

cavity, you may perforate the fundus, or you may produce abortion in a gravid uterus. For all these reasons the sound should be avoided. Nothing can be more reprehensible than the repeated straightening of the uterus by means of the uterine sound, for the risks of infection are very real, and tubal inflammation may follow.

Treatment by Pessary.—Having replaced the uterus, it is maintained in position by a pessary. The capacity of the vagina will have been gauged by the former examination, and a pessary of suitable size should be selected or a cast of the upper portion of the vagina may be taken by means of a thin rubber ring previously immersed in boiling lotion to make it soft, and a pessary of corresponding size can be procured or, if necessary, made. The most suitable variety of pessary is the Hodge or Albert-Smith, made of hard glass or vulcanite. It should be introduced in the antero-posterior diameter of the vulva, the index finger pressing the upper bar backwards and upwards into the posterior fornix. The pessary should be grasped by the vaginal vault, and should not cause pain or discomfort. Before leaving the examination couch the woman should be asked to "bear down," in order to see whether or not the pessary can be pressed out. It is well to request her to report herself in three or four days to ascertain if the pessary is causing any pain or interference with micturition or defaecation. During the wearing of a pessary a daily vaginal douche is necessary, and for this purpose warm saline solution is useful, as it does not interfere with conception. The pessary should be changed every two to three months, when the opportunity may be taken to see if its use may be discontinued or if a smaller or larger size be required.

When asked the question, How long has the pessary to be worn? the answer is, Until the uterus can maintain itself in the normal position. That may be months or years, or it may never maintain itself in the normal position.

Women are often told that they will be cured at the "change of life." This is true when the uterus becomes smaller and the upper portion of the vagina contracts, or when, from an increased deposit of fat, the retentive power of the abdomen is increased. But in parous women with a relaxed vagina and a gaping vulva the condition becomes worse.

I think, therefore, that the prospects of pessary treatment should be put before the patient, and she should be left to decide whether she will endure the inconvenience of wearing a pessary or have surgical treatment.

A vaginal pessary is an unclean thing, requiring constant attention, and as it acts by stretching the vaginal vault it is in reality favouring the condition it is supposed to remedy. As cures by pessary treatment are not numerous, I believe the interests of the patient are best served by advising appropriate surgical treatment. Moreover, the social status is an important factor, for the hard-worked woman has not the time to give the attention and care which treatment by pessary demands.

The uterus may be found tilted slightly backwards in association with a congenital hypertrophic elongation of the cervix, a condition frequently mistaken in practice for uterine prolapse. A supravaginal amputation of the cervix followed by accurate suture cures the condition, and pregnancy has followed this operation. When met with in a virgin the same treatment is employed.

Treatment of Backward Displacement when Pain and Tenderness Exist.

When the body of the uterus is tender and any movement of it is resented, before attempts at replacement are made treatment should be applied. The best is the "ichthyol treatment." For its successful application the patient should rest in bed for a fortnight or three weeks, during which time tampons of glycerine and ichthyol 10 per cent. are inserted into the vagina every other day and a saline douche given once a week, to clear away the excess of ichthyol. Ichthyol vaseline 10 per cent. is rubbed into the flanks, and ichthyol pills 2 to 3 grains given three times daily. It will be found that after this treatment the uterus can be easily replaced and a pessary inserted.

When the uterus is enlarged and there is excessive and irregular menstruation, probably indicating that there is some adenomatous growth *in utero*, the curette should be

employed to remove this growth under anaesthesia, and after all discharge has subsided a pessary may be inserted.

It is here that the operation of curetting may be usefully employed, but only if the menstrual loss is markedly increased, as it is an operation the indications for which are very definitely limited, and it is far too frequently done at the present time.

