to take place next Tuesday, June 24th, at 3 p.m., the ceremony being performed by the Right Hon. Lord Amthill. A garden party on the terrace of the hospital will follow, and the various departments of the joint institutions be thrown open to inspection.

THE annual meeting of the Medico-Psychological Association of Great Britain and Ireland will be held on Wednesday and Thursday, July 16th and 17th, at the rooms of the Medical Society of London. The annual dinner of the association will take place at the Café Monico on the evening of July 16th.

As announced in the advertisement pages, the next examination of candidates for the Royal Naval Medical

Service will be held at the Examination Hall, 8, Queen Square, Bloomsbury, W.C., on September 29th, and following days. Twenty-five appointments are offered for competition. Application forms and further particulars can be obtained from the Medical Director-General, Admiralty, S.W.

THE Royal Sanitary Institute has elected Mr. Waldorf Astor, M.P.; Mr. Lewis Haslam, M.P.; Major H. B. Fawcus, R.A.M.C., assistant professor of hygiene, Royal Army Medical College; Lieutenant-Colonel Sir Joseph Fayrer, R.A.M.C., superintendent of the Royal Infirmary, Edinburgh; Dr. W. H. Hamer, medical officer to the London County Council; Dr. F. St. George Mivart, medical inspector to the Local Government Board; and Professor H. A. Woodruff, M.R.C.S., L.R.C.P., M.R.C.V.S., of the University of Melbourne, to be Fellows of the institute.

AT the annual meeting of the Royal National Pension Fund for Nurses, on June 12th, the Chairman (Sir Everard Hambro) said that the invested funds stood at a book value of £1,720,475 at the end of last year, as against £1,632,725 at the end of 1911, and that any depreciation due to a fall in market values was well covered by the reserve fund. The sum now being paid to annuitants amounted to about £40,000 a year. The experience of the fund was that their annuitants lived long beyond the term of their assessed expectation of life at the time of their retirement. This, of course, was a disadvantage to the fund, but it showed what an advantage the fund was to nurses.

DR. JOHN JOHNSTON, of Bolton, who has taken a practical interest in ambulance work for the past twenty-five years, was the recipient on June 11th of a handsomely mounted umbrella from members of the Bolton ambulance class. The presentation was made at a meeting for the distribution of certificates and medallions secured by the Bolton ambulance division of the Lancashire and Yorkshire Railway during the past year. This division has for some years past held a conspicuous position among ambulance corps in the North of England; last year it won the shield offered by the company, and this year was awarded the Sir George Pilkington cup. In the course of the proceedings many allusions were made to the indebtedness of the corps to Dr. Johnston's tuition, and a comparison was supplied by the latter of ambulance work as it is to-day and as it was twenty-five years ago.

AT a meeting of the general court of governors of St. George's Hospital, on June 12th, it was decided by a majority of 17 on a total of 29 votes to take no action in the question at issue between the hospital and the King Edward's Hospital Fund for London until a report had been received from Lord Moulton and Sir George Hayter Chubb, who, at the request of the president of the hospital, Princess Christian, have consented to hold an independent inquiry. This decision was reached as an amendment to a motion to the effect that the hospital should provide the difference between £1,000 and the sum expended on the bacteriological and pathological departments out of the discretionary fund, as suggested by the authorities of the King's Fund. An outline of the facts of this long-standing dispute between these two bodies and of the arguments on either side will be found at page 549 of the SUPPLEMENT to our issue for June 14th.

THE progress of practical medicine is to be dealt with in a series of lecture courses given in Berlin by the Lecturers' Association for Medical Vacation Courses from June 19th to 28th in collaboration with the Central Committee for Medical Post-graduate Education in Prussia. Lectures will be given on all special subjects of practical medicine. Among the subjects we note the new problems with which the practitioner is confronted, owing to the new Government insurance regulations. Foreign doctors are entitled to participate. All applications should be addressed to the Bureau of the Lecturers' Organization for Medical Vacation Courses (Herr H. Melzer, N. 24, Ziegelstr., 10/11). Inquiries will be answered by the Bureau of the Lecturers' Organization and by the Medical Information Bureau of the Kaiserin Friedrich-Haus (Berlin N.W. 6, Luisenplatz 2-4).

AN excellent method for promoting friendly relations between England and Germany has been adopted by the managers of the Crystal Palace, where the great Anglo-German Exhibition was opened by the Lord Mayor on June 11th. Every effort has been made to render the exhibition as fully representative as possible of the arts and industries of both countries, and the result is an extremely interesting collection of exhibits, whose tasteful arrangement and attractive surroundings show them off to the best advantage. Paintings and statuary offer a good opportunity for studying the different methods of English and German artists, whilst the sections devoted

to music, printing, wood carvings, and brass and metal work enable the visitor to compare still further the artistic capacities of the two nations. Other sections contain naval and military appliances, machinery, and tools; textiles, furniture, chemicals, and surgical and optical instruments; whilst some of the prettiest stalls are given over to German toys, trinkets, and pottery, including a number of very beautiful specimens of Dresden china. A large variety of international musical and athletic competitions will be held during the course of the summer in the great hall and grounds of the Palace; and a repertory theatre has been instituted in which German plays will be acted nightly by a special company. The exhibition will remain open until October, and should fulfil a useful purpose in making better known to each other and fostering a more complete sympathy between the people of England and Germany.