From a series of cases collected by the late Dr. Herman he estimated that in 40 per cent. menstruation was increased, sometimes in quantity, sometimes in frequency, sometimes in both. Occasionally it is diminished. What is frequently noted is a "relative retention" of the menstrual flow, so that it is prolonged as a brownish discharge for two or three days, and in the intervals between menstruation a uterine discharge, mucoid or muco-purulent, comes away in gushes.

All these symptoms disappear when the uterus is kept in position, and no curetting is required. They prove, however, the evil effects which result from a backward displacement.

The wearing of a pessary is only a part of the treatment of women with backward displacements, and general treatment should always be adopted. For this purpose tonics, exercise in the fresh air, graduated exercises, massage, and dieting are most helpful. The appropriate exercises should be written down and carried out by the masseuse under medical supervision.

The somewhat narrow outlook possessed by many of those who attempt to treat these disorders in women has been the means of diverting countless numbers of patients into the hands of various types of unqualified practitioners. Many patients seem to take a delight in informing medical practitioners that they have tried many doctors without obtaining any benefit, and that they have been cured by massage and exercises. It behoves us all to take the hint, and remember that to strengthen the abdominal muscles and to favour the deposition of fat is the best way of increasing the retentive power of the abdomen.

(To be continued.)

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

THE INCUBATION PERIOD OF PARATYPHOID B FEVER.

THE following case is of interest as *Bacillus paratyphosus* B was found in the stools some time before the onset of the disease.

The patient, No. 403, Pte. McK., was admitted on September 23rd, 1915, suffering from "dysentery." A specimen of his stools was sent to the laboratory next morning; amoebae were not found. On plating the stool dysentery bacilli were not found, but *Bacillus paratyphosus* B was isolated.

It was thought that the patient might be convalescing from paratyphoid B fever, so a serum reaction was carried out by the microscopic method with negative results.

Twelve days after admission, on October 5th, his temperature began to rise. A blood culture was made on October 7th, and *Bacillus paratyphosus* B was isolated. On October 25th a serum reaction was again carried out, and agglutination of *Bacillus paratyphosus* B was found in a dilution of 1 in 1,000 by the microscopic method.

This case shows that *Bacillus paratyphosus* B can be present in the intestine at least twelve days before the onset of the fever, and that cases which develop in hospital are not necessarily infected in hospital.

T. J. HALLINAN, Captain R.A.M.C.,
M.B., B.S., D.P.H.

H. E. ROAF, Captain R.A.M.C.(T.),
M.D., D.Sc.

FIELD MARSHAL VON MOLTKE, who died suddenly in the Reichstag on June 18th, was a supporter of Christian Science, of which his cousin, the heir of the conqueror of 1870, is the official head in Germany.

THE 4th London General Hospital has added one more to the number of military hospital magazines. Two numbers have appeared, May and June. Its title is *The Fourth*, and it presents a cheerful countenance.

men whom we can trust and who deserve to be properly treated. The Clyde "rollers" make £20 a week—I am, etc.,

Edinburgh, June 17th.

JAMES CAMERON, M.D.

THE DR. JAMES B. BIRD MEMORIAL FUND.

DR. JAMES B. BIRD, of Carlisle, was universally respected by his colleagues and highly esteemed by the people among whom he worked; he died of influenza last April, at the age of 47, and had been unable to make due provision for his family. A committee was formed in Carlisle to raise a memorial fund for the education of his children, and we are informed that it now amounts to £1,623 ls. 6d. At a recent meeting of the executive committee it was decided to close the fund at the end of the present month, and three trustees were appointed to administer it. Further subscriptions should be sent at once to the Honorary Treasurer, Mr. James Nelson, Bank of Liverpool, Limited, Carlisle. The following subscriptions from members of the profession have been received since the list published in our columns on May 20th:

	£ s. d.		£ s. d.
Dr. A. C. Burrows, Carlisle ...	5 5 0	Dr. J. R. Burnett, Keswick ...	1 1 0
Dr. Helm, Carlisle ...	5 5 0	Dr. John Brown, Blackpool ...	0 10 6
Dr. Farquharson, Carlisle ...	5 5 0	Dr. T. C. Guthrie, Tunbridge Wells ...	10 10 0
Dr. R. Fawcett, Broughton-in-Furness ...	2 2 0	Dr. Shephard-Walwyn, Wetheral, Cumberland ...	5 5 0
Dr. C. W. Graham, Carlisle ...	3 3 0	Dr. C. T. Street, Crosby-on-Eden ...	2 2 0
Dr. Macdonald, Carlisle ...	3 3 0	Major Butterworth, Carlisle ...	2 2 0
Dr. H. J. Robinson, Kirkoswald ...	1 1 0	Dr. Rufus E. Evans, Newcastleton ...	2 2 0
Dr. Edwards, Carlisle ...	3 3 0	Dr. G. B. Muriel, Whitehaven ...	3 3 0
Dr. Logan, Ecclefechan ...	4 4 0	Dr. J. Barclay, Wetheral ...	2 2 0
Dr. Alfred Cox, London V.P.R.C.S.E. ...	10 10 0	Dr. Donald, Carlisle ...	5 5 0
Dr. Doughty, Dalton, Cumberland ...	3 3 0	Dr. C. Crawford-Aitken, Carlisle ...	5 5 0
Mr. C. Balfour Paul, Carlisle ...	8 8 0	Lieut. P. A. Bennet, Clark, R.A.M.C. ...	2 2 0
Dr. Edington, Penrith ...	2 2 0	Lieut. Walter Mercer, R.A.M.C. ...	2 2 0
Dr. Dodgson, Southwaite ...	2 2 0		

The Services.

THE AUXILIARY R.A.M.C. FUNDS.

THE Provisional Committee appointed at the meeting at the Royal Army Medical College on June 1st to consider and report on the steps which should be taken to establish a fund for the benefit of the auxiliary branches of the R.A.M.C., will present a scheme at the meeting to be held at the Royal Army Medical College on Monday next, at 2.45 p.m., under the chairmanship of the Director-General.

The committee will recommend the formation of two independent funds for the auxiliary R.A.M.C. Forces, one a benevolent fund for the orphans of officers and the other a relief fund for the widows and orphans of the rank and file. It is recommended that the funds should embrace the three auxiliary branches of the corps, and that both funds should be administered by the same committee, which should be representative of the three auxiliary branches—namely, Special Reserve, Territorials, and those holding temporary appointments in the R.A.M.C.

The scheme of the committee seems to us, as we have indicated elsewhere, so defective that we hope it may be withdrawn and a wider reference given by the meeting on Monday to a committee strengthened by the inclusion of more men who have an intimate personal acquaintance with the hardships and difficulties suffered by medical men engaged in civil practice, and by the addition of representatives of existing medical funds and organizations. We therefore refrain from publishing further details of the provisional scheme.

The Provisional Committee adopted the following resolution at its meeting on June 15th:

To recommend the general meeting to appoint a committee to report to a further meeting on the possibility of the establishment of a loan fund to help medical officers of the auxiliary forces who are in temporary difficulties on returning to their civil practices.

EXCHANGE.

CAPTAIN 2nd Line Field Ambulance (T.F.) wishes an exchange with M.O. attached to Base Hospital abroad, or Ambulance Train.—Address, No. 2400, BRITISH MEDICAL JOURNAL Office, 429, Strand, W.C.

Universities and Colleges.

UNIVERSITY OF LONDON.

MEETING OF THE SENATE.

The University and the War.—At a meeting of the Senate on May 24th a letter was read containing the King's congratulations upon the important part the University was taking in connexion with the war, not only in actual military service but in science and research, and expressing his sympathy with the losses sustained.

Recognition of Teachers.—The following were recognized as teachers at the institutions and in the subjects indicated:—St. Mary's Hospital: Mr. F. A. Juler (ophthalmology), Mr. C. A. Pannett (surgery).