In 1877 the Staffordshire Institution for Nurses was established at Hartshill, near Stoke-on-Trent, mainly through the exertions of the late Bishop Sir Lovelace Stamer and Mr. W. D. Spanton, then surgeon to the North Staffordshire Infirmary. The institution has done a great deal of good work, and recently it was arranged to establish in connexion with it a nursing home for paying patients. This home was opened a short time ago, and Mr. Spanton presided at the ceremony. He said that the home was intended solely for those who were unable to pay an adequate fee. The building, he said, was very simply constructed, the great objects being to secure an abundance of air, free ventilation, and plenty of light. The building was then declared open by Lady Stamer, the widow of the late bishop. The home has, owing to the slope of the site, three stories on the one side and two on the other. In the front are the kitchen, scullery, and other rooms. On the ground floor there are two large wards and a smaller one, with a preparation room, waiting room, and accommodation for the superintendent. On the floor above there are two large wards, bath room, maids' room, and store rooms. The floors are connected by a lift as well as by a wide staircase. The building is lighted by electricity, the corridors are heated by hot water, and each room has an open fireplace in addition to an electric radiator. The success of the nursing institution has been so great that it now employs over a hundred nurses, and its affairs have been so well managed that Mr. Spanton was able to state that the new home had been built from reserve funds.

THE annual report of the National Society for the Prevention of Cruelty to Children, presented to the Council on May 27th, states that the number of offenders against children in cases reported to the society in England, Ireland, and Wales in the year ending March 31st, 1913, was 74,687, being 899 more than in the previous year. The central fact of the whole report is that during the year the society acted as the protector of 159,407 children, a larger number than in any of the twenty-nine years of its existence, and 2,770 more than in 1911-12. The total number of complaints was 54,541, being 353 more than in 1911-12. The complaints are classified as follows: Neglect and starvation, 47,880; ill-treatment and assault, 3,886; indecent assault 194, criminal assault 163, immoral surroundings 485—making a total of 842 offences against morality; exposure for begging purposes, 575; exposure, 501; abandonment, 299; baby farming, 42; manslaughter, 1; other wrongs, 515. Of these 54,541 cases, 52,967, on a preliminary investigation, appeared to have substance in them; using the technical expression of the record, they were "found true." It is pointed out that this does not mean that the other 1,565 complaints made were not justified. "In the majority of these there was good reason for making them, but there was also an explanation that made it unnecessary for the investigator to proceed." Of the 54,541 complaints, 30,863 were made by members of the general public, 6,140 were reported by the police, 8,983 by school officials, 4,603 by other officials, while 3,952 were discovered by the society's inspectors. Stress is laid on the fact that prosecution is not the main object of the society's work. The cases brought to its notice during the year were dealt with as follows: Warned, 48,114; prosecuted, 2,456; otherwise dealt with, 2,397. The proportion of cases successfully dealt with by warning was larger than in any previous year, being 88.2 per cent. The report, though it bears witness to the splendid work done by the society, is sad reading, as showing the amount of suffering inflicted on helpless children. In view of the statistics set forth in the report there is comfort in the assurance, which is given with emphasis, that "neither cruelty nor neglect of children can be described as a characteristic of the people as a whole."

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.

SUGGESTIONS are invited by "C." as to the two following cases: (1) A boy who, although only 12 and of average height, weighs 8 st. 7 lb., and gets very readily tired. The urine shows phosphates and the blood an increased number of white corpuscles, but otherwise the boy appears healthy. Thymus extract is apparently of some utility. His stoutness began a few months after an operation for hypertrophied turbinates, adenoids, and tonsils. What is its pathogenesis? (2) A case of rheumatism in the shoulders. Ionization has not been tried, but all ordinary remedies for rheumatism, including hot ironing, have proved useless.

ANSWERS.

SOMNAMBULISM.

DR. ALEXANDER HAIG (London, W.) writes in reply to "Aber," JOURNAL, p. 1256: I would suggest that if he will measure the circulation by methods similar to those suggested in my paper, "Some Circulation Factors Admitting of Easy Measurement," JOURNAL, September 16th, 1911, he will find considerable defects due in part to impure blood and in part to heart weakness. If he can improve the circulation, the somnambulism will also improve or disappear. He will find a good deal bearing on the relation of the circulation to the kindred troubles, headache and epilepsy, in my book, *Uric Acid in the Clinic*, London, 1910, p. 32 and pp. 72 to 76.

LETTERS, NOTES, ETC.

ENQUIRER, who has recently sent us two letters, is informed that answers cannot be returned unless the enquirer authenticates his communications with his name and address.

PREMATURE CREMATION.

DR. G. ANGUS HUNT (London, N.) writes: With reference to the leader in the JOURNAL for June 14th, may I ask—and, like Rosa Dartle, "I only ask for information"—if the doom of a premature burial is possible, why not the doom of a premature cremation? Personally, I should prefer even a momentary return to consciousness in a coffin underground rather than in a casket in the midst of a burning fiery furnace.

* * We think that even Miss Rosa Dartle's thirst for information would for once have been satisfied had she witnessed a cremation. Moreover, with the stringent precautions as to the certification of death when cremation is proposed, the doom of a premature cremation is almost unthinkable.

DOGS AND DOG OWNERS.

MISS C. A. M. BAILEY, Honorary Secretary National Canine Defence League, has issued an appeal to dog owners not to chain their dogs. We quite appreciate the fine sentiment which has dictated this appeal, but is it not just a little sweeping? An unchained dog may have a taste for the calf of the human leg, but we agree that dogs are often treated by their masters with great carelessness. As Miss Bailey says: "A dog chained out in the sun in hot weather, unable to reach the shade, his kennel, which has been left to face the sunny quarter, baked through and through, probably with no water to quench his burning thirst, or only a drop of stale, filthy, hot liquid, suffers torments." But while condemning this inhumanity, we think that her unreserved demand, "Give dogs their freedom and do not chain them," fails to take sufficiently into account possible danger to human beings.

DIACHYLON OR DUTY: A CORRECTION.

In the sixth line of Dr. W. Wrangham's letter under this heading in last week's JOURNAL (p. 1297), for "blood" read "lead."

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