Dental Schools.—It was resolved that the Royal Dental Hospital and London School of Dental Surgery, and the National Dental Hospital and College forming part of University College Hospital Medical School, be continued as schools of the University in the Faculty of Medicine (in dentistry only).

Withdrawal of Scholarships.—It was decided to reduce the number of university scholarships to be awarded in the summer of 1916 from nineteen to twelve.

Staff Examiners for Medical Degrees.—The following were appointed staff examiners in the subjects of examinations for medical degrees:—*Anatomy*: Professor R. W. Reid; *Bacteriology*: Professor R. T. Hewlett; *Chemistry*: Dr. H. F. Morley; *Forensic Medicine and Hygiene*: Drs. E. P. Manby and F. J. Smith; *General Biology*: Mr. M. Davenport Hill; *Medicine*: Professors Norman Dalton and Arthur J. Hall; *Mental Diseases and Psychology*: Drs. R. H. Cole and W. H. B. Stoddart; *Obstetric Medicine*: Professor W. C. Swayne and Dr. G. F. Blacker; *Pathology*: Professors F. W. Andrews and J. Martin Beattie; *Pharmacology*: Professor R. B. Wild; *Physics*: Dr. Sidney Russ; *Physiology*: Professor D. Noel Paton; *State Medicine*: Drs. T. M. Legge and R. K. Brown; *Surgery*: Professor W. F. Haslam and Mr. William Turner; *Tropical Medicine*: Professor F. M. Sandwith and Dr. C. W. Daniels.

Physiological Laboratory.—The annual report of the Physiological Laboratory Committee for 1915 stated that the normal work of the laboratory had been hampered by want of funds and absence of workers on military duty. The resources of the laboratory had again been held at the disposal of the War Office.

UNIVERSITY OF EDINBURGH.

OWING to the large reduction due to the war in the number of students attending, it has been resolved not to hold separate graduation ceremonies in arts and medicine, but a combined graduation ceremony for arts, science, medicine, and the other faculties, which will take place on July 11th. Sir James A. Ewing, K.C.B., the newly-elected Principal, is expected to take part.

At the last meeting of the University Court Dr. McKenzie Johnston was appointed a governor of the Fettes trust for the residue of the term of office for which the late Principal had been elected.

It was announced that Mr. Balfour had expressed the wish that the sketch portrait of himself by the late Sir George Reid, which Sir William Turner had bequeathed to him, should at once find a place in the University. The Court accepted the bequest, and thanked the Chancellor for his considerate regard for the University.

The Combe trustees have agreed that Dr. W. G. Smith shall be reappointed to the lectureship in psychology for a further period of five years from September 30th next.

UNIVERSITY OF ST. ANDREWS.

THE Senate has resolved to confer the honorary degree of LL.D. upon Dr. James Musgrove, Bute Professor of Anatomy in the University 1901-14, and now Emeritus Professor. Professor Musgrove graduated M.D. Edin. in 1888.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

Election of President and Officers.—The annual election of officers took place on June 6th as follows:—*President*: William Taylor; *Vice-President*: John B. Story; *Secretary of the College*: Sir Charles A. Cameron; *Council*: William Stoker, Sir Charles A. Cameron, Sir Lambert H. Ormsby, Richard D. Purefoy, Henry Gregg Sherlock, Sir Thomas Myles, D. Edgar Flinn, Sir Arthur Chance, Shepherd McC. Boyd, Sir Robert H. Woods, R. Bolton McCausland, Thomas E. Gordon, Edward H. Taylor, F. Conway Dwyer, Alexander J. M'A. Blayney, R. Charles B. Maunsell, Trevor N. Smith, William Ireland Wheeler, Sir C. Arthur Ball. Mr. William Taylor, the new president, has a long association with the Royal College of Surgeons, in the schools of which he studied; he became Licentiate in 1893, and a Fellow in 1898, and in 1902 graduated in arts and medicine in the University of Dublin. Mr. Taylor is surgeon to the Meath Hospital and County Dublin Infirmary, and visiting surgeon to the Cork Street Fever Hospital. For the past two years he has been Vice-President of the College.

Lord Kitchener.—The College has adopted a resolution expressing its profound regret at the great loss the empire has sustained by the death of Lord Kitchener.

Obituary.

DR. ALFRED FREER, J.P., born at Stourbridge, Worcestershire, on March 15th, 1829, died at his residence in that town on June 10th, aged 87. His family had held leading positions in Stourbridge since 1547, and he himself was one of the fourth generation of doctors who lived at Green Close, Stourbridge. His great-grandfather, John Freer, was one of the first four surgeons appointed to the General Hospital, Birmingham, in 1779. Dr. Alfred Freer entered King Edward's School, Stourbridge (where Dr. Samuel Johnson had been an usher) in 1836. He began life as apprentice to a doctor at Birmingham, studying at the same time at Queen's College, and serving as a dresser at the General Hospital. In 1850 he took the diploma of M.R.C.S. and went, in order to study midwifery, to Dublin, where he became L.M. in 1851. At the end of that year he was working in the Paris hospitals, and witnessed Louis Napoleon's *coup d'état*. In 1852, after taking the L.S.A., he entered into partnership with his father and brother, and remained in practice for sixty-four years, for he was working only a few months ago at the Stourbridge dispensary during the temporary incapacity through accident of the resident surgeon, Dr. Lloyd Francis. Dr. Alfred Freer was a very active member of the British Medical Association. He was president of the Birmingham Branch in 1890, and became chairman of the Dudley Division, and representative for the combined Bromsgrove and Dudley Divisions. Until recently he was a very regular attendant both at the Branch and the Division meetings. Dr. Freer was the first president of the Stourbridge District Medical Society, Birmingham. Thirty-four years ago he was appointed a county magistrate. He took a great interest in church questions, Conservative and Unionist politics, and, latterly, in matters concerning the war. Dr. Freer was likewise known as a geologist, archaeologist, and chess player. He was held in universal esteem in the neighbourhood, where he laboured and was so long known and beloved that representatives of all phases of life attended in great numbers at his funeral on June 15th.

DR. FREDERICK JOHN WADD died at his residence at Richmond, Surrey, on June 12th, aged 71. He studied medicine at St. Thomas's Hospital and the University of Aberdeen, where he graduated M.B., C.M. in 1866; he also took the diplomas of M.R.C.S. and L.S.A. in the same year. Dr. Wadd was for many years the family physician to the Duke and Duchess of Teck at White Lodge, Richmond Park, and attended Queen Mary at the birth of the Prince of Wales; his grandfather was surgeon-extraordinary to George IV. He was for twenty-two years a member of the Richmond Town Council, and held the position of Chairman of its Health Committee for seventeen years; he was also one of the oldest supporters of the Royal Horse Show. A service was held on June 15th at St. Mathias's Church, Richmond, where the Queen was represented by the Hon. Alexander Nelson Hood, and the burial took place at Richmond Cemetery.

DEPUTY SURGEON-GENERAL EDWARD MALCOLM SINCLAIR, A.M.S.(ret.), died at his residence in South Kensington on June 14th, aged 84. He was born in 1832, the son of Dr. Malcolm Sinclair, and took the diploma of M.R.C.S. and the degree of M.D. St. Andrews in 1853. Entering the army as assistant surgeon on March 28th, 1854, he became surgeon in 1866 and surgeon-major in 1873, retiring as deputy surgeon-general on December 19th, 1888. He served in the Crimea in 1854-56, and was present at the siege and capture of Sebastopol, receiving the medal with a clasp and the Turkish medal. He served also in the Indian Mutiny from 1857 to 1859, when he took part in the operations in Oudh and in Bandakhand, including the actions of Chanda, Umirpur, and Sultaupur, and the capture of Lucknow, and received the Mutiny medal and Lucknow clasp. He was principal medical officer of the lines of communication and base in the Transvaal war of 1891, and was mentioned in dispatches.

Medical News.

THE annual general meeting of the Poor Law Medical Officers' Association of England and Wales will take place at its offices, 9, Copthall Avenue, London, E.C., on Friday, July 7th, at 4 p.m.

DR. A. E. LARKING, honorary secretary of the Buckinghamshire Division of the British Medical Association and of the Buckinghamshire Panel Committee, has been appointed a magistrate for the Borough of Buckingham.

THE Duchess of Marlborough will give the Lady Priestley memorial lecture of the National Health Society, on Thursday next at 5 p.m., at the Royal Society of Medicine, 1, Wimpole Street, W. The subject of the lecture is "Saving the Children." The chair will be taken by Sir James Crichton-Browne.

THE King has granted Dr. James Russell Watson of the English Baptist Mission Hospital, Tsing-chow-fu, China, licence and authority to wear the order of the sixth class of the Excellent Crop conferred upon him by the President of the Republic of China, in recognition of valuable services rendered.

THE annual meeting of the National Training School for District Midwives will be held, under the presidency of the Lord Mayor of London, at the Mansion House, on June 27th, at 3.30 p.m. The meeting will be addressed by Lord Balfour of Burleigh, Sir Dyce Duckworth, M.D., Lady Betty Balfour, and Dr. Barbara Tchaykovsky, and a statement will be made by the honorary secretary, Miss Alice Gregory, from whom, at the British Hospital for Mothers and Babies, Woolwich, tickets of admission can be obtained on application.

AT no period of its history has Great and Greater Britain stood in greater need for the preservation of child life than at the present time, and a great responsibility now rests upon those who have the care of the children of to-day. The formation of associations under whose auspices a number of centres have already been established to spread information as to the best means of preventing infant mortality has done much within recent years to reach the wives and mothers of the poor. The National League for Physical Education and Improvement (4, Tavistock Square) has recently published a small book, price 3d., entitled *To Wives and Mothers*, compiled for the most part from leaflets carefully drawn up by expert workers among the poor, in which a vast amount of sound advice is contained as to the preparations and precautions that the expectant mother must observe, and as to the proper management of the infant during the first weeks or months of life. The vital and far-reaching importance of skilful upbringing during the first five years of life, whether it be regarded from the physical or the mental standpoints, can hardly be exaggerated, but it is not by any means as fully recognized as it should be. A short section on character training inculcates some points which deserve the respectful consideration of mothers in all ranks of society, to whom we can cordially commend the pamphlet.

AT the monthly meeting of the Central Midwives Board on June 15th, when Sir Francis Champneys presided, a letter was read from the M.O.H. Chatham forwarding a circular letter addressed to all midwives in that district inquiring whether they would be willing to supply the names and addresses of expectant mothers with a view to facilitating antenatal visiting in connexion with infant welfare work, and asking whether the Board was taking any action. The Board replied to the effect that no midwife had any right to give any information concerning her patients to any one except with the consent of the patient, which, if possible, should be expressed in writing. The Board agreed to co-operate with the Board of Education in approaching the Treasury with a view to the provision of grants in aid of the training of midwives. The Board accepted with regret the resignation of Dr. W. Crump Beatty, one of the examiners of the Newcastle centre, and appointed in his place Dr. W. L. Ruxton. University College Hospital, London, was granted recognition as a training school. At special meetings of the Board on June 14th, 15th, and 16th, fifteen fresh penal cases were heard, and in six the midwives were struck off the roll. In three cases the Board decided to take no action. Apart from the usual charges of dirt, ignorance of the pulse and temperature, etc., there were several of neglect in cases of serious rupture of the perineum, puerperal fever, and ophthalmia. Reports on four adjourned cases were heard; they were all satisfactory. The names of two women were removed from the roll on their own application